

Western Reserve Hospital Summer Quality Improvement Fellowship Program

WRH Contacts: Ron Russ D.O. FACOFP

330-971-7615

russ@ohio.edu

Linda Faris BSN MEd CIC CPHQ

330-971-7165

lfaris@westernreservehospital.org

OUHCOM Contacts: Grace Brannan Ph.D.

brannang@ohio.edu

Karen Collins MPA

collink3@ohio.edu

Purpose:

The purpose of this experience is to gain exposure in the hospital environment to the quality, service and safety processes that are necessary for proper functioning of a medical facility. This shall be accomplished through attendance at hospital meetings / workgroups, completion of basic quality improvement online resources, and weekly feedback and reflection by the participant. There will also be clinical shadowing experiences in different hospital areas for the participant to gain additional experience in the QI and safety processes.

Stipend:

\$1200 – paid ½ after completion of 2nd week of experience, and final ½ at end of fellowship

Length:

6 weeks, after 2nd semester of 1st year

Housing:

Free (in student housing complex)

Meals:

\$50 / week meal allowance through use of medical student swipe-badge

Fellow requirements:

Participant should be in good standing with OUHCOM and have successfully completed the first year of curriculum. The student selected for participation in this program must apply online and show documentation of the following before beginning the experience:

Up-to-date immunization record

Proof of current Tb test completion

Orientation:

During the Summer Quality Improvement Orientation, the Fellow will read, review and sign the Experiential Learning Program Guidelines and Safety Information Agreement Form. This document outlines the responsibilities and expectations necessary of WRH experiential learners. This document will be reviewed during the QI orientation. The following items will also be reviewed in detail.

1) Schedule:

Calendar shared (with invitation) online: link activated 2 weeks before start

Details to the calendar may be changed at any time due to personnel needs or room availability. It is recommended that the QI Fellow check the calendar daily for the most up-to-date information

2) Modules:

a. Institute for Healthcare Improvement –

- i. [IHI Basic Certificate Course - \(red\)](#) – minimum requirement for QI fellowship
- ii. all modules – participant option

Participants must register (free), modules free for students

(15-30 minutes per module est.)

Quality Improvement (QI) [101, 102, 103, 104, 105, 106](#), 201, 202

Patient Safety (PS) [100, 101, 102, 103, 104, 105, 106](#), 201, 202

Leadership (L) [101](#)

Patient- and Family-Centered Care (PFC) [101](#), 102, 103

Quality Cost and Value (QCV) 100, [101](#)

Triple Aim for Populations (TA) 101, 102

Graduate Medical Education 1,2,3,4,5,6,7

** See attachment 1 for a more complete explanation of IHI modules

- b. American College of Physicians High Value Care (HVC) modules 3.0

http://hvc.acponline.org/curriculum_list.html registration not necessary

(5-10 minutes per module est.)

1. Eliminating Healthcare Waste & Over-ordering of Tests
2. Healthcare Costs & Payment Models
3. Utilizing Biostatistics in Diagnosis, Screening and Prevention
4. High Value Medication Prescribing
5. Overcoming Barriers to High Value Care
6. High Value Quality Improvement Project

** see attachment 2 for a more complete explanation of the HVC modules

- 3) Meetings: The following meeting will be attended during the 6 week experience. Attendance is necessary for the Fellow to begin the basic understanding of the interdisciplinary nature of quality and the impact QI can have in the hospital setting.

Cancer Conference: resident led review of oncological cases with expert opinions on proper patient care and follow up.

Case Management Meeting: daily bedside review of in-house patients for discharge planning, needs and goals.

Chest Pain meeting: monthly meeting with focus on metrics and quality data to meet Chest pain accreditation

Continuous Service Readiness: monthly multi-disciplinary accreditation task-force to optimize preparedness for all surveys, including the triennial Healthcare Facilities Accreditation Program (HFAP).

Department of Surgery Meeting: semi-annual meeting of the department of surgery with review of all items pertaining to the delivery of surgical services to patients focusing on cost, quality and outcomes.

Emergency Department (ED) Operations: physician-led review of all ED data, including trainees, Emergency Medical Squads (EMS), quality, systems communications and patient satisfaction.

Emergency Preparedness Committee: every other month review of disaster readiness with respect to drills, as well as policies and procedures that pertain to mass casualty disasters.

EMR / Forms Management meeting: monthly planning and education related to all medical record forms / EMR templates used in clinical areas

Environment of Care Meeting: every other monthly safety focused meeting to review protective services incidents, fire drills, life-safety issues and employee incidents, as well as the policies and procedures that pertain to these items

Graduate Medical Education (GME) Committee: monthly review of all items pertaining to the training and accreditation of medical residents and student trainees.

Hospital Operations: every other month meeting of select hospital leaders for review of current operations and innovation for potential hospital outreach

Infection Control Risk Assessment (ICRA): bi-weekly review of hospital-wide construction and renovation for protection of patients, staff and visitors.

Intensive Care Unit (ICU) Multi-disciplinary Rounds: daily review of all patients in the ICU, including ICU Intensivist, medical resident, medical students nursing, respiratory therapy, dietary, physical therapy, pharmacy, case management, quality improvement and palliative care services

Morbidity and Mortality Committee (M & M): monthly presentation of patient cases in which a mortality occurred, or in which a significant morbidity factor was identified. There is both a surgical and medical M&M committee with focus from this area.

Mortality Committee: monthly administrative review of patient records which pertain to mortality cases and preparation of these records for presentation at monthly physician morbidity and mortality committee meetings

Nursing Quality Meeting: review of nursing quality indicators and projects with focus on peer review and actionable items

Patient Safety Coach Meeting: every other month team meeting of hospital wide department representatives that submit observations of compliance with safety behaviors with a focus on improvement

Patient Safety Council: multi-disciplinary committee that reviews patient safety indicators and specific patient safety projects

Patient Safety Huddle: twice weekly informal administrative meeting to review key parameters of patient safety with a focus on communication and action

PPEC Committee: monthly physician peer review meeting with regards to unusual behaviors, outcomes or professional activities

Quality Council: administrative multi-disciplinary oversight committee with review of all quality indicators, projects and actions

Quality Improvement Huddle: informal weekly departmental review of quality issues, including physician complaints, and physician opportunities for improvement

Recruitment Committee: monthly meeting to discuss medical student recruitment strategy as well as the retention of CORE based medical students into WRH residency programs. Retention of residents and well as local, state and national recognition of trainees and attending physicians is also discussed

Revenue Cycle: monthly review of appeals, denials, and other issues related to the financial performance of a healthcare facility and third party payers

Safety Rounds – weekly observational rounds on patient care areas for compliance with HFAP standards

Service Excellence Council: quarterly review of patient satisfaction data and actionable items related to the patient experience

Stroke Team Committee: every other month meeting of all stroke team leaders including clinical and non-clinical to review stroke protocol and statistical outcomes

Unusual Occurrence Meeting: monthly review of unusual occurrences, medication errors and adverse drug reactions for trending, tracking and educational opportunities

Utilization Review Committee: physician led data review of utilization statistics, including readmissions, avoidable days, audits, and medical records

Value Analysis Committee: monthly review of products, new equipment, and capital purchases related to patient care

Research:

There is no required research outcome or publication that is expected. However, if opportunity arises for participation in any original or ongoing research project, it is expected that the participant follow all established protocols / policies through both OUHCOM and Summa in regards to IRB notification and qualifications.

Future Ideas:

The following are concepts that may be developed during the 6 week experience. We would be happy to work with you, but cannot guarantee that any of these ideas (or ideas of your own) may come to fruition:

IHI Open School Chapter Leader??

Project extension through 2nd year and into 3rd year?

Pre-CHAP assignment through QI fellowship completion?

Improvement Capability

QI 101: Fundamentals of Improvement

Lesson 1: Errors Can Happen Anywhere — and to Anyone

Lesson 2: Health Care Today

Lesson 3: The Institute of Medicine's Aims for Improvement

Lesson 4: How to Get from Here to There: Changing Systems

QI 102: The Model for Improvement: Your Engine for Change

Lesson 1: An Overview of the Model for Improvement

Lesson 2: Setting an Aim

Lesson 3: Choosing Measures

Lesson 4: Developing Changes

Lesson 5: Testing Changes

QI 103: Measuring for Improvement

Lesson 1: How to Plan for Data Collection

Lesson 2: How to Display Data on a Run Chart

Lesson 3: Using Run and Control Charts to Understand Variation

QI 104: The Life Cycle of a Quality Improvement Project

Lesson 1: The Four Phases of a Quality Improvement Project

Lesson 2: Spreading Changes

Lesson 3: Case Study in Spreading Innovations: Transforming Care at the Bedside

QI 105: The Human Side of Quality Improvement

Lesson 1: Overcoming Resistance to Change

Lesson 2: What Motivates People to Change

Lesson 3: Culture Change Versus Process Change

QI 106: Mastering PDSA Cycles and Run Charts

Lesson 1: Using a PDSA Template for Tests of Change

Lesson 2: A Deeper Dive into PDSA

Lesson 3: Using a Run Chart Template to Display Data

Lesson 4: A Deeper Dive into Run Charts

QI 201: Guide to the IHI Open School Quality Improvement Practicum

Lesson 1: Putting Quality Improvement into Practice

Lesson 2: Starting Your Project

Lesson 3: Looking for Changes? Try Cause and Effect Diagrams

Lesson 4: Spell Improvement with P-D-S-A

Lesson 5: Data: Collect and Display

Lesson 6: Summarizing Your Project

QI 202: Quality Improvement in Action: Stories from the Field

Lesson 1: The Challenges of Quality Improvement

Lesson 2: Strategies to Sustain Your Quality Improvement Journey

Lesson 3: Stories of Improvement Success

Patient Safety

PS 100: Introduction to Patient Safety

Lesson 1: Understanding Medical Error and Patient Safety

Lesson 2: Responding to Errors and Harm

Lesson 3: A Call to Action — What YOU Can Do

PS 101: Fundamentals of Patient Safety

Lesson 1: The Swiss Cheese Model

Lesson 2: Understanding Unsafe Acts

Lesson 3: A Closer Look at Harm

PS 102: Human Factors and Safety

Lesson 1: Understanding the Science of Human Factors

Lesson 2: Changes Based on Human Factors Design Principles

Lesson 3: Using Technology to Mitigate the Impact of Error

PS 103: Teamwork and Communication

Lesson 1: Why Are Teamwork and Communication Important?

Lesson 2: Basic Tools and Techniques

Lesson 3: Communication During Times of Transition

Lesson 4: Developing and Executing Effective Plans

PS 104: Root Cause and Systems Analysis

Lesson 1: Root Cause Analysis Helps Us Learn from Errors

Lesson 2: How a Root Cause Analysis Works

Lesson 3: How Root Cause Analysis Can Help Improve Health Care

PS 105: Communicating with Patients after Adverse Events

Lesson 1: The Importance of Communication When Things Go Wrong

Lesson 2: Responding to an Adverse Event: A Step-by-Step Approach

Lesson 3: The Impact of Adverse Events on Caregivers: The Second Victim

Lesson 4: The Apology

Lesson 5: To Communicate or Not to Communicate

PS 106: Introduction to the Culture of Safety

Lesson 1: The Power of Speaking Up

Lesson 2: What Is a Culture of Safety?

Lesson 3: How Can You Contribute to a Culture of Safety?

PS 201: Partnering to Heal: Teaming Up Against Healthcare-Associated Infections

PS 202: Preventing Pressure Ulcers

Lesson 1: Why Work on Preventing Pressure Ulcers?

Lesson 2: Assessing Patients

Lesson 3: Responding to Patients

Lesson 4: How to Implement a Pressure Ulcer Prevention Program

Leadership

L 101: Becoming a Leader in Health Care

Lesson 1: Taking the Leadership Stance

Lesson 2: The Leadership Stance Is Not a Pose

Lesson 3: Influence, Persuasion, and Leadership

Lesson 4: Measuring Leadership

Person- and Family-Centered Care

PFC 101: Dignity and Respect

Lesson 1: An Introduction to Patient- and Family-Centered Care

Lesson 2: First Impressions

Lesson 3: Privacy and Confidentiality

Lesson 4: Culture and Belief Systems

Lesson 5: Creating a Restful and Healing Environment

PFC 102: A Guide to Shadowing: Seeing Care Through the Eyes of Patients and Families

PFC 103: Having the Conversation: Basic Skills for Conversations about End-of-Life Care

Lesson 1: Conversation: An Essential Element of Good End-of-Life Care

Lesson 2: The Conversation Begins with You

Lesson 3: Understanding and Respecting Your Patients' Wishes

Lesson 4: Changing the Culture: Better Ways to Care for Patients Nearing the End of Life

Quality Cost and Value

QCV 100: An Introduction to Quality, Cost, and Value in Health Care

QCV 101: Achieving Breakthrough Quality, Access, and Affordability

Lesson 1: Two Mustangs

Lesson 2: How to Make Complex Systems Fail

Lesson 3: Solving Problems in Complex Systems

Triple Aim for Populations

TA 101: Introduction to Population Health

Lesson 1: What is Population Health?

Lesson 2: The Small (But Powerful!) Impact of Health Care

Lesson 3: Population Health in Action

TA 102: Improving Health Equity

Lesson 1: Understanding Health Disparities

Lesson 2: Initiatives to Improve Health Equity

Lesson 3: Your Role in Improving Health Equity

Graduate Medical Education

GME 1: Why Engage Trainees in Quality and Safety?

GME 2: A Guide to the Clinical Learning Environment Review (CLER) Program

GME 3: The Faculty Role: Understanding & Modeling Fundamentals of Quality & Safety

GME 4: The Role of Didactic Learning in Quality Improvement

GME 5: A Roadmap for Facilitating Experiential Learning in Quality Improvement

GME 6: Aligning Graduate Medical Education with Organizational Quality & Safety Goals

GME 7: Faculty Advisor Guide to the IHI Open School Quality Improvement Practicum



1. Eliminating Healthcare Waste and Over-ordering of Tests [Download](#)

- [Eliminating Healthcare Waste and Over-ordering of Tests](#)
 - [Small Group Worksheet: Syncope](#)
 - [Facilitators Guide](#)
-



2. Healthcare Costs and Payment Models [Download](#)

- [Healthcare Costs and Payment Models](#)
 - [Facilitators Guide](#)
-



3. High Value Diagnostic Testing and Cancer Screening [Download](#)

- [High Value Diagnostic Testing and Cancer Screening](#)
 - [Small Group Worksheet - Cases](#)
 - [Screening Value Cases](#)
 - [Likelihood Ratios Handout](#)
 - [Facilitators Guide](#)
-



4. High Value Hospitalization [Download](#)

- [High Value Hospitalization](#)
 - [Medical Reconciliation for Case 3](#)
 - [Facilitators Guide](#)
-



5. Overcoming Barriers to High Value Care [Download](#)

- [Overcoming Barriers to High Value Care](#)
 - [High Value Care Conversation Guide](#)
 - [Facilitators Guide](#)
-



6. High Value Quality Improvement [Download](#)

- [High Value Quality Improvement](#)
- [Facilitators Guide](#)

