QI Project Charter

|  |
| --- |
| **Project Title:**  |
| **Team Leader:**  | **Executive Sponsor:**  |
| **Team Member Names:**  | **Position and Organization or Site:**  |
| **Patients Who Will Benefit:**  | **Types of Clinical and Administrative Staff Involved:** **Staff Benefits:**  |
| **Problem/Opportunity Statement:** (What’s wrong with quality?) |
| **Aim Statement:** (What are we trying to accomplish? Numerical target for improvement, over what time?) |
| **Measures**: (How will we know if we are improving?)Outcome measures:Process measures:Balancing measures: |