



Enable Quality
Improve Patient Care

Project Title

Sponsor(s):
Leader(s):
Team Members:

Last Updated:
Mentors:



International Clinical
Improvement Collaboratives

Problem Statement

Background

Target State: SMART Goal

Current State: Identify Target / Actual / Gap

Analysis

Key Drivers

Interventions / Countermeasures

Sustain Plan

Activity to sustain	Owner	Sustain method and frequency	Report to

Reliability Level:

(1) Individuals: Feedback, checklists, training, basic standards

(2) Procedures: Embedded standard work, reminders, constraints

(3) Systems: Process design, fail safes, physical layout, built-in feedback, automated systems, concentration of responsibility

Maturity Bars:

0: Untested idea

1: Early tests / PDCA

2: Multiple PDCA's

3: Early implementation

4: Working well in operation

Progress

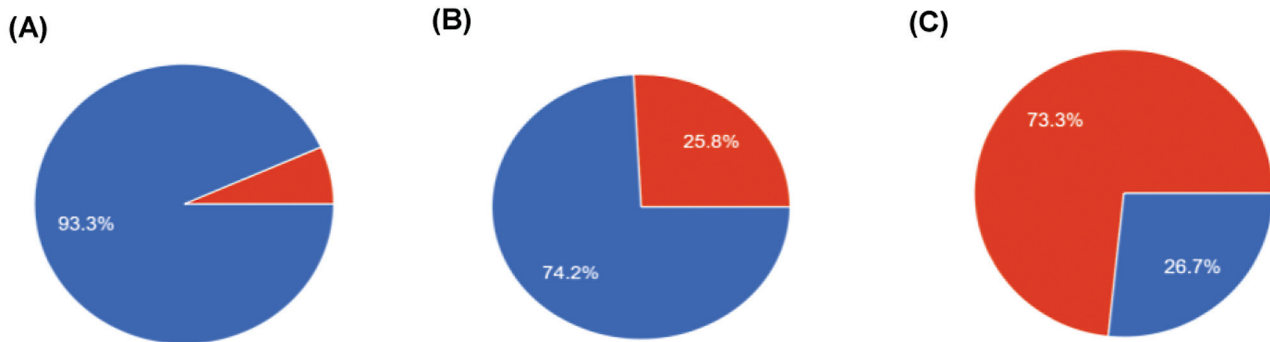
Barrier





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Supplementary Fig. 1 The A3 methodology template depicting the sequential steps, from top left to bottom left and then top right to bottom right, to achieve improvement in a selected quality concern in health care delivery or outcomes.



Supplementary Fig. 2 Results of the follow-up survey done with alumni institutions, 5 months after completion of the 2022 EQUiP India cohort. (A) Proportion of alumni who sustained the improvement achieved through QI projects completed through the NCG-QI-Hub. In all, 93.3% of alumni institutions ($N = 30$) have the improvement project ongoing or sustained at their institution. (B) Proportion of alumni who feel confident to mentor new QI projects, based on the learnings through the NCG-QI-Hub; 74.2% of alumni ($N = 31$) feel confident to mentor another QI project team. (C) Proportion of alumni who have initiated new QI projects at their institution, after completing their learnings through the NCG-QI-Hub; 73.3% of responded alumni ($N = 30$) have initiated new QI projects at their institution.

Supplementary Table 1 QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

Institution, region ... With link to A3 sheet and graduation presentation	Quality concern addressed through the QI project and outcome achieved	Quality domain addressed
COHORT 2017 (7 mo)		
1. All India Institute of Medical Sciences, New Delhi Ref: Indian J Palliat Care.2021 Apr-Jun;27(2) Link to the graduation video - https://vimeo.com/698960757	The delays in referring patients with oral cancer to the palliative medicine clinic decreased from a baseline average of 48.02 to 12.94 d by the end of the project period	Timely integration of palliative care
2. Trivandrum Institute of Palliative Sciences (Pallium India), Trivandrum, Kerala Ref: Indian J Palliat Care.2021 Apr-Jun;27(2):204-210. Link to the graduation video https://vimeo.com/698959466	The satisfaction score of homecare personnel regarding the quality of homecare services, improved from baseline of 5.82, to 7.6 during the project period; and reached the target 8.0/10 3 mo after (0 = not satisfied and 10 = completely satisfied)	Aligned care services with individualized intensity of care needs
3. Institute of Palliative Care, Thrissur, Kerala Ref: Indian J Palliat Care. 2021 Apr-Jun; 27(2): 222–229. Link to the graduation video https://vimeo.com/698962734	Improved documentation of prognostic discussions with newly registered cancer patients/ family member, from 0 to 75% by the end of the project period	Clarity on goals of care, and avoidance of futile care—both for the team and for the patient/family
4. Homi Bhabha Cancer Institute and Research Centre, Vishakhapatnam, Andhra Pradesh Ref: Indian Journal of Palliative Care • Volume 27 • Issue 2 • April-June 2021 Link to the graduation video https://vimeo.com/698961979	Increased the number of home visits conducted by the department, from the 2 times per week, to 6 times per week, by the end of the project period	Continuity of care beyond institution, equitable access to care
5. Cipla Palliative Care Centre, Pune, Maharashtra Link to the graduation video https://vimeo.com/698960228	Improved the palliative care references from 0 to 30% For OPD patients with solid tumors, on curative intent cancer treatment at a tertiary cancer center	Timely integration of palliative care for oncology patients
6. Tata Memorial Centre, Mumbai, Maharashtra Ref: Indian Journal of Palliative Care • Volume 27 • Issue 2 • April-June 2021 Link to the graduation video https://vimeo.com/698961452	Improved the rates of palliative care referrals from 30 to 75%—for outpatients attending surgical oncology OPD with advanced lung cancer (stage 3, 4 NSCLC)	Timely integration of palliative care for oncology patients
7. MNJ Institute of Oncology, Hyderabad, Telangana Ref: Indian Journal of Palliative Care • Volume 27 • Issue 2 • April-June 2021; 216-221 Link to the graduation video https://vimeo.com/698958434	Improved the clarity of documented communications between the palliative care teams at the hospital and hospice regarding the goals of care of transferred patients— from baseline of 1.5/10 to 6.5/10 (where 0 is no clarity on goals of care and 10 complete clarity on goals of care as)	Improved clarity on goals of care, decisions on care planning through better communications and coordination
COHORT 2018 (7 mo)		
8. Institute of Palliative Medicine, Calicut, Kerala	Improved the rate of documented, posthumous assessment regarding death and dying experience of inpatients, as experienced by the family caregivers from 0 to 100% during the project period	The quality of death and dying experience
9. JIPMER, Pondicherry, Tamil Nadu	Improved the documentation of patient-evaluated in the palliative care clinic in a tertiary cancer care center from 0 to 90%	Efficiency and efficacy of care (quality of clinical evaluation, care coordination, and triaging of patients improved and hence the care planning)

Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

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10. CanKids, New Delhi	This a community based nongovernmental organization reduced the turnaround time from the patient's 1st application for financial support for curative-intent oncotherapy, to initiating the treatment, from a baseline of 46 to ≤ 15 d	Equity in access to cancer treatment
11. Cachar Cancer Hospital and Research Centre, Silchar, Assam	Improved the satisfaction score of inpatient nursing staff on the clarity of doctor's orders and care-plan, from the baseline of 4/10 to 9/10 (0 = not satisfied at all; 10 = completely satisfied)	Efficiency, efficacy, and timeliness of inpatient palliative care
12. Tata Medical Center, Kolkata, West Bengal	The average daytime discharge process of in-patient palliative care unit at a Tertiary Cancer Care Center , reduced from baseline 3.5 h to ≤ 45 min during the project period	Timeliness of discharge process. Patient/family experience
13. Gujarat Cancer and Research Institute, Ahmedabad, Gujarat?	The number of home visits done by the team, for patients identified with palliative care-needs increased from 5 per week to 10 per week during the project period	Equity, effectiveness, and efficiency of palliative home-based care services
14. Mahaveer Jain Cancer Hospital, Jaipur, Rajasthan	The percentage of comprehensive patient assessment attending outpatient palliative care clinic increased from 29 to 55%	Efficiency, safety, and efficacy of palliative care
COHORT 2019 (7 mo)		
15. Homi Bhabha Cancer Institute and Research Centre, Vishakhapatnam, Andhra Pradesh Ref: Link to the graduation video https://vimeo.com/696043247	Improved the colposcopy coverage of community-camp-screened positive women, from 12.5 to 95% during the QI project	Improved the effectiveness and efficiency of preventive gynec-oncology program
16. Kasturba Medical College, Manipal, Karnataka Ref: Link to the graduation video https://vimeo.com/696043956	Improved the identification and effective management of pain of mucositis of patients receiving curative intent radiotherapy for head and neck cancer— from the baseline 70 to 20%, and prevented dropout rate, due to uncontrolled pain	Safety, effectiveness, and patient experience of curative intent radiation
17. Amrita Institute of Medical Sciences, Kochi, Kerala Ref: Link to the graduation video https://vimeo.com/696044969	Reduced the initial workup time of patients with breast cancer visiting onco-surgical unit, by 2 h in at least 50% of patients	Timeliness, safety, and efficiency of curative intent surgical intervention
18. Tata Memorial Centre, Mumbai, Maharashtra Ref: Link to the graduation video https://vimeo.com/696041000	Reduced the initial workup time on day 1 of radiotherapy patients in a tertiary cancer center from 8 to 6.6 h	Timeliness and efficiency of radiotherapy day 1 processes of radiotherapy
19. Believers Church Medical College, Ernakulam, Kerala Ref: Link to the graduation video https://vimeo.com/696042518	Improved the percentage of referrals from Oncology to Palliative care from 12 to 50% during the project period	Timely integration of palliative care for oncology patients
20. Cancer Institute Adyar, Chennai, Tamil Nadu Ref: Link to the graduation video https://vimeo.com/696042028	Improved the identification and access of critically ill cancer patients in the ICU to palliative care, from) to 50%	Equity, safety, and timeliness of access to palliative care for cancer patients in intensive care unit

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Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

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21. Malabar Cancer Hospital, Thalasseri, Kerala Ref: Link to the graduation video https://vimeo.com/696045489	Reduced the waiting time of patients visiting the Palliative care OPD, from 35 to 20 min	Timeliness, patient and staff experience at OPD settings
22. Alpha Palliative Care Ref: Link to the graduation video https://vimeo.com/696044514	Incorporated advance care directive and developed standards of End-of-Life care for patients seen through home-care services	Culture appropriate standards for a comfortable dying of terminally ill cancer patients—improving the quality of death
COHORT 2021 (7 mo)		
23. Christian Medical College, Vellore, Tamil Nadu Link to the graduation video https://vimeo.com/697271130	Improved psychosocial assessment of palliative care outpatients from a baseline of 11 to 45% at completion of the 6 mo QI project	Impacted the efficacy, efficiency, safety, timeliness of palliative care processes
24. CanSupport, New Delhi Link to the graduation video https://vimeo.com/697273347	The home-based palliative care team improved the assessment of delirium in home-bound palliative care patients from 25 to 50% at completion of the 6 mo QI project	Impacted the safety, timeliness and efficiency, effectiveness of delirium management in home-based palliative care setting
25. G Kuppuswami Naidu Memorial Hospital, Coimbatore, Tamil Nadu Link to the graduation video https://vimeo.com/697273797	The gynecology-oncology team increased the number of pap smears amongst women in the age group of 25–60 y, visiting the general gynecology clinic, from the baseline of 34 to 70% at completion of the 6 mo QI project	Impacted the safety, timeliness and efficiency, effectiveness of preventive oncology processes in cervical cancers
26. Max Super specialty Hospital, Saket, New Delhi Link to the graduation video https://vimeo.com/697274979	The palliative care team increased the palliative care referral of stage IV cancer patients from oncology departments from the baseline of 7.5 to 25%, at completion of the 6 mo QI project	Impacted the efficacy, safety, timeliness, care experience of oncology patients
27. Indrayani Hospital and Cancer Institute, Pune Maharashtra Link to the graduation video https://vimeo.com/697275795	Increased the utilization of chemotherapy beds in the day-care unit from the baseline of 61 to 75% at completion of the 6-mo QI project	Impacted the timeliness, efficiency, efficacy, staff and patient experience of day-care chemotherapy processes
28. Tata Memorial Hospital, Muzaffarpur, Bihar Link to the graduation video https://vimeo.com/700758539	The team improved objective pain assessment in oncology outpatient and In-patient settings from 0 to >80% at completion of the 6 mo QI project	Impacted efficiency, timeliness, safety, and patient experience of cancer patient care processes
29. Post Graduate Institute, Chandigarh Link to the graduation video https://vimeo.com/700762220	The radiation oncology team improved the 6th month follow up of radically treated head and neck cancer patients from a baseline of 41 to >60% at completion of the 6 mo QI project	Impacted safety, efficacy, timeliness, staff and patient experience in the continuity of radiation oncology care processes
30. MNJ Institute of Oncology, Hyderabad, Telangana Link to the graduation video https://vimeo.com/697285557	The pediatric palliative care team achieved adequate and timely phone follow-up for enrolled Children, from baseline 20 to 99% at completion of the 6 mo QI project	Impacted safety, timeliness, and patient experience in the continuity of palliative care processes
31. Malabar Cancer Centre, Thalasseri, Kerala Link to the graduation video https://vimeo.com/700761179	The radiation oncology team reduced the weight loss of cancer patients on curative radiation therapy from a baseline average of 50% before the QI project to 20% at completion of the 6 mo QI project	Impacted the safety, efficiency, efficacy, treatment adherence, and patient experience in the radiation oncology care processes
32. Homi Bhabha Cancer Hospital and Research centre, Vishakhapatnam, Andhra Pradesh Link to the graduation video https://vimeo.com/697274496	The medical oncology team reduced the percentage of scheduled day-care chemotherapy patients waiting for >2 h from baseline of 64 to 10% at completion of the 6 mo QI project	Impacted the timeliness, efficiency, efficacy, staff and patient experience in the day-care chemotherapy processes

Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

Institution, region ... With link to A3 sheet and graduation presentation	Quality concern addressed through the QI project and outcome achieved	Quality domain addressed
COHORT 2022 (7 mo)		
33. Malabar Cancer Centre, Thalasseri, Kerala Ref: Link to the graduation video https://vimeo.com/831162109	The team reduced the percentage of patients with head and neck cancer, experiencing weight loss of $\geq 10\%$ when undergoing curative intent radiation treatment—from baseline 70 to $<10\%$ during the 7 mo of the QI project	Ensured the nutrition of patients with head and neck cancer undergoing curative intent radiation treatment did not suffer
34. National Cancer Institute, Maharagama, Sri Lanka Ref: Link to the graduation video https://vimeo.com/831172546	The team reduced the delay in ensuring the Numerical Rating Pain score of oncology-palliative inpatients to $<4/10$, from baseline 8 to 3 d, during the 7 mo of the QI project	Efficiency and timeliness of pain management for cancer patients
35. St Johns Medical College Hospital, Bangalore, Karnataka Ref: Link to the graduation video https://vimeo.com/831167438	The surgical oncology team increased the percentage of patients reverting back to surgical oncology OPD with breast imaging reports within one working day, from 0% at baseline to 30%, during the 7 mo of the QI project	Improved safety, efficiency and timeliness of surgical care processes
36. Malabar Cancer Centre, Thalasseri, Kerala Ref: Link to the graduation video https://vimeo.com/831393046	The radiation oncology team reduced the average time of discharge of admitted private oncology patients from baseline 6 h, to 4.5 h, during the 7 mo of the QI project	Efficiency, timeliness, and patient experience regarding the discharge processes
37. Cachar Cancer Hospital and Research Centre, Silchar, Assam Ref: Link to the graduation video https://vimeo.com/831143162	The surgical oncology team incorporated processes for documenting patient feedback at completion of treatment, from baseline of 0 to 30%, during the 7 mo of the QI project	Patient experience and satisfaction, quality of cancer care perceived
38. Cancer Institute Adyar, Chennai, Tamil Nadu Ref: Link to the graduation video https://vimeo.com/831152020	The team improved the satisfaction of physician when communicating bad news to patients with advanced gynecology cancer, from 30% at baseline to 60% during the QI project period of 7 mo	Timely, goal-oriented decision-making and care planning, patient experience and satisfaction
39. Christian Medical College Vellore, Tamil Nadu Ref: Link to the graduation video https://vimeo.com/831126259	The palliative care team increased the documentation of patient priorities and needs during outpatient consult from baseline 25 to 90%, during the QI project period of 7 mo	Patient priority and needs guiding palliative care delivery—equity, patient experience and satisfaction
40. Homi Bhabha Cancer Hospital and Research centre, Vishakhapatnam, Andhra Pradesh https://vimeo.com/831175721	The onco-anesthesiology team improved the percentage of preanesthesia clearance at first assessment from 60% at baseline to 80% by the end of the QI project period of 7 mo	Impacted processes related to timeliness, efficiency, patient and staff experience
41. Kidwai Memorial Institute of Oncology, Bengaluru, Karnataka Ref: Link to the graduation video https://vimeo.com/831124028	The radiation oncology team reduced the radiation treatment initiation time for lung and colorectal cancer patients, from baseline 31 to 17 d during the project period of 7 mo	Efficiency, and timeliness of radiation oncology care processes
42. Kolhapur Cancer Centre, Kolhapur, Maharashtra Ref: Link to the graduation video https://vimeo.com/831173522	The surgical oncology team reduced the discharge turnaround time of their patients from 180 min at baseline, to 110 min, during the project period of 7 mo	Efficiency, timeliness, patient experience, and satisfaction of discharge processes for postoperative surgical oncology patients
43. Government Royapettah Hospital and Kilpauk Medical College, Chennai, Tamil Nadu Ref: Link to the graduation video https://vimeo.com/831388486	The oncology team improved the compliance of patients with advanced head and neck cancer, to peri-op chemoradiotherapy from baseline 66 to 90% during the QI project period of 7 mo	Improved the safety, and efficacy, of the cancer therapy interventions and hence optimized the outcome

(Continued)

Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

Institution, region ... With link to A3 sheet and graduation presentation	Quality concern addressed through the QI project and outcome achieved	Quality domain addressed
44. Homi Bhabha Cancer Hospital and Research centre, Punjab Link to the graduation video https://vimeo.com/831124629	The radiation oncology team reduced the average time delay, between CT simulation to initiating first radiation in curative intent RT patient from baseline of 20 d to ≤ 12 d during the QI project period of 7 mo	Timeliness, safety, and efficacy of curative-intent radiotherapy was enhanced
45. Malabar Cancer Institute, Thalasseri, Kerala Link to the graduation video https://vimeo.com/831178242	The gastro-oncology surgical team improved the percentage of planned surgeries happening within 30 d of registration, from baseline of 25 to 40% during the QI project period of 7 mo	The timeliness and efficacy of surgical intervention for gastro-oncology patients improved
46. Sri Venkateswara Institute of Cancer Care & Advanced Research (SVICCAR), Tirupati, Tamil Nadu Link to the graduation video https://vimeo.com/831161363	The patient navigator team improved the adherence of patients to postdischarge OPD follow-up appointments from baseline 60 to 70% by the end of the QI project period of 7 mo	Safety, timeliness, and continuity of care for cancer patients postdischarge
47. Tata Memorial Hospital, Mumbai, Maharashtra Link to the graduation video https://vimeo.com/831171492	The radiation oncology team reduced the average daily waiting time of their patients from 65 min at baseline, to 45 min by the end of the QI project period of 7 mo	Safety, timeliness, efficiency, and patient experience of the radiotherapy treatment
48. Cachar Cancer Hospital and Research Centre, Silchar, Assam Link to the graduation video https://vimeo.com/831156900	The preventive oncology team increased the caregiver participation in oral cancer screening from baseline 38 to 50%, by the end of the QI project period of 7 mo	Safety, efficiency, effectiveness of the preventive oncology program
49. Cachar Cancer Hospital and Research Centre, Silchar, Assam Link to the graduation video https://vimeo.com/831169768	The team increased the objective pain assessment in head and neck cancer patients on their initial visit from baseline of 18 to 80%, by the end of the QI project period of 7 mo	Efficacy, efficiency, adherence to treatment, and the cancer patient experience of the treatment received
50. Cachar Cancer Hospital and Research Centre, Silchar, Assam Link to the graduation video https://vimeo.com/831169224	Reduced the default rate in head and neck outpatient clinic from baseline 40 to 20% by the end of the QI project period of 7 mo	Safety, timeliness, and effectiveness of cancer treatment
51. Cachar Cancer Hospital and Research Centre, Silchar, Assam Link to the graduation video https://vimeo.com/831144031	The surgical oncology team decreased the waiting time of patients in surgical oncology clinic from baseline 157 to 100 min, by the end of the QI project period of 7 mo	Efficiency, timeliness, patient and staff experience in the surg-oncology outpatient department
52. Cachar Cancer Hospital and Research Centre, Silchar, Assam Link to the graduation video https://vimeo.com/831164334	The oncology team reduced wait times to initiate the chemotherapy in day-care patients from baseline 10 to 5 h, by the end of the QI project period of 7 mo	Efficiency, timeliness, patient and staff experience in the day-care chemotherapy department
COHORT 2023 (10 mo)		
53. Tata Memorial Hospital, Mumbai, Maharashtra https://vimeo.com/995703037	Incidence of nasal ala necrosis in patients undergoing long duration surgery for head and neck cancer reduced from 36.4 to 13% in due course of time (3–4 months) by the end of the QI project period	Safety, effectiveness, timely, efficient
54. Jan Swasthya Sahyog, Bilaspur, Chhattisgarh https://vimeo.com/995703931	Turnaround time from Registration to Treatment initiation among new oral cancer patients decreased from 10 to 5–6 d; by the end of the QI project period	Timely, efficient
55. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995722905	Early referral to palliative care services in patients with advanced gastric and colorectal malignancies improved from 30 to 60% by the end of the QI project period	Effective, patient-centered, timely

Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

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56. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995724935	Incidence of postoperative abdominal wound infections in colorectal cancer patients decreased from 20 to 5% by the end of the QI project period	Safe, effective, timely
57. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995726996	Reduced the average time taken for the initiation of gynecology outpatient X-ray services in the special OPD intended on the same day from the baseline average of 215 to 84 min by end of the project duration	Timely, efficient
58. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995727907	Reduced the average waiting time for initiating daily radiation for patients who are being treated with curative intent in a single treatment unit from 54 to 36 min by the end of the QI project period	Timeliness, efficiency
59. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995732246	Tracheostomy-related morbidities in the postoperative wards reduced from 25 to 15% by the end of the QI project period	Safety
60. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995732749	Rate of documentation of goals of care discussion in patients with advanced pancreatic and colorectal cancers having oncologist assessed life expectancy of <1 y discussed in multidisciplinary tumor board for palliative treatment improved from 0 to 100% by the end of the QI project period	Timeliness, efficiency, patient centeredness, patient and staff experience
61. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995733095	88% of ovarian cancer surgical patients were referred timely to prehabilitation program in 2 wk before surgery (the target was 100%)	Efficiency, safety, patient-centeredness, patient experience
62. Cancer Institute Adyar, Chennai, Tamil Nadu https://vimeo.com/995733432	Frozen section processing time of 41–49 min reduced by 30% (29–34 min) by the end of the QI project period. Average FS processing time decreased from 45 to 38 min, totaling a decrease of 40 min daily	Efficiency, timeliness, safety
63. CHRISTIAN MEDICAL COLLEGE, VELLORE https://vimeo.com/995734201	Timely and appropriate palliative care referrals of advanced/metastatic lung cancer improved from a baseline of 37 to 68% by the end of the QI project period. Target was 70%.	Timeliness, efficiency, patient centeredness, patient and staff experience
64. Basavatarakam Indo American Cancer Hospital Research hospital, Hyderabad, India https://vimeo.com/995734512	Compliance from the current documentation of pain scores (NRS/CPOT) improved from baseline 48.07 to 90% by the end of the QI project period	Efficiency, patient-centeredness, patient experience
65. MALABAR CANCER CENTRE - Postgraduate Institute of Oncology Science & Research https://vimeo.com/995734898	Children on outpatient cancer therapy, received first dose of antibiotic within 1 h of prescription for FN episodes, improved from 33.3 to 50% by the end of the QI project period. Target of 75% not achieved	Safety, timeliness, efficiency
66. Kamala Nehru memorial hospital, Uttar Pradesh https://vimeo.com/995735365	Timely completion of treatment for head and neck cancer patients improved from 22 to 37% by the end of the QI project period. Target of 40% not achieved	Safety, timeliness, efficiency

(Continued)

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67. TATA MEDICAL CENTRE KOLKATTA https://vimeo.com/1015551204?share=copy	Reduced the needle stick injuries sustained by nursing staff/month from 3 to 2 (monthly average) during this study period	Safety of nurses/personnel, awareness, safe injection practices
68. TRIVANDRUM INSTITUTE OF PALLIATIVE SCIENCES. https://vimeo.com/1015553757?share=copy	Increased the number of new pediatric patients registration at TIPS from 0 to 4 per month by the end of project period. The improvement had yet to be sustained	Effective triaging, empowering palliative physicians, sensitization
69. KMC MANIPAL TEAM 1 https://vimeo.com/1015554309?share=copy	Increased the percentage of 3 mo posttreatment follow-up of radically treated patient in radiation oncology OPD, from 25 to 75% by the end of the project (8 mo)	Follow-up strategy, health education and reminder mechanism
70. KMC MANIPAL 2ND TEAM https://vimeo.com/1015557739?share=copy	Reduced the time for IGABT from induction of anesthesia to delivery of first fraction, from an average of 5.5 to 3.5 h by the end of Project period. The improvement had yet to be sustained	Reduction in anesthesia time, resource optimization, improved outcomes
71. KMC MANIPAL 3RD TEAM https://vimeo.com/1015558058?share=copy	To reduce the duration from the onset of fever to administration of first dose of antibiotics in non-hospitalized children with febrile neutropenia from the current average of 2 to <1 h for all patients, from 25 to 75% by the end of project period	Decrease morbidity and mortality in highly vulnerable groups. Patient safety and efficiency
72. ST JOHNS HOSPITAL https://vimeo.com/1015558508?share=copy	Improved the satisfaction of the palliative care team regarding the continuity of care achieved through phone call follow up, from baseline 4.5/10 to 8.5/10 by the end of the project duration (0 = not at all satisfied and 10 = completely satisfied)	Care satisfaction and care continuum
73. CANSUPPORT NGO (DELHI) https://vimeo.com/1015559706?share=copy	Increased the identification and prognostication of advanced cancer patients on home-based care nearing end of life, from current 30 to 60% by the end of the project duration	Effective prognostication, timely intervention and improving EOLC
74. KASHMIR INSTITUTE OF MEDICAL SCIENCES https://vimeo.com/1015560087?share=copy	Improved the weekly feedback Patient satisfaction score regarding the communication of care-plan provided by the radiation oncology department at SKIMS, from a baseline of 3.3/5 to 3.7/5 by the end of the project duration	Improved the quality of care delivery, patient experience and staff satisfaction
75. KOLHAPUR CANCER CENTRE https://vimeo.com/1015560754?share=copy	Reduced the delay between admission into Daycare, and initiation of chemotherapy from 3 to 2 h in paying category patients by the end of the project duration	Efficiency and better overall treatment experience
76. SIDDARTH GUPTA HOSPITAL MAHARASTHRA https://vimeo.com/1015561229?share=copy	Reduced default in completion of radiotherapy in curative intent head and neck cancer patients from baseline of 50 to 30% over the 7 mo of the project	Improving outcomes and reduction in toxicity
77. FORTIS HOSPITAL GURGOAN https://vimeo.com/1015561815?share=copy	Goals of care on discussion and documentations Improved the documentation of goals-of-care discussion in patients with advanced malignancy (progressed on 2nd line treatment) with ECOG ≥ 3 from 0 to 50% over the 7 mo of the project	Effective communication and treatment compliance
78. CENTRE FOR ONCOLOGY CENTRE, CHENNAI https://vimeo.com/1015562209?share=copy	Decreased the number of postoperative head & neck patients with weight loss >5%, from 30 to 15% over the duration of the project	Improved safety, effectiveness and hence oncologic and QoL outcomes

Supplementary Table 1 (Continued) QI projects completed through the NCG-QI-Hub between 2017 and 2024 across quality domains: safety, efficiency, timeliness, efficacy, effectiveness, equitable access to care, staff satisfaction, patient/family experience

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79. Dr B Booroah Cancer Institute, Guwahati, Assam, Department of Palliative Medicine https://vimeo.com/1015998822?share=copy	Decreased the percentage of patients opting out of home-based palliative care services, from the current 32.88 to 15%	Care access and care continuum
80. Dr B Booroah Cancer Institute, Guwahati, Assam - Team 2 Department of Critical Care Medicine https://vimeo.com/1015998822?share=copy	Increased the compliance rate of hand-hygiene compliance in the ICU by 30% over the duration of the project	Sensitization, reduction in infections, and improved care quality
81. Cachar Cancer Hospital and Research centre, Pharmacy Department Team 1 https://vimeo.com/1015999253?share=copy	Reduced the average waiting time in CCHRC pharmacy from 24 to 15 min over the duration of the project	Efficiency and waiting time
82. Cachar Cancer Hospital and Research centre, Endoscopy department Team 2 https://vimeo.com/1015999467?share=copy	To improve patient experience before undergoing endoscopies Decreased the waiting time for endoscopy in CCHRC from the baseline, 140 to 90 min over the duration of the project	Patient satisfaction and experience
83. Cachar Cancer Hospital and Research centre Department of Surgery Team 3 https://vimeo.com/1015999887?share=copy	Reduced the waiting time for patients transfer from the postoperative ward to regular ward, from a baseline of 3.5 to 2 h over the duration of the project	Ward efficiency and better resource allotment and optimization
84. Cachar Cancer Hospital and Research centre Department of Surgery - head and neck Team 4 https://vimeo.com/1016000305?share=copy	Improved the documentation predischARGE morbidity of postoperative head and neck cancer patients, from 30 to 100% on Health Management System over the duration of the project	Documentation and care continuum
85. Cachar Cancer Hospital and Research centre Chemotherapy unit of Radiation and Medical oncology Team 5 https://vimeo.com/1016001046?share=copy	Reduced the number of poorly controlled hypertension at the time of admission in chemotherapy ward from 44 to 20% by the end of the project	Efficiency, reduction in treatment delays, and improved oncologic outcomes
86. Cachar Cancer Hospital and Research centre Department of Surgery Team 6 https://vimeo.com/1016009177?share=copy	Increased the compliance to antibiotic policy in the post operative patients with clean, and clean contaminated procedures, from 36% to at least 80% over the duration of the project	Antibiotic stewardship and reduction in AMR
87. Cachar Cancer Hospital and Research centre Department of Radiation Oncology Team 7 https://vimeo.com/1016009579?share=copy	To reduce weight loss in head and neck cancer patients undergoing chemo radiation Reduced >5% weight loss in patients admitted in radiation ward, undergoing chemo-radiation therapy, from the current 40 to 20% by the end of the project	Treatment compliance, improved patient outcomes and QoL
88. Cachar Cancer Hospital and Research centre Department of Radiology Team 8 https://vimeo.com/1016009776?share=copy	Reduced the average CT scan waiting time in ward 2 of CCHRC from 15.11 to 6 h by the end of this project	Timeliness and resource optimization
89. Amala Institute of Medical Sciences, Thrissur, Kerala Department of Palliative Medicine https://vimeo.com/1016010158?share=copy	Improved the referral to palliative care services of metastatic Cancer patients before the initiation of Oncological treatment, from 40% to 60% by the end of this project	Improved symptom care, quality of life, sensitization, and reduce time/financial toxicities

Note: This comprehensive list of EQuIP India QI projects, 2017–2023, is available on the NCG E-learning portal. Link: <https://ncgeducation.in/mod/page/view.php?id=2756>.