

## Readmissions Quality Collaborative (Phase 2) Monthly Milestone Reporting Questions

Monthly reporting opens on the 5<sup>th</sup> of each month and is due on the 10<sup>th</sup>. Please report on the status of your planning and activities as of the last day of the previous calendar month. Each hospital / health home should complete one survey for the organization as a whole. Reporting will continue monthly until all milestones are reached.

For each of the following milestones, select one: Not yet started, in progress, or complete.

1. The Readmissions Quality Improvement (QI) Project Team is assembled.
2. The QI team has obtained PSYCKES access for all relevant staff.
3. The QI team has briefed leadership and staff of all relevant departments on project goals and activities.
4. The QI team has conducted a root cause analysis to understand the readmissions population and the drivers of readmissions.
5. The QI team has developed a written action plan for the project.
6. Staff has begun delivering project interventions.
7. Staff is consistently delivering project interventions to all eligible clients.
8. There is a system in place for the QI team to track project data.