**A. AGENCY INFORMATION**

**1. Agency name:**

**2. Name and contact information for the person(s) submitting this plan:**

**3. This is a plan for:** [ ]  **Part A** [ ]  **Part B/Rebate**

**4. Services funded for the above part(s):**

1. **Do you and your staff have sufficient quality management capacity to carry our quality improvement projects using the Plan-Do-Study-Act (PDSA) cycle?** [ ]  **Yes** [ ]  **No**

**If no, would you like in-service training for your staff on quality improvement projects and PDSA cycles?** [ ]  **Yes** [ ]  **No**

**B. GOALS**

1. **Measurable QI Goal #1**
	1. QI goal/aim statement:
	2. Intervention/strategy that will help you achieve your goal:
	3. Staff responsible for intervention:
	4. How will you measure progress?
		1. Process measures:
		2. Outcome measures:
	5. Where will you track the data?
	6. How will your progress be communicated and to whom?
2. **Measurable QI Goal #2**
	1. QI goal/aim statement:
	2. Intervention/strategy that will help you achieve your goal:
	3. Staff responsible for intervention:
	4. How will you measure progress?
		1. Process measures:
		2. Outcome measures:
	5. Where will you track the data?
	6. How will your progress be communicated and to whom?

|  |
| --- |
| 1. **QI PLAN SUMMARY**
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| **Measurable Goal for 2025** (rewrite your aim statements from above here) | **Baseline Measure**(your starting point or what you achieved in FY2024) |
| **Goal #1:** |  |
| **Goal #2:**  |  |

**Please review and check the following before submitting to the Quality Management Team.**

[ ]  Our QI plan/project(s) addresses clients and/or services for all our funding sources.

[ ]  Our QI goal(s) is specific.

[ ]  Our QI goal(s) is measurable.

[ ]  Our QI goal(s) is attainable.

[ ]  Our QI goal(s) is relevant.

[ ]  Our QI goal(s) is time bound.

[ ]  Our QI goal(s) is inclusive or considers inclusivity.

[ ]  Our QI goal(s) is equitable or considers equity.

[ ]  Our QI goal is an improvement on what we accomplished year to date or last year.

[ ]  Our staff involved in these programs have agreed to these projects and reviewed this submission.

[ ]  Our program leadership has reviewed and agreed to this submission.

[ ]  Our QI project intervention is specific, and it is clear what we are going to do to try to reach our goal.

[ ]  Our QI project/intervention is not the same project/intervention we wrote last year.

**Please submit your QI plan as a Word document to** **scott.bilodeau@hennepin.us** **by April 1st, 2025.**