

Criteria	Definition	Scoring Guidelines (1-5 scale)
<b>Value Criteria</b>		
<b>Better Population Health</b>	Compared to the current service/treatment options, the project will lead to better health outcomes for children with pediatric orthopedic conditions. Metrics to consider include decreasing the variability of care, limiting the cost of care, improving patient outcomes and decreasing complication rates.. (Y/N) if Y then weigh all value criteria at 20%.	5: Significant improvement in health outcomes for a large group of patients with with a pediatric orthopedic condition. 3: Moderate improvement in health outcomes for a moderately-sized group of patients with with a pediatric orthopedic condition or a goal to decrease health inequalities among different populations. 1: No impact on health outcomes for a pediatric orthopedic condition. or small to no impact/decrease on health inequalities within POSNA
<b>Clinical Relevance</b>	Compared to the current standard of care, this grant has the ability to improve clinical outcomes. - Will this project reduce the burden of disease? - What is the size of the population that would be positively impacted? - Is this elevating the standard of care within POSNA?	5: Significant improvement of clinical outcomes/ large population impacted/ improving standard of care 3: Moderate improvement of clinical outcomes/ moderate population impacted / meeting current standard of care 1: No impact on clinical outcomes/small population impact / no standard of care evidence
<b>Patient Experience of Care</b>	Will this project positively impact the patient care experience (improve patient reported outcomes, patient satisfaction, quality of life, decrease complications, etc.)?	5: Improves quality, safety and value of care we provide to our patients 3: Improves either quality, safety and value of care we provide to our patients 1: No improvement of quality, safety or value of care we provide to our patients
<b>Provider Impact</b>	Will this project positively impact the provider' experience of care delivery? (i.e. provider engagement, wellness, safety, communication, support or decrease legal risk or exposure)	5: Significant positive impact to provider experience 3: Moderate positive impact to provider experience 1: No improvement to provider experience or negative impact.
<b>Lower Cost</b>	Compared to the current standard of care, will this QSVI grant achieve the following: - Reduce waste or unnecessary practice variation; - Reduce cost in operational/clinical areas; - Standardize clinical care/generate clinical practice guidelines; - Encourage multicenter collaboration to reduce cost and standardize care	5 - Reduces healthcare costs per member of the targeted population - e.g. reduces waste/variation, reduces overhead, reduces utilization (i.e. readmissions, complications, etc.) 3 - Neutral effect on healthcare costs per member of the targeted population 1 - Increases healthcare costs per member of the targeted population - e.g. increases waste/variation, increases overhead, increases utilization.

## Project Delivery Risk Criteria

<b>Ability to Implement</b>	What resources are required (IT, space, FTE, training, workflow, cost, support)? What is the complexity of implementation? What is the scale of implementation? Is this project feasible? What is the track record of the co-investigators?	5. Very complex or highly resource intensive, unproven track record of investigators, little QI resources available at their institution. 3. Moderate complexity or moderate resources, some experience of the investigators in performing QI type research, some QI resources available at their institution. 1. Low complexity or minimal resources, with well experienced clinicians in the realm of QI investigation, significant QI resources available at their institution.
<b>Short &amp; Long Term Effects</b>	Is there a positive return on investment (ROI) to POSNA in the next 1-5 years?	5 - Positive ROI in 5 years 3 - Positive ROI in 3 years 1 - Positive ROI in 1 year or less
<b>Transition to Value Based Care</b>	Does this project retain the intended benefits in a value based care model? Where value = Outcome/Cost	5: Does not transition to value based care 3: Adequately transitions to value based care 1: Benefits are sustained in transition to value based care
<b>Measurability</b>	Are there clear and achievable metrics presented that define the success of the proposed grant or initiative? Is there a sustainable plan to track those measures?	5: Difficult to measure or difficult to monitor and report 3: Adequate measures available, difficult to monitor and report 1: Strong measures available, easy to monitor and report