



# MCW Office of Research Standard Operating Procedure

## QUALITY ASSURANCE/ QUALITY IMPROVEMENT PROJECTS

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Unit: Human Research Protections Program (HRPP), Office of Research

Applies to: Faculty and Staff involved in human research

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### **PURPOSE:**

Quality Assurance/Quality Improvement (QA/QI) initiatives are a mandated function of the Medical College of Wisconsin (MCW) and Froedtert Health (FH). Some of these initiatives are implemented after thorough evidenced-based best practices are identified, in response to an identified safety issue, or to improve the delivery of care and avoid potential safety issues.

The overarching intent of these initiatives is continuous monitoring of hospital operations and improved care of patients here at MCW and FH.

### **DEFINITIONS: N/A**

### **PROCEDURE:**

#### **A. QA/QI initiatives**

The following activities are not considered research activities at MCW and FH. The responsible conduct of the activities described below falls under the jurisdiction of the Froedtert Hospital system-recognized departmental patient safety and quality committee, designated Patient Safety Quality Officers (PSQOs) and/or a department designated QA review committee.

- Any hospital QA initiatives, and presentation/publication of results thereof, that are conducted within Froedtert system only, and that serve to:
  - Measure or improve FH and MCW's ability to meet or exceed an existing national standard of care or benchmark (JCAHO, etc)  
**OR**
  - Develop a standard of care or benchmark for applicability within FH and MCW.
- Submission of data to a national or state registry/database:
  - That is mandated at the state or federal level.  
**OR**
  - That directly impacts reimbursements and funding available from the state, Department of Health, or federal Centers for Medicare & Medicaid Services (CMS) based on performance and/or clinical or quality outcomes.  
**OR**
  - That is maintained by an organization/consortium, formally recognized by FH and/or MCW administration, the principal purpose of which is benchmarking and/or performance improvement, and the use of which is for internal MCW and FH activities.
- FH and MCW QA use of data from a registry/database, meeting any of the criteria above, for the purpose of:
  - Measuring or improving Froedtert and MCW's ability to meet or exceed an existing national standard of care or benchmark (JCAHO, etc).  
**OR**
  - Developing a standard of care or benchmark for applicability within Froedtert and MCW.

For investigators seeking to receive an official letter from the HRPP Office confirming that their activities qualify as QA/QI, a summary of the project should be submitted via the eBridge “Quality Improvement” pathway. The HRPP Office will review the submission and provide an official letter if the project is indeed determined to be a QA/QI project.

- Investigators must provide in this submission correspondence from the department / organization affected by the project that they believe the project is QA/QI

## **B. Research Activities:**

The following activities are considered research activities. The responsible conduct of the activities below fall under the jurisdiction of the MCW Institutional Review Board (IRB) and the Froedtert Office of Clinical Research and Innovative Care Compliance (OCRICC):

- Any hospital QA initiative, conducted within Froedtert and MCW only, designed to develop a standard of care or benchmark for general applicability (i.e., not only for operations within Froedtert and MCW, but to outside entities as well).
- Any QA or QI initiatives (including those proposing to develop an operational standard of care or benchmark) that are “investigator-initiated”, i.e., that have not been vetted through, and endorsed by, a hospital-recognized general or departmental QA committee).
- Submission of data to a registry/database that is not covered by those described above.
- Use of data from any registry/database for the purpose of measuring, improving or developing a standard or benchmark, under any condition not defined as QA/QI activity above, including the use of registry data for the purpose of research.
- Any activity that proposes comparisons of one or more prospective interventions that are deliberately administered or made available (through a randomization or other process) to some patients (if within Froedtert and MCW) or some hospitals (if part of a consortium or organizational effort) and not to others. This does not include, e.g., initiating a QI process in a small percent of patients at Froedtert and MCW first to ensure feasibility, before introducing it to the entire patient population.

### **Activities that have a mix of both QA/QI and Research Components**

When an activity involves a mix of activities from Sections A and B, the investigator must ensure compliance with all applicable entities, i.e., including the MCW IRB and OCRICC, for the research aspects of the activity (including securing approval prior to conducting the research aspect)

For any ‘questionable’ (QA vs. Research) activity not described above, please consult with the MCW HRPP Office.

**REFERENCES: N/A**

**SUPPORTING DOCUMENTS: N/A**

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