SQUIRE 2.0 Rubric: Quality Improvement Proposal

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| Heading   * Sub-heading | Criteria | Comments | Score |
| Title | * Indicates proposed project intends to improve healthcare in terms of quality, safety, effectiveness, patient-centeredness, timeliness, cost, efficiency, and/or equity of healthcare * Succinctly includes information about the intervention, population, and type of setting |  | xx/10 |
| Introduction |  |  |  |
| * Problem Description | * Defines the health care problem including introducing acronyms that will be used and cites primary sources. * Provides evidence regarding the incidence/prevalence of the problem (general population, specific population of interest) and cites primary sources. * Identifies the clinical significance of the local problem. |  | xx/40 |
| * Available Knowledge | * Organizes information according to appropriate subtopics (using subheadings to divide the Introduction section) that relate to the problem. Related issues could include: mortality, morbidity, costs, access problems, etc. Cites primary sources. * Summary of available knowledge about the clinical problem citing recent and relevant research studies that address its occurrence and/or management thereof. Cites primary sources. * Synthesizes and critiques the literature pertaining to interventions that address the problem.   + Pros and cons of commonly used interventions in the research literature or in practice settings.   + Describes the specific details describing the intervention(s) that will be discussed in the methods section (i.e. the intervention(s) that will be implemented for the DNP Project proposal) and pros and cons about the research regarding its efficacy. Cites primary sources throughout. |  | xx/40 |
| * Rationale | * Provides context for why the intervention is expected to work using theories or models that explain the problem or assumptions about the intervention that support its use (based in the literature, ***not*** personal beliefs). For example, the framework could include an approach such as Plan, Do, Study, Act. * State the gap in practice, i.e. “Despite evidence to support the use of intervention \_\_\_ for \_\_\_, it has not been disseminated consistently in \_\_\_\_ type of care settings…” * Cites primary sources. |  | xx/15 |
| * Specific Aims | * States the purpose of the proposed project (the inverse of the gap statement), i.e. “The purpose of this DNP Project is to implement intervention x in a Northern California ambulatory surgery clinic and to evaluate outcome a and outcome b. |  | xx/10 |
| Methods |  |  |  |
| * Context | * Described the contextual elements that will be important to understand the ramifications of implementing the evidence-based practice or quality improvement intervention * Describes the setting in which the project will take place in full detail (Use a setting with which you are familiar if it is not yet determined).   + Type of setting (inpatient, specialty, ambulatory, etc.)   + Patient population seen (ages, ethnicity, socioeconomic or insurance status, etc.)   + Approximate size of patient population (# of patients seen in a week or month in the setting)   + Specifics of setting (types of providers on interdisciplinary team, numbers of each, roles in patient care, etc.)   + Describe current policy and practices for addressing the problem at the site (providing reference to and relevant information and documents in the appendix). |  | xx/25 |
| * Intervention | a. Describes the intervention in clear enough detail that it could be replicated  b.  Clearly describes the actions required by each team member  c. Provides step by step detail of the planned intervention roll-out including, but not limited to:   * Training of staff * Steps in procedure that are relevant to the intervention, i.e. diabetes coaching intervention might involve assessment at intake, scheduling a 1:1 education session and development of a treatment plan, planning for nutrition, physical therapy, and social work referrals, monthly follow-up phone calls to provide encouragement and answer questions, outcomes assessment at baseline, 3 months, 6 months, and 12 months, etc. |  | xx/30 |
| * Study of intervention | a. Describes the plan for evaluating the impact of the intervention in the setting or on the patients   * + Describes the time period over which the project will take place   + Identifies the frequency of data collection   b.  Describes the method of determining if outcomes were improved or worsened by the intervention   * + c. Describes the study design. Retrospective or prospective?   + Is the comparison of outcomes to a national benchmark standard?   + Pre-intervention to post-intervention outcomes?   + A unit that received the intervention to one that did not receive the intervention? |  | Xx/30 |
| * Measures | a. Clearly identifies and describes a succinct selection of measures chosen to study the process and/or outcomes of the intervention (i.e. cost, efficacy, adherence to protocol, etc.). Bases measures on existing literature and available data in the care setting.  b. Includes a table with all variables (data) that will be collected. The table should have two columns: one for the name of the variable, the second with the operational definition (description of specifically how each will be measured).  c.  Describes methods to ensure data completeness and accuracy  d. ***If*** any survey-type or psychological assessment instruments are used, care is taken to choose one with established reliability or validity, in the language of the patient population (without the need for translation) and includes: 1) complete description of the instrument including number of items, concept it measures, scoring range, scoring interpretation, research to support its reliability and validity. Cites primary sources  e. Avoids mixing aggregate and individual patient-level data (choose one method of data collection or the other)  f. If individual patient-level data are used, outcome (dependent) and appropriate demographic or potential variables of influence are collected as well (such as race, age, gender, etc.) |  | xx/30 |
| * Analysis | a. Describes plan developed in consultation with statistician and DNP Project chair regarding plan for analysis of data given the variables identified above.   * + Written plan includes software that will be used for data entry and storage.   + Describes methods that will be used to analyze and interpret the data including descriptive (overall characteristics of data collected) and/or inferential (answers primary questions pertaining to purpose of the project) analyses, if applicable. |  | xx/20 |
| * Ethical Considerations | * Addresses the ethical aspects that should be considered for the proposed project. Issues could include: informed consent for treatment, privacy, conflicts of interest, or plans or requirement for IRB review. |  | xx/20 |
| References | * Every reference in the body of the paper appears in the reference list and vice versa. |  | xx/20 |
| APA Format | * The paper uses APA format throughout including, but not limited to:   + Headings   + Margins   + Font   + Spacing   + In-text and reference list citation format |  | xx/20 |
| Tables | * Data table(s) appears here. |  | xx/10 |
| Appendix | * Possible items including, but not limited to:   + Letter of support from employer / site   + Policy guidelines   + Flowchart of intervention   + Anything that might be better represented by a graphic that is briefly described in the text, followed by (See Appendix A, B, or C) placing the item in the appendix in the correct order that corresponds with the sequence that each appears in the text. |  | xx/30 |
| Total: |  |  | xxx/350 |

Adapted from: <http://squire-statement.org/index.cfm?fuseaction=Page.ViewPage&PageID=471>