

A Model for Quality Improvement and Patient Safety Programs in Academic Departments of Medicine

The Problem

Academic departments of medicine care for large populations of often underserved patients, conduct research designed to improve medical care, and educate the next generation of physicians. As part of delivering patient care, they must assure that the care they provide is of the highest possible quality. To do this well, they must determine which approaches to care are most effective, and disseminate these practices within the department.

Aim/Goal

To successfully design and implement a comprehensive QI/PS program for the BIDMC Department of Medicine that engages front line clinicians and may serve as a blueprint for other Departments of Medicine.

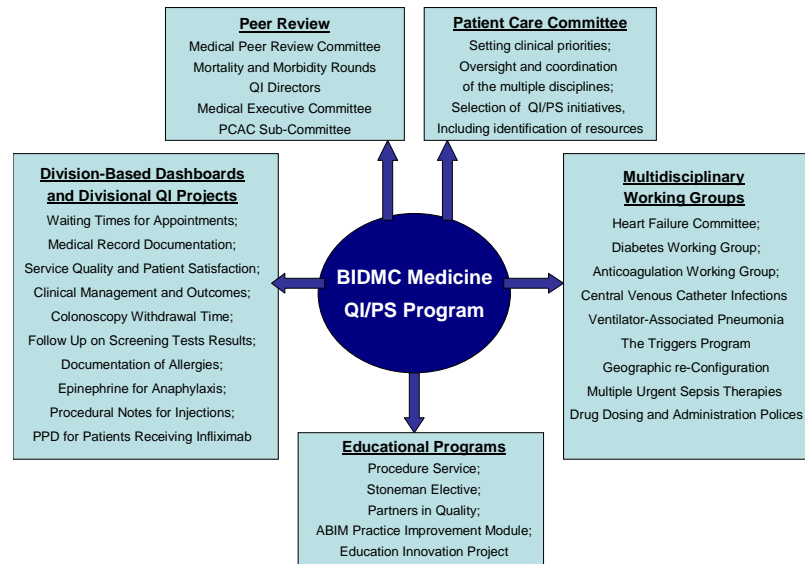
The Team

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The Interventions

Incorporation of quality into departmental operating plan by Chair of Medicine; establishment of Vice Chair of Quality with designated QI administrators; engagement of clinicians from all divisions to serve as local QI leaders; an inter-departmental collaboration with the Hospital's Departments of Health Care Quality, Nursing, Pharmacy, and Information Technology; integration of QI/PS into the teaching programs.

The Medicine QI/PS Program



Lessons Learned

Our experience suggests that key ingredients for a successful Medicine QI/PS program include: direct involvement of leadership; appointment of QI administrators; engagement of clinicians from all disciplines to serve as “QI champions”; an effective approach to dealing with resistance to change; alignment with hospital administration; and an inter-departmental collaboration.

Next Steps:

Broaden focus to outpatient care, particularly with follow up of abnormal test results and verification of referrals for tests and consultations.