QI Basics

# Data Collection and Monitoring Plan

The QI Data Collection and Monitoring Plan is a tool to keep track of one or more measures you wish to monitor for your quality improvement (QI) project.

## How to Use

For each measure/indicator you collect and monitor, answer the questions in the grid. The information gleaned from these questions will help you determine how best to track, display, and evaluate the results of your chosen measures. Suppose you have a relatively small number of measures or indicators you track. In that case, you may wish to include all measures in one table and use this as an overview tool that could be completed by the person coordinating QI activities in your organization. Alternatively, you may use this table for individual measures or groupings of measures that are the target for specific improvement projects.

* **What are we measuring?** What is the measure's name, how do we refer to it internally, and are any state or federal IDs linked to it?
* **What are the measure specifications?** Clearly define the measure, including the population of interest and any exclusions, and define the numerator and denominator.
* **What is the data collection strategy?** Who is collecting the data, when are they collecting it, how are they gathering it, and where is it being kept?
* **What is our baseline performance?** Enter the baseline for the measure if known.
* **What is our performance goal or aim?** Enter your targeted performance goal or aim for each measure here.
* **Who is responsible for monitoring the measure?** Include names of individual team members responsible for monitoring the measure and/or ensuring that the team monitors the measure.
* **How frequently will the data be monitored, and for how long?** Indicate the frequency with which you pull data and monitor the measure and the duration of monitoring at that frequency.
* **How will data findings be tracked and displayed?** Include notes, descriptions, or comments regarding how the data will be tracked and/or shared/displayed for each measure. (e.g., in a report specific to your quality team or an existing report that includes your chosen measure)
* **What are the stratification factors?** (optional) Document any need for collecting data at a more detailed level (by name, department, time factors, etc.) that will assist in analysis.

An example is included in the table on the next page for your reference.

# Example QI Data Collection and Monitoring Plan

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| **Measure Name** | **Measure Definition** | **Numerator** | **Denominator** | **Baseline Performance** | **Performance Goal** | **Who is responsible for monitoring this measure?** | **Who, Where, When, and How is Data Collected?** | **Frequency and Duration of Monitoring** | **How will data findings be tracked and displayed?** | **Stratification Factors** |
| Controlling High Blood Pressure  AKA - Hypertension  Quality ID 236 NQF 0018 | Percentage of patients 18-85 years of age diagnosed with hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during measurement period.  Exclusions:  Hospice; ESRD; dialysis; renal transplant; pregnancy; certain instances for patients 66 and older (see measure specs) | Number of patients in the funded grant project target patient population whose blood pressure at the most recent visit is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during measurement period. | Total patients 18 through 85 years of age in the funded grant project target patient population who had a diagnosis of hypertension during measurement period. | 45% | 55% (after one month of PDSA testing) | Sophia (Team lead) | Data is entered into EHR during patient encounters by the clinician. | Monthly monitoring/ ongoing | Line Graph in the project dashboard | Stratify at the clinician level; stratify at the patient level based on race |
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