

Community Memorial Health System Performance Improvement Project Summary

Project Title:	Click here to enter text	Project Start Date:	Click or tap to enter a date.
Department/Group:	Enter Department/Group	Project Completion Date:	Click or tap to enter a date.
Project Lead(s):	List project lead(s) here	Executive Sponsor:	List Executive Sponsor here
Project Team Members:	List project team members here		
Aim Statement:	Enter a concise statement indicating: 1) What you're trying to accomplish, 2) How good do you want to get, 3) By when, and 4) For whom.		

PLAN

Background: (What concern was the driver to initiate this performance improvement project? What input from staff, colleagues and/or customers supports a practice change? What evidence-based article, practice, collaborative provided insight, direction, benchmarks, etc., were used in your decision-making process?)

Current State: (How does your process work currently? Detail current process using a process map and paste here or type the steps in this section.)

Ideal State: (How SHOULD your process work in an ideal state? Detail the ideal state process using a process map or list the steps that SHOULD be taken to complete your process here.)

Problem Analysis: (Also known as Root Cause Analysis or the Five Whys – List the problems that are preventing you from working in the Ideal State and drill down—keep asking “why” until you get to the root cause.)

Problem	
1	List problems in this column – Click or tap here to enter text.
2	
3	
4	You can make additional entries to this table by using the Tab key – the table will expand automatically.

Interventions: (In this section, identify the interventions (i.e. modifications to process steps, additional education, introducing new approaches, etc.) you are going to put in place to address the issues noted in the Problem Analysis section.)

Intervention Description	
1	Click or tap here to enter your first intervention description.
2	
3	
4	You can make additional entries to this table by using the Tab key – the table will expand automatically.

Community Memorial Health System Performance Improvement Project Summary

DO

Implementation Plan: (In this section, detail the steps in your project plan – what are they, who will be doing them, when are they expected to be completed and what was the final outcome.)

What	Who	When	Outcome
Click or tap here to enter text.		Click or tap here to enter due date for this action item.	Enter the status of this action item.
		Click or tap to enter a date.	
		Click or tap to enter a date.	You can make additional entries to this table by using the Tab key – the table will expand automatically.

CHECK

Success Measures: Enter the metrics you have chosen to determine the success of your project.

Success Measure	Measure Status
Click or tap here to enter Success Measure.	Click or tap here to enter Status of Success Measure noted to the left.
Click or tap here to enter Success Measure.	
	You can add additional entries in this table by using the Tab key – the table will expand automatically.

Project Status Report: Enter a brief narrative of the actions taken by the project team since the last report.

Report Date	Project Status (as of Report Date)
Click or tap to enter a date.	Click or tap here to enter text.
Click or tap to enter a date.	You can expand this table by using the Tab key to expand this table automatically.

ACT

Select "PROJECT STATUS" below and make a selection from the drop-down list:

PROJECT STATUS

Community Memorial Health System Performance Improvement Project Summary

SUPPORTING DATA/DOCUMENTATION:

(Copy and paste your graphs, tables or charts here.)