Proposed Small Quality Improvement (QI) Project Review Request
Indiana University School of Medicine, Department of Pediatrics
For American Board of Pediatrics (ABP) Part IV Maintenance of Certification (MOC4) credit

Review Request Guidelines
This application is for a PROPOSED small quality improvement project (1-10 physicians) that has not been previously approved and is seeking American Board of Pediatrics (ABP) Part IV Maintenance of Certification (MOC4) credit. Pediatric residents and fellows who are not yet board certified but are part of an ACGME approved residency or fellowship may participate in QI projects and bank credit during their residency. This credit will be applied to their first MOC cycle after certification. Contact pedsMOC@iu.edu for more information.

To help determine if a project currently in the design phase will qualify for ABP Part IV MOC credit, complete and submit this application for feedback from the IU School of Medicine pediatrics quality improvement review committee. The committee will review the submission and provide tips, guidance and resources to help with the project design. This is a preliminary step to help ensure that the project will qualify for MOC credit and no Part IV points will be awarded at this stage. Once the project is completed a Completed Small Quality Improvement Project Application [link to appropriate page] should be submitted.

Projects must be able to demonstrate the following:
Aims – what was the project trying to accomplish?
Measurement – Was there demonstrable improvement? At a minimum, a baseline and two follow-up measurements are required.
Ideas - What changes were made that will result in an improvement?

A basic quality improvement guide is available to provide physicians with information on the principles of quality improvement. Email pedsMOC@iu.edu to request a copy.

This form and supporting documents should be submitted to pedsMOC@iu.edu. Supplemental information can be included with this application, but will not be accepted in lieu of original, thoughtful, detailed, complete, and written responses to each question.

Application Form for Review of a Proposed Small Team QI Project for MOC IV Credit
Please note this application is for review of a PROPOSED Small Group Quality Improvement Project with 10 or fewer participants. For already completed projects see: Completed Small Quality Improvement Project Application (link to https://medicine.iu.edu/departments/pediatrics/education-programs/physician-training/MOC/completed-small-project)

Quality Improvement Project Title:

Name of Applicant:

What is the setting of this proposed small team QI project?

Phone:

Email:
Approximately when will the project start?

What is the anticipated completion date for the project? Please note that credit is awarded based upon the date the project is completed. Please allow time for baseline and two follow-up improvement cycles.

Project Description
In the boxes below provide a thoughtful original response to each question.

1. **Describe the quality gap or issue to be addressed by this QI project.** The quality gap/issue is the difference between processes or outcomes observed in your setting and those that are potentially obtainable based on current professional knowledge. The difference should be attributable (in whole or in part) to a deficiency in your setting that could/can be addressed by this project. For example: Wait times in the emergency room are persistently high, resulting in unacceptable rates of patients leaving before being seen.

2. **What specifics may be causing this gap?** For example: Slow registration process, inadequate space in the emergency room, inadequate nursing staff.

3. **What is the specific aim of the QI project?** Strong aims are specific, measurable, achievable, realistic, and have a time frame.

4. **What actions will be taken to accomplish the improvement aim?** For example: education, daily or weekly reminders, checklists, registry, process flow redesign.

5. **Please identify the specific measures that are planned for this project.** If information was collected and reviewed for more measures than are relevant to this project, please exclude the irrelevant measures from the responses to the measures questions.

6. **Number of physicians expected to participate.** Must be a number less than 10. For projects with greater than 10 participants, the large project review application (link to Large Project Review Application) must be completed.

7. **Length of time physicians must participate to obtain credit.** Must be long enough to participate in at least two cycles of improvement with at least 3 measurements.

8. **How many meetings must a physician attend and actively participate in to obtain MOC Part 4 credit?**

9. **What education is planned in quality improvement that a physician would have to complete in order to get credit.** For example, physicians might complete 2-4 modules in the [IHI open school](http://www.ihi.org) or the [EQUIP module](http://www.aap.org) by AAP.

10. **Is baseline data being collected? Circle/highlight one: Yes No**

A measures table (similar to a checklist) is a useful tool to ensure each selected measure has all the necessary components. Example project: BMI is measured at every well-child visit at 123 Pediatrics.

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Goal</th>
<th>Exclusions</th>
<th>Unit of Measurement</th>
<th>Data Source</th>
<th>Data Reporting</th>
</tr>
</thead>
</table>

**Measure Name:** Proportion of Children with BMI documented in the chart
Goal: 90%
Exclusions: Sick visits
Unit of Measurement: kg/m²
Data Source: Visit template
Data Reporting: Monthly run chart

11. After baseline data is collected, how many improvement cycles (follow-up measurements) will be conducted? The ABP requires multiple cycles of data collection and reporting. A minimum of baseline and two follow-up measurements. For example: collect baseline data, implement a change, re-measure, implement another change, measure again, or baseline, implement a change, re-measure and sustain.

12. How will the results of the project be displayed? Please plan to provide de-identified team results in graph form.

13. Will the improvement team meet regularly? Circle/highlight one: Yes No How often?

14. Is there a plan to turn this project into scholarship? If so, what are those plans?

15. What education in quality improvement will be completed as part of this project? At least two learning events covering QI topics are required to meet criteria for meaningful participation.

16. What additional questions/comments do you have for the Proposed Small Project review team?

Email completed form to pedsMOC@iu.edu along with any attachments.