# Action Plan—Guidance

Use this form to develop your quality improvement plan. Clarification for each component is provided below and a blank template.

## ORGANIZATION NAME

### Action Plan for PROJECT

<table>
<thead>
<tr>
<th>Initiated DATE–Updated DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

## Goal Statement:

Clearly state the aim/goal that you are trying to accomplish.

The aim should be SMART:

- Specific
- Measurable
- Attainable
- Relevant
- Time-Bound

## ITEM | ROOT CAUSE | PLAN | RESPONSIBILITY | DATE DUE/COMPLETED | MEASUREMENT PLAN | STATUS | RESULTS/LESSONS LEARNED
--- | --- | --- | --- | --- | --- | --- | ---
Identify key areas for improvement. | Identify the root cause of the problem (findings of the root cause analysis [RCA]). The root cause is the factor that when fixed prevents the problem from re-occurring. | Identify plan for accomplishing the improvement in each area identified for change. | Identify project leader and/or team. Make sure to include individuals that directly work in the area that is under improvement. Assign clear responsibilities to each team member. | Set deadlines. Identify when completed. Due (D) Completed (C) D—xx/xx/xx C—xx/xx/xx | Describe the plan to collect information to evaluate the results and to monitor progress. | Describe the status of progress over time | Plan-do-study-act (PDSA) • Record what you have learned. • What has worked/not worked? • Identify changes you would make to your project plan and plans you have moving forward. • Identify potentials to spread good practices across your organization. |
# Action Plan—Example

**Quality Care Practice of Your Town**

**Action Plan for Aspirin Therapy**  
*Initiated 9/01/19–Updated 10/22/19*

**Goal Statement:**  
To improve the heart health of our patients by increasing awareness of appropriate low-dose aspirin therapy, with 90% of high-risk patients receiving education by the end of CY 2019.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>ROOT CAUSE</th>
<th>PLAN</th>
<th>RESPONSIBILITY</th>
<th>DATE DUE/COMPLETED</th>
<th>MEASUREMENT PLAN</th>
<th>STATUS</th>
<th>RESULTS/LESSONS LEARNED</th>
</tr>
</thead>
</table>
| Staff Education           | Lack of familiarity with current guidelines | 1. Conduct front-line staff education  
2. Conduct competency assessment | • Dr. Hauser  
• All frontline staff | 1. D—11/01/19  
C—10/10/19  
2. D—11/15/19  
C—10/31/19 | • 100% staff attendance  
• 100% on assessment | Complete | 100% of front-line staff received training and achieved score of 100% on competency assessment (3 on second attempt). |
| Patient Education: EMR/systems | No aspirin education in system | 1. Add education to EMR  
2. Implement chart audits to verify (through 2012) | Mary                  | 1. D—11/01/19  
C—10/29/19  
2. D—12/31/19 | Audit charts monthly to see if education has been given from EMR: target 100% compliance | EMR updates complete | Dr. Jones has problems accessing the internet to get patient education on aspirin. We will provide materials at check out and make sure it is tracked for Meaningful Use. |
| Patient Education: Office reminders | Incomplete understanding of aspirin therapy | 1. Obtain materials and MD approval  
2. Display patient posters | • Robin/ Dr. Hauser  
• Jennifer | 1. D—11/01/19  
C—10/10/19  
2. D—11/15/19  
C—10/31/19 | 1 poster in each high-traffic area | Complete | HSAG posters displayed in waiting area and examination rooms. |
## Action Plan

Action Plan for _________
Initiated __/__/__ – Updated __/__/__

Goal Statement:

<table>
<thead>
<tr>
<th>ITEM</th>
<th>ROOT CAUSE</th>
<th>PLAN</th>
<th>RESPONSIBILITY</th>
<th>DATE DUE/COMPLETED</th>
<th>MEASUREMENT PLAN</th>
<th>STATUS</th>
<th>RESULTS/LESSONS LEARNED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>