



NOWS INITIATIVE

30-60-90 Day Plan Worksheet

Use this tool to help you clarify your team aim(s) and plan for the next 90 days of improvement work with the ALPQC NOWS Initiative.

Foundations <small>[Reflect on your strengths and barriers to help you select your aim, goals and plan]</small>	
Strengths	
Barriers	
Focus of Your Work <small>[You'll want to select at least one team aim and one equity/patient partnership goal]</small>	
Team Aim(s)	<ul style="list-style-type: none"> ▪ Reduce length of stay by 10% ▪ Reduce exposure to pharm care among OENs at our facility by 10%
Equity and Partnership Goal(s)	<ul style="list-style-type: none"> ▪ Work with admissions/registration to establish system to accurately document patient self-identified race/ethnicity and preferred language. ▪ Develop process to support improved understanding and interaction in patient education (e.g., "teach-back" method; see resources here and here). ▪ Implement process to collect patient/family feedback; use feedback to identify areas of improvement and run PDSA cycles to test changes. ▪ On a regular basis (e.g., quarterly), report stratified measures back to staff and physicians, include debrief.
Looking Ahead <small>[Should be tied to the aim/goals and to each other (should build on each other over the 30, 60, 90 days)]</small>	
Things to Accomplish in Next 30 Days	<ol style="list-style-type: none"> 1. Develop/implement comprehensive non-pharm guidelines and checklist to implement at bedside and monitor consistent application. 2. Provide education on new non-pharm guidelines to all nursing staff. 3. Develop process for documenting use of non-pharm guidelines and tools.
Things to Accomplish in Next 60 Days	<ol style="list-style-type: none"> 1. Set up PDSA cycles for implementation of non-pharm guidelines and tools. 2. Develop/implement comprehensive pharm guidelines to implement at bedside and process for documenting consistent application. 3. Provide education on pharm guidelines to all relevant staff.
Things to Accomplish in Next 90 Days	<ol style="list-style-type: none"> 1. Set up PDSA cycles for implementation of pharm guidelines. 2. Develop/implement plan for implicit bias training for all staff. 3. Develop process for documenting completion of implicit bias training. 4. Set up PDSA cycles for implementation of implicit bias training.