New York State Department of Health AIDS Institute
Ryan White Part B Clinical Quality Management Program

Quality Improvement Project Review Tool

This standardized template assists contract managers, AI staff, and others to review quality improvement (QI) projects and to document any feedback. In the spirit of quality improvement, the goal is to guide the planning and implementation of robust QI projects and strengthen local improvement efforts by Part B-funded service providers.

Agency Name:	
Agency Contact:	
Reviewer(s):	
Date of Review:	

QI Project Selection				
	Adequate	*Room for Improvement*	*NA*	*Comment*
- Is the focus of the QI project aligned with the annual Part B-issued priorities?				
- Has the selection decision been reached by using a team approach that included clients and staff who work in the area of focus?				
- Is a robust rationale for selecting the QI project included?				
- Does the rationale include qualitative and/or quantitative data to describe the magnitude of the problem?				
Improvement Team				
	Adequate	*Room for Improvement*	*NA*	*Comment*
- Does the QI team include the necessary stakeholders to work on the QI project?				
- Are the roles and responsibilities clearly defined?				
- Is a QI project lead identified?				
- Does the QI team include a person with HIV?				

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Aim Statement				
	Adequate	*Room for Improvement*	*NA*	*Comment*
- Does the agency have a written Aim Statement?				
- Is the Aim Statement developed using a team approach?				
- Is the Aim Statement supported by the agency leadership?				
- Are the goals the specific, measurable, achievable, results-oriented, and time-bound?				

Change Ideas				
	Adequate	*Room for Improvement*	*NA*	*Comment*
- Has the agency conducted an investigation on the underlying root causes?				
- Does the agency implement changes ideas/interventions to reach the goals outlined in the Aim Statement?				
- Does the implemented quality improvement activities use a defined approach or methodology (e.g., PDSA Cycle)?				
- Are the change ideas tested out using small scale PDSA cycles?				

Performance Measurement				
	Adequate	*Room for Improvement*	*NA*	*Comment*
- Does the agency accurately submit required performance data in a timely manner?				
- Does the QI team routinely review and use the available data sets to inform their QI project?				
- Does the QI team routinely collect data to assess whether the goals of the Aim Statement are achieved?				
- Does the QI team use visual tools to understand changes in data over time?				