**Improvement Scholars Project Proposal Guidelines**

**UNC Institute for Healthcare Quality Improvement**

**I. Purpose**

The UNC Institute for Healthcare Quality Improvement (IHQI) Improvement Scholars Program promotes the development of experience and expertise in healthcare improvement among clinician leaders at UNC School of Medicine and UNC Health Care. The purpose of this request is to solicit applications for healthcare improvement projects. Improvement projects must be aligned with formally-organized UNC clinical improvement priorities.

Please address questions about the Improvement Scholars Program to Laura Brown [laura.brown@unchealth.unc.edu](mailto:laura.brown@unchealth.unc.edu), 919-818-3558.

**II. IHQI Personnel and Non-Personnel Support**

IHQI intends to support up to six projects for the period Sep 1, 2018 – Aug 31, 2019. Support includes 0.5 FTE IHQI Improvement Project Manager, IHQI faculty mentorship, just-in-time training, and non-personnel project support funds.

IHQI works closely with awardees and provides in-kind support, training, and coaching. IHQI does not cover provider salary support for Improvement Scholars Projects. Typically, recipients use academic or administrative time to lead project work and rely on the IHQI 0.5 FTE Project Manager to manage day-to-day project operations. Recipients who hold clinical leadership positions such as medical, program, or service line director positions can integrate Improvement Scholars program participation with their existing leadership role. If you anticipate needing additional non-clinical administrative time to lead an IHQI Improvement Scholars Project you should approach your supervisor about anticipated additional time.

**III. Dates**

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| --- | --- |
| RFP Published | November 21, 2017 |
| Competitive Letter of Intent Due | January 12, 2018 |
| Invitation to Apply | January 26, 2018 |
| Proposals Due | Mar 21, 2018 |
| Notification of Awards | May 2, 2018 |
| Team Preparations with IHQI | May – August 2018 |
| Projects Start | September 1, 2018 |

**IV. Eligibility and Requirements**

Projects are intended to improve clinical care and outcomes for a population of patients by implementing proven and/or expert-recommended strategies and approaches. Proposals to research new interventions for efficacy and/or effectiveness will not be funded.

Projects must align with one of UNC’s institutional priorities. Project applicants should discuss project ideas with clinical leads of institutional priorities prior to submitting a letter of intent (see Section V).

Selected projects must be approved by clinical leads of prioritized initiatives. Clinical leads may be interested in projects that address topics other than the current emphasized topics listed in the table below. Please seek guidance and approval from the clinical lead prior to submitting a letter of intent to IHQI.

If you have a project idea that aligns with an institutional priority not listed below, please contact Laura Brown at IHQI to provide information about the institutional priority and discuss the feasibility of IHQI support for the proposed project.

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| --- | --- | --- | --- |
| Institutional Priority | Current Emphasized Topics | Clinical Lead | Program Manager |
| Mortality Reduction | Failure to Rescue  Sepsis Care  Palliative Care  Advanced Care Planning | Tina Schade Willis | Matt Huemmer  Karen Gupton |
| Reducing Avoidable Readmissions | Medication Reconciliation  Standardization of Discharge Summaries  Follow Up Appointment Scheduling  Collaboration with Home Health and Skilled Nursing | Spencer Dorn  David Hemsey | Fabienne McClellan |
| Opiate Stewardship | Prescribing Standards  Opiate Disposal | Brooke Chidgey  Jami Mann  Matt Nielsen | Nathan Woody  John Prieur |
| Ambulatory and Primary Care | Colorectal cancer screening  Breast cancer screening  Influenza immunization  Pneumonia immunization  Depression screening & management  Falls prevention  Diabetes management | Sam Weir | Crystal Hoffman |
| Reducing Patient Harm | |  |  | | --- | --- | | SSI | CAUTI | | VTE | CLABSI | | MRSA | C. diff. |   Falls  Pressure Ulcers  Post-op Respiratory Failure  Peri-op/Post-op Hemorrhage & Hematoma  Accidental Punctures & Lacerations  Foreign objects retained | Tom Ivester | Erin Burgess |

Project leads meet monthly with IHQI faculty coaches throughout the project period. All project teams meet together at half-day IHQI-facilitated meetings three times during the project period. Each project lead attends and presents results at the IHQI Improvement Scholars Symposium near the end of the project period.

**V. Competitive Letter of Intent**

Potential Improvement Scholar project applications undergo an initial evaluation via a letter of intent.

Please submit a one-page letter of intent (single-spaced, minimum 11-point font, 1-inch margins) that addresses these questions:

1. What is the problem or gap in quality you seek to improve?
2. Which institutional priority will this project address?
3. Where is this problem occurring (specify hospital unit, outpatient practice setting, etc.)?
4. How has this problem been addressed successfully in other settings?
5. How do you propose to solve this problem/close the gap in quality?
6. How will you know if you have improved (what is the main outcome to be measured)?
7. Who will comprise the improvement team?

Submit your letter of intent to Laura Brown ([laura.brown@unchealth.unc.edu](mailto:laura.brown@unchealth.unc.edu)).

**VI. Proposal Format and Length**

Invitations to submit proposals will be extended based on review of letters of intent. If you are invited to submit a full proposal, please include the items below in your proposal. Format proposals using 11-point font, 1-inch margins and double-spaced text.

1. Project Lead/Key Contact (name, email & phone number)
2. Which organizational priority is your project aligned with?
3. Aim: What are you trying to accomplish? What is the gap in quality you are trying to address? What is the specific patient population your project will impact? (1/2 page)
4. How will you know if you have improved? Briefly describe your measurement approach as part of the proposal narrative; a completed “[Measures Table](https://www.med.unc.edu/ihqi/improvement-scholars/measures-table-example/)” is required. Please describe the outcome measure(s), 2-3 process measures and at least one balancing measure. (1 page plus table)
5. What changes can you make that will result in improvement? How will you test those changes? (1-2 pages)
6. Improvement team: List names, roles and QI experience (if any) of each team member, describe how the improvement team will function and how the team’s work impacts other teams/units and/or is impacted by other teams/units. (1 page)
7. Improvement facilitators and barriers: Describe the QI leadership, QI culture, capability for improvement and motivation to change within the unit/department. How does the proposed project align with institutional and/or departmental goals? (1 page)
8. Sustainability plan: Describe the plan for sustaining the improvement and conducting ongoing improvement after the end of the project (1 page)
9. Implementation Timeline (1 page)
10. References
11. Budget and Justification (see Section VIII)
12. Letter of Support: The project sponsor (defined below) must provide a letter of support describing his/her commitment to ensuring that the project team will have sufficient time allocated to:
    1. Attend IHQI meetings and just-in-time training
    2. Conduct the improvement project
    3. Monitor and report on project progress through monthly reports and meetings with IHQI and other seed grant project teams

In addition, the letter of support should describe the project sponsor’s commitment to supporting change within the unit and working to facilitate changes outside the unit as needed.

The project sponsor (e.g., Division Chief, Service Leader, Department Chair, Nursing Supervisor, Vice President, etc.) has executive authority and provides liaison with other areas of the organization, serves as a link to senior management and the strategic aims of the organization, provides resources and removes barriers on behalf of the team, and provides accountability for the team members. The sponsor is not a day-to-day participant in team meetings and testing. The sponsor reviews the team's progress on a regular basis. The sponsor must meet at least quarterly with the project team.

**VII. Review Criteria**

The primary review criterion is likelihood of sustainable improvement in clinical care and outcomes in areas of organizational clinical improvement priorities. Proposals without a viable plan for sustainability beyond the 12-month project period will not be selected. Secondary criteria include:

* the project’s impact on developing provider capacity to lead healthcare improvement
* the project’s impact on promoting collaboration across units and departments
* clarity of the improvement strategy

Each project will be evaluated by at least three reviewers, using a 1-5 scoring system with 1 being the best score. After initial scoring, IHQI faculty and staff will review scored proposals and categorize them into 3 groups: 1) support as is; 2) consider for supporting after revisions; 3) do not support at this time. Those categorized as “consider for support after revisions” will have 30 days to revise their proposal for reconsideration during the same award cycle.

**VIII. Budget Documentation and Allowable Expenses**

Please submit a project budget and narrative justification for non-personnel expenses.

Travel is allowed to conduct improvement work, but not to attend professional meetings unless awardee is a trainee. IHQI cannot purchase hospital or clinic supplies and equipment.

Applications will be strengthened by the commitment of matching funds from the applicant’s home department. Such a match is not required, but is desirable as a demonstration of departmental support of the proposal.

All funds should be spent within 12 months of the project start date. Requests for no-cost extensions will be considered by IHQI staff on a case-by-case basis.

**IX. Application Procedure**

Please submit a one-page letter of intent by 5pm on Jan 12, 2018 to Laura Brown ([laura.brown@unchealth.unc.edu](mailto:laura.brown@unchealth.unc.edu)).

Invitations to submit a proposal will be extended by Jan 26, 2018.

If you are invited to submit a proposal, please submit two email attachments to: [laura.brown@unchealth.unc.edu](mailto:laura.brown@unchealth.unc.edu) by 5pm on Mar 21, 2018.

Email attachment 1: Application including everything except budget and budget justification

Email attachment 2: Budget & budget justification

Late applications will not be reviewed.