

**DIHS Performance Improvement Study Worksheet  
and  
Reporting Form**

**Facility**\_\_\_\_\_

**Scope of Service:** (Circle) Administrative, Financial, Sick Call, Dental, Chronic Care, Lab, X-ray, Short Stay Unit, Medical Records, Pharmacy, Urgent Care, Environmental Health and Safety, Mental Health, General Medical Services.

**Indicator:**

**Baseline Data:**

**Data Collection:**

**Source of data:**

**Data Collector:**

**Time frame of study:**

**Criteria:**

**Results of Study:**