SIU GMEC QUALITY IMPROVEMENT/PATIENT SAFETY OBJECTIVES Approved January 15, 2021

The term "resident" is inclusive of all trainees at SIU School of Medicine, whether training in a residency or

Every SIU faculty member and resident (by the time of graduation) should be able to:

KNOWLEDGE BASED OBJECTIVES

Define, discuss and meaningfully explain the following <u>Patient Safety</u> concepts (HM-SBP1):

- Culture of safety
- IOM's Six Aims of Quality Health Care
- James Reason's Swiss cheese model of system failure
- Human error and the limits of human performance
- Differential approach to preventable adverse events in a just-culture framework
- Components and tools of an inter-professional patient safety event investigation (commonly called a Root
 - $\circ~\mbox{Review}$ by inter professional team
 - $\circ~$ Detailed analysis of systems and processes
 - o Identification of potential systems changes
 - Implementation of an action plan
 - Follow-up evaluation of the actions
- The full range of reportable events
 - o Events with harm
 - \circ Near Misses (potential for harm but did not reach the patient)
 - Unsafe conditions
 - Unexpected deterioration
 - \circ Complications
- Disclosure of adverse events to patients and families
- The difference between a patient safety investigation and peer review/M&M and understanding that the

Define, discuss and be able to meaningfully identify various resources available to them (HM-SBP1):

Such as:

- IHI modules
- Department Level PS/QI Level Experts
- Simulations
- SIU Medicine QI/PS experts
- Hospital QI/PS experts
- GMEC PS/QI Objectives

Define, discuss and meaningfully explain the following <u>Quality/Performance Improvement</u> methodologies,

- Lean
- Six Sigma
- PDSA cycle
- TeamSTEPPS
- Variation
- Flow Chart
- Process Map
- Fishbone Diagram

• Learning from Defects tool

Define, meaningfully discuss and demonstrate (where applicable) the following concepts:

- Health care disparities, including:
 - Social determinants of health (See SDH Curriculum) (HM-SBP2)
 - Cultural competence or humility (HM-ICS1)
 - The role of implicit bias (HM-ICS1)
 - Stratification of quality measures (HM-SBP1)

BEHAVIORAL OBJECTIVES

PATIENT SAFETY

Consistently demonstrate and role model the practice of:

- Infection control standards and precautions including (HM-PROF1/2):
 - Hand hygiene
 - o Proper use of personal protective equipment
 - Sharps disposal
 - o Timely follow-up of injuries or exposures
 - o Appropriate reporting of injuries and exposures and understanding that this role should not be delegated
- Common tools for patient safety including (HM-PROF1/2):
 - o Time outs
 - o Checklists
 - o Medication reconciliation
 - Decision support tools
 - Standardized sign-out lists
- Self-Care, including (HM-PROF 3):
 - Seeking help when feeling overwhelmed or in need of support
 - $\circ~$ Debriefing with team members after difficult clinical encounters
 - Knowing how to obtain mental health resources
 - $\circ~\mbox{Recognizing}$ and intervening when colleagues need support
- Meaningful participation in interprofessional patient safety event investigations (HM-SBP1)

For any given clinical setting, demonstrate a working knowledge of (HM-SBP1):

- The most common patient safety events in that environment
- How to report adverse events and near misses
- Where to seek assistance when a patient safety event occurs
- Patient Safety goals and resources available (or how to access)
- How to access and utilize quality metrics and benchmarks related to that patient population
- Priorities in addressing health care disparities common to that clinical population (or how to access)
- Strategies to mitigate health care literacy limitations such as teach back (HM-ICS1)
- How to access appropriate language translation services for relevant patient population (HM-ICS1)
- The process for providing feedback on a reported patient safety event

Consistently demonstrate and role model:

- Reporting of adverse events/near misses/close calls (HM-SBP1)
- Disclosure of safety events to patients and families (HM-SBP1)
- Managing the immediate harm of an ongoing patient safety event (e.g., gathering information,
- Patient Handoffs that include: (HM-SBP2)
 - $\circ\;$ Summary statement of current patient circumstances and context
 - o Active issues, including current and anticipated problems
 - If then contingency planning
 - $\circ\;$ Follow-up recommendations for any tests, procedures or treatments
 - $\circ\;$ Active listening and interactive questioning
 - $\circ~$ Readback where appropriate
 - $\circ~$ Patient concerns and considerations

QUALITY IMPROVEMENT

- Use common tools to inform QI efforts (HM-SBP1)
- Design and implement a small test of change (utilizing change principles) to improve some aspect of
- Interpret QI data to distinguish significant change from random variation (HM-SBP1)
- Lead change to enhance systems for high value efficient and effective patient care (HM-SBP3)
- Consider cost and patient access when practicing medicine (HM-SBP3)
- Consider the ethical differences and governing practices between QI projects and research projects,

Experience and meaningfully participate in (HM-SBP1):

- Quality improvement projects, including:
 - $\circ~$ Assessment and follow-up of interventions
 - $\circ~$ Ability to distinguish significant change from random variation
 - o Ability to articulate and explain the methods and approaches used including, but not limited to:

Consistently demonstrate and role model the following practice improvement skills:

- Use practice data to develop and measure the effectiveness of a learning plan and improve it when
- Identify the factors that contribute to the gaps between expectations and actual performance (HM-PBLI2)
- Analyze, reflect on, and institute behavioral changes to narrow the gaps between expectations and actual

COMMUNICATION AND TEAMING

Consistently demonstrate and role model:

- Communicating in a way that values input from all healthcare team members, resolving conflict when
- Communicating in a clear, organized, concise, and timely way, and incudes anticipatory guidance (HM-
- Requesting a consultation in organized succinct respectful and timely manner (HM-ICS2)
- Engaging in timely direct and respectful communication among primary and consulting teams (HM-ICS2)
- Coordinating recommendations from different members of the healthcare team to optimize patient care
- Accurate and appropriate documentation in the patient's record (HM-ICS3)
- Effectively working as an interprofessional team member (HM-ICS2)
- Practicing shared decision-making and informed consent with patients and families (HM-ICS1)
- Participate as a team member with patients and families in efforts to improve quality and safety (HM-ICS1)

• Effective coordination of patient centered care (HM-ICS1/2)

POPULATION HEALTH AND HEALTH EQUITY

Consistently demonstrate and role model:

- Identification of population and community health needs and disparities (HM-SBP2)
- Supporting innovations and advocating for populations for community with healthcare inequities
- Exploring ways in which community health priorities can be used to inform improvement opportunities
- The use of referral to local resources to effectively meet the needs of patients and patient populations
- Participating in changing and adapting practice to provide for the needs of specific populations (HMSBP2)
- Recognition of ways the health system influences health and health care inequities of its local patient
- Management of the interrelated components of the healthcare system for efficient and effective care (HM-
- Advocating for change to enhance systems for high value, efficient and effective care (HM-SBP3)
- Collection and integration of data regarding social determinants of health when taking a patient's history
- Use of stratified quality improvement data to guide and monitor QI interventions (HM-SBP1)
- Identification and minimization of biases in clinical decision making (HM-ICS1)

References:

<u>CLER Pathways to Excellence: Expectations for an Optimal Clinical Learning Environment to Achieve Safe and ACGME Institutional Requirements</u> <u>ACGME Common Program Requirements</u> <u>AAMC Quality Improvement and Patient Safety Competencies (QIPS)</u> ACGME Harmonized Milestones

Learning Objective Patient Safety	IHI Module	SIU QIPS Recorded Session	OGME Institutional Curriculum/Activity	Hospital QIPS Staff	SIU Medicine Staff	MMC Executive White Belt Program	SJH Team STEPPS	SOAR
KNOWLEDGE BASED OBJECTIVES								
Define, discuss and meaningfully explain the following <u>Patient Safety</u>	T	1	1	-	T	-	-	
Culture of safety	PS101, PS104, PS202, PS203	<u>PS for New</u> <u>Residents</u>						
IOM's Six Aims of Quality Health Care	QI101, QI102, T102					х		
James Reason's Swiss cheese model of system failure	PS102	PS for New Residents	Mock RCA					
Human error and the limits of human performance	PS102, PS103							
Differential approach to preventable adverse events in a just-culture framework	PS102, PS103							
Components and tools of an inter-professional patient safety event investigation (commonly called a Root Cause Analysis (RCA) or systematic analysis) Review by inter-professional team Detailed analysis of systems and processes Identification of potential systems changes Implementation of an action plan Follow-up evaluation of the actions	PS201	<u>QIPS:</u> <u>Medical</u> <u>Errors</u>	Mock RCA	Х				
The full range of reportable events Events with harm Near Misses (potential for harm but did not reach the patient) Unsafe conditions Unexpected deterioration Complications			Mock RCA	Х				

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		<u>QIPS:</u>	Patient					
Disclosure of adverse events to patients and families	PS105	<u>Medical</u>	Simulation					
		<u>Errors</u>						
The difference between a patient safety investigation and peer			<u>Relevent</u>					
review/M&M and understanding that the aforementioned processes			<u>Issues in</u>	х				
			<u>Law &</u>	^				
are free of reprisal			Medicine					
BEHAVIORAL OBJECTIVES								
Consistently demonstrate and role model the practice of:								
Infection control standards and precautions including (HM-PROF1/2):								
Hand hygiene								
Proper use of personal protective equipment								
Sharps disposal								
Timely follow-up of injuries or exposures								
Appropriate reporting of injuries and exposures and understanding								
that this role should not be delegated to other staff								
Common tools for patient safety including (HM-PROF1/2):								
Time outs								
Checklists	PS104							
Medication reconciliation	P3104							
Decision support tools								
Standardized sign-out lists								
Self-Care, including (HM-PROF 3):			<u>Mental</u>					
Seeking help when feeling overwhelmed or in need of support			<u>Health</u>					
Debriefing with team members after difficult clinical encounters	PS105		Resources					
Knowing how to obtain mental health resources			on OGME					
Recognizing and intervening when colleagues need support			<u>Webpage</u>					
Meaningful participation in interprofessional patient safety event	DC201							
investigations (HM-SBP1)	PS201							
For any given clinical setting, demonstrate a working knowledge of		•	•					
		QIPS:						
		Safety in			.,			
The most common patient safety events in that environment		Specific		Х	Х			
		Settings						
How to report adverse events and near misses		2011.20	Mock RCA					
	1		New					
Where to seek assistance when a patient safety event occurs	PS105		Resident	х				
			Orientation	- •				
	1	L	Sheritation			1		

Patient Safety goals and resources available (or how to access)	PS202		New Resident Orientation	х		
How to access and utilize quality metrics and benchmarks related to that patient population	QI104					
Priorities in addressing health care disparities common to that clinical population (or how to access)						
Strategies to mitigate health care literacy limitations such as teach back (HM-ICS1)	PFC101, PFC102					
How to access appropriate language translation services for relevant patient population (HM-ICS1)	PFC102					
The process for providing feedback on a reported patient safety event						
Consistently demonstrate and role model:		-			 	
Reporting of adverse events/near misses/close calls (HM-SBP1)						
Disclosure of safety events to patients and families (HM-SBP1)	PS105	<u>QIPS:</u> <u>Medical</u> <u>Errors</u>	Patient Simulation			
Managing the immediate harm of an ongoing patient safety event (e.g., gathering information, communicating safety plan)	PS201		Mock RCA			
Patient Handoffs that include: (HM-SBP2) Summary statement of current patient circumstances and context Active issues, including current and anticipated problems If - then contingency planning Follow-up recommendations for any tests, procedures or treatments Active listening and interactive questioning Readback where appropriate Patient concerns and considerations	PS104	<u>QIPS: TOC</u> <u>&</u> <u>Communic</u> <u>ation</u>	New Resident Orientation <u>GMEC TOC</u> <u>Policy</u> <u>Readback</u> Poster			

Learning Objective Quality Improvement KNOWLEDGE BASED OBJECTIVES	IHI Module	SIU QIPS Recorded Session	OGME Institutional Curriculum/Activity	Hospital QIPS Staff	SIU Medicine Staff	MMC Executive White Belt Program	SJH Team STEPPS	SOAR
Define, discuss and meaningfully explain the following								
Lean						Х		
Six Sigma						Х		
PDSA cycle	QI102- QI105, QI201	<u>QIPS:</u> <u>Research</u> <u>vs QI</u>				х		
TeamSTEPPS		QIPS: TOC <u>&</u> <u>Communi</u> <u>cation</u>					х	
Variation	QI104	<u>QIPS:</u> <u>Clinical</u> Variation				х		
Flow Chart						Х		
Process Map						Х		
Fishbone Diagram						Future state		
Learning from Defects tool								
Define, meaningfully discuss and demonstrate (where applicable)		_						-
Health care disparities, including:	4		New Resident					
Social determinants of health (HM-SBP2)			Orientation,					
Cultural competence or humility (HM-ICS1)	TA101,		Social		х			
The role of implicit bias (HM-ICS1)	T102		Determinants of Health					
Stratification of quality measures (HM-SBP1)			Curriculum					

BEHAVIORAL OBJECTIVES					
Use common tools to inform QI efforts (HM-SBP1)				Х	
Design and implement a small test of change (utilizing change					
principles) to improve some aspect of individual or system				Х	
performance (i.e. PDSA) (HM-SBP1)					
Interpret QI data to distinguish significant change from random				х	
variation (HM-SBP1)				~	
Lead change to enhance systems for high value efficient and effective	QI202				х
patient care (HM-SBP3)	QIZUZ				^
Consider cost and patient access when practicing medicine (HM-	TA103				
SBP3)	TAIUS				
Consider the ethical differences and governing practices between QI					
projects and research projects, including when to utilize institutional					Х
review board (IRB) (HM-PROF1/2)					
Experience and meaningfully participate in (HM-SBP1):					
Quality improvement projects, including:	QI105	QI Poster		х	х
	4.200	Competition			~
Assessment and follow-up of interventions				Х	Х
Ability to distinguish significant change from random variation				Х	Х
Ability to articulate and explain the methods and approaches used					
including, but not limited to: interpreting of QI data that may be				Х	Х
displayed in run charts or process-control charts					
Consistently demonstrate and role model the following practice					
Use practice data to develop and measure the effectiveness of a					х
learning plan and improve it when necessary (HM-PBLI2)					Λ
Identify the factors that contribute to the gaps between expectations	PFC101	QI & Pop			
and actual performance (HM-PBLI2)		Health Forum			
Analyze, reflect on, and institute behavioral changes to narrow the					
gaps between expectations and actual performance (HM-PBL2)					

Learning Objective	IHI Module	SIU QIPS Recorded Session	OGME Institutional Curriculum/Activity	Hospital QIPS Staff	SIU Medicine Staff	MMC Executive White Belt Program	SJH Team STEPPS	SOAR
Communication & Teaming BEHAVIORAL OBJECTIVES								
Consistently demonstrate and role model:								
Communicating in a way that values input from all healthcare team members, resolving conflict when needed (HM-ICS2)	L101, PS104							
Communicating in a clear, organized, concise, and timely way, and incudes anticipatory guidance (HM-ICS3)								
Requesting a consultation in organized succinct respectful and timely manner (HM-ICS2)								
Engaging in timely direct and respectful communication among primary and consulting teams (HM-ICS2)								
Coordinating recommendations from different members of the	L101,							
healthcare team to optimize patient care (HM-ICS2)	PS104							
Accurate and appropriate documentation in the patient's record (HM-ICS3)			Relevant Issues in Law & Medicine					
Effectively working as an interprofessional team member (HM-ICS2)	L101, PFC102, PFC201, PS104							
Practicing shared decision-making and informed consent with patients and families (HM-ICS1)	PFC101, PS202							
Participate as a team member with patients and families in efforts to improve quality and safety (HM-ICS1)	PFC101, PFC102, PS101, PS104, PS202							
Effective coordination of patient centered care (HM-ICS1/2)	PFC 101, PFC 102							

Learning Objective Population Health & Health Equity	IHI Module	SIU QIPS Recorded Session	OGME Institutional Curriculum/Activity	Hospital QIPS Staff	SIU Medicine Staff	MMC Executive White Belt Program	SJH Team STEPPS	SOAR
BEHAVIORAL OBJECTIVES								
Consistently demonstrate and role model:								
Identification of population and community health needs and disparities (HM-SBP2)			QI & Pop Health Forum					
Supporting innovations and advocating for populations for community with healthcare inequities (HMSBP2)								
Exploring ways in which community health priorities can be used to inform improvement opportunities (HM-SBP2)			QI & Pop Health Forum					
The use of referral to local resources to effectively meet the needs of patients and patient populations (HM-SBP2)								
Participating in changing and adapting practice to provide for the needs of specific populations (HMSBP2)								
Recognition of ways the health system influences health and health care inequities of its local patient population (HM-SBP3)	PFC101							
Management of the interrelated components of the healthcare system for efficient and effective care (HM-SBP3)			QI & Pop Health Forum					
Advocating for change to enhance systems for high value, efficient and effective care (HM-SBP3)	TA103		QI & Pop Health Forum					
Collection and integration of data regarding social determinants of health when taking a patient's history (HM-SBP2)								
Use of stratified quality improvement data to guide and monitor QI interventions (HM-SBP1)								
Identification and minimization of biases in clinical decision making (HM-ICS1)	PFC101							
SIU SOM's Population Science & Policy Curriculum								

Patient Safety and Quality Improvement Contact and Activity Information

as of January 2021

Activity/Event	Frequency of Activity	Contact Person	Contact Information
Medicolegal Session: Relevant Issues in	Video available on OGME	GME Office	<u>nworkman@siumed.edu</u>
Law & Medicine	Webpage		
Memorial Executive White Belt Program	Offered Annually	Raj Mitra	hill.kelly@mhsil.com
Memorial PS Staff		Lindsay Price	Price.Lindsay@mhsil.com
		Lance Millburg	Millburg.Lance@mhsil.com
Mock RCA	Offered 3 times Annually	GME Office	nworkman@siumed.edu
New Resident Orientation	Offered Annually in June	GME Office	nworkman@siumed.edu
QI & Population Health Forum	Offered Annually	GME Office	nworkman@siumed.edu
QI Poster/Project Competition (Residents and Fellows)	Offered Annually in Spring	GME Office	nworkman@siumed.edu
Social Determinants of Health/Healthcare	Consultation upon request	Office of Population	psp@siumed.edu
Disparities	Curriculum Available	GME Office	nworkman@siumed.edu
SOAR (Statistics, Outcomes and Analytical Research)	Ongoing	Lance Millburg	Millburg.Lance@mhsil.com
St. John's TeamSTEPPS	Available Upon Request	Shelly Meyers	Shelly.Meyers@hshs.org