

Improving Colonoscopy Performance

The Problem

Screening colonoscopy can prevent colorectal cancer by the removal of precursor lesions, adenomatous polyps. It has been demonstrated that longer colonoscopy withdrawal times improve polyp detection rates, whereas rapid withdrawal time may miss lesions and reduce the effectiveness of colonoscopy in preventing colorectal cancer. Given this evidence, we conducted an audit in which withdrawal time for each screening colonoscopy performed by the Division of Gastroenterology was recorded and performance feedback was provided to the individual physicians as well as the division as a whole.

Aim/Goal

To ensure that withdrawal time for each screening colonoscopy performed in our institution is compliant with recommended guidelines (i.e. colonoscopy withdrawal time ≥ 7 minutes).

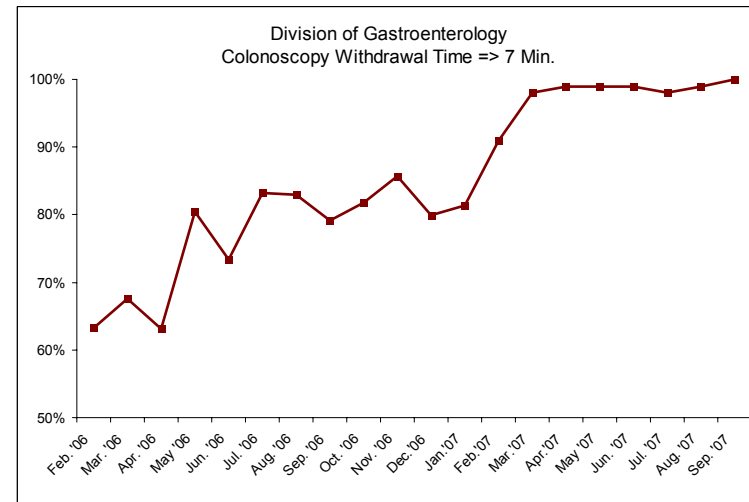
The Team

Stanley J Rosenberg, MD, GI, Director of Quality Improvement
Richard B Doyle MD, GI, Co-Director of Quality Improvement
Thomas J. Lamont, MD, GI, Chief
Janet M. Lewis, RN, GI, Nurse Manager
Naama Neeman, MSc, Medicine, Quality Improvement Specialist
Mark D. Aronson, MD, Medicine, Vice Chair for Quality

The Interventions

- Implemented an institution-wide policy on colonoscopy withdrawal time.
- Conducted an audit in which withdrawal time for each screening colonoscopy performed by the GI Division was recorded.
- Designed an electronic database to monitor performance over time.
- Implemented an individual scorecard system.
- Provided performance feedback on an ongoing basis to individual caregivers as well as the GI Division as a whole.
- Presented findings and results of improvement project in divisional faculty meetings, as well as the Department of Medicine division chief meeting.

The Results/Progress to Date



Lessons Learned

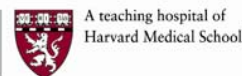
- Successful leadership requires ongoing direct communication of overall goals to the faculty as a whole, repeated personal encouragement to individual providers, and a willingness to set ambitious quality goals to which divisional leaders and individual faculty members are held.
- To overcome resistance, caregivers must be included in quality improvement initiatives, encouraged to participate in these efforts, and given timely feedback on their performance in a respectful and supportive manner.
- Communication and team work between physicians, nurses and administrative staff are essential for a successful improvement project.

Next Steps/What Should Happen Next:

We will continue to randomly audit colonoscopy withdrawal time and provide feedback to clinicians, with the goal of maintaining a 100% compliance rate with recommended guidelines.



Beth Israel Deaconess
Medical Center



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For More Information Contact
Naama Neeman, MSc (nneeman@bidmc.harvard.edu)