

# Stoneman Resident QI Experience

## The Problem

Medical Residents caring for patients have knowledge of near miss events and adverse events that affect clinical quality and patient safety. However, their insights into the system are not necessarily captured. Exposure to event analysis and improvement initiatives will broaden their understanding of quality and safety priorities at the Beth Israel Deaconess Medical Center and provide opportunities for learning.

## Aim/Goal

Introduce Medical Residents to key concepts in quality improvement and allow them opportunities to participate in the ongoing QI activities at BIDMC

## The Team

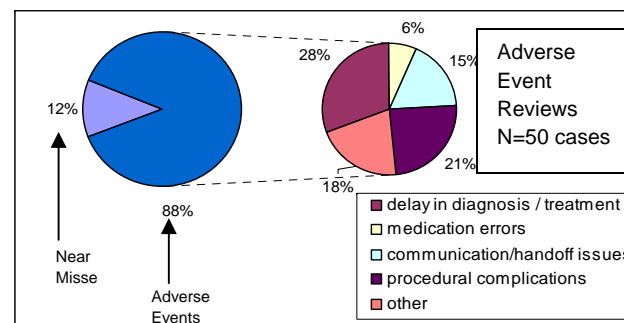
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## The Interventions

- Complete didactic series: adverse event investigation and performance improvement project
- Attendance at quality and safety forums
- Complete adverse event analysis
- Presentation of adverse event analysis at peer review forum
- Complete Web based safety modules as offered by Crico/RMF

## The Results/Progress to Date

- 74 residents have completed the now mandatory Stoneman rotation in 18 mos. This represents over a 300% increase in annual enrollment.
- We have started 11 different initiatives, 9 with specific measures.
- Projects are in line with hospital-wide priorities and resident input has informed policy: hand hygiene, JCAHO audits, pneumovax, and medication reconciliation.



## Lessons Learned

The expansion of the elective has been coupled with creation of microsystems on the medical units where residents deliver care and practice performance improvement.

Safety of culture data has shown residents can be integrated into hospital QI/PS work. May 2006 compared with May 2007. (n=124, results are % Agree or Strongly Agree) (Prelim data)		
1.	I play a role in designing quality improvement changes in the hospital and/or clinic.	<u>37</u> <u>60.8</u>
2.	I feel comfortable reporting a medical error to the department of healthcare quality.	<u>62.9</u> <u>77.6</u>
3.	My ideas to improve patient care are sought and used constructively by hospital and/or clinic leaders.	<u>56.5</u> <u>76.8</u>

## Next Steps/What Should Happen Next:

Broaden scope to include nursing at the bedside in a rotation mirroring the Stoneman program. Tighten linkage between project cycles as residents rotate through.

**For More Information Contact**  
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