

## Continuous Quality Improvement Project Plan

1. What are we trying to accomplish?

We are trying to provide a simplified referral procedure.

2. How will we know that a change is an improvement?

We will know the change is an improvement when we can spend more time with our patients and reasonable time completing referrals.

3. What changes can we make that will result in improvement?

We can exchange the paper referral for an electronic referral and evaluate the results.

**1. Identify the Problem or Opportunity:** Our paper referrals procedure may become extremely difficult and time-consuming once we expand classes to three more clinics. We have a new contract with OSIS, who are NextGen specialists. The QC has met with the OSIS rep who offered to develop an electronic referral that meets Medicare requirements. The referral would include electronic provider signature, and the diagnosis and all demographic patient information would automatically populate onto the referral. The QC will only need to check appropriate boxes, submit the referral, and task the PSR with setting up the initial appointment. This would significantly speed up the referral process and eliminate any risk of losing it on paper.

**2. Collect the Data:** The QC will contact IT support and enlist a staff member as a team player in this CQI project. The team of QC and IT will contact the OSIS rep (our next team member) to determine progress on the EHR referral.

**3. Analyze the Data:** Our expanded team of three will discuss any progress on the referral and any desired improvements, if appropriate.

**4. Identify Alternative Solutions:** Alternative solutions will be identified and considered.

**5. Develop an Implementation Plan:** If moving forward with an electronic referral, this phase of the plan will include requesting permission from Administration, notifying providers of the new referral procedure, sending instructions, and implementing any training required.

**6. Implement the plan:** The QC will begin classes using the new referral procedure at one clinic.

**7. Evaluate the Actions:** The procedure will be reviewed, and corrections made if needed. When ready, we will begin classes at a second clinic, using the same procedure.

**8. Maintain the Improvement:** Eventually, if successful, the new referral procedure will be maintained due to preference, and classes will expand to include all clinics.