

Office of Graduate Medical Education

West Virginia University School of Medicine

POLICY ON HEALTHCARE QUALITY

I. Rationale

In accordance to the ACGME Clinical Learning Environment Review (CLER), the West Virginia University Office of Graduate Medical Education must ensure that residents are engaged in quality improvement activities. CLER consist of regular site visits that entail site visitor participation in programs or institutional quality assurance and quality improvement activities.

II. Definition

Quality improvement activities include active participation on a Quality Improvement committee through at least one of the following:

1. Planning;
2. Implementation;
3. Analysis of an intervention on a practice outcome;
4. Incorporation into practice if improvement has occurred;
5. Initiation of a new Plan-Do-Study-Act (PDSA) cycle if improvement has not occurred.

Adapted from: Program Director Guide to the Common Program Requirements, 2012

III. Scope

This policy applies to all graduate medical education programs sponsored by the West Virginia University School of Medicine.

III. Policy

- A. Programs should encourage and support residents and/or fellows participation in the following West Virginia University Healthcare quality and safety committees:

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| 1. Blood Utilization | 11. Pain Management |
| 2. Cancer Review | 12. Peer Review |
| 3. Care Management Steering | 13. Pharmacy, Nutrition, &
Therapeutics |
| 4. Carotid Angioplasty | 14. Practitioner Health |
| 5. CPR | 15. Quality & Patient Safety |
| 6. Ethics | 16. Council of Surgical Chairs |
| 7. Infection Control | 17. Quality of Care |
| 8. Legal E.H.R. | 18. Performance Improvement |
| 9. Med Exec | |
| 10. Ongoing Professional
Practice | |

Office of Graduate Medical Education

West Virginia University School of Medicine

- B. Programs must develop policies to ensure all residents and fellows are instructed in quality improvement, and, are involved in quality improvement activities.
1. Programs must incorporate quality improvement instruction into its curriculum.
 2. All residents and fellows must complete the WVU Office of Graduate Medical Education assigned self-directed modules from the Institute for Healthcare Improvement (IHI) Open School.
 3. It is recommended that residents and fellows receive additional instruction in the form of small or large group discussions or workshops.
 4. Alternate format of instruction must be submitted for review by the WVU Office of Graduate Medical Education Quality Improvement Subcommittee.
 5. Programs must ensure each resident or fellow is engaged in quality improvement activities. The level of participation can vary depending on the activity.

Adapted from: Common Program Requirements VI.A.3. The program director must ensure that residents are integrated and actively participate in interdisciplinary clinical quality improvement and patient safety programs. ^(Core)

- C. Programs must develop competency-based goals and objectives that pertain to instruction in quality improvement and participation of resident or fellows in quality improvement activities.

Adapted from: Program Director Guide to the Common Program Requirements, 2012. Each assignment in which the resident is expected to participate must have a set of competency-based goals and objectives. Assignment refers to each rotation, scheduled recurring sessions such as M&M conferences, journal club, grand rounds, simulated learning experience, lecture series, and required resident projects such as a quality improvement project that are not explicitly part of a recurring session or rotation.

- D. Programs, through the Program Evaluation Committee (PEC), must evaluate instruction in quality improvement and participation of resident or fellows in quality improvement activities at least annually.
1. Residents and fellows must have the opportunity to evaluate instruction in quality improvement confidentially and in writing.
 2. Programs must provide a report of resident or fellow quality improvement activities to the Office of Graduate Medical Education. This includes submission and acceptance to the West Virginia University Quality and Safety Fair and other regional or national conferences.

Office of Graduate Medical Education

West Virginia University School of Medicine

III. Evaluation

- A. Monitor resident and fellow completion of mandatory IHI Learning Modules.
- B. Monitor resident and fellow scores and passing and failing rate in the IHI Learning Modules post-test.
- C. Quantity and Quality of projects submitted from consideration to the GME and WVUH Quality and Safety Fair.

Approved by GMEC – 11/18/2016

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APPENDIX A: Quality Improvement Curriculum

Periods	Step 1: Basic	Step 2: Advanced
1. <i>Why did you start?</i> Activity: <ul style="list-style-type: none"> Identify a local problem or intended improvement Goal: <ul style="list-style-type: none"> Identify a Clinical Aim 	QI 101: Introduction to Health Care Improvement <ul style="list-style-type: none"> Lesson 1: The Institute of Medicine's Aims for Improvement (30 minutes) QI 102: The Model for Improvement: Your Engine for Change <ul style="list-style-type: none"> Lesson 1: An Overview of the Model for Improvement (15 minutes) Lesson 2: Setting an Aim (15 minutes) 	QI 105: Leading Quality Improvement <ul style="list-style-type: none"> Lesson 1: The Four Phases of a Quality Improvement Project (25 minutes) Lesson 3: Working with Interdisciplinary Team Members (25 minutes) QI 301: Guide to the IHI Open School Quality Improvement Practicum <ul style="list-style-type: none"> Lesson 1: Putting Quality Improvement into Practice (15 minutes)
2. <i>What did you do?</i> Activity: <ul style="list-style-type: none"> Identify the clinical setting and patient group that will be affected by your Clinical Aim Planning the study of the intervention Goal: <ul style="list-style-type: none"> Create a Process map or Key driver diagram PDSA Cycle 	QI 102: The Model for Improvement: Your Engine for Change <ul style="list-style-type: none"> Lesson 3: Choosing Measure (20 minutes) Lesson 4: Developing Changes (20 minutes) Lesson 5: Testing Changes (20 minutes) QI 103: Testing and Measuring Changes with PDSA Cycles <ul style="list-style-type: none"> Lesson 1: How to Define Measures and Collect Data (25 minutes) 	QI 301: Guide to the IHI Open School Quality Improvement Practicum <ul style="list-style-type: none"> Lesson 3: Looking for Changes? Try Cause and Effect Diagrams (10 minutes) QI 105: Leading Quality Improvement <ul style="list-style-type: none"> Lesson 2: Change Psychology and the Human Side of Quality Improvement (25 minutes) Lesson 4: Spell Improvement with P-D-S-A (15 minutes) QI 201: Planning for Spread: From Local Improvement to System-Wide Changes <ul style="list-style-type: none"> Lesson 2: How change spreads (20 minutes)

Office of Graduate Medical Education
West Virginia University School of Medicine

Periods	Step 1: Basic	Step 2: Advanced
3. What did you find? Activity and Goal: <ul style="list-style-type: none"> Graphs of measurement over time (e.g. run charts or control charts) 	QI 103: Testing and Measuring Changes with PDSA Cycles <ul style="list-style-type: none"> Lesson 2: How to Use Data for Improvement (25 minutes) 	QI 104: Interpreting Data: Run Charts, Control Charts, and Other Measurement Tools <ul style="list-style-type: none"> Lesson 1: How to Display Data on a Run Chart (30 minutes) Lesson 2: How to Learn from Run Charts and Control Charts (30 minutes)
4. What do the findings mean? 5. Activity: <ul style="list-style-type: none"> Summarize the most important successes and difficulties in implementing intervention components, and main changes observed in care delivery and clinical outcomes. Explore possible reasons for differences between observed and expected outcomes. Suggest steps that might be modified to improve future performance. Goal: <ul style="list-style-type: none"> Summary and share you "Improvement Story" at The GME Quality Improvement and Safety Fair 		

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