Implementation Plan

What is the purpose of this tool? The purpose of the implementation plan is to provide a format in which to:

- Define the tasks/actions required to implement each selected best practice.
- Develop a communication/training and implementation plan.
- Set a timeframe and target dates for the completion of tasks/actions and communication/training.

Who are the target audiences? The project liaison will be the primary individual to complete this implementation plan, but the document should be used as a working document by the entire improvement project team.

How can the tool help you? Upon completion of the implementation plan, the project team will have a customized project plan that will guide activities through established timeline to completion of implementation.

How does this tool relate to others? This tool should be used with the other tools found in the Implementing Improvements section of the toolkit (section D).

Instructions

- 1. In the header row (shaded in light gray), list the best practice your organization will implement, as identified in the Gap Analysis (Tool D5). Replace the red text with the description of your best practice(s).
- 2. In Column 1, list the detailed tasks/actions for each best practice.
- 3. In Column 2, assign responsibility to team members for the completion of each detailed task/action.
- 4. In Column 3, replace the red text with target implementation start dates.
- 5. In Column 4, determine whether communication/training is required for each task. If so, replace the red text with target dates of communication/training in column 5. Once the communication/training is complete, check off the completion boxes.
- 6. In Column 6, replace the red text with the actual implementation start date. Once the implementation is complete, check off the completion boxes.
- 7. Repeat steps 1-6 for each best practice, adding rows as needed.
- 8. Review the implementation plan at each team meeting. If target dates are not met, determine the cause and revise the implementation plan. Ultimately, the project's executive liaison will be responsible to ensure that the team has the adequate resources to complete tasks and that the team stays on track with task deadlines.

Note: Brainstorming with team members can be helpful for generating the detailed task/action list.

It is essential to consider several categories of key tasks when generating a list of detailed tasks/actions. Consider these key task categories:

- Design/Customization of Best Practice
- Policy/Protocol Development
- Tools (documentation, forms, etc.)
- Staffing/Resources
- Equipment/Materials
- Education/Training
- Performance Evaluation

Consider the following example: If the team identifies "educate staff" as a necessary key task, the detailed tasks/actions may include developing the education inservice, developing the handouts, identifying staff members who require education, and notifying staff of the inservice dates.

Implementation Plan

Project:

Quality Indicator:

Individual completing this form:

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6		
Detailed Tasks/Actions Associated With Implementation of Best Practice	Team Members Assigned to Each Task	Target Implementation Start Date	Communication and/or Training Required? Yes/No	Communication and/or Training Scheduled Dates	Actual Implementation Start Date		
Selected Best Practice #1 Identified in Gap Analysis: [insert description of best practice here]							
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		

Toolkit for Using the AHRQ Quality Indicators How To Improve Hospital Quality and Safety

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6		
Detailed Tasks/Actions Associated With Implementation of Best Practice	Team Members Assigned to Each Task	Target Implementation Start Date	Communication and/or Training Required? Yes/No	Communication and/or Training Scheduled Dates	Actual Implementation Start Date		
Selected Best Practice #2 Identified in Gap Analysis: [insert description of best practice here]							
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		

Toolkit for Using the AHRQ Quality Indicators How To Improve Hospital Quality and Safety

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6		
Detailed Tasks/Actions Associated With Implementation of Best Practice	Team Members Assigned to Each Task	Target Implementation Start Date	Communication and/or Training Required? Yes/No	Communication and/or Training Scheduled Dates	Actual Implementation Start Date		
Selected Best Practice #3 Identified in Gap Analysis: [insert description of best practice here]							
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		
				MM/DD/YY	MM/DD/YY		
		MM/DD/YY		Complete?	Complete?		
				□Yes □No	□Yes □No		