



FIFTH ANNUAL

Transplant Quality Institute

October 10-12, 2018

**SAVE
THE DATE!**

QUALITY

**The only transplant conference focused
on quality, process improvement,
data and patient safety**



Basic and advanced breakout sessions offered

Oral abstract presentations

Poster session

Ample opportunity for networking

**Pre-Conference
Session
UNOS PRIMER
Tuesday, Oct. 9, 2018
9 AM - 4 PM**

THE RADISSON BLU – MINNEAPOLIS, MN

Sponsored by the American Foundation for Donation and Transplantation



Transplant Quality Institute

October 10-12, 2018

Call for Program Proposals

The founding faculty of the 5th annual Transplant Quality Institute is seeking program proposals for podium and poster presentations to be held October 10-12, 2018 at The Radisson BLU Hotel, Minneapolis, MN. Take this opportunity to share with your transplant colleagues, your center's Quality journey, QAPI tools you have developed, QAPI projects and the many lessons learned!

The focus for program submissions should relate to one or more of the following categories:

- Patient Safety
- Quality Improvement Project
- Data Management
- Hospital, Staff and Physician Engagement Initiatives
- Successful collaborative Quality or Patient Safety Initiatives between Transplant and Hospital Quality Departments

Deadlines:

- March 31, 2018 at 12 midnight PST - proposals must be submitted.
- April 30, 2018—primary authors will be notified regarding abstract selection.
- May 15, 2018—presenters' deadline to accept or decline the invitation.

Please complete the attached form, providing information and email to: Arlene Skinner, Director of Operations, skinner@amfdt.org.

For more information, see the TQI Abstract Resource Tool attached.



Name: _____

Facility Name: _____

Email Address: _____

Contact Phone: _____

Submission Title: _____

Presentation Type: (if you are submitting more than one presentation, complete and submit each separately).

(30 minutes in length)

Podium Presentation (please identify session level)

_____ Basic

_____ Intermediate

_____ Advanced

Poster (will be present at poster and provide handouts)

Please provide a summary of the proposed content clearly defining and using the format outlined in the "Call for Program Proposals".

Thank you. We look forward to seeing you in October.

2018 TQI Poster Abstract Resource Tool*

Quality Assessment Performance Improvement Abstract

- This tool provides the framework for writing an abstract for the TQI. A self-assessment scoring system is included as a guide and evaluation tool to assess your abstract for completeness. It is the same scoring tool used by the reviewers to evaluate and rate the abstracts submitted for oral and poster presentation.
- While it may not be possible to include every criteria listed in each major section, it should thoroughly address all major elements.
- The abstract should clearly and comprehensively describe each major section, as outlined in the scoring tool (i.e., Background, Purpose, Methods, Results, Discussion, and Conclusion).

Instructions for submitting an abstract:

- Content Area:** Select the Content Area that best matches your abstract: Patient Safety Quality Improvement Project
- Data Management Hospital, Staff & Physician Engagement Initiatives
- Successful Collaborative Quality or Patient Safety Initiatives between Transplant and Hospital Quality Departments

Abstracts are to be:

- Typed in size 12 font
- No more than 2 pages in length (tables and graphs included)
- In Word format
- Less than or equal to 500 words (graphs and tables excluded).

Blind: Two abstracts are to be submitted, one abstract as written and the second as written but blinded with all potential identifiers removed (i.e. facility name, author name, geographic location.)

Send: Abstracts should be sent to skinner@amfdt.org
All abstracts must be submitted by
March 31st at 12 midnight (PST).



2018 TQI Poster Abstract Resource Tool*

Quality Assessment Performance Improvement Abstract

ABSTRACT SUBMISSION CRITERIA	
Title	<p>1. The Abstract Title:</p> <p>a. Indicates the article concerns the improvement of quality (broadly defined to include the safety, effectiveness, patient-centeredness, timeliness, efficiency and equity of care).</p>
Author	<p>2. The Author Listing:</p> <p>a. Includes the name, credentials and employer or institutional affiliation of each person who substantially contributed to the concept, design, analysis, etc.; OR final approval of the abstract submitted. Participation solely in the collection of data usually does not warrant authorship.</p> <p>b. Designates one author as the presenting author by CAPITALIZING THE FULL NAME.</p> <p>c. When authors work for different employers, superscript is used to designate which employer is associated with each author, as shown in this example:</p> <p style="padding-left: 40px;">JANE DOE, PharmD¹; Jim Doe, MPH¹; Joe Doe, PharmD¹; Janine Doe²</p>
Background:	<p>3. In a “Performance Improvement” Abstract, the Background:</p> <p>a. Describes the problem or challenge in need of improvement;</p> <p>b. Provides historical perspective or context for the problem being presented, including how the issue was identified;</p> <p>c. Utilizes available literature/research findings and/or industry best practices to support the need for the new idea or intervention;</p> <p>d. Connects clearly to the purpose statement;</p> <p>e. Is written using complete sentences, proper grammar, punctuation and spelling.</p>

DEVELOP & ASSESS YOUR ABSTRACT HERE!		Self-Assessment Using the Abstract Reviewer’s Scoring Criteria			
		3 points	2 points	1 point	0 points
Title		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.
Author		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.
Background:		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.

2018 TQI Poster Abstract Resource Tool*

Quality Assessment Performance Improvement Abstract

Purpose:	<p>4. In a “Performance Improvement” Abstract, the Purpose Statement:</p> <ul style="list-style-type: none"> a. States the problem or challenge to be resolved; b. Conveys the reason for conducting the project, and the goal to be accomplished; c. Is usually one to two sentences in length; d. Connects logically to the rest of the abstract; e. Is written using complete sentences, proper grammar, punctuation and spelling. 		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.
Methods:	<p>5. In a “Performance Improvement” Abstract, the Methods section:</p> <ul style="list-style-type: none"> a. Describes the action(s) taken to improve the problem or challenge; b. Includes the timeline during which the action(s) took place; c. Describes the “population” characteristics (how many participants, factors used to determine participant inclusion and exclusion, etc.); d. Describes the data collection or documentation process; e. Describes and quantifies how a successful outcome or resolution will be determined; f. Describes instruments and procedures (qualitative, quantitative or mixed) used to assess (1.) the effectiveness of implementation, (2.) the contributions of intervention components and context factors to effectiveness of the intervention and (3.) primary and secondary outcomes. 		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.

2018 TQI Poster Abstract Resource Tool*

Quality Assessment Performance Improvement Abstract

Result	<p>6. In a “Performance Improvement” Abstract, the Results section:</p> <ul style="list-style-type: none"> a. Briefly describes the results of the actions taken—quantitative, qualitative, and/or descriptive, as applicable; b. Provides sufficient detail to support the conclusions; c. Discuss the intervention’s impact on both direct and indirect costs/resources (financial, staff time, quality of care, customer satisfaction) in a quantifiable way, as applicable; d. Is written in narrative format, saving “visual” elements such as lists, tables, graphs, photos and/or illustrations for the poster itself; e. Is written using complete sentences, proper grammar, punctuation and spelling. 		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.
Discussion:	<p>7. In a “Performance Improvement” Abstract, the Discussion:</p> <ul style="list-style-type: none"> a. Reminds the reader of the primary lesson learned and states whether the project goal was achieved; b. Explains why the outcome is interesting; c. States the relevance of the findings to other published work, when applicable; d. Addresses implications for future improvement efforts (<i>Note: Use caution in applying the results to a broader population</i>); e. Statements are clearly supported by the findings in results section; f. Is written using complete sentences, proper grammar, punctuation and spelling. 		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.
Conclusion:	<p>8. In a “Performance Improvement” Abstract, the Conclusion:</p> <ul style="list-style-type: none"> a. A brief statement; clearly supported by the findings in results section; b. Is written using complete sentences, proper grammar, punctuation and spelling. 		All criteria are met.	One to two of the criteria are missing.	Three or more of the criteria are missing.	This section of the abstract is incomplete or missing.

* TQI acknowledges incorporation of the NHIA abstract template to develop this tool.