

MQii Project Prioritization Matrix

The **MQii Project Prioritization Matrix** is a tool to help your team prioritize the multiple quality improvement (QI) Focus areas or intervention efforts being considered when your organization is balancing multiple priorities due to resource constraints. By narrowing available options systematically through assessment of a series of criteria, your team should arrive at a QI Focus area or intervention aligned with your organizational goals. The template below can be used when selecting your initial QI Focus, or intervention, and when refining your intervention to identify the best processes or activities for your facility.

CONSTRUCTING YOUR MQii PROJECT PRIORITIZATION MATRIX:

1. Fill in each QI Focus area being considered by your team in the first column. Sites are encouraged to use findings from the MQii Care Assessment and Decision Tool when considering QI Focus areas.
 - If using this template to prioritize multiple intervention efforts under consideration by your team, include each intervention effort in the first column
 - Complete one row for each topic (i.e. either QI Focus prioritization or intervention effort prioritization)
2. Review recommended criteria in the template
 - Identify any additional factors that are important to your organization for prioritizing such as hospital QI goals, leadership priorities, etc.
3. Rank each effort being considered with your team based on criteria and factors identified in the template

ADDITIONAL RESOURCE:

- Source: Minnesota Department of Health. Prioritization Matrix. Available at: <http://www.health.state.mn.us/divs/opi/qi/toolbox/prioritizationmatrix.html>.

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INSTRUCTIONS:

Once your team has identified QI Focus areas or intervention efforts for prioritization, complete the table below (one row for each QI Focus area and/or intervention effort being considered). Assess whether each approach is high-risk, high-volume, problem-prone, resource-intensive, or any other factors deemed important by your facility.¹ An example is included below in **orange** text.

- **High-volume:** Occurs frequently or involves a large number (more than 50 percent) of facility providers
- **Problem-prone process:** May disrupt other clinical workflow processes (i.e. those unrelated to malnutrition care)
- **Resource-intensive process:** Requires a large resource allocation (funding, staffing, or other)
- **Other Factors:** Other reasons that may be relevant in selecting a particular change as high- or low-priority
 - Please provide any explanations or rationale in the “Comments/Rationale” column

Please note, these are suggested criteria based on best practices. Teams are encouraged to include additional factors relevant to their facility that should be considered when ranking as applicable. Examples of “Other Factors” might include your hospital mission, leadership goals for this year, and/or hospital QI department priorities.

¹ Definitions for criteria have been revised to fit the MQii intervention. Initial definitions were obtained from *The Six Sigma Way* (2000). Change Prioritization Matrix example. Pande, Peter S., Robert P. Neuman, and Roland R. Cavanaugh. *The Six Sigma way: how GE, Motorola, and other top companies are honing their performance*. New York: McGraw-Hill, 2000

Potential QI Focus Areas or Intervention Efforts	High-Volume (Y or N)	Problem-Prone (Y or N)	Resource-Intensive (Y or N)	Other Factor(s)	Comments/Rationale	Rank
1. Conducting training sessions with staff regarding the burden of malnutrition and the importance of referring at-risk patients to dietitians for assessment	Y	N	N	Our dietitians have previously requested nurses receive this type of training	Until automated systems can be implemented, dietitians are reliant on patient referral by other providers	2
2. Piloting automated referral to dietitian feature in the EHR (i.e., a best practice alert)	N	N	Y	This has been on our radar to implement for several months now – leadership interest in the MQii would prioritize this activity for IT	Automated process has the potential to streamline the referral process and ensure patients do not fall through the cracks	1
3. Educating dietitian team on process to ensure patients are assessed within 48hrs of screen	N	Y	N	N/A	Longer wait times to assessment delay diagnosis and treatment	3
4.						