USC Pediatric Residency Quality Improvement Project Planning Document

Resident Name: ____________________________________________________________

Team Members
  1. Myself
  2. Faculty Mentor: _______________________________________________________
  3. Other team members (if any):

Aim: (What are you trying to accomplish?):

Measure(s): (How will you know a change is an improvement?):
Outcome Measure(s):

Process Measure(s):

Balancing Measure(s):

Changes: (What change(s) will you make to result in improvement?):

When will you collect your baseline data? (Be specific—ex. In Feb 2016 during my NICU month):