2025 VON Award for Excellence in Quality Improvement Criteria

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Note: Names and emails should be provided with the individual's permission*

Organizational Support

Met with senior leaders (those at Director, Chief, Vice President, or higher level) to review VON QI project plan at least once prior to submitting this application.
[ ] Yes
Date: _____

Our team has a plan to review our VON QI Improvement Project Poster with our senior leader(s).
[ ] Yes

Our current year's VON QI project is supported by our senior leader(s).
[ ] Yes
Senior Leader(s) Name(s): _____
Senior Leader(s) Email(s): _____

Quality Improvement Team

Improvement team of 4 or more individuals representing a minimum of 3 disciplines.
[ ] Yes
Team Member(s):

- Name: _____
  Email: _____
  Discipline: _____
- Name: _____
  Email: _____
  Discipline: _____
- Name: _____
  Email: _____
  Discipline: _____

- Name: _____
  Email: _____
  Discipline: _____

Identified VON QI project leader who is the VON Champion.
[ ] Yes
VON Champion(s) Name(s): _____
VON Champion(s) Email(s): _____

Team meets on a regular schedule in person, virtually, or hybrid.
[ ] Yes
Meeting Schedule: _____
Meeting Method: _____

At least 4 members of the team have completed the VON QI Foundations course.
[ ] Yes
Qualifying Team Member(s):

Name: _____
Email: _____

Name: _____
Email: _____

Name: _____
Email: _____

Name: _____
Email: _____

Quality Improvement Performance (see examples below)

Defined at least one SMART Aim for our VON QI project.
[ ] Yes (will be verified by VON with poster assessment)

Used a formal QI method such as the Model for Improvement, Lean, or 6 Sigma.
[ ] Yes (will be verified by VON with poster assessment)

Measured performance over time using annotated run or SPC charts.
[ ] Yes (will be verified by VON with poster assessment)

Submitted a poster to VON documenting our VON QI work for the current collaborative.

[ ] Yes
Poster Reference Number: _____

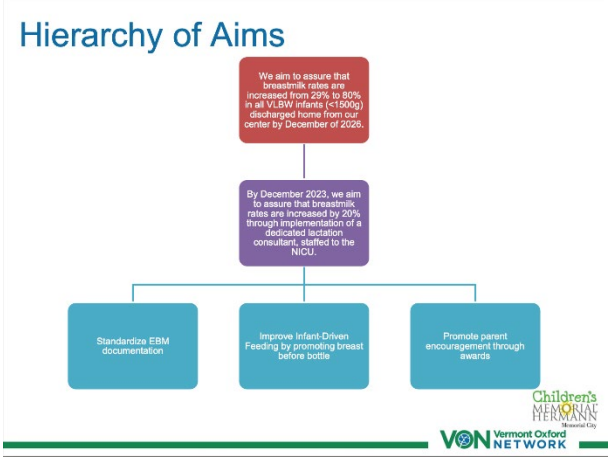
Families as Partners

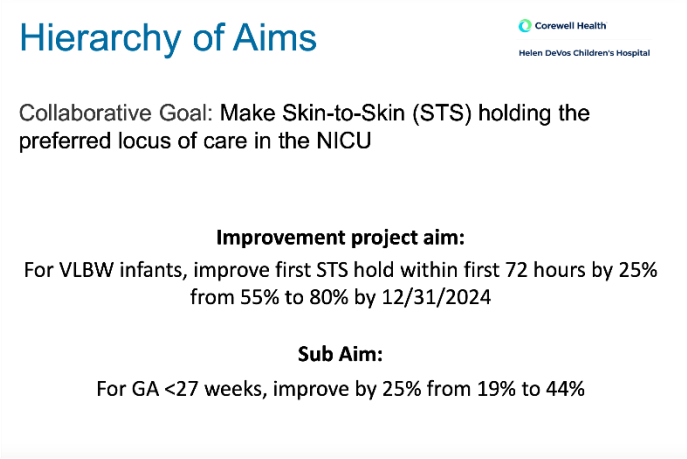
The parent of an infant cared for in the NICU (who is not a member of the care team) is a working member of the multidisciplinary VON QI team and participated in the project reported in the team QI poster.
[ ] Yes
Family Partner(s) Name(s): _____
Family Partner(s) Email(s): _____

Examples

Below are some examples of previously submitted posters that meet the Quality Improvement Performance criteria.

Defined at least one SMART Aim for our VON QI project



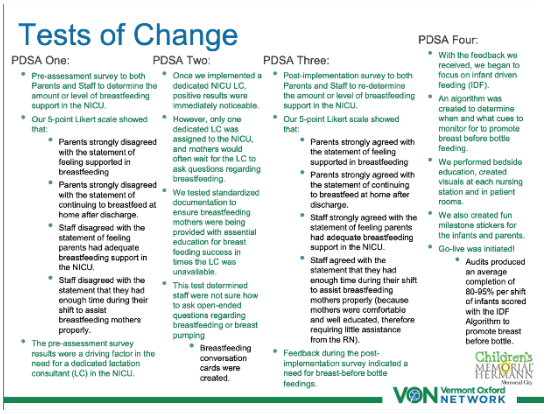


Used a formal QI method such as the Model for Improvement, Lean, or 6 Sigma.

PDSAs

- P: Improve documentation of iRainbow Stage
- D: Make required documentation once per shift
- S: Documentation improved to almost 100% but was often inaccurate
- A: Ongoing education on proper staging

- P: Improve discussion of iRainbow by adding stage to provider handoff
- D: Stage printed under "neuro" section of handoff
- S: Improved but inconsistent discussion despite prompt
- A: Feedback and education to encourage discussion of stage on rounds



Measured performance over time using annotated run or SPC charts.