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| **Improvement Initiative Planning Form** |
| Name: |  |
| Role: |  |
| Date of submission: |  |
| Multidiscipline Team Members: |  |
| Improvement Initiative Title: |  |
| Division: |  |
|  |
| Opportunity Statement (Topic/ issue that you would like to improve) |
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| Aim Statement (How good do you want it to be and by when?) |
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| Why is it necessary to make this improvement? |
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| Measures (How will you know that your change is an improvement?) |
| Outcome Measure: |
| Process Measures: |
| Balancing Measures |
| What changes can you make that will lead to the desired improvement? (Use Driver Diagram to help identify them and then list the changes to test below) |
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| What Risks and barriers are there to the success of this improvement initiative and how will you manage them? |
| Risks: |
| Barriers: |