# Project Evaluation and Debriefing

**What is the purpose of this tool?** The purpose of the project evaluation is to:

* Identify factors that contributed to the team’s success.
* Identify factors that hindered the team’s success.
* Identify additional clinical areas in the organization where the best practice can be implemented.
* Identify any followup work that may be needed.
* Determine how the results of the project will be communicated.

**Who are the target audiences?** The project liaison will be the primary individual to work with this evaluation and debriefing tool, but it also should be used by the entire improvement project team.

**How can the tool help you?** Upon completion of the project evaluation, project teams will accomplish:

* Project closure.
* Recognition of lessons learned.
* Plans for future activities (if applicable).

**How does this tool relate to others?** This tool is used to evaluate the effectiveness of the D tools for implementing performance improvements, as well as other aspects of the hospital’s initiative.

## Instructions

1. Indicate whether goals set for each best practice on the project charter were successfully implemented.
2. List factors that helped and hindered the team’s success.
3. Determine if the best practices will be implemented in other units, clinics, or programs. If yes, describe in the space provided the plans for further implementation.
4. Check the appropriate box to indicate whether additional followup activities need to be completed. If yes, describe the followup work in the space provided.
5. Determine whether internal and external communication plans need to be developed. If yes, describe in the space provided how the results of the project will be communicated within the organization and to external stakeholders.

# Performance Improvement Project Evaluation

Project: Performance Opportunity:

**Institution: Individual Completing This Form:**

**1. BEST PRACTICES IMPLEMENTED**

a. Goal achieved? [ ]  Yes [ ]  No

b. Goal achieved? [ ]  Yes [ ]  No

c. Goal achieved? [ ]  Yes [ ] No

d. Goal achieved? [ ]  Yes [ ] No

e. Goal achieved? [ ]  Yes [ ] No

f. Goal achieved? [ ]  Yes [ ] No

**2. EVALUATION**

What factors helped the team succeed? What factors hindered the team’s success?

a. a.

b. b.

c. c.

**3. STANDARDIZATION AND INTEGRATION (FOLLOWUP)**

a. Will the best practice(s) be implemented in other units, clinics, or programs? **[ ]** Yes **[ ]** No

 **If yes, what are the plans for further implementation?**

b. Is there additional followup work that needs to be completed? **[ ]** Yes **[ ]**  No

 **If yes, list followup activities and related plan.**

**4. COMMUNICATION**

#### a. Is there an internal communication plan to inform leadership, management, and staff of project results? [ ]  Yes [ ]  No

b. Is there an external communication plan to inform accrediting organizations and other stakeholders of project results? **[ ]** Yes **[ ]**  No

c. Briefly describe ideas for internal and external communication plans: