

# **St. Vincent Hospital IM Residency Quality & Patient Safety Curriculum (Certificate of Completion)**

**Directors:** Drs. Yingkei Hui, Grace Greist, Kapil Mehta, Lannie Cation

## **ACGME core competencies and needs assessment**

- Patient Safety Programs must provide formal educational activities that promote patient safety-related goals, tools, and techniques
- Residents, fellows, faculty members, and other clinical staff members must:
  - know their responsibilities in reporting patient safety events at the clinical site
  - know how to report patient safety events, including near misses, at the clinical site
  - be provided with summary information of their institution's patient safety reports
- Residents must participate as team members in real and/or simulated interprofessional clinical patient safety activities, such as root cause analyses or other activities that include analysis, as well as formulation and implementation of actions.
- Residents must receive training and experience in quality improvement processes, including an understanding of health care disparities.
- Residents must have the opportunity to participate in interprofessional quality improvement activities.

## **Goals:**

- Teach residents the basic concepts and common terminology in quality improvement and patient safety
- Educate residents on patient safety identification
- Involve residents in event reporting and root cause analysis
- Teach Quality Improvement methodology and skills (A3/PDCA)
- Engage all residents in a quality improvement project and incorporate health care disparities
- Improve the quality of care we deliver to our patients
- Introduce IHI Triple Aim for Populations
- Provide residents feedback on common ambulatory metrics
- Provide Patient Safety and Quality Improvement Track opportunity PGY-2 and PGY-3 residents

## **Education Strategy:**

- **Mandatory requirement** (*Checklist completion in New Innovations by the end of the third year*)
- Complete Series of lectures/case-based discussions on quality improvement, patient safety and health care disparity
- Participate in outpatient group projects
- Panel Management time during Chief Month (One hour every Wednesday afternoon for 4 sessions)
- Present in the structured morbidity and mortality conference during PGY-3 year
- ***Complete Patient Safety Simulations in SIMS Center***

- **Attend at least 3 morbidity and mortality conference each year on average**
- **Submit at least 1 safety event report in the ERS**
  
- **Optional opportunities** (Required for residents going into the QPS Track)
  - Participate in QPS AIMS team huddles
  - Complete **IHI (Institute for Healthcare Improvement) Basic Certificate in Quality and Safety:** IHI Open School Online Courses (<http://app.ihi.org/lmsspa/#/certificates/6cb1c614-884b-43ef-9abd-d90849f183d4>) – About 15 hours
  - Electives with Risk Management, Pharmacy, QPS, PACT/supportive team, Ethic and Legal teams, Clinical Informatics (each team at least ½ day) for at least 1 week
  - Attend at least 1 Hospital RCA (cases involving teaching teams preferred)
  - Involve in at least 1 Hospital Committee (GME, PS, PCC Quality and Safety, CAUTI, CDI, CLABSI etc.)
  - Conduct at least 1 Hospital or outpatient PS/QI projects
  - Track QPS AIMS Team Huddles Metrics
  - Submit at least 1 QPS abstracts (St. Vincent Symposium, AAMC, ACP local chapter, APDIM, ACP, SHM etc.)
  - Involve in Safety Stand-up dashboard synthesis: biweekly or monthly
  - Maintain and update QPS website as regular basis
  - Attend at least 1 National PS/QI conference during 2nd or 3rd year

## Implementation

- Drs. Hui, Greist and Mehta to prepare lecture series
- Directors mentor and supervise PGY-3 M&MC, QPS AIMS Team Huddles, PSQ IHI WBTs
- Liaise with Risk Management, QPS, PACT/supportive team, Ethic and Legal teams, Healthcare IT, ED, Critical care and other specialties, Pharmacy, Nursing, Case Management teams
- Group QI projects to be determined by Outpatient Quality Champion
- Individual PSQI projects can be generated from various sources (MMC, RCA and hospital committees etc.)
- Residents will actively participate and receive feedback on the progress of the yearly project during FIRM meetings
- Faculty to be trained in A3 methodology and all faculty can serve as mentor for individual projects on an as needed basis
- During chief clinic month, the outpatient quality champion will serve as Panel Management supervisor, provide individualized metrics to each resident and oversee a strategy for improvement

## Feedback

- Successful group and individual projects will be reported out by the residents at the end of the academic year at the St. Vincent Research Symposium or other determined setting.
- For positive results, residents will be strongly encouraged to present their projects at regional and national meetings.
- Feedback on panel management will be provided at the end of the clinic chief rotation.

- Feedback on M&MC presentation will be provided through New Innovations and a M&MC champion presenter will be selected at the end of the year
- QPS AIMS Team Huddles winning team will be announced and awarded as monthly basis
- Basic Certificate in Quality and Safety WBT from IHI
- Feedback from residents will be solicited through end of the year surveys and via ACGME surveys and CLER visit feedback