

Continuous Quality Improvement Individual Worksheet



Tip: Use this worksheet to guide each team member of their individual tasks and responsibilities, who to report to and when tasks are due.

Practice Name		Start Date	
Activity Name			
Staff Member Responsible			
Team Leader			
Goal			

No.	Task	Due date	Completed Y/N
1.			
Any barriers identified:			
2.			
Any barriers identified:			
3.			
Any barriers identified:			
4.			
Any barriers identified:			