

Clinical Quality Improvement Checklist

CLINICAL QUALITY IMPROVEMENT CHECKLIST		
Date:		
Division:		
Project leader:		
Instructions: Answer YES or NO to each of the following statements about QI projects	Yes	No
The aim(s) of the project is to improve the process or delivery of care with established /accepted quality standards, or to implement change according to mandates of the hospital's Clinical Quality Improvement programs. There is no intention of using the data for research purposes.		
The specific aim is to improve performance on a specific service or program in the hospital and is part of usual care . <u>All participants will receive standards of care.</u>		
The project is NOT designed to answer a research question or test a hypothesis and is NOT intended to develop or contribute to generalizable knowledge.		
The project does NOT follow a research design (e.g. hypothesis testing or group comparison randomization, control groups, prospective comparison groups, cross-sectional, case- control)). The Project does NOT follow a protocol that over-rides clinical decision-making.		
The project involves implementation of established and tested quality standards and/or systematic monitoring assessment or evaluation of the organization to ensure that existing quality standards are being met. The project does Not develop paradigms or untested methods or new untested standards.		
The project involves implementation of care practices and interventions that are consensus-based or evidence based. The project does NOT seek to test an intervention that is beyond current science and experience.		
The project is conducted by staff where the project will take place, and involves staff who are working at, or patients who are seen at AUBMC.		
The project has NO funding and is not receiving funding for implementation research		
The clinical practice unit (Hospital, clinic, division, or care group) agrees that this is a QI project that will be implemented to improve the process or delivery of care (i.e. <u>Not</u> a personal research project that is dependent upon the voluntary participation of your colleagues, students and/or patients).		
If there is an intent to, or possibility of publishing your work, you and your Department/QI oversight group are comfortable with the following statement in your methods section: <i>"This project was undertaken as a Quality Improvement Initiative at X hospital or clinic, and as such was not formally supervised by the Institutional Review Board (IRB) per their policies"</i> .		
Answer Key: If the answer to ALL of these questions is YES , the activity can be considered a Clinical Quality Improvement/ Measurement activity that does not meet the definition of research. IRB review is not required. Keep a dated copy of this checklist in your files. If the answer to ANY of these questions is NO . The project must be submitted to the IRB for review.		