3.21 QUALITY IMPROVEMENT

Quality improvement (QI) is the process of continually evaluating existing processes of care and implementing/disseminating best practice. QI is influenced by objective data and focuses on systems change to optimize institutional performance and appropriate resource use. Since the Institute of Medicine released its report “To Err is Human” in 1999, the then fledgling field of hospital medicine and the QI movement have simultaneously evolved and worked synergistically. Hospitalists are uniquely positioned to improve the quality of inpatient care. Hospitalists should strive to lead or participate in QI efforts to optimize management of common inpatient conditions and improve clinical outcomes on the basis of standardized evidence-based practices.

KNOWLEDGE

Hospitalists should be able to:

- Describe the roles of quality and peer review committees in facilitating continuous QI processes.
- Identify structure, process, and outcome measures appropriate for specific QI projects.
- List the characteristics of high-reliability organizations and learning healthcare systems.
- Describe the elements of effective teams and teamwork.
- Describe the relationships among value, quality, and cost.
- Explain different philosophies and techniques for thorough analysis of complex systems, such as root cause analysis, failure mode and effects analysis, Lean, Six-Sigma, Plan-Do-Study-Act, etc.
- Identify and categorize adverse outcomes including sentinel events, medical errors, and near-misses.
- Describe QI outcome measurements currently used by stakeholders and regulatory agencies.
- Identify guidelines and protocols supported by outcomes data to shape and standardize clinical practice.
- Identify the relative strengths and limitations of proposed interventions to address hospital-based QI concerns.
- Identify appropriate institutional systems used to report medical errors, patient safety events, and near-misses.

SKILLS

Hospitalists should be able to:

- Use quality data to inform hospitalist practice and improve patient care at the individual and system levels.
- Distinguish outcome measurements from process measurements.
- Interpret patient satisfaction metrics.
- Incorporate patient preference and satisfaction into the optimization of healthcare quality.
- Identify key stakeholders within individual institutions and work collaboratively in QI endeavors.
- Use common methods to understand, describe, and analyze QI initiatives such as the fishbone diagram and the 5 why’s.
- Apply the results of validated outcome studies to improve the quality of inpatient practice.
- Structure QI initiatives that reflect evidence-based literature and high-quality outcomes data.

ATTITUDES

Hospitalists should be able to:

- Practice patient-centered care and recognize its value in improving patient safety and satisfaction.
- Promote the adoption of new practices, guidelines, and technology as supported by best available evidence.
- Engage in a collaborative multidisciplinary team approach to lead, coordinate, and/or participate in the design and implementation of QI initiatives at individual, practice, and system levels.
- Appreciate the importance and need to align quality goals with institutional and system goals.
- Advocate for and foster a Just Culture around patient safety and QI.