

Planning for Improvement Process

Now that your SBHC has completed an assessment (or SWOT analysis) and selected its priority areas, the next step is to develop an improvement plan. The improvement plan will serve as the broad guide for addressing areas in your initiative or program. The improvement plan is to include desired goals or milestones, objectives, activities/strategies, and indicators for evaluation.

Developing Objectives

- The objectives should align with the priorities selected using the assessment or SWOT analysis exercise.
- Effective objectives are SMART: Specific, Measurable, Attainable/Achievable, Realistic, and Time-bound.

Directions

- **Step 1:** Using the information collected from the SBHC assessment or S.W.O.T. analysis, select the priority area(s) to direct the focus of the improvement process. Identify which areas of your current practices or situation needs attention.
- **Step 2**: Provide a brief summary of the clinic's current practice, role, and/or involvement for each of your selected priority areas. Summarize what is the "area of improvement" you are focusing on—it can be paraphrased from a question item on the particular assessment tool used or the SWOT analysis exercise.
- Step 3: Write a SMART objective that will aim to improve the current situation. Do this for all priority area(s) before developing activities and strategies.
- **Step 4:** Once you have written the objectives, go back to brainstorm or suggest activities or strategies that will serve as the steps towards achieving the specific objective.
- **Step 5:** Assign a date/timeline for each of the activities or strategies listed. You may include a desired timeframe to achieve the overall objective, but be sure to include an itemized timeline for completing the activities listed as well.
- Step 6: Identify the key person(s) responsible for each objective. Indicate the lead person(s) responsible for ensuring the activities are completed.
- **Step 7:** Indicate how you will evaluate whether the objective was achieved. Your evaluation indicators can focus on different level of outcomes: implementation/process or effectiveness/impact.

Improvement Plan Template

EXAMPLE

Priority Area: Enhancing obesity prevention & treatment

Summary of SBHC's current situation (practice, role, and/or involvement) in priority area:

The providers in the SBHC indicate they are comfortable in talking to patients and their families about weight and obesity. The medical chart audit revealed that we are not consistently calculating the child's BMI, even though H/W is recorded. In addition, our providers were not formally trained in the Expert Recommendation guidelines, but were following a majority of the guidelines. The clinic's involvement within the greater school environment (outside the clinic) and in the community, in regards to obesity prevention efforts, is very limited, almost non-existent.

<u>Desired Goal or Milestone</u>: All primary care staff in the SBHC are trained to consistently employ best clinical practices in obesity prevention and t serve as a health education resource in the classrooms.

Area for Improvement (from assessment tool)	Objective	Activities/Strategies	Date / Timeline:	Key Person(s) Responsible	Evaluation Indicator(s) (Type of outcome)
SBHC primary care provider(s) participate in clinical guidelines training/workshop for screening, counseling, and treating students who are overweight or obese, or at risk for co-morbidities (Question 1)	By December 2013, all primary care providers in the SBHC will have participated in at least one training workshop that covers best practices for screening, counseling, and treating obesity in children and adolescents.	Revisit archived version of training webinar hosted by School-Based Health Alliance and Kaiser Permanente. (from Sept. 2013) Participate in at least one online training module that covers pediatric obesity screening and counseling	Nov. 1- Dec. 1, 2013	NP (lead) PA Medical Director	 Archived webinar is viewed by all PC staff (Process) Staff completes the preand post-tests of the training module. (Process) Medical chart audits at mid-point reveal more consistent use of best practices (Impact)
SBHC staff delivering health education curricula in classrooms (Question 22)	By May 2014, the nutritionist will conduct at least two classroom presentations related to healthy eating for each grade level in the school. By May 2014, the health educator will conduct at least 3 presentations related to physical activity, e.g. cardiovascular health, benefits of exercise, etc., to P.E. classes.	 SBHC nutritionist and health educator meet with school's health and P.E. teachers to discuss proposal to conduct sessions in their classes. Nutritionist and health teacher review curricula and determine appropriate timing for presentation. Health educator works with P.E. teacher to determine the appropriate class sessions to deliver presentations. Nutritionist and health educator conduct presentations in classrooms based on mutual agreements with the health and P.E. teachers. 	Nov.1 2013-Dec 1, 2014 Dec. 1, 2013- Jan. 15, 2014 Jan. 15- June 15, 2014	Nutritionist (lead) Health educator (lead) Health teacher P.E. Dept. Chair P.E. teachers	 Dates of presentations (process) List of classrooms (Process) Topics covered (process) Activities conducted within each presentation (Process) Number of students present during each session (process) Student evaluations of presentation content (impact)

Improvement Plan Template

Priority Area:

Summary of SBHC's current situation (practice, role, and/or involvement) in priority area:							
Desired Goal or	Milestone:						
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