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| **Section and Requirements per I.A.C.T Phase** | **Per review** |
| **Identify** | |
| **TITLE**  Title is Catchy, informative, appropriate Capitalization each word |  |
| **Project Status** change to completed |  |
| * Don’t forget to add Team details (at the end of the charter) * Team members names do not include name of the sponsor, or leader * Team names and ID written exactly as it is in the hospital directory * Identify team member department and role in the PI Project * Make sure to involve a member of all departments that was affected by the process change |  |
| **Problem Statement:**   1. Includes the answer to all the following questions : 2. What is the Ideal situation? 3. What is the Reality? (What, where, and when)   2. What are the consequences (if no action)? With no assumptions  4. What is the proposal? (What are you looking to do?) without details just general Idea |  |
| **Baseline flow :**  Mandatory to draw the flow in the current situation not the flow after the interventions. Do not use this field to but KPI data the baseline flow help to determine the root cause of the issue and pinpoint area where improvement could be focused at  **Flow chart check**   * Include title, date and all the necessary information in your process map * Do map the process as it actually happens * Do talk to the other people who are involved in the process * Do define the correct shapes for process map * Don’t map the process as you think it happens * Don’t get bogged down with too much detail |  |
| **Baseline Data :**  Write down the last data points captured (The last KPI Data) define the date that this data was captured. |  |
| **Benefit/Impact: Select only one** that reflect the main impact/Benefit of your PI   * The benefit selected should have current data and should be measured at the end of the project to reflect the change Example: if you select improved productivity you should have the current productivity and at the end of the project add the change effect on productivity. |  |
| **SMART Aim statement**  **1. What will the project increase or decrease?** Be specific  **2. What is the Group or population affected?** Be specific with inclusion and exclusion criteria  **3. Baseline (From what) and goal (To what)?** Measurable data is key add the last KPI Data identified at the baseline data part. And determine what you want to achieve. Keep in mind the goal to be achievable within the time frame of the project, within the budget allocated for the project and it’s always good to be evidence based or national or international Target/benchmark  **4. What is the time frame (By when (Date) & sustain)?** Within the RPI window and to be sustained for at least 2 years |  |
| **Analyse** | |
| * Keep in mind the actions action hierarchy will assist teams in identifying which actions will have the strongest effect for successful and sustained system improvement. <https://www.health.state.mn.us/facilities/patientsafety/adverseevents/toolkit/docs/safetytoolkit_actionhierarchy.pdf> * It is recommended to document all interventions, including rationale for the chosen interventions * Note: the team don’t have implement all actions however the team will vote on the most appropriate actions that they think will take them to the desired goal within the project time frame. * Documentation of the details of action taken must be attached (Rapid improvement, PDCA, Just do it, 5s… other * All applied actions must be piloted and tested before full implementation a process measure assigned for each action * **REFERENCES: Site any reference used in the project , policy # …etc** |  |
| **Change** | |
| **Data Management Plan**  **Outcome Measures**   * Each project should have only one Outcome Measures: which is the measure that highlights the main problem from the baseline data and derived from the smart aim * All outcome measures should be added at the departmental KPI definition sheet this will ensure sustainability after project completion * Outcome measure should be monitored throughout the project timeframe and to be displayed using the appropriate chart to show improvement ant the results space. |  |
| **Process Measures:**   * Project has a measure for each driver * The process measure to be monitored throughout the project timeframe and to be documented in a tracking sheet |  |
| **Balance Measures:**   * The counter-measure/ unexpected impact of the outcome measure * Could be positive or negative |  |
| **Results:**  Insert all charts illustrating your project outcomes  • Make sure all data displayed is validated and accurate  • Choosing the correct chart  • Charts must have specific title, dated, have a target line and a median line  • Charts displayed show sustained improvement   * Incise of missing data include details about it   If a new flow is created for the process include the new well-constructed process flow at the results space  Include all pictures and graphs for your project |  |
| **Transform** | |
| **Monitoring methods**  Select all that applies and if others selected please clarify |  |
| **Sustainment plan**  Explain how will the work continue to be governed overtime even after project is closed and next steps if applicable |  |
| **Lessons learned**   * In this section the team will list information that reflects both the positive and negative experiences of a project * Also list any limitations |  |
| Team details including roles and departments  • Don’t forget to add Team details (at the end of the charter)  • Team members names do not include name of the sponsor, or leader  • Team names and ID written exactly as it is in the hospital directory  • Identify team member department and role in the PI Project  Make sure to involve a member of all departments that was affected by the process change |  |
| **Check spelling and capitalization of before submitting** |  |
| **Ethics approval statement (IRB approval, consent), as appropriate**  **If project will be published** Please contact , Research Ethics Committee – Madinah at: [m1518343@kfshrc.edu.sa](mailto:m1518343@kfshrc.edu.sa) ; [aalquhtani@kfshrc.edu.s](mailto:aalquhtani@kfshrc.edu.s) for application and approval. |  |
| **RPI Coach/ Quality champion Review** |  |
| **Executive Sponsor Review and approval to close** |  |