GENERAL INFORMATION:
1. Name of Non-ACGME fellowship: Fellowship in Perioperative Quality and Safety
2. Department: Anesthesiology
3. Program Director: Satya Krishna Ramachandran MD
4. Program Coordinator: Susan Herlihy-Kilbride
5. Duration of Fellowship: 2-years
6. Number of positions: 2 per academic year
7. Expected Program Start Date: April 2019
8. Purpose of the Fellowship:
The purpose of the fellowship program is to develop future international academic leaders in Perioperative Quality and Safety. The program will equip fellows with the theoretical, practical and leadership skills to implement world-class quality & safety techniques and processes within their organizations.
9. Appointment Status: (clinical or research): Clinical
11a. Is there an ACGME equivalent of this fellowship in your specialty? No
    b. Is there a Match program for this fellowship? No
    c. If no, are there established guidelines or standards for this type of fellowship? If so, describe. No

CLINICAL FELLOWSHIP PROGRAM INFORMATION:
1. Curriculum Goals and Objectives for the Program
The core objectives of the Fellowship program are summarized below:

LEADERSHIP DEVELOPMENT
- Learn how to drive change and foster a culture of quality and safety
- Develop the confidence to lead teams of professionals who engage in improvement work
- Expand capabilities to become an effective leader in the field of quality and safety

ANALYTICS/INFORMATICS
- Generate data-driven solutions that address operational challenges
- Learn to measure, interpret, and communicate meaningful outcomes of quality and safety data, initiatives, and research
- Use data to support rational and evidence-based improvements
HEALTHCARE QUALITY
- Deepen understanding of evidence-based, patient-centered care and hospital design
- Learn to identify quality and safety gaps, and develop strategies for addressing them
- Discover how to implement quality improvement in the face of financial constraints
- Construct and interpret meaningful outcomes from quality and safety initiatives

PATIENT SAFETY
- Develop an innovative infrastructure for healthcare delivery that improves safety
- Assess and improve processes of care through evidence-based best practices
- Identify, design, and implement malpractice prevention and intervention strategies

2. Rotation Schedule/Primary units on which the trainee will function:
The fellow will be expected to participate in supervised anesthesia care 40% during the first year and 60% of the second year, and take call. Since the fellowship program does not stipulate specific anesthesia or surgical specialty case-mix, it is anticipated that the fellows will be exposed to a wide variety of clinical care environments within BIDMC.

3. Lectures/Didactics/ Conferences
The program curriculum has been tailored to help clinicians improve patient safety and healthcare quality in an increasingly complex and evolving healthcare environment. Coursework in the program emphasizes the following core themes:

OPERATIONAL QUALITY AND SAFETY
Analyze the evolving definitions of quality and safety in healthcare, and how they can be measured and improved. Explore how culture, human factors, and system theory affect safety science, and examine how detection methods affect error impact. Special focus areas include:
- Procedural safety
- Medication safety
- Ambulatory safety
- Cognitive bias

INFORMATICS
Examine the role of informatics in healthcare improvement. Explore the digital infrastructure for capturing and organizing data, as well as user interfaces used by patients and providers. Fellows will focus on how to collect and display data in the context of real improvement work. Other topics include healthcare privacy issues and the design of:
- Clinical databases
- Electronic health records
- Patient portals
LEADERSHIP
Gain an overview of leadership concepts that are most relevant to safety and quality, as well as those required to drive meaningful change. Fellows will learn to initiate action in the current complex healthcare environment— one in which stakeholders have varying, and often competing, needs. Foundational concepts include:
- Change management
- Negotiation and consensus building
- Making a financial case for quality and safety
- Managing teams for improvement

QUANTITATIVE APPROACHES
Learn to assess outcomes specific to ongoing quality improvement (QI) research using statistical processes. Fellows will examine study design—including measurement, bias, and sample sizes—and gain the skills to:
- Apply quantitative methods to QI work
- Analyze simple data and present findings
- Discuss and weigh general institutional review board (IRB) issues

RISK
Obtain an overview of malpractice and evolutions in the field, along with strategies for promoting safety and error disclosure. Fellows will explore innovations and interventions in different areas of risk, including:
- Diagnostic process
- Communication failures
- Procedural safety
- Medication safety

4. Research /Scholarly Activity
CAPSTONE PROJECT
Along with faculty mentor, fellows will apply the tools, strategies, and methods gained from didactic courses to develop a solution to an evidence-based problem in healthcare delivery. The selected challenge may be driven by a need in:
- Quality
- Safety
- Informatics
- Risk
5. Evaluation Processes for Fellow Performance:
Attendings are expected to evaluate trainees on a regular basis and provide feedback to the program director and the trainee regarding performance during the period of supervision. Feedback will be provided to the trainees on a formal basis at least 4 times a year.

6. Evaluation Process for the Quality of Program and Faculty:
Trainees have access to confidential online faculty and program evaluations. This feedback will be incorporated into a comprehensive in-person quarterly review of the fellow by the PD.

7. Will the proposed Non-ACGME program interfere with any clinical requirements or educational experience of residents or fellows in ACGME programs? (i.e. procedures or clinical experience?)
We do not anticipate this to be an issue. Since the fellowship program does not stipulate specific anesthesia or surgical specialty case-mix, it is anticipated that the fellows will be exposed to a wide variety of clinical care environments within BIDMC.