Infant Mortality CoINN – Individual Measurement Worksheet
EXAMPLE

Instructions: Complete this worksheet for each potential measure to plan data collection and to assist in determining its feasibility and link to the project's Aim.

Name of CoIIN: Preconception CoIIN	**State Team** *(if applicable):* NC

Aim:	By 2020…effectively integrate preconception care into the well woman visit: work with clinics to implement validated screening tool(s) and response strategies…
Measure:	% of patients completing the validated screening tool
Target Measure:	30% increase over baseline within 12 months
Population:	Women patients of child bearing age
What do we need to obtain this measure and monitor it?	• Clinics who want to participate/improve who can readily track and provide this data • Clinic staff and method to audit patient charts (EMR, manual, etc.)
Interval/Frequency of Data Collection	Monthly

Proposed measure start and stop periods	*Baseline:*	*Start date: 1/1/18*	*Stop date: 6/30/18*
	Post Intervention:	*Start date: 1/1/20*	*Stop date: 6/30/20*

Explain how this measure supports the CoIIN team's ability to understand progress toward and impact on the Aim	This measure directly relates to the aim and will provide proof source that the aim is being achieved.		
Rate the measure as to progress and impact on the Aim *(circle one):*	*High impact*	*Medium Impact*	*Low Impact*
			* *If Medium or Low Impact, consider eliminating.*
Explain the expected burden or effort of collecting data for this measure	If a Clinic site has EMR, the data can be generated easily. Manual audits will require extra effort.		
Rate the data collection's burden or effort *(circle one):*	*High burden/effort*	*Medium burden/effort (manual)*	*Low burden/effort (EMR)*
			* *If Medium or High Burden/Effort, consider eliminating.*
Explain time lag between making a change to the system and seeing evidence of change in the measure	Collect and enter data to create monthly annotated run charts. It may be that ~ 8-12 months of data will begin to show evidence of change in the measure.		
Data Source:	EMR or manual audits		
Exclusions:	To be determined with clinic site		

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Sampling plan:	Collect 100% of women of child-bearing age who qualified for screening and did and did not receive it. Enter monthly #'s in platform and generate run charts by a specified date monthly (date will depend on whether EMR or manual data collection is utilized).
Who will enter data on platform and prepare/ share reports with the team/stakeholders? *(DATA team will create graphs)*	Team's data lead will enter into platform and prepare run chart reports. Team lead will share with others.

Calculation:

$$\frac{\text{\# of eligible women receiving screening}}{\text{Total \# of eligible women}} \quad \textbf{X} \quad \textbf{100} \quad \textbf{=} \ \underline{\quad} \ \text{Percent}$$

Notes: