EDGEWOOD COLLEGE

QUALITY IMPROVEMENT CHECKLIST

Quality Improvement (QI) consists of activities that are undertaken to measure the effectiveness of standard accepted processes, programs, or services. QI projects cannot expose individuals to any additional risks. HPRB oversight may be required in some NON-research projects, for the protection of participants and/or personal information.

In contrast, research consists of a systematic investigation that is designed to develop or contribute to generalizable knowledge, the results of which are to be shared with both individuals associated with and individuals unassociated with the investigation.

**The HPRB will review QI projects to make a determination as to whether or not the project meets all the requirements for a QI project**. The standard HPRB proposal form should be used to make this determination.

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| **QUALITY IMPROVEMENT CHECKLIST** | | |
| **Instructions:** Answer **YES** or **NO** to each of the following statements about QI projects. | **YES** | **NO** |
| 1. The intent of the project is to improve the process or delivery of care while decreasing inefficiencies within a specific health care setting. |  |  |
| 1. The specific aim is to improve performance on a specific service or program and **is part of usual care.** All participants will receive standard of care. |  |  |
| 1. 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. |  |  |
| 1. The project design does **not** test a hypothesis, involve randomization, or utilize comparison or control groups. |  |  |
| 1. The project has **no** funding from federal agencies or research-focused organizations, and is not receiving funding for implementation research. |  |  |
| 1. The project is conducted under the direction of a supervisor who has the authority to, if appropriate, impose a corrective plan based on the outcomes of the project. |  |  |
| 1. The project will involve a sample of the population (patients/participants) ordinarily seen in the institution where the activity will take place. |  |  |
| 1. Adequate protections are in place to maintain confidentiality of the data to be collected and there is a plan for who can access any data containing participant identifiers. |  |  |
| 1. The risk to patients/participants is no greater than what is involved in the care they are already receiving OR participating in the activity can be considered acceptable or ordinarily expected when practice changes are implemented within a health care environment |  |  |
| 1. The project does not require accessing patient or employee records beyond your scope of practice or responsibility. If records are beyond the scope, then a supervisor has provided documentation allowing access to the records. |  |  |
| 1. The institution (hospital, clinic, care group) has provided documentation to HPRB that this is a QI project (i.e., not a personal research project that is dependent upon the voluntary participation of your colleagues, students and/or patients). |  |  |
| 1. If you wish to change any aspect of this project or add procedures that would impact answers to any of the above questions, you agree to submit changes for HPRB review and approval prior to implementation of these changes. |  |  |
| **ANSWER KEY**: If the answer to **ALL** of these questions is **YES**, the activity can be considered a Quality Improvement activity that does not meet the definition of research. **Submit this form with your HPRB proposal to register your QI project.** If the answer to **ANY** of these questions is **NO**,the project must be submitted to the HPRB as research for review. | | |