

READ THE FOLLOWING BEFORE YOU PROCEED:

- I. All UAMS MOC improvement projects are required to utilize an approved Improvement Science methodology and document their work in a format that is approved by the Associate Chief Medical Quality Officer. We encourage use of the pre-approved PDSA template, which is available on the UAMS MOC/QI website: <http://medicine.uams.edu/files/2015/02/PDSA-Reporting1.pdf>
- II. If you have **completed** your improvement project, in addition to this application, you will need to submit a completed PDSA form (or report using a pre-approved alternate method) and a completed [Attestation Form](#) that is signed by both you and your attestor.

[CLICK HERE FOR PDSA INSTRUCTIONS AND TEMPLATE](#)

[CLICK HERE FOR THE PDSA SCORING RUBRIC](#)

Next, select one of the following:

- I am including a completed PDSA document and a completed Attestation Form with this application.
- I am including a partially completed PDSA document with this application (**Plan** section only).
- I am not including an PDSA document with this application.
Please explain:

Read and consider each of the instructions below carefully. Your application will not be reviewed, and cannot be approved, unless all of the information below is provided in full. Add additional documentation as needed.

4. **External Funding:** Is there external (NON-UAMS) funding for this project? Yes No

If yes, state the following:

(a) exactly how much is being/has been received

(b) the precise funding source(s), and

(c) exactly how these funds will be/have been used with regard to the project.

Please note: pharma/medical device funds are prohibited for use in topic selection, content development, intervention selection, or honoraria. If your project has funding, we will need to see the budget.

5. **Project Description:** Describe what your project will improve.

(1) How/why this topic was identified as a priority

(2) Patient population that will be impacted and how they will be impacted

(3) The impact on health/disease state(s) for the institution and beyond

(4) Any potential cost savings and/or waste reduction.

(5) What are the expected outcomes of the project?

6. **Interventions:**

List your project intervention(s).

For each intervention, please address the following:

(1) How each intervention addresses the goal of the project

(2) How each intervention will improve patient care

(3) Whether the proposed intervention has been shown effective at other locations.

(4) What evidence or best practices exist to support the selection of these interventions

(5) How are underlying/root causes addressed by the intervention

(6) List the team members involved in the implementation of the interventions and their SPECIFIC roles and responsibilities within that intervention

(7) When were/are interventions implemented

(8) What barriers do you anticipate or have you encountered and how would you or have you addressed them?

7. **Measures:**

List each of the outcomes and process measures you will use in this project. Include numerators, denominators and exclusion criteria.

NOTE: Measures used for your project must reflect the improvements you are trying to make and should be based on evidence or best practices. If that is not possible, provide rationale as to why/how these measures have been selected/created.

8. **Data:**

Provide each of the following:

- (1) the source from which your project data will come,

- (2) how the data arrives in the source location (e.g. hand-entered by you, report generate by EPIC, etc),

- (3) how you are ensured the data is objective.

9. **Project data:** You must submit measures data a minimum of five (5) times during your project; once at baseline, at least once during the implementation period (which must be at least three months in length), and a minimum of three post-intervention data points.

Select one of the following:

For data collection, I will use/have used a UAMS approved tool.

For data collection, I will use/have used my own tool.

Please attach your data collection tool or guidance.

Complete the following:

I am including baseline data with this application. Yes No

I am including interim (post-intervention) data with this application. Yes No

I am including completion data with this application. Yes No