Institute for Healthcare Improvement

IHI Forum 2025

How to Submit a Strong Proposal

April 9, 2025

Welcome and Agenda

What we WILL cover today:

- Brief review of general information
- Tips for submitting a strong session proposal
- Pitfalls to avoid
- Q&A

What we will NOT cover today:

- Tracks and Content Areas
- Poster Presentations

Key Information

Your one-stop-shop for all things Forum: www.ihi.org/forum

Abstract submission deadline: **Wednesday, April 30, 2025** at 11:59 PM EST

Poster submission deadline: **Monday, November 3, 2025** Forum Submission Page & Proposal Guidelines

IHI Forum

Format:	In-Person
When:	Dec 07–10, 2025
Where:	Anaheim, California, USA
General Conference Fee:	$1395*

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True or False: The following are ALL the categories of abstracts available for submission for Forum 2025

a. Case Study

b. Methods

c. Products & Services

d. Results from an Improvement Initiative

True or False: The following are ALL the categories of abstracts available for submission for Forum 2025

FALSE

Types of Abstracts

Results: These sessions share what a team learned from an improvement initiative or how they used improvement methods and tools to achieve an outcome.

Methods: These sessions build knowledge on the use of a particular method or tool related to improvement science or related disciplines

Case Study: These sessions share a case study from the field.

*All results and methods abstracts will undergo review from both the relevant content area/track *and* a scientific expert. Top-rated results and methods abstracts may appear in a special issue of *BMJ Open Quality.*

Session Formats

Type of Session	Description	Length of Time
Half-Day Pre-Conference Workshop	• "How to" learning sessions that focus on tools, methods, or frameworks or data/results	3 Hours (including breaks)
General Session	• Features a variety of didactic or interactive formats	60 Minutes
Rise & Shine Session	• Early morning sessions • Mostly didactic with some attendee interaction	45 Minutes
Couch Conversations	• Presenter-led discussion with ≤30 people seated in a circle • No slides or formal presentation	30 Minutes
Abstract-Driven Session	• Didactic with some attendee interaction • ≈12-minute presentations (≈4 abstracts in 60-minute session • Moderator facilitates discussion between attendees & presenters	≈12 Minutes
Pecha Kucha	• Pecha Kucha sessions tell stories with images. • Presenters have 6 minutes and 40 seconds (20 slides/20 seconds per slide) to share their work.	6 Minutes and 40 Seconds

Ensure that the "platform presentation" (whatever we name it, the session formerly known as parallel abstract sessions) also is an option. Maybe a note on interactive sessions?

Sample Abstract-Results from an Improvement Initiative

1 Bridging health equity gaps: strategies for transformative change

Author affiliations • Amy Grant [1], Nana Jones [1], Sarah Corathers [1], Amanda Riley [1], Marissa Town [1], Laura Smith [1], Jennifer Kelly [1], Amy Poetker [1], Desireé N Williford [1], Kyle Kaplan [1], Amanda Howell [1].

Abstract

Background Healthcare's landscape is marred with health disparities. A type 1 diabetes (T1D) team identified only 49% of black patients were using continuous glucose monitors (CGM), compared to 77% of white patients. This demonstrates critical inequities, as it is well established that CGMs accelerate patients toward glucose targets.

Objectives The aim was to achieve excellent and equitable outcomes for patients with T1D. Specifically, increase the percentage of black patients using CGM from 49% to 77%, and thereby narrow the black-white gap.

Methods Quality improvement tools and multi-faceted interventions were used to activate transformative change. The team utilized failure analysis and process maps to assess the current landscape, Voice of the Customer to envision an ideal environment, a bridge tool and PDSA (Plan-Do-Study-Act) testing to bridge equity gaps (figures 1–3).

Results CGM usage increased from 49% to 89% for black patients, and from 77% to 94% for white patients. Thus, narrowing the black-white gap from 28% to 5% (figure 4).

Conclusion and Implications Quality improvement methodology and targeted interventions resulted in improved health outcomes. Learnings from this project can be applied in other settings to create bridges, remove barriers, and ultimately eliminate all gaps.

Sample Abstract-Methods

D07: Shewhart Charts at Scale: New Templates That Enable SPC in Health Systems Using Tableau

9:30 am - 10:30 am 12/11/2024 Improvement Science & Methods Intermediate Magnolia 22-23

Shewhart Charts are essential for understanding variation. Tableau is emerging as the predominant business intelligence platform for U.S. health systems. The absence of native support for Shewhart Charts in Tableau has hindered their use. This necessitated a user-driven solution.

Our healthcare system developed templates specifically designed for creating Shewhart Charts in Tableau. We will share these templates and demonstrate their functionality, and offer comprehensive instructions (at and post-session). Essential features will be highlighted such as phases and rational subgrouping options, and showcase the automation of centerline and control limit calculations within Tableau. We will also provide a physician perspective on using these templates for improvement and show their use for real-time interpretation and decision-making.

The technical considerations for health systems will be discussed, including Tableau versions and integrations with tools such as R and SQL. Also the potential for collaborative learning among health systems seeking to adopt these templates will be explained, given variance in analyst proficiency, Tableau versions, and stakeholder familiarity with Shewhart Charts.

After this session attendees will be able to:

1.) Describe how to create Shewhart charts (C, U, P, I, X-bar and S, T, G, and prime charts) in Tableau

2.) Describe how to seamlessly integrate Shewhart Charts into Tableau

3.) Design statistical process control (SPC) displays in Tableau that enable physician-led improvement

Saul Euceda *Health Informatics Analyst, Analytics Solutions,*

Saul Euceda is a Computer Engineer with thirteen years of experience in the IT Ind Healthcare sector for the past six years. Currently employed at UCLA Health as a H contributes to numerous data analytics initiatives, focusing primarily on developing improve healthcare quality, including enterprise-level and physician-initiated learnin passionate about using the power of technology to drive positive change in patient past 2 years, he developed Shewhart Chart templates within Tableau, with producti SQL programming, and continues to innovate in auto-calculation of limits and relate

Vladimir Manuel *Family Medicine Physician, UCLA Health*

Dr. Manuel is a family medicine physician at UCLA Health. As medical director of U he designed and implemented a best practice model for urgent care and a network which included developing a pool of 33 part time and full time physicians, standardi UCLA, and developing operational synergies among unscheduled care models and provided hospitalist services and preventive and acute healthcare services for peop quality officer in UCLA Health, he supports the development of learning system cap outpatient delivery systems, including dashboards that enable real-time physician l

Gareth Parry *Biostatistician, Cambridge Health Alliance*

Gareth Parry is a biostatistician with expertise in data science and healthcare resea of improvement and implementation initiatives. He is skilled in leading research and identify practical solutions to bring about equitable and sustainable improvement. H at the Institute for Healthcare Improvement (IHI) where he led the rapid-cycle evalu and provided scientific leadership to a number of IHI programs. He is currently a bi Health Alliance. In 2020 he co-developed a hybrid Shewhart chart for exponential d Shewhart Charts using R and auto-recalculation to foster real-time learning.

Russ Smith *Manager, Analytics Solutions, UCLA Health*

Russ Smith began his career as a software engineer at a facial recognition firm. Tra company, he honed his skills as a web developer and data architect. In 2006, he fo Pediatrics department, immersing himself in the intersection of technology and hea provided invaluable insights into both technical and business realms within UCLA H to the Office of Health Informatics and Analytics (OHIA) within UCLA Health as a Bu Developer and then as Manager of the Analytics Solutions team. In this role, he lea enterprise-grade dashboards and data marts to enable data-driven learning and de

Sample Abstract-Case Study

RS20: Building Cross-Sector Partnerships to Address Health-Related Social Needs and Reduce Readmissi

7:00 am - 7:45 am 12/11/2024 Intermediate Population Health Unique Format Magnolia 3

Older adults face post-hospitalization risks including medication complexity, barriers to follow-up care, and limited understanding of how to manage health conditions at home – which are exacerbated for patients with limited English proficiency, lower health literacy, and complex social needs.

JASA Aging Services and Maimonides Hospital have partnered to create an age-friendly hospital and home-based transitional care model to address social needs and reduce readmissions. It includes several innovative elements: age-friendly care across settings driven by "what matters" to the patient; home-based education to build trust and learn about the patient's environment; an in-language, culturally appropriate model led by international medical graduates with extensive clinical knowledge and concordance of (10+) languages and cultures with patients. The program provides education, medication reconciliation, and vital sign monitoring while addressing social needs.

The model shows early signs of success: 83% of 1353 patients served were connected to essential social services. We achieved a 32% reduction in readmissions and patients are 21% more likely to engage with a PCP compared to baseline data. Patient satisfaction scores exceed 97%.

After this session attendees will be able to

1.) Demonstrate how cross-sector partnerships address health-related social needs and reduce readmission

2.) Create strategies to provide post-discharge care that aligns with patient's real world circumstances

3.) Outline how age friendly transitional care models improve health outcomes for older adults

Arielle Basch *Senior Director, Health Services, JASA*

Arielle Basch is Senior Director of Health Services at JASA. In this role, Arielle creates and implements evidence-based community interventions that address the social drivers of health, prevent avoidable hospitalizations and provide more good days in the community for older adults. Her work on transitional care has reduced hospital readmission rates by 40% for older adults for key clinical partners, and was recognized with the Crain's Whole Health Heroes Award, the John A. Hartford Innovation Award and a Healthfirst Quality Incentive Program Award. Arielle loves working with her team which is comprised of healthcare professionals from 15 countries who speak many of the languages and reflect the diverse cultures of older adults in NYC.

Isabella LaRosa *Senior Director, Transitional Care, Maimonides Medical Center*

Isabella LaRosa, RN MSN is an experienced Senior Director of Post-Acute Transitional Care. For more than 35 years, Isabella has worked in Community Health Care focusing primarily on aiding complex and vulnerable patients manage their health care post hospital admission. Her passion for QI grew early in her professional career as visiting nurse seeing first-hand how overwhelmed patients became in trying to navigate their own health care needs after a long and complex hospital stay.
Most recently, Isabella has partnered with QI and JASA to develop valuable quality initiative programs focused on providing patients the support to better manage their own health care, improve quality of life and bridge possible gaps in care that may lead to unnecessary readmissions.
Isabella earned her BSN at Wagner College in 1983 and her MSN from Mercy College in 2017.

Jose Martinez *Program Director, AFHS Transitional Care, JASA*

Jose Martinez Escudero M.D. is the Program Director of Age Friendly Transitional Care at JASA. In this role, Jose supports underserved older adults navigate the healthcare system in New York City. Jose loves working with patients and empowering them with tools and information that enable them to successfully manage their health. Jose graduated from medical school at the National Polytechnic Institute in Mexico City and earned a Master of Science degree in Neurophysiology. Jose's goals are to get into an Internal Medicine and Palliative Care residency training program and to continue his age friendly work as a Medical Doctor. In his free time, Jose loves to exercise, grow gourmet mushrooms, and spend time with his wife and cats.

Tips, Tools, and Pitfalls to Avoid

POP QUIZ: True or false? The proposal submission portal and the Forum website are located on the same website.

A. True

B. False

POP QUIZ: True or false? The proposal submission portal and the Forum website are located on the same website.

FALSE

Tip: Review the Information on the Forum Website and Session Portal

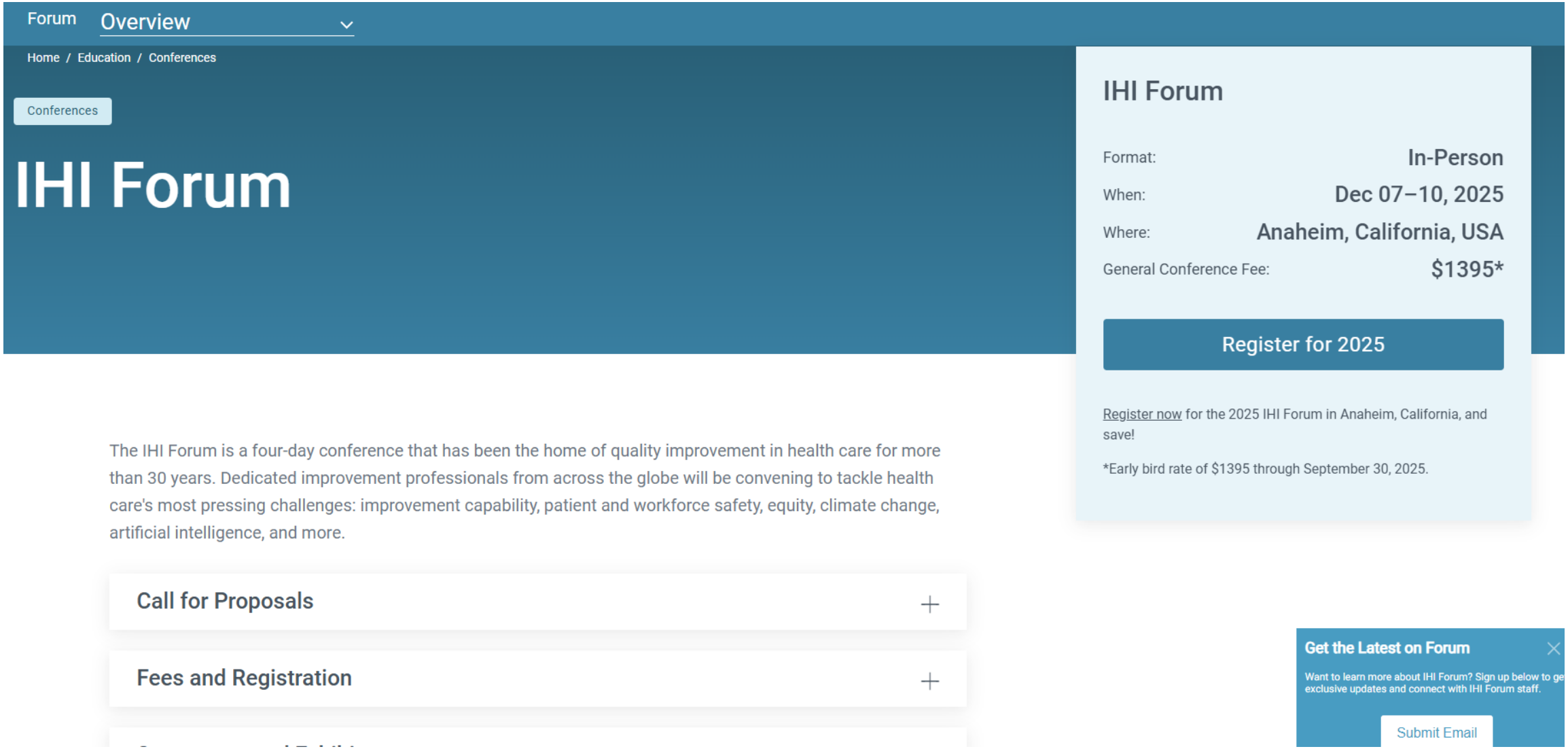
Forum Website

- Deadlines
- Venue information
- Registration & Fees
- Scholarships

Submission Portal

- Deadlines
- Subject Matter Areas
- Format Types
- Proposal Form Limits
- Drafting Tools for Objectives/Proposal/Title/etc.
- Criteria for Acceptance and the Review Process
- And more…

Forum Website



Submission Portal Website

Tip: Understanding Forum Attendees

- Demographics
- **Why** are they here? **What matters** to them?
- What might they expect from your presentation?
  - **Evidence** of solid research?
  - Practical **advice**?
  - **Methods** and/or **tools** to take home?
  - A **discussion**?
- How much might your audience already know/need to know/want to know about your topic?

https://libguides.tru.ca/presentation/audience

Tips on Proposal Attachments

Purpose: Share information relevant to your presentation

What to include:

- Max 5 graphics or 5 individual charts
- Run charts and/or tables to support results
- Figures to help illustrate theory of change or methods

Can be shared via Microsoft PowerPoint or Word

Tips for Data Visualization

1

Use time-series data in run or control charts when applicable.

2

Avoid bar graphs or pie charts.

3

Add data labels to clarify but not clutter

4

Add annotations to your data

Insert chart here

Tips for Methods & Results

If you have results, please share them.

If you do not yet have all your results, it will not count against you if you can demonstrate the importance of your work and make clear that your project or study is in progress. Include as much relevant information as possible.

Share what you have learned about scale, spread, and sustainability (especially the replicable portions)

Don’t be afraid to make your session dynamic! You can consider…

- Pecha Kucha session types
- Limiting didactic presentation time
- Demonstrate how to use a tool, method, or framework
- Include discussion
- Role play with case studies

If you are submitting a structured abstract…

Keep the Background section brief

Focus on Methods and Results

Ensure the Discussion includes implications for your work

Tip: Use the Tools on the Submission Portal to Help Draft Your Proposal

Session Proposals

Each year practical, real-world sessions at the IHI Forum provide some of the most informative and memorable moments for attendees.

Presenting a session at the IHI Forum is an excellent opportunity to highlight the work you and your organization are doing to improve health care for all.

Submit a Session Proposal

Session Proposals are due April 30, 2025.

Poster Presentations

Poster displays at the IHI Forum chronicle specific improvement projects. They are an integral part of the conference, providing an opportunity for organizations to share their improvement strategies and celebrate their successes with attendees. Posters should not advertise products or services.

Submit a Poster

Poster submissions are due by November 3, 2025.

Learning Objectives Builder

https://teachonline.asu.edu/objectives-builder/

Video: Five Tips to Improve YOUR Forum Session Title and Description

https://www.youtube.com/watch?v=_idfhzaTw_8

More Recommended Tools

https://conferences.ihi.org/eSites/823377/Session%20Proposal%20Guidelines

Use the Proposal Drafting Tool

https://forms.ihi.org/hubfs/25%20Forum/2025%20Integrated%20Forum%20Abstract%20Drafting%20Tool.docx

1. Category of Submission

I am submitting and abstract that features (select the most appropriate category):
Methods (presentations to build knowledge on the use of a particular method, or tool related to improvement science or related disciplines) ☐
Results from an Improvement Initiative (presentations showing how an outcome was achieved (and/or other learning) through the use of improvement methods and tools) ☐
A case study from the field: ☐

Abstracts in the first two categories will be eligible for consideration for publication in a special issue of BMJ Open Quality

2. Main Submission Details

Presentation Title (100 Characters including spaces): * Title should be descriptive and engaging, avoiding acronyms and exclamation points. Please limit the presentation title to 100 characters, including spaces.
Click or tap here to enter text.

Subject Matter Focus – Please Select One (descriptions below) *
AI in Health Care: Hype, Reality & What's Next: ☐
Chief Quality Officers: Leading System-Wide Impact: ☐
Health Equity: ☐
Improvement Science & Methods ☐
Leadership: ☐

Pitfalls to Avoid

- Follow the directions. Complete all fields. Reviewers will not consider incomplete proposals.
- When writing objectives, avoid using words like **understand**, **learn**, **know**, **appreciate**, and **believe** that are not measurable.
- Avoid endorsing or selling products or promoting services.
- Tools, content, and technology referenced should be non-proprietary and accessible to all.
- IHI will not accept late submissions.

Questions?

Help us spread the word on social media!

Use this language to help tell people about the IHI Forum:

- Connect with like-minded improvers and health care professionals at this year's #IHIForum, December 7-10, 2025! Learn more and register: ihi.org/Forum.
- Join me at this year's #IHIForum, December 7-10, 2025, along with others dedicated to improving health care for all. Learn more and register: ihi.org/Forum

Tell us what you thought about our time together:

https://forms.office.com/r/W6198mWE6t

Thank You!

Reminder, ALL proposals are due via the Forum portal on **April 30** by 11:59 PM Eastern Standard Time

This presentation and recording will be available on the Forum website by Wednesday, April 16.

SAVE THE DATE! We will also be hosting a Poster Session Workshop on July 9, 2025 from 12:00-1:00 PM Eastern Standard Time.

Questions? Email presentations@ihi.org