

Readmissions Quality Collaborative Monthly Milestones Reporting Questions

Each hospital is asked to complete a single survey (although separate surveys for different sites/services will be accepted). Hospitals will continue reporting until all milestones are reached. Please report on the status of your planning and activities as of the last day of the previous calendar month.

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

1. The hospital's Readmissions Quality Improvement (QI) Project Team is assembled.
2. The QI team has obtained PSYCKES (Psychiatric Services and Clinical Knowledge Enhancement System) access for all relevant staff.
3. The QI team has selected the clinical services that will participate.
4. The QI team has identified priority goals for reducing readmissions (Improve medication practices / improve engagement in outpatient care / integrated treatment for co-occurring disorders).
5. Within the identified priority area, the QI team has selected strategy(ies) for reducing readmissions.
6. The QI team has briefed leadership and staff of all relevant departments on project goals and activities.
7. The QI team has developed a written action plan.
8. The QI team has submitted the Initial Project Planning Form, listing participating clinical services.