

HARVARD MEDICAL SCHOOL FELLOWSHIP IN QUALITY AND PATIENT SAFETY

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September 19, 2013

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BACKGROUND AND ORIGINS

Across the Harvard institutions, physicians who play leadership roles in quality improvement and patient safety have arrived at those roles through a variety of career paths – Masters in Public Health, General Medicine Fellowships, Systems Engineering.

Most of these leaders had to learn key skills on their own, from each other, and without the benefit of formal training or experience.



NATIONAL NEEDS PHYSICIAN AND ORGANIZATIONAL NEEDS

Efforts to improve the quality of healthcare are an international priority. This endeavor shapes clinical practice, management, research, education, and policy. It generates demand for physician leaders, but few post graduate training programs exist for physicians to acquire expertise in these domains.

The shortage of training programs is a barrier for physicians wishing to specialize in quality and patient safety, and a challenge for organizations to recruit professionals who can lead quality and patient safety initiatives.



HARVARD MEDICAL SCHOOL FELLOWSHIP IN QUALITY AND PATIENT SAFETY

Leadership/Governance

Fellowship Director:

Tejal Gandhi, MD, MPH, NPSF

Curriculum Director and Site Director

Susan Abookire, MD, MPH, Mount Auburn Hospital, Harvard Medical School

Site Directors:

BCH: Mira Irons, MD BIDMC: Kenneth Sands, MD, MPH

BWH: Allen Kachalia, MD, JD MGH: Elizabeth Mort, MD, MPH

CRICO

Luke Sato, MD

HMS FELLOWSHIP IN QUALITY AND PATIENT SAFETY

Goals/Objectives

Understand scientific basis of QI and patient safety, including epidemiology and nature of medical error, quality measurement and data analysis, research and evaluation design, improvement tools and techniques, as well as best practices

Develop competence in designing and conducting QI projects using rigorous methods, the results of which can be communicated through publication

Learn to facilitate/lead healthcare professionals in multi-disciplinary teams

Understand and navigate the complex dynamics of hospitals/ clinical operations

HMS FELLOWSHIP IN QUALITY AND PATIENT SAFETY

Structure (continued)

Fellows participate in Harvard School of Public Health

Program in Clinical Effectiveness

Eligible to obtain an MPH

Fellows participate in weekly seminars

Fellows also participate on a limited number of hospital quality and safety committees in order to better understand and participate in local hospital operations

HARVARD/CRICO FELLOWSHIP IN PATIENT SAFETY AND QUALITY

Curriculum

- Based on ACGME Outcomes Project Framework
- Established Essential Domains of Quality and Patient Safety
- Built consensus on topic areas
- Modeled on ACGME "Milestone" Approach

Charting the Road to Competence: Developmental Milestones for Internal Medicine Residency Training

MICHAEL L. GREEN, MD, MSC EVA M. AAGAARD, MD KELLY J. CAVERZAGIE, MD DAVOREN A. CHICK, MD ERIC HOLMBOE, MD GREGORY KANE, MD CYNTHIA D. SMITH, MD WILLIAM IOBST, MD

Abstract

Background The Accreditation Council for Graduate Medical Education (ACGME) Outcome Project requires that residency program directors objectively document that their residents achieve competence in 6 general dimensions of practice.

Intervention In November 2007, the American Board of Internal Medicine (ABIM) and the ACGME initiated the development of milestones for internal medicine residency training. ABIM and ACGME convened a 33-member milestones task force made up of program directors, experts in evaluation and quality, and representatives of internal medicine stakeholder organizations. This article reports on the development process and the resulting list of proposed milestones for each ACGME competency.

Outcomes The task force adopted the Dreyfus model of skill acquisition as a framework the internal medicine

"competency" level in the 5-step progression by the completion of residency. The task force also developed general recommendations for strategies to evaluate the milestones.

Discussion The milestones resulting from this effort will promote competency-based resident education in internal medicine, and will allow program directors to track the progress of residents and inform decisions regarding promotion and readiness for independent practice. In addition, the milestones may guide curriculum development, suggest specific assessment strategies, provide benchmarks for resident self-directed assessment-seeking, and assist remediation by facilitating identification of specific deficits. Finally, by making explicit the profession's expectations for graduates and providing a degree of national standardization in evaluation, the milestones may improve public accountability for residency

Table 1: Six Core Domains for Quality and Patient Safety Training			
Competency Domain	Examples		
Clinical Effectiveness	Biostatistics, Population Mgmt		
Patient Safety Theory	Error, Root Cause Analysis, Teams		
Quality Improvement	Quality Improvement, LEAN		
System Design	Principles System Design		
Leadership, Self, and Change Management	Leadership, Self- Awareness,		
Healthcare Operations and Policy	Contracts, Revenues		

MILESTONES

Within each of the 6 Primary Domains in Quality and Patient Safety, Milestones were established for acquisition of knowledge, skills and attitudes.

A timeframe within which each milestone should be attained was established.

A total of 77 milestones were developed.



HARVARD/CRICO FELLOWSHIP IN PATIENT SAFETY AND QUALITY

Curriculum format

Weekly seminars

- Didactic training
- Hands-on workshop
- Knowledge
- Skills training
- Project work
- Mentoring

Participants will participate in the Harvard School of Public Health Clinical Effectiveness Program Fellows will be eligible to apply to obtain a Master's degree in Public Health.

ELECTIVE ROTATIONS

- Atrius Health (Ambulatory Care)
- Cambridge Health Alliance
- McLean Hospital
- National Patient Safety Foundation
- ▶ IHI
- Global Health Opportunities



FELLOWS' PROJECTS

Standardizing Preoperative Management of Antithrombotic Therapy (Y. Cheung, MD)

Dissecting Error in the Histology Laboratory

(Y. Kushner, MD)

Improving the Validity and Efficiency of Time-Sensitive Lab Draws (H. Tory, MD)

Ambulatory Patient Safety in the Pediatric Office (I. Zenlea, MD)

CLASS OF 2013-2015

Fellows: Specialty:

Jeffrey Bruckel, MD Internist

Kiran Gupta, MD Internist

Kate Humphrey MD Pediatrician

Mary LaSalvia, MD Infectious Disease

Merranda Logan, MD Nephrologist

Peter Najjar, MD Surgeon

EVALUATION OF PROGRAM AFTER YEAR-1

Fellows' review of site directors, very positive Site directors' review of fellows, very positive Fellows' review of overall program, very positive

- Among comments on program strengths:
 - "exposure to an unparalleled curriculum.."; "mentorship and direct access to so many leaders in QI and patient safety"; "faculty—their excitement, enthusiasm and dedication to this fellowship and to us has been exceptional"; "invaluable networking opportunities".

EVALUATION OF PROGRAM AFTER YEAR-1

(continued)

Among comments on areas for improvement:

"more training on how to walk the line between academics (research) and administrative/operational improvement work"; "somewhat clearer review of expectations and the breakdown between operational experience and research time"

Fellows review of didactics/speakers

- Courses rated highly
- Positive comments towards courses and course directors and speakers

	PHS - Patient Safe Fellow Evaluation of 7/1/2012 - 6/30/2	Program		
Included Status Ty	ypes: Non-accredited1			
Show All Commen	ts			
Question:		Answers:	% Total	
lease rate th	e fellowship program on the following items			
Q1. My fellowship ha safety and qualit	as met my expectations for training and exposure in patient ly	Unsatisfactory 1 Below expectations 2 Meets expectations 3 Exceeds Expectations 4	0% (0) 0% (0) 0% (0) 100% (4)	
Unsatisfactory 1 Below expectations				
	Unsurpassed exposure to diverse and varied health care quality and patient safety issues. So far my fellowship experience has exceeded my expectations for training. The afternoon didactics have been both interesting and informative. Although some of the concepts may not have been new for others with prior exposure, I was a grateful that the program did not assume prior knowledge of quality and safety ideas or vocabulary. PCE was also a great way to start the fellowship—although the work load was challenging I definitely needed the foundation in research and statistics and now fell better equipped to pursue my individual project(s). Fantastic fellowship program. Exceeds my expectations.			
Q2. I am satisfied with the degree of mentorship I have received in my fellowship		Unsatisfactory 1 Below expectations 2	0% (0)	
		Meets expectations 3 Exceeds Expectations 4	100% (4)	
Unsatisfactory 1 Below expectations 2				
Meets expectations 3				