

ResQIPS (Research, Quality Improvement and Patient Safety) Contact Form

Name:
Best Way of Contact: (e.g., phone, text, email):
Project Sponsor (program mentor):
Topic or Interest:
Purpose and background (e.g., what is the purpose of the change; why is there a need for change?). Describe how the topic aligns with institutional priorities:
What is your hypothesis? (e.g., who will it affect; what will be the result):
Who is on your QI team (must be interprofessional)?
Do you anticipate any obstacles in completing your project, achieving your goals (time resources, stakeholder engagement)?