

* 1. QI Lead

☐ [Redacted]
☐ [Redacted]
☐ [Redacted]
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☐ [Redacted]
☐ [Redacted]

* 2. Borough

☐ Croydon
☐ Lambeth
☐ Lewisham

☐ Southwark
☐ Wandsworth

* 3. Service

☐ Community
☐ In-patient

* 4. CAG

☐ CAMHS
☐ MHOAD
☐ Other (please specify)

☐ Psychosis

* 5. Year of project

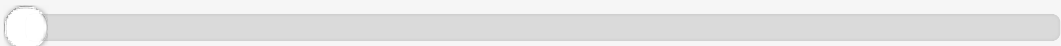
2015 2018

* 6. Month of project

1 12

* 7. Project life span (approx. in weeks)

0 52



* 8. Project status

- ☐ Closed ☐ Terminated at S
- ☐ Terminated at P ☐ Terminated at A
- ☐ Terminated at D

* 9. Was the project affected by staff turnover?

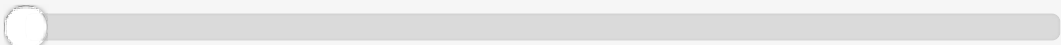
- ☐ No ☐ Yes

* 10. Aim achieved?

- ☐ Yes ☐ No

* 11. After the aim was achieved, how many weeks was it sustained before the project is closed?

0 12



* 12. After project completion, were the change ideas adopted in practice?

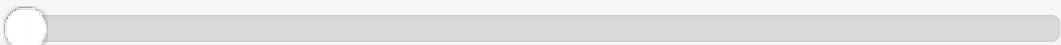
- ☐ Yes ☐ Not known
- ☐ No

* 13. Did this project trigger similar projects at other sites?

- ☐ Yes ☐ Not known
- ☐ No

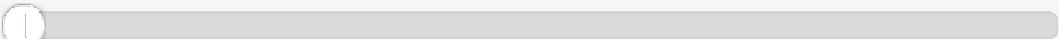
* 14. Estimated no. of meetings with SLaM QI

0 10 20



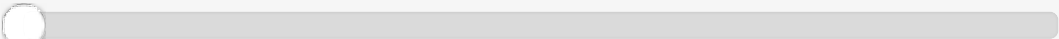
* 15. Estimated no. of email/phone contact with/from SLaM QI

0 50 100

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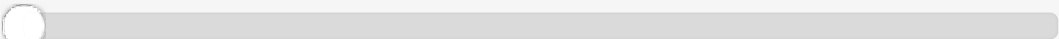
* 16. Estimated total hours of commute incurred by SLaM QI

0 10 20

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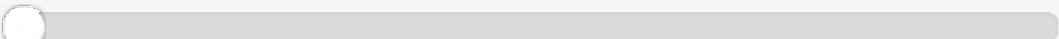
* 17. Estimated total travel expenses incurred by SLaM QI

0 20 40

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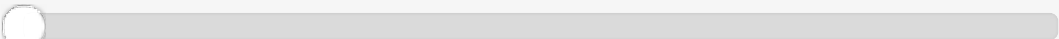
* 18. Estimated total hours of staff time officially sanctioned for QI project

0 20 40

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* 19. Estimated total hours of staff time taken

0 20 40

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* 20. Was funding available for the QI project?

☐ Yes ☐ No

* 21. Was funding required for the QI project?

☐ Yes ☐ No

* 22. Did the project team make a budget plan?

☐ No ☐ Yes

* 23. Is it possible to quantify the improvement in terms of cost savings?

☐ No ☐ Yes, but not attempted
☐ Yes

* 24. Role of the team leader in this QI project?

- | | |
|---|--|
| ☐ They were directly involved. | ☐ Approached, but no apparent input. |
| ☐ Not directly involved, but consulted. | ☐ Not known. |

* 25. Role of key stakeholders (not in project team)?

- | | |
|---|--|
| ☐ They were directly involved. | ☐ Approached, but no apparent input. |
| ☐ Not directly involved, but consulted. | ☐ Not known. |

* 26. Role of service users

- | | |
|---|--|
| ☐ They were directly involved (not as beneficiaries). | ☐ Approached, but no apparent input. |
| ☐ Not directly involved, but consulted. | ☐ Not known. |

* 27. Is this the first QI project developed by this site/service?

- | | |
|---------------------------|---------------------------------|
| ☐ Yes | ☐ Not Known |
| ☐ No | |

* 28. How many staff members were there in this QI project team?

0

5

* 29. How many project team members received Foundation QI training?

0

5

* 30. Band of employment of the project lead.

1

9

* 31. Professional role of project lead

- | | |
|---|--------------------------------|
| ☐ Professional Services | ☐ Clinical |
| ☐ Non-clinical | |

* 32. Highest band of employment in this project team?

* 33. Lowest band of employment in this project team?

* 34. How many more QI projects were developed by any of these staff members since?

* 35. Did the project team disseminate the results?

- ☐ At the local site/service ☐ Not Known
- ☐ Beyond the local site/service

* 36. Did the project team disseminate the results?

- ☐ In a form of publication (e.g newsletter) ☐ Not known
- ☐ At a conference

* 37. Estimated no. of service users who directly benefited from the change introduced.

* 38. Estimated no. of staff who directly benefited from the change introduced.

* 39. The project aligns with Trust Quality priorities for

- | | |
|--|--|
| ☐ Patient Safety: Reduce the use of restrictive interventions applied to service users. | ☐ Clinical Effectiveness: Developing electronic systems to improve the delivery of care |
| ☐ Patient Safety: Safer staffing | ☐ Patient Experience: Reducing the number of Acute out of area treatments |
| ☐ Patient Safety: Risk Assessments | ☐ Patient Experience: Carer's assessments and associated care plan |
| ☐ Clinical Effectiveness: Physical healthcare screening | ☐ Patient Experience: Quality of environments and food within in-patient services |
| ☐ Clinical Effectiveness: Care planning | |

* 40. No. of outcome measures attached to the Aim identified in the driver diagram.

0 2 4

☐ ☐ ☐

* 41. Were the target outcomes quantified in the Aim?

- ☐ No ☐ Yes

* 42. How many primary drivers were there in the driver diagram?

0 5 10

☐ ☐ ☐

* 43. No. of primary drivers with a measure attached to it

0 5 10

☐ ☐ ☐

* 44. How many secondary drivers were there in the driver diagram?

0 5 10

☐ ☐ ☐

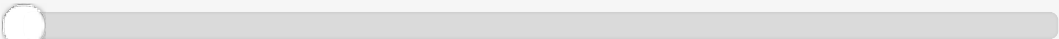
* 45. No. of secondary drivers with a measure attached to it

0 5 10

☐ ☐ ☐

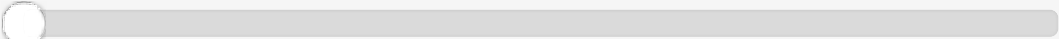
* 46. No. of change ideas identified in the driver diagram

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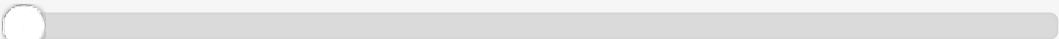
* 47. No. of change ideas tested and retained

0 5 10

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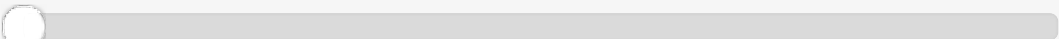
* 48. No of change ideas tested and discarded

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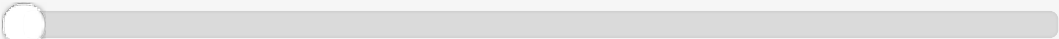
* 49. No. of PDSA constructed for the entire project

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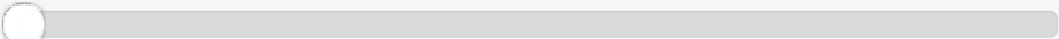
* 50. No. of PDSA with documentation to enable others to replicate what was done

0 5 10

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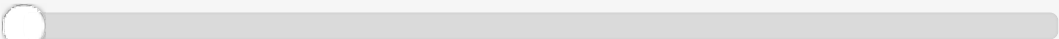
* 51. No. of balancing measures introduced to check for unintended consequences

0 5 10

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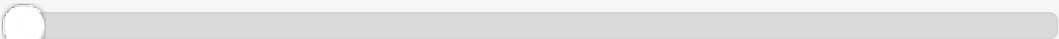
* 52. No. of PDSA that completed 1 cycle (i.e. concluded with an informed action)

0 5 10

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* 53. No. of PDSA that completed more than 1 cycle

0 5 10

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* 54. Was there clear evidence to suggest that an improvement is needed?

☐ No

☐ Yes

* 55. How many times was data collected before implementing change ideas?

0

5

* 56. No. of weeks data was collected before implementing change ideas?

0

5

10

* 57. Was the median value of random variation established for outcomes?

☐ No

☐ Yes

* 58. Was the median value of random variation established for process measures?

☐ No

☐ Yes

* 59. Was the median value of random variation established for balancing measures?

☐ No

☐ Yes

* 60. How many times was data collected after implementing change ideas?

0

5

* 61. No. of weeks data was collected after implementing change ideas.

0

10