**Project Title**

**Site/Organization**

State the name and location of the site or describe the organization where the project will take place. Identify the participants (nurses in the unit, leadership in the department, physician stakeholders).

**Statement of the Problem**

Describe the local problem and its significance addressed by this quality improvement project. Include data to frame local problem. Summarize information that supports topic/problem is an organizational priority. Provide support that the focus of this project is to implement existing knowledge in clinical practice and not to generate new knowledge.

**Evidence-Based Literature Review/Synthesis**

Write a brief synthesis of the existing literature and evidence. If applicable, provide an Evidence Table that indicates the Level of Evidence and the GRADE of evidence.

**External Evidence.** Summarize search strategy (e.g., databases, keywords, filters/limits, criteria for article selectin, tools for critical appraisal). Include practice-based evidence (e.g. evidence-based solutions that experts/other health systems have implemented. Critically summarize the evidence that supports the quality improvement project. The evidence should be convincing to clearly support practice change. Demonstrate how the translation of evidence will be implemented in clinical practice. Emphasize that this project will not produce new knowledge (research) but is to implement evidence into clinical practice (quality improvement) to drive practice change.

**Internal Evidence.** Summarize applicable unit/ community/ department/ hospital/ organizational level data or data required for national entities (e.g. CMS, NDNQI, AHRQ …)

Performs a needs assessment (SWOT) if applicable.

**Project Purpose & Aims**

* Identify the purpose of this project and list specific aims or goals to be accomplished.
* You must list one or the other with Goals or Aims. You don’t have to have both.

**If stating Goals:**

* Goals will use SMART criteria as the established method.

**If stating Aims:**

* The aims should clearly support that the project is to implement evidence into clinical practice (quality improvement) and that it will not produce new knowledge (research).
* Aims should be directional (date specific) and measurable (increase/decrease by %).
* Do not use more than two AIM statements without express approval from your advisor.

**Data Collection Plan**

* Provide a concise description of how data will be collected. Include how patient data will be identified, who is involved with data collection, and what data will be obtained.
* Describe where this information is found and how it will be extracted.
* Include Appendix for all data collection forms (keep in sequential order within the narrative).

**Timeline**

* Describe the timeline for completion of the project. Include when data collection is to be initiated, when the project implementation phase occurs, and when post implementation data will be collected.

**Project Methods**

Include the following information in this section:

* Design, organization setting, sample.
* Identify agencies, departments, units, individuals needed to complete the project and/or affected by project, and strategies to gain stakeholder buy-in.
* Evidence-based innovation that will change practice Evidence-based Implementation Strategy of selected framework/model to guide implementation (e.g., EBP model, QI framework, Change model)
* Assessment measures including fidelity and patient outcomes as appropriate.

**Evaluation Plan**

Using an established method (e.g. run or control charts) display data and interpret project outcomes. Report evaluation of the effectiveness of the practice change, including extent the practice change was implement (process outcome) and extent to which the desired outcome(s) were achieved.

* **Run charts** – illustrates change and patterns over time; assist in identifying problems and when they occurred.
* **Pareto charts** - Based on the Pareto principle that 80% of the output in a situation is due to 20% of the input; Prioritizes frequency of causes related to one another.
* **Flowcharts** – Help provide a better understanding of a process and variations in the process; Can be used prospectively or retrospectively.
* **Dashboards** – Optional to provide quick information in the form of a compilation of run charts or summary.

**Ethical Merit**

**Protected Health Information**

Indicate how you intend to use Protected Health Information (if you do) of patients whose information is used to measure the change in practice because of the evidence-based implementation project.

**Privacy, Data Storage & Confidentiality**

***All of the following information must be included in this section:***

* Discuss how the patient’s privacy will be protected (if you use patient data)
* Describe what media type will be used to store the data (paper or electronic file or both).
* Describe what Protected Health Information (PHI), if any, will be stored/secured.
* Specify whether PHI will be destroyed once all data collection is completed. Specify how data will be de-identified.
* Specify the location where the paper or electronic file will be stored.
* Specify the location where the data will be secured, who will have access to this information and measures to assure confidentiality is maintained.

**Letter of Approval from Research Oversight Committee**