

AACVPR Quality Improvement Cohort: **QI iMPROVE Program Overview and Application**

The Quality Improvement Cohort is a new offering from AACVPR's Research and Quality of Care Committees. The purpose of this new program is to provide clinicians with the skills needed to identify, plan for, and implement a Quality Improvement project in their program, and to then write up the results of that project to present to administration and/or submit as an abstract for AACVPR's Annual Meeting Call for Abstracts.

As this is our first cohort, we will limit the number of participants to 20 sites. As a result, it is possible that this will be a competitive selection process, and not all that apply may ultimately be selected to participate.

The cohort will meet on Tuesdays at 2:00 pm ET/1:00 pm CT/12:00 pm MT/11:00 am PT on the currently planned dates to cover the following topics:

- **November 12, 2024:** Introduction & Purpose, PICO Method, Baseline Data Collection
- **November 19, 2024:** Engagement & Managing Teams
- **December 3, 2024:** Identify Root Problems Through the Use of Quality Improvement Tools
- **December 10, 2024:** Strategic Thinking for Planning Interventions
- **January 14, 2025:** Using Data to Guide Your Project
- **February 4, 2025:** Presentation and Refinement of QI Projects by Participants
- **March 4, 2025:** Data Collection Check-in: Q&A and Troubleshooting
- **April 1, 2025:** Data Collection Check-in: Q&A and Troubleshooting
- **April 15, 2025:** Writing Up & Presenting Data
- **April 22, 2025:** Sustainability and Continuous Quality Improvement, Creating a Poster

In addition to the calls, participants will need to implement their selected Quality Improvement project within their program.

Eligibility Requirements:

- Applicants must be AACVPR members in good standing
- Applications must work at an AACVPR-certified program.
- \$50 non-refundable participation fee if selected for the cohort.

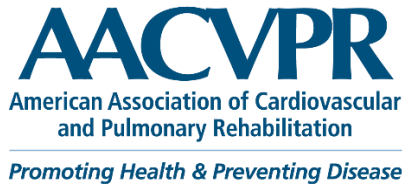
Application Requirements:

- ✓ Completion of Contact and Demographic Information
- ✓ Completion of Applicant Attestation
- ✓ Completion of Application Attestation by Direct Supervisor
- ✓ Submission of Quality Improvement Proposal (See proposal template and sample proposal included in this application packet for details) to include:

- Clinical question or problem to target and the proposed intervention to address the question or problem.
- Unsure what question or problem you would like to target for this program? See below for suggestions:
 - The [Program Certification Performance Measures](#) are a good starting point as your program should already have a process for collecting the data points, and access to historical data from previous applications and annual reports.
 - Applicants are encouraged to review the [Million Hearts Cardiac Rehabilitation Change Package](#) for possible questions and problems to target.

All applications are due November 4, 2024 and should be submitted to research@aacvpr.org.

Any questions regarding this process should be directed to research@aacvpr.org.



Quality Improvement Cohort Application

Please complete the demographic information and attestation below and submit this with the completed supervisor attestation and your project proposal to research@aacvpr.org no later than **November 4, 2024**.

Demographic Information

Please provide your contact and demographic information below:

Full Name: Click or tap here to enter text.

Title: Click or tap here to enter text.

Designations: Click or tap here to enter text.

Email: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Program Name: Click or tap here to enter text.

Program Address: Click or tap here to enter text.

Annual Enrollment: Click or tap here to enter text.

Why you would like to participate in this program (2-4 sentences max):

Click or tap here to enter text.

Participant Attestation:

By signing below, I understand that if I am selected, I will be required to pay a non-refundable fee of \$50. I also understand that I will be asked to participate in regular calls to cover the process of selecting, implementing, and writing up a quality improvement project, and will need to gain stakeholder buy-in for my project and implement my selected quality improvement project as part of my participation in this process.

Name: Click or tap here to enter text.

Title: Click or tap here to enter text.

Signature:

Signature Date: Click or tap here to enter text.

Quality Improvement Cohort Application - Supervisor Attestation Overview:

In working with prior groups, we understand the importance of supervisor support. We have found that quality improvement projects are more successful with supervisor support and resources. Because of this, we are asking all participants to have their supervisor complete the attestation below to ensure proper buy-in and visibility for this program.

Quality Improvement Cohort Application - Supervisor Attestation:

By signing below, I understand that the applicant, _____, is applying to participate in AACVPR's Quality Improvement Cohort, and will work to develop and implement a quality improvement project over the next 8 months. I understand that the applicant will be asked to participate in regular calls to cover the process of selecting, implementing, and writing up a quality improvement project, which is expected to take approximately 1-2 hours per week, and I have read and reviewed this application document prior to submission. I also understand that later this year, I will be asked to sign off on the project selected by the applicant to confirm stakeholder buy-in.

Supervisor Name: Click or tap here to enter text.

Supervisor Title: Click or tap here to enter text.

Supervisor Email: Click or tap here to enter text.

Supervisor Signature:

Signature Date: Click or tap here to enter text.

Quality Improvement Cohort Project Proposal Template

Please use the following template to structure your proposal. The completed proposal should be no longer than one page, single spaced, and would ideally be between a half page and $\frac{3}{4}$ of a page. A sample proposal is included on the following page to help you as you build out your proposal.

Title:

Name:

Supervisor: Your supervisor should briefly review the proposal and will need to complete the attestation included in the application packet.

Problem: In 1-2 sentences, describe the problem you want to address in your program.

Goal: In 1-2 sentences, describe the ultimate goal of this project. If possible, choose a quantitative threshold to determine success.

Setting: Describe your program's setting and 1-2 unique features or barriers of your particular program.

Possible Metrics and Data measures: Identify 1-2 quantitative metrics and/or data measures to track to determine progress toward goal.

Possible Key Barriers: In 1-2 sentences, describe key barriers.

Possible Strategies:

Include 4-5 possible bulleted strategies to address the problem below:

Sample Quality Improvement Cohort Project Proposal

Title: Improving Enrollment into Cardiac Rehabilitation for Patients with Heart Failure

Name: Patrick Schilling, Manager, Cardiac Rehabilitation

Supervisor: Shiela Shoemaker, NP; Heart and Vascular Program Director

Problem: Patients with Heart Failure (HF) rarely participate in cardiac rehabilitation, with typically enrolment rates of ~3%. At Baystate, this is also a problem, with typically 3,000 admissions for heart failure each year, with only 50 patients participating each year. Even when referred and scheduled, heart failure patients have been among the most likely to no-show for their appointment.

Goal: Increase referral and participation among patients with heart failure, to a goal of 100 patients per year with a no-show rate of <15% (typical for our other patients.)

Setting: Baystate Medical Center, Springfield MA, 760 bed tertiary care hospital with large Phase 2 Cardiac Rehabilitation program that enrolls 800 patients per year. Mixed urban, suburban, rural population with 10% Hispanic population.

Possible Metrics and Data measures: We plan to track the number of patients with HF who are eligible, how many are referred, how many qualified, the average time between referral to enrollment, the number of patients who enroll, and the number of patients who complete 12 or more sessions.

Possible Key Barriers: We suspect that that referral to CR is not a priority for most physicians, that they are unaware of the benefits, and also may not know how to refer patients. Patients with HF may also not perceive the need for cardiac rehabilitation.

Possible Strategies:

- Meet with key stakeholders, such heart failure physician leadership, HF nursing coordinator, medical director of cardiac rehab.
- Do some listening sessions with front-line providers, nurses, medical assistants.
- Increase HF awareness and visibility by placing posters in the HF clinic.
- Develop a “how to order cardiac rehab” poster.
- Round twice monthly with the NP in the HF clinic
- Track data and provide feedback to providers about referral rates.
- Create a dashboard to post in the HF clinic work room.
- Create a system of warm hand-off, after a HF referral has been made in the clinic with the medical assistant who will bring them across the hall to get a quick tour of cardiac rehabilitation.
- Send reminders to HF patients who are scheduled for an orientation.