

## Is my project ...



IS MY PROJECT	Research (including clinical trials)	Service evaluation / review	Clinical audit	Quality Improvement / Service Improvement	
Purpose Why?	The attempt to derive generalizable or transferable new knowledge to answer questions with scientifically sound methods* including studies that aim to generate hypotheses as well as studies that aim to test them, in addition to simply descriptive studies.	Designed and conducted solely to define or judge current care	Designed and conducted to produce information to inform delivery of best care.	Designed to improve health services, systems, processes	
What?	Quantitative research – can be designed to test a hypothesis as in a randomised controlled trial or can simply be descriptive as in a postal survey.  Qualitative research – can be used to generate a hypothesis, usually identifies/explores themes.	Designed to answer: "What standard does this service achieve?"	Designed to answer:  "Does this service reach a predetermined standard?"	Can be designed to test a series of change ideas to see if these result in the desired improvement	
	Quantitative research – addresses clearly defined questions, aims and objectives.  Qualitative research – usually has clear aims and objectives but may not establish the exact questions to be asked until research is underway.	Measures current service without reference to a standard	Measures against a standard	Systematic method, using Model for Improvement  Projects have clear aims, measures and change ideas, tested in continuous change cycles.	
	Quantitative research – may involve evaluating or comparing interventions, particularly new ones.  However, some quantitative research such as descriptive surveys, do not involve interventions.  Qualitative research – seeks to understand better the perceptions and reasoning of people.	Involves an intervention in use only.  The choice of treatment, care or services is that of the care professional and patient/service user according to guidance, professional standards and/or patient/ service user preference.	Involves an intervention in use only. The choice of treatment, care or services is that of the care professional and patient/service user according to guidance, professional standards and/or patient/service user preference.	Involves one or multiple interventions or "change ideas" – usually changes to the process	
How?	Usually involves collecting data that are additional to those for routine care but may include data collected routinely. May involve treatments, samples or investigations additional to routine care.  May involve data collected from interviews, focus groups and/or observation.	Usually involves analysis of existing data but may also include administration of interview(s) or questionnaire(s).	Usually involves analysis of existing data but may include administration of simple interview or questionnaire.	Involves collecting baseline data and then continuously monitoring a series of measures (outcome, process, balancing) to see improvement over time. Often data is plotted in a 'time series' on a run chart. Patient/ staff experience data (for example, through survey) can also be used to inform and design change ideas.	
	Quantitative research – study design may involve allocating patients/ service users/ healthy volunteers to an intervention.  Qualitative research – does not usually involve allocating participants to an intervention.	No allocation to intervention: the care professional and patient/ service user have chosen intervention before service evaluation.	No allocation to intervention: the care professional and patient/service user have chosen intervention before audit.	No allocation of intervention	
	May involve randomisation.	No randomisation	No randomisation	No randomisation	
Ethics?	An ethical opinion may be required from a Research Ethics Committee (REC). If you are unsure please contact the R&D department or <a href="http://www.hra-decisiontools.org.uk/ethics/">http://www.hra-decisiontools.org.uk/ethics/</a>	No 'REC' opinion required. If you wish to publish your quality improvement project then you can obtain an ethical statement from the Trust R&D department	No 'REC' opinion required. If you wish to publish your quality improvement project then you can obtain an ethical statement from the Trust R&D department	No 'REC' opinion required. If you wish to publish your quality improvement project then you can obtain an ethical statement from the Trust R&D department	
How to start?	Speak to your clinical or academic supervisor – or contact the R&D department (see below).	Speak to your local service lead	Speak to Clinical Governance Team or your supervisor.	Speak to your divisional quality improvement leads or the central improvement and innovation team if you'd like to discuss your ideas. Visit the RIQI portal for more information. You can also register your QI project.	
What to do at the end?	The results of research should be reported, whether through publication in peer reviewed journals or other means of dissemination. Negative as well as positive results should be published, or at least made publicly available	Share through the improvement team or feedback directly to the service	Published through Trust clinical governance	Write up your project as a case study/ poster (template available on the improvement hub) and share with the improvement team to post on the improvement and innovation hub.	
Who to contact? Read more here	Contact R&D: <a href="mailto:chelwest.research@nhs.net">chelwest.research@nhs.net</a> Visit: <a href="mailto:https://www.chelwest.nhs.uk/research">https://www.chelwest.nhs.uk/research</a>	Ensure your service lead is aware of the project	Register with your divisional clinical governance manager Visit: <a href="http://connect/departments-and-mini-sites/quality-clinical-governance/">http://connect/departments-and-mini-sites/quality-clinical-governance/</a>	Contact the improvement team to register your project or for advice/ support: <a href="mailto:chelwest.improvement@nhs.net">chelwest.improvement@nhs.net</a> Visit the improvement hub: <a href="mailto:http://connect/departments-and-mini-sites/riqi-portal/">http://connect/departments-and-mini-sites/riqi-portal/</a>	
	Innovation				
Scalability	Consider if your project can be scaled up beyond the initial setting – i.e. if a new intervention or process can be rolled out in other departments or organisations.				
Impact & Value	Consider if your recommended new intervention or process continues to deliver impact and value when it becomes the routine/ mainstream and no longer has the special attention and resource of a project				
Do you have idea that will improve patient care and experience? We want to hear from you! Email: <a href="mailto:chelwest.riqi@nhs.net">chelwest.riqi@nhs.net</a>					