

Quality Improvement Program Design

Objective: Review, discuss progress, and recommend improvements to our quality improvement curriculum and involvement within the residency.

Background: This year we have implemented a plan to involve all residents in the quality improvement process and quality improvement projects. Quality improvement projects are mandatory for first year residents and optional for second and third year residents at this time. We would like to discuss the current curriculum and additional recommendations and requirements for quality improvement in the future.

Idea Generation:

Plan for Progress:
(include task leaders, objectives and timeline)

FrontPage

last edited by Felix Ankel 1 yr ago [Page history](#)

EM Residency Quality Wiki

Welcome to the EM Residency Quality wiki. I would like to use this tool to be the repository for the EM residency quality program. I suggest the following:

1. Develop guiding principles for the residency quality program.
2. Open the wiki to others.
3. Determine content experts by EM topic.
4. Develop process for EM residency projects.

I have attached some of the files from the 2008 Residency Retreat and files from a quality course that may be of interest to you. I'm looking forward to your feedback.

Felix

- [Quality Binder Fall08.pdf](#)
- [GME Knowledge Translation from AEM.pdf](#)
- [Begin to Use Clinical Outcomes from Acad Med.pdf](#)
- [Using Pt Care Quality Measures from AEM.pdf](#)
- [2004 06 25 Bulding a quality educational program \(2\).ppt](#)
- [Kim QI Project.pdf](#)
- [2008 10 23 quality GME integration.xls](#)
- [Ankel email of 2005 03 11 \(3\).pdf](#)
- [QI bottom up vs top down.pdf](#)
- [CORD emails re IOM Report.txt](#)
- [Coming Soon Quality Fair 2009!.txt](#)

[MatrixTutorial.pdf](#)

[schneider.pdf](#)

Free help:

1. Learn how to use PBwiki: [The PBwiki Manual](#)
2. If you prefer video, watch a recording of our popular webinar, [PBwiki 101: Your Guide to Wiki Basics](#).
3. Need more help? Sign up for a [Free introductory webinar](#)

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Felix Ankel said
 at 3:17 pm on Dec 3, 2008
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Pages Files options

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Project Description Forms Booklet.pdf
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Pre Conference Workshop Quality Curricul
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Pre Conference Workshop Quality Curricul
uploaded by Felix Ankel

ED Shift Calculations.pdf
uploaded by Felix Ankel

PDSA.pdf
uploaded by Marcella de la Torre

FrontPage
commented on by Felix Ankel

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Quality Improvement Intro 5

Quality Improvement Introduction and Process

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<input type="checkbox"/>	Name	Last changed	Revs
<input type="checkbox"/>	01-Introduction to Quality Improvement.ppt 5.93 MB Rename	02/11/2010 7:09 pm by Kara Kim	1
<input type="checkbox"/>	02-Begining_a_QI_project_Defining_Scope_and_Aim_Statement.ppt 1.37 MB Rename	02/11/2010 7:10 pm by Kara Kim	1
<input type="checkbox"/>	02 -AIM-Scope Work Sheet-1.doc 39 KB Rename	02/11/2010 7:10 pm by Kara Kim	1
<input type="checkbox"/>	03 -Measures- How will we know a change is an improvement.ppt 1.06 MB Rename	02/11/2010 7:10 pm by Kara Kim	1
<input type="checkbox"/>	03-Measures Work Sheet-1.doc 28 KB Rename	02/11/2010 7:10 pm by Kara Kim	1

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Barrett, Lori J

From: Kim, Kara S
Sent: Sunday, July 18, 2010 12:39 AM
To: EMD Residents 2011; EMD Residents 2012; EMD Residents 2013
Cc: Ankel, Felix K; Zinkel, Andrew R; Healy, Mary M; delaTorre, Marcella X; Barringer, Kelly W
Subject: Quality Improvement Projects

Hi Everyone,

Below is the list of our quality improvement (QI) teams. We are hoping to have additions to our teams in the future including RNs, medics, and technicians.

The person starred in the teams below is designated to send an email out to all members of your team to discuss how you will divide the following steps over the next month:**

Over the next month you should:

1. Define the process that you have selected that needs improvement
 - a. Search Ednet for current processes and procedures for the defined area (ex. protocol for CVA - Code Grey)
 - b. Watch the process as it happens in the ED (for example, watch what happens once a Code Grey is called)
 - c. Ask those involved in the process to define the current steps (for example, for door to EKG time, what happens once we place an order for an EKG? Do the medics see the order? or does an RN see the order and then page a medic? What happens if there are no medics available at that time to complete an EKG? Is there an established set of guidelines on prioritizing what type of patients should have an EKG completed first?)
 - d. Request existing documentation of the current processes from our quality leaders (Dr. Drew Zinkel or Mary Healy) to ensure you have the latest protocols
 - e. Ask or consider what needs to be improved with the current process
2. Search literature & websites for quality initiatives and EBM articles in that area
 - a. Our librarians are excellent resources for this area
 - b. Our online medical library is also wonderful
3. Find existing protocols and guidelines for QI projects already completed in this area (don't re-invent the wheel if a great process already exists)
 - a. Ask our quality leaders for contacts at other emergency departments either in our city or across the nation to learn what processes our colleagues have established
 - b. Research existing quality standards and guidelines. For example, there may be data or guidelines from the American Heart Association on door to EKG times (our quality leaders may be able to help point us in the right direction)

The **deadline for the initial research and above steps is next month** because this is when we will begin the next steps of our projects. You can use your ROD assigned time to work on the project. Remember, the quality improvement projects are required for all G1s, and it would be great to have a lot of G2 and G3 involvement! :) The next conference quality hour we will be working in our groups on the next steps of our Quality Improvement projects! Woo hoo!

Remember, **if you have any questions, email me or Marcella Delatorre** (Marcella.delatorre@healthpartners.com) any time.

Team "STEMI" - Quality Improvement project for Door to EKG time

1. Bjorn Peterson
2. Gary Meyeux***
3. Kara Kim
4. Eric Roth
5. Catie Carlson
6. Becky Gardner
7. Eric Dahl

Team "CVA" - Quality Improvement Project for Door To needle time - Implementation/monitoring of new protocol

1. Timmy Sullivan
2. Casey Wooster
3. Jodi Deleski***
4. Joe Watter
5. Kolja Paech
6. Peter Baggenstos
7. Tyler Ferrel

Team "DKA" - Protocol Development/Standardization (with comparison against ICU protocol)

1. Katie Davidson
2. Amanda Carlson***
3. Wendy Rangitsch
4. JR Walker
5. Jillian Smith
6. Kate Graham
7. Sonali Meyer

Team "Vital Signs" - Creation and implementation of a Vital signs policy

1. Alex Gerbig
2. Adetolu Oyewo***
3. Zabrina Evans
4. Ben Watters
5. Darcy Rumberger
7. Autumn Erwin
8. Clint Hawthorn