



Name of Organization: _____

PROJECT CHARTER

1. CHANGE PROJECT TITLE	
2. What AIM will the Change Project address? Choose one aim and indicate baseline measure and target.	
3. LOCATION	
4. START DATE and expected completion date	
5. LEVEL OF CARE	
6. What CLIENT POPULATION are you trying to help, e.g. clients in a specific program?	
7. EXECUTIVE SPONSOR	
8. CHANGE LEADER	
9. CHANGE TEAM MEMBERS	
10. How will you COLLECT DATA to measure the impact of change?	
11. What is the expected FINANCIAL IMPACT of this change project? How will the Executive Sponsor know?	
12. PDCA Pre-Planning Checklist	

PDSA CYCLES

Rapid Cycle #	Cycle Begin Date	Cycle End Date	Plan <i>What is the idea/change to be tested?</i>	Do <i>What steps are you specifically making to test this idea/change? Who is responsible?</i>	Study <i>What were the results? How do they compare with baseline measure?</i>	Act <i>What is your next step? Adopt? Adapt? Abandon?</i>

EVALUATION AND SUSTAIN PLAN

Project Outcomes (only complete once the project is finished)	
1. What was the project END DATE , when you stopped making changes?	
2. What did you LEARN (e.g., what were some unexpected outcomes or lessons learned from your change efforts)?	
3. What was the FINANCIAL IMPACT of this change project? (e.g. Increased revenue? Reduced costs? Increased staff retention?)	
4. Is there a HEALTH EQUITY IMPACT as a result of the change project?	

Sustainability Plan (only complete if you are sustaining the changes)	
A. Who is the SUSTAIN LEADER ?	
B. What CHANGES do you want TO SUSTAIN ?	
C. What SUSTAIN STEPS are being taken to ensure that the changes stay in place and that it is not possible to revert back to the old way of doing things?	
D. What is the TARGET SUSTAIN MEASURE , i.e. the point at which the Change Team would intervene to get the project back on track?	
E. What system is in place to effectively MONITOR the SUSTAIN MEASURE ?	



Project put into QI Project Summary Document?

☐ Yes

☐ Not Yet

Additional Notes: