



CQI Project Report Form

Facility Name: _____ Provider #: _____

Dates of Project: _____ Date Submitted: _____

Name of Individual Submitting Report: _____

1. Find a process to improve

Topic: _____

Goal/Target: _____

2. Organize a team that knows the process

Team Members: _____

3. Clarify current knowledge of the process

Data Collection Tools Used (e.g. check sheets, run charts): _____

Preliminary Patterns/Results (what did data show?): _____

4. Understand sources of process variation: _____

Tools Used (e.g. Fishbone diagram, algorithm, etc.): _____

Preliminary Analysis/Results: Why do we think this result occurred? _____

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5. Select the process improvement

Final analysis/root cause(s) found:

Areas to Focus On (What can be changed to improve outcomes?): _____

6. Plan improvement pilot

"Who" is involved: _____

"What" will be done: _____

"When" (time frame for activity): _____

7. Do solution on a trial basis

Date implemented: _____

8. Check data and evaluate results

Did solution work? _____

9. Act to implement solution or return to "Plan" stage

Date of implementation: _____