Performance Improvement Project (PIP) Documentation

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| --- | --- | --- |
| Facility Name | State | CCN |
|  |  |  |

# Team Charter

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| --- | --- |
| PIP Team Name | PIP Start Date |
|  |  |

# PIP Team Project

|  |  |
| --- | --- |
| Quality Measure (QM or Area of Focus) | Baseline Data (include time period) |
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# SMART (Specific, Measurable, Attainable, Relevant and Time-Bound) Goal

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| Example: Reduce the long-stay quality measure rate for UTI from 4.2% to 2.5% (the national average on Care Compare) by December 31, 2022. |
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# PIP Team Members

Identify team members to support the improvement project; select those who are closest to the area of focus identified

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| --- | --- |
| Staff Name | Title |
| Leader: |  |
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| Executive Sponsor: (Name and Title) |

# List of Root Causes

List top root causes in order of priority

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# Goal Monitoring

Use the table to routinely track outcomes measures to determine progress in reaching your goal

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| --- | --- | --- | --- | --- | --- | --- |
| Measure of Focus | 1st Measured Date | 1st Measured Rate | 2nd Monitoring Date | 2nd Measured Rate | 3rd Monitoring Date | 3rd Measured Rate |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Measure of Focus | **4th Measured Date** | **4th Measured Rate** | **5th Monitoring Date** | **5th Measured Rate** | **6th Monitoring Date** | **6th Measured Rate** |
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# Interventions

The following are interventions to eliminate root causes and are used in PDSA process completion

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| --- | --- | --- | --- | --- | --- |
| Selected Root Cause | Start Date | Selected Intervention | PDSA Cycle (1, 2 or 3) | Outcomes | Adapt, Adopt or Abandon |
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# Outcomes

Use the table below to document what has worked, what has not, or lessons learned

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| --- | --- | --- | --- |
| Selected Intervention | Success Identified | Barriers Identified | Lessons Learned |
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# Sustainability

How are you going to sustain the improvements that were made? (Example: Update policies and procedures, educate staff, update onboarding process, identify a champion to monitor the data and interventions being carried out at routine intervals, etc...)

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| --- | --- |
| PIP Goal Met Date: | Sustainability Start Date: |
|  | |

# Resources

* [Five Why’s Worksheet](https://www.telligenqiconnect.com/resource/five-whys-worksheet/)
* [Root Cause Analysis (RCA) Pathway](https://www.telligenqiconnect.com/resource/root-cause-analysis-rca-pathway/)
* [Fishbone Diagram Worksheet](https://www.telligenqiconnect.com/resource/fishbone-diagram-worksheet/)
* [PDSA Template](https://www.telligenqiconnect.com/resource/pdsa-worksheet/)
* [Sustainability Decision Guide](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/downloads/SustainDecisGdedebedits.pdf)