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| --- | --- |
| Agency:  |  |
| Report Completed by: | **Name:** |  |
| **Title:** |  |
| **Contact Info:** |  |
| Date Submitted:  |  |
| Report Period: | **Start Date:** | **End Date:** | **Report Due Date** |
| [ ]  Quarter 1 | **March 1, 2023** | **May 31, 2023** |  |
| [ ]  Quarter 2 | **June 1, 2023** | **August 31, 2023** |  |
| [ ]  Quarter 3 | **September 1, 2023** | **November 30, 2023** |  |
| [ ]  Quarter 4 | **December 1, 2023** | **February 28, 2024** |  |
| QIP Title: |  |

**cc:** *Program Officer; Courtney Middlebrook; Laura Whittaker; RW.Quality@dc.gov*

Guidance on Using the Reporting Template

This template serves as a written method of improvement Plan, Do, Study, Act (PDSA) cycle.

* **PLAN** *(Sections 1 & 2)* – Make predictions about what will happen and why it will happen.
* **DO** *(Section 3)* – Carry out the change or test on a small scale.
* **STUDY** *(Section 4)* – Analyze the test cycle and reflect on the findings.
* **ACT** *(Section 5)* – Decide if there are any refinements or modifications need for the changes tried.

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| Section 1: BACKGROUND |

The QIP will focus on…

**Problem Statement**: **(Specific problem statement for each quarter)**

Quarter 1:

Quarter 2:

Quarter 3:

Quarter 4:

|  |
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| Section 2: AIM & GOALS |

1. **Agency Goals Statement:** (**If needed, update the Aim Statement and Goals quarterly.)**

Indicate your agency’s **S**pecific, **M**easurable, **A**chievable, **R**ealistic, and **T**imely (SMART) **goal for the coming quarter** based on current received cohort data. *(e.g., Our agency will have 2 clients from our cohort achieve VLS by April 30th)*

* Quarter 1:
* Quarter 2:
* Quarter 3:
* Quarter 4:
1. **QIP Team Members including at least one consumer:**

(*Names, Titles, Role in this QIP only; please omit client name and indicate “Consumer”*)

**If needed, update the QIP Team Members quarterly.**

|  |  |  |
| --- | --- | --- |
| **Name** | **Role at Agency (Title)** | **Role with this QIP** |
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| Section 3: Intervention & Data Reporting |

1. **Actions/Change Steps Completed in Previous Quarter:**
Describe **each intervention/change step you identified last quarter** to improve the performance measures of your cohort data for this reporting quarter. *The list below should list your previous submitted action steps from the previous quarter’s report.*

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| **List action steps taken to improve your data**  |
| *List the four main action steps you took to improve data and services this quarter.* | *When did you complete this step?* | *Will you keep or stop this action step for the coming quarter?* |
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| **4.** |  |  |

**Performance Reporting Periods: Ryan White Grant GY33**

BASELINE:

Quarter 1:

Quarter 2:

Quarter 3:

Quarter 4:

**Performance Measurement Definitions**

Performance Measure

1. **Overall Cohort Data**

**Numerator:**

**Denominator:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | **Deadline** | **Numerator (n)** | **Denominator (d)** | **Percentage (n/d x 100)** | **Total**  |
| Quarter 1 rate:  |  |  |  |  |  |
| Quarter 2 rate: |  |  |  |  |  |
| Quarter 3 rate:  |  |  |  |  |  |
| Quarter 4 rate: |  |  |  |  |  |

**Data:** Indicate your performance measure rate/percentage data for each reporting quarter using data provided by your agency.

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| Section 4: Data Interpretation & Analysis |

1. **Analysis:** *Explain the data by using the following prompts to analyze the data from this reporting quarter.*
	1. **What are the data telling you between QX and QY?**

* 1. **Provide insight on what action steps went well for this quarter.**
	2. **Provide any Barriers/Challenges for implementing planned action steps.**
	3. **What frequency did you receive lab data this quarter? Was there a lag time?**
1. **Cause and Effect:**Provide the root causes for the data for the reporting quarter in the space below or attach additional page if needed. **This will be updated each quarter to help identify change steps/interventions to address from data set.**

*The use of updated Driver Diagram or Fishbone models* ***is requested quarterly*** *to show root causes and their effects on the cohort. Root causes and graphs help support analysis listed.*

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| **Section 5: Planning New Steps for the Next Quarter** |

Using the table below describe each of the four action steps (interventions/changes) you will do to improve your current quarterly data reported above.***Do not list more than four action steps****.* Your chosen action steps below should always be informed by a data review, understanding the gaps in the care provided, and root causes identified above before they can begin to improve the process of care.

1. **Interventions/Change Description for the next coming quarter:** Based on your analysis of the received data for this quarter’s report, **what are the four action steps you are planning to do for the next 3-month period** (Action plan)? *Key quality improvement ideas to remember: principle of 1 to 1 and, small change steps.*

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| --- | --- | --- |
| **Four Main Action Steps for Next Quarter** | **Person(s) Responsible** | **Target Date** |
| *What are you going to do*? | *Who is going to take the lead?* | *What is the time period for this action step? (Include start date and end date)* |
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1. **Summary Report:** *Overall,* *analyze the cumulative data and progress towards projected goals and objectives****.*** *If applicable, include any technical assistance needed for this quality improvement project with the summary report.*