

Standardized Performance Improvement Report

This template is designed to re-engineer your committee meetings by imposing a disciplined, data-first structure on every discussion. Presenters must complete this form entirely, ensuring the data (and its interpretation) is the central focus, not just the action plan.

Standardized Performance Improvement Report

Driving Data-Based Decisions in Quality & Safety

Report Date:	Committee Review Date:	Primary Presenter:

SECTION 1: Metric & Goal Definition (The WHAT)

Metric Name	Metric Definition (Numerator/Denominator)	Data Source (System)

Target Goal	Baseline Performance (Pre-Intervention)	Accountable Manager
e.g., Reduce rate to 2.1 by Q4	e.g., 4.2 falls per 1,000 patient days	

SECTION 2: Data Analysis & Trend (The DATA REVIEW)

This section is mandatory for discussion. Data must be attached (Run Chart or Control Chart).

Current Reporting Period	Result for This Period	Goal Status
e.g., Last 30 days		Achieved / Maintained / Missed

Data Validation Check

Data/Metric Presented?	Evidence Strength	Key Observation from Run Chart
(YES or NO)	(HIGH / MODERATE / LOW)	Describe the trend: e.g., "The mean has shifted down, but the last two data points show a possible return to baseline."

Process Monitoring (Compliance vs. Effectiveness)

Category	Specific Metric	Result	Conclusion
Compliance Monitoring (Process Adherence)	e.g., Post-Fall Huddle completion rate	e.g., 96%	Process is stable and being followed.
Effectiveness Monitoring (Outcome Impact)	e.g., Patient Injury Rate (related to falls)	e.g., 0.5 per 1,000 Pts/Days	Intervention is positively impacting patient outcome.

SECTION 3: Root Cause & Intervention Summary (The WHY)

Initial Root Cause (Based on RCA/5 Whys)	Primary Intervention/Fix
The systemic failure identified.	The specific change that was implemented to fix the root cause.

Are there any High-Risk TJC RFIs tied to this metric?	If Yes, RFI Standard & Status:
	e.g., LS.02.01.30, EP 2 - Fixed and Verified

SECTION 4: Committee Action & Accountability (The NEXT STEP)

Discussion Summary

Brief summary of the committee's key findings, challenges identified, or congratulations.

Committee Directives & Next Steps:

Action Required / Directive	Responsible Party	Target Completion Date	Evidence for Next Review
e.g., Mandate 1:1 coaching for 3 nurses with low huddle completion.	e.g., Nurse Educator	e.g., 11/15/2025	e.g., Signed staff coaching forms.
e.g., Approve funding for IT to implement a hard stop in the EHR.	e.g., CQO / IT Director	e.g., 12/01/2025	e.g., IT Ticket Closure Report.