

IN THIS ISSUE:

Welcome to The
Quality Post P.1

New IT tools P.1

QI Leadership Tips P.1

Division Innovation
Challenges P.2

Spotlight: New Process
and Selection Criteria
for Case Review P.3

Spotlight: Introducing
the QI Committee P.3

The Quality Post

Monthly Quality
Improvement Newsletter
FOR THE
Division of Hospital
Medicine

JANUARY 2011 • Volume 1

Greetings from Michelle & Katie

QUALITY IMPROVEMENT
DIVISION OF HOSPITAL MEDICINE



Welcome to our first Division of Hospital Medicine Quality Improvement Newsletter designed to share and celebrate our divisional quality improvement (QI) efforts. Our Division has a rich tradition of quality improvement, and we wanted a way to inform the hospitalists and residents about new projects, disseminate data, recognize achievements and provide important tips on QI leadership.

New IT tools for the New Year

#1 New Tool for scheduling

appointments: Use the new Note Writer templates “Request for follow up” and “Urgent Referrals” to schedule follow up appts with Yolanda. **Attendings:** you must select “Edit your clinical role” in Note Writer and become a resident to route the notes (Yolanda is your “attending”).

#2 New Tool for identifying a DGIM

PCP/Preceptor: Thanks to hard work from DGIM, there is now a tool on the **UC Links** page under UCSF Pages (orange) to use the tool. Login using UCSFMC and your UCare login information.

#3 New way to complete a Transfer Summary to another service (including Parnassus to MTZ & back):

Encourage your housestaff to use the “Interservice Transfer Summary” in Note Writer and avoid a separate PN and transfer dictation. This note counts as a PN and a transfer summary.

Questions?

email michelle.mourad@ucsf.edu

QUALITY LEADERSHIP TIPS OF THE MONTH*

**15 Simple strategies to lead
your quality improvement
team to success:**

1. **Articulate** the vision, mission and specific objectives
2. **Do not** try to achieve too many objectives at one time
3. **Know** when to lead and when to follow
4. **Do** business efficiently, especially the small things
5. **Know** what to delegate and what to do yourself
6. **Keep** your word
7. **Understand** the difference between telling somebody they “have to” do something, and when you “want them” to do something
8. **When you negotiate** with someone and offer a solution, make sure that person is satisfied before you put it into action
9. **Try** to find things you can do for your team members that they value, especially if they cost you little or nothing
10. **Be** a connector
11. **Lead** by example
12. **Know** that the successes of your members constitute your success
13. **Allow** others to take credit for your ideas and decisions
14. **Seek** advice, training and feedback
15. **Keep things in perspective.** Remember, the health and happiness of your family is what counts the most

QI CHAMPIONS

Email the champions if you are interested in getting involved

We are excited to announce we have submitted **5 projects** to the first **Department of Medicine QI Innovation Challenge!**

Brad Monash
(BMonash@medicine.ucsf.edu)

Challenge: Hand Hygiene rates on 14L are **abysmally low**.
Goal: **Improve Hand Hygiene rates for all providers on 14L.**
Interventions: Mock audits, sign making, and educational outreach. Efforts will dovetail with larger Hand Hygiene Task Force.

Heather Whelan
(HWhelan@ucsf.edu)
Cat Lau
(CLau@medicine.ucsf.edu)

Challenge: It is difficult to reliably schedule follow up appointments for uninsured patients at UCSF. Lack of follow up may result in frequent readmissions and poor clinical outcomes.
Goal: **Improve follow up care for uninsured patients.**
Interventions: Provide a service to schedule appointments with the Healthy San Francisco office at the time of discharge in order to schedule them with a primary care provider.

Michelle Mourad
(Michelle.Mourad@ucsf.edu)
Ellen Kynoch
(Ellen.Kynoch@ucsfmedctr.org)

Challenge: Many patients have a hard time filling prescriptions after discharge which may contribute to frequent readmissions and poor clinical outcomes.
Goal: **Increase services of bedside medication delivery on discharge.**
Interventions: Partner with Walgreens to develop a standard process for filling prescriptions prior to discharge and delivering them to patients before they leave the hospital

Sara lobst
(Sara.lobst@ucsf.edu)

Challenge: The Joint Commission recommends that hospitals identify LEP patients on admission and provide language access 24/7. However, access to and utilization of interpreter services on 14M and 14L is poor.
Goal: **Improve access to and utilization of interpreter services in 14M and 14L.**
Interventions: Empower patients to request interpreter services; provide education to providers; standardize process of identifying LEP patient.

Diane Sliwka
(Dsliwka@medicine.ucsf.edu)

Challenge: Patient satisfaction is highly reliant on patients' abilities to correctly identify and communicate with their providers.
Goal: **Increase patient satisfaction with physician communication among medicine patients on 14M and 14L.**
Interventions: Improve the identification of providers on the primary team through the use of face sheets. These face sheets will complement the team's own introduction to the patient and the ongoing emphasis on white boards as a communication tool identifying current providers.

Stay tuned for updated information as these projects unfold. Thank you to the champions for leading these efforts within our Division and thank you in advance for your interest and support in ensuring these projects are successful!

Spotlight: New Process and Selection Criteria for Case Review

The Case Review Committee re-launched with its *new* format on Thursday, Jan 20. Diane, Michelle, and Katie spent the Fall of 2010 reviewing the goals of case review and redesigning the process by which cases enter and flow through the Division. This included creating new classification systems for prioritization and thematic areas for improvement. The goals of Case Review remain largely the same:

1. Create/promote a Culture of Safety
2. Provide education around process of Case Review and Reflection to junior faculty and students
3. Identify trends/needs for QI activity
4. Review Quality of Care provided (hold ourselves accountable to Med Center)

Stay tuned for more exciting updates as we finalize plans for piloting the use of the Med Center's M&M Tool. This new form will simplify the way we submit cases & communicate with other divisions and departments. If you have any questions about this new format, please contact Diane Sliwka, dsliwka@medicine.ucsf.edu

Spotlight: Introducing the QI Committee

Members: Henry Crevensten, Mike Hwa, Brad Monash, Michelle Mourad, Sumant Ranji, , Stephanie Rennke, Brad Sharpe, Diane Sliwka, Naama Neeman, Katie Quinn.

As 2011 begins to unfold, you will notice many new QI initiatives beginning throughout the Division. Managing and ensuring success of these initiatives requires a true collaborative effort. As such, we have invited Divisional QI Leaders to sit on the **Divisional QI Committee** which will be responsible for:

1. Reviewing the quality of care provided by the Hospitalist Division through a **Hospitalist Quality Dashboard** and **Subcommittee reports**
2. Using these reports to prioritize the focus of Divisional QI activities
3. Holding those working on operational/quality activities accountable
4. Sustaining a working framework from which to report our Divisional QI activities to the medical center

The committee will meet the fourth Wednesday of every month starting **January 26** at 7:30am. Be sure to look for updates from this committee in future newsletters, including a draft of our Hospitalist Quality Dashboard, highlights from subcommittees, and opportunities for you to be involved

CALENDAR OF EVENTS

QI SCHOOL

FEBRUARY 17: Quality Improvement Methods (Six Sigma, Lean, PDSA)

MARCH 10: Change Management with Ed O'Neil

DOM INNOVATION CHALLENGE

JUNE 7: DOM Quality & Safety Symposium

RESIDENT QI LUNCHES

M&M type format for Quality Case:

FEBRUARY 21

MARCH 21

APRIL 18

FACULTY QI LUNCHES

FEBRUARY 14: Updates in Patient Satisfaction

MARCH & APRIL: Value Based Purchasing and DOM Innovation Challenge updates