**GUIDE TO DOCUMENTATION OF INNOVATION AND QUALITY IMPROVEMENT INITIATIVES**

Publication in peer review journals remains the primary measure of scholarly activity. It is highly recommended that faculty publish quality improvement efforts.

1. **STATEMENT OF PHILOSOPHY RELATED TO QUALITY IMPROVEMENT**

In 1-2 pages, describe your approach to quality improvement and the principles that underlie its importance to patient care. For example, you might provide a description of your involvement in quality improvement over time, your goals and perspective on roles and responsibilities of physicians in this area, self-assessment of success, areas needing improvement, plans for improvement, etc. You may illustrate with examples from your own experience.

**NOTE:** Only faculty on the Clinical Track are required to complete the Statement of Philosophy. Faculty on the Clinical Educator Track and Clinician Scholar Track should complete Sections II and III below but include philosophy of QI in the philosophy of Clinical Services.

1. **IMPROVEMENT PROJECTS**

***Project 1 (brief description of problem, goal, methods} :***

Role (chair, project lead, member)

Internal Scope (# units/clinics/departments/functional units involved in activity)

External Spread (# of external organizations/states/countries adopt practice/ initiative/ methodology)

Sustainability (To what extent was improvement built into daily operations? How long has it been sustained?) (Was activity sustained over 1 year, over 5 years?

 Value (Was I provided dedicated time to complete?)

Time/Effort (o/o time or length of time I devoted to effort; include project initiation and completion dates)

Feedback (Feedback from others on the project, leadership that championed initiative (e.g., departmental chair, QI team leader, frontline clinicians and patients affected by change)

Magnitude of Impact (Does the project address a local, hospital-level, or national priority? What is the magnitude of the improvement for patient care or outcomes?)

Results (Process or outcome measures, as applicable to initiative (e.g., reduction in complications, adverse events, medication errors, improved compliance to guidelines, improved throughput, reduced LOS))

***Project 2 (brief description of problem, goal, and methods):***

1. **PROGRAM AND INFRASTRUCTURE DEVELOPMENT**

Describe initiatives that built capacity or developed a lasting infrastructure to improve quality; these may have results that are difficult to quantify.

***Initiative 1:***

Rationale/Problem

Role (chair, project lead, member)

Actions Undertaken/Completed

Time/Effort (% time or length of time person devoted to effort; include project initiation and completion dates)

People/Areas Impacted

Result of Initiative

***Initiative 2***