

**AHRQ QI  
TOOLKIT**



**How To Improve Hospital  
Quality and Safety**



# AHRQ Quality Indicators™ Toolkit for Hospitals

<http://www.ahrq.gov/professionals/systems/hospital/qitoolkit/index.html>

The Agency for Healthcare Research and Quality (AHRQ) Quality Indicators (QIs) Toolkit is designed to help your hospital understand the AHRQ QIs and to support your use of them to successfully improve quality and patient safety in your hospital. It is available for all hospitals to use free of charge. The toolkit is a general guide to using improvement methods, with a particular focus on the QIs.

The AHRQ QIs are measures of hospital quality and safety drawn from readily available hospital inpatient administrative data. Hospitals across the country are using QIs to identify potential concerns about quality and safety and track their performance over time.

The QI Toolkit supports hospitals that want to improve performance on QIs, including the Inpatient QIs (IQIs) and Patient Safety Indicators (PSIs) by guiding them through the process, from the first stage of self-assessment to the final stage of ongoing monitoring. The tools are practical, easy to use, and designed to meet a variety of needs, including those of senior leaders, quality staff, and multistakeholder improvement teams.

This toolkit was developed and tested in 2011 and expanded in 2014. It now focuses on 18 PSIs and 28 IQIs.

**A Sequence of Steps for Improvement.** The QI Toolkit addresses the complete improvement process, including the following steps to set priorities and plan for performance improvements on the QIs, implement improvement strategies, and sustain improvements:

- Determining Readiness To Change.
- Applying QIs to the Hospital Data.
- Identifying Priorities for Quality Improvement.
- Implementing Improvements.
- Monitoring Progress for Sustainable Improvement.
- Analyzing Return on Investment.
- Using Other Resources.

The toolkit focuses on a five-step improvement cycle based on the well-known PDSA (plan, do, study, act):

1. Diagnose the problem;
2. Plan and implement best practices;
3. Measure results and analyze;
4. Evaluate effectiveness of actions taken; and
5. Evaluate, standardize, and communicate.



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**Toolkit Roadmap.** Tools are available to support work during each improvement step. The Toolkit Roadmap will help you get started. For each key improvement step, it identifies the tools provided in the toolkit to support your work. For each tool, the roadmap gives a brief description and identifies additional relevant information.

**Different Tools for Different Audiences.** Successful improvement requires involvement by multiple staff in the hospital. Therefore, while your hospital's quality leaders are the primary audience, many tools are aimed at several audiences. The roadmap shows the intended audiences for each tool.

Your hospital may choose to use only those tools that you find helpful. View the toolkit as a “resource inventory” from which you can select the tools that are most useful, given your hospital's current quality improvement capabilities and efforts. The Toolkit Roadmap is the “shopping list” you can use to quickly identify which tools to use at any point in time.

## Questions About the Quality Indicators?

Contact the QI Support Team:

Email: [support@qualityindicators.ahrq.gov](mailto:support@qualityindicators.ahrq.gov).

Voice mailbox (toll free): 888-512-6090.

## AHRQ QI Email List

Learn about free resources to help users of the AHRQ QIs and Hospital QI Toolkit, including Webinars and podcasts, by registering for the AHRQ QI Email list. Instructions for registering are available at [www.qualityindicators.ahrq.gov/FAQs\\_Support/default.aspx](http://www.qualityindicators.ahrq.gov/FAQs_Support/default.aspx).



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