



Systems of Care

AN ACC CLINICAL TOOLKIT

AD HOC IMPROVEMENT PROJECT TEAM CHARTER – TEMPLATE

Improvement Project Charter – Example

(insert Organization logo here)

Project Title: (Insert project title)



Element	Description	Information
Process	The process in which the problem or opportunity exists	Name of process. Consider using a hierarchical format with macro process and sub-processes to reach the one which the project will operate
Problem / Opportunity Statement	Describe the problem or improvement opportunity	
Intervention Hypothesis	Specify the change / intervention being made in the form of a hypothesis	
Consequences of Status Quo	What happens if nothing is done?	
Benefits to Customers	Who are the internal and/or external customers that may benefit? What can be measured that reflects how well or efficiently their needs or expectations are being met? What changes in that measure(s) are projected from this project? Use one set of parameters per customer / per need/expectation.	Customer: Need / Expectation: Measure: Projected Change:
Other Justifications	Any other reasons why this project should be approved	
Proposed Team Members	Names and titles of proposed team members. Also include organization name if external to the department.	<ul style="list-style-type: none"> • (name, title) • (name, title) • (name, title) • (name, title)
Projected Schedule	Proposed Project Start Date	
	M - Measure	(insert date for projected completion of this phase)
	A – Analyze	(insert date for projected completion of this phase)
	I - Improvement	(insert date for projected completion of this phase)
	C- Control	(insert date for projected completion of this phase)



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RTSCC Improvement Project Charter – (Insert project title)

Anticipated Deliverables	M – Measure	<ul style="list-style-type: none"> Baseline measure or similar
	A – Analyze	<ul style="list-style-type: none"> Report on other options considered as possible interventions based on the analysis and root cause considerations
	I – Improve	<ul style="list-style-type: none"> Results of intervention(s)
	C – Control	<ul style="list-style-type: none"> Recommendations for making changes permanent Report on potential performance decline scenarios and associated corrective efforts Report on overall project to stakeholders Notes on where / how project information has been archived Notes on any plans for any external presentations and/or publications
Other Support Required	Aside from funding, personnel, such as data access, equipment, etc.	<ul style="list-style-type: none">
Review Status	Allows improvement process itself to be measured on individual projects and for projects in aggregate	<p>Sub-Committee Submission Date:</p> <p>Sub-Committee Initial Review Date:</p> <p>Sub-committee - Recommendation Status: Approve Decline Reconsider</p> <p>Sub-Committee Reconsideration Date:</p> <p>Steering Committee - Submission Date:</p> <p>Steering Committee - Initial Review Date:</p> <p>Steering Committee - Recommendation Status: Approve Decline Reconsider</p> <p>Steering Committee - Reconsideration Date:</p> <p>Final Review Status: Approve Decline To Be Reconsidered in Future</p>