

## Vijay Babu Rayudu Quality Improvement & Patient Safety Day | UMKC School of Medicine

Quality Improvement (QI) projects typically seek to accomplish one or more of the following aims: improve patient outcomes (health), enhance system performance (care), or increase professional development (learning). Patient Safety (PS) projects address the first domain of quality care and aim to eliminate, prevent, reduce, or mitigate injury and harm. *Several criteria\* below will distinguish QIPS projects from research projects:*

ABSTRACT CRITERIA	1 Below expectations	3 Satisfactory, meets some criteria but clearly not a candidate for winning	5 Excellent score, clearly a candidate to win
<b>*Title</b>	The title does NOT adequately describe an improvement effort.	Title contains keywords (such as improving, increasing, decreasing, etc.) indicative of an improvement effort.	Title contains keywords that clearly indicate an improvement effort.
<b>Introduction</b>			
<i>Background</i>	The problem is vaguely described or with no description of the local context or best practice.	The problem is clearly stated but with only a minimal link to the local context or best practice.	The problem is clearly stated, with a strong link to local context and best practice.
<i>*Aim Statement</i>	A high-level overarching goal may be present, but an aim statement is lacking.	An aim statement is present but is unclear / incomplete (i.e., the goal is not measurable and/or timebound).	The aim statement is clear and includes a primary outcome measure, the specific change expected, and a time frame for expected improvement.
<b>Methods</b>			
<i>*Intervention</i>	An intervention to close gaps was described but not implemented.	At least one intervention was implemented.	One or more interventions were implemented. The rationale for choosing them is thoroughly described and the implementation plan is clear and concise.
<i>*Data &amp; Analysis</i>	An intervention was not implemented, or no link is made among the problem, outcome, and intervention. QI methods are not used or are not clearly described.	A clear link is made among the problem, primary outcome, and intervention. The use of QI methodology and tools may be described, but not completely clear. Data was measured pre- and post-intervention only, not in time series (i.e., run chart, control chart).	A clear link is made among the problem, primary outcome, and intervention. A link is made between the outcome measure and process measures. Analysis includes QI methodology & tools (i.e., value stream map, power & interest grid, Fishbone Diagram, FMEA, 5 Whys, run/control chart).
<b>Results</b>	No results are presented. Qualitative description of improvement is absent.	Results are presented but the actual course of events is not clearly described, or it is not clear how the results correlate with the actual course of events.	Results are clearly described and include actual course of events, reference to data analysis, and qualitative description of the improvement. Unintended consequences of interventions (balancing measures) are described.
<b>Conclusion / Discussion</b>	Improvements are not summarized. Lessons learned, practical applications for next steps, or the mechanisms for sustaining the gains are not discussed.	Overall improvements or suggested improvements are summarized with some discussion of lessons learned, practical applications for next steps, and mechanisms for sustaining the gains.	Overall improvements are clearly summarized, including a discussion of lessons learned, practical applications for next steps, and mechanisms for sustaining the gains.
<b>Academic Writing</b>	Grammatical errors and typos hinder readability and understanding. Word count is much less or much more than 350-word limit.	Clarity of writing, grammatical errors, and typos could be improved.	Abstract is clearly written with minimal or no grammatical errors or typos. Word count is $\leq$ 350 words.