



MSTCVS Quality Collaborative

2024 Site-Specific Quality Initiative Identification Form

Due to the Coordinating Center by January 15, 2024

Important Dates:

January 15, 2024 - Submit 2024 Site Specific QI Identification Form to Coordinating Center

February 16, 2024 - Approval/Revision of 2024 Site Specific QI - Coordinating Center to Sites

September 9, 2024 - Submit 2024 Progress Reports to the Coordinating Center

February 14, 2025 - Submit 2024 Final Reports to the Coordinating Center

-Report templates can be found on the mstcvs.org website under resources.

Points for the *site-specific quality initiative* (QI) metric will be awarded based on evidence of the development and implementation of the QI plan. P4P points will not be awarded without evidence that a plan was implemented and/or if no reports are submitted. All hospital specific QIs must identify baseline data and a target goal (2024 year-end). *All QIs must be approved by the MSTCVS Quality Committee.*

Contact [Lisa Grelecki](#) if you need assistance selecting a quality initiative.

Hospital Name:	
Submitted by:	
Date:	
Site-Specific Quality Initiative:	
Target Patient Population:	
Exclusions (if any):	
Baseline Performance:	
Baseline Numerator/Denominator:	
Baseline Performance Date Range:	
2024 Year-End Target Performance:	
Please list the names and titles of the QI team members:	
Please describe initial QI plans, interventions, and potential challenges:	