

PRACTICE IMPROVEMENT PROJECT ASSESSMENT FORM

Date: _____

Resident: _____

Assessor: _____

Topic: _____

1. Quality Improvement Question:

Practice audit question specifies the patients, the intervention and the specific performance criteria that are being assessed. ___ Yes ___ No

Quality Improvement Question asks, "How are we doing compared to the recommended standard of care?" ___ Yes ___ No

2. Standard of Care:

Clinical criteria (standards of care) used to compare with own practice are described. ___ Yes ___ No

How evidence was selected, to base current standard of care, is summarized. ___ Yes ___ No

3. Method:

The method of practice assessment is described. ___ Yes ___ No

The selection criteria is specified (for a chart audit). ___ N/A ___ Yes ___ No

How a random sample, and a number, is selected (for a chart audit) is described. ___ N/A ___ Yes ___ No

4. Results:

Results are described briefly as percentages, averages etc. ___ Yes ___ No

Audit or results form is attached (usually a spreadsheet or chart). ___ Yes ___ No

5. Analysis:

Findings are compared with standard or other audits. ___ Yes ___ No

Reflection is included about whether this truly reflects actual practice and about biases that may result from the methods used to assess practice. ___ Yes ___ No

Description is included of potential gap between current practice and any evidence-based recommendations. ___ Yes ___ No

If there is a gap, reflection is included regarding importance and possible reasons. ___ Yes ___ No

6. Improvement Plan:

Description included of what changes, if any, are planned for the practice. ___ Yes ___ No

Description included of potential barriers and solutions to implementing these changes. ___ Yes ___ No

Description included of the collaborative discussion with the preceptor. ___ Yes ___ No

7. Follow up Assessment

Reflection included about how successful he/she was in implementing a change. ___ Yes ___ No

Recommendations included for the next PDSA cycle (next small step). ___ Yes ___ No

OVERALL ASSESSMENT:

This PIP project meets CFPC residency requirements: YES NO