GOAL
To engage and train healthcare teams (physicians and healthcare professionals) in quality improvement that is aligned with organizational strategic objectives.

LEARNING OBJECTIVES
- Evaluate a process and determine if it needs improvement or re-engineering
- Discuss concepts and applications of a variety of QI methods and techniques
- Conduct an improvement project using Institute for Healthcare Improvement Model for Improvement
- Demonstrate ability to implement concepts of change
- Exercise leadership and accountability in the design, execution, and evaluation of QI programs and projects
- Serve as a well-informed “Process Improvement Advisor”
- Explain and apply interplay between human factors and process design
- Demonstrate how to develop, participate in, and lead a QI team within a complex organization

METHODS
- 6-month QI collaborative (January-June, 2014)
- Participants selected based on interest, commitment, and potential to demonstrate improvement in organizational goals including communication, clinical outcomes, patient experience, and clinical effectiveness
- Curriculum based upon IHI Model for Improvement
- The faculty practice plan (University of Minnesota Physicians) partnered with the School of Public Health and the University’s CPD Department to develop and implement the course
- Steps taken to ensure strategic alignment of learning objectives, content, design, and the evaluation and reporting of outcomes
- The principles of PDSA cycle were applied by the planning team for continued review and modification of the course to ensure it was meeting the objectives and to maximize its impact
- The University of Minnesota designated this live activity for a maximum of 24.0 AMA PRA Category 1 Credit™
- The following PI/QI Coaches were assigned to each team to facilitate completion of the projects: Dawn England, Rod Haas, Nick Hanson, Brandon Harmon, Sally Huntington, Kyung Park, Kevin Shores, Andy Thompson, Doug Zech

CURRICULUM

PROJECTS

<table>
<thead>
<tr>
<th>CLINICAL AREA</th>
<th>PROJECT FOCUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulmonary</td>
<td>OGTT screening of non-diabetic CF patients age &gt;6</td>
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<tr>
<td>Transplantation</td>
<td>Evaluation of potential liver transplant recipients with a living donor</td>
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<tr>
<td>Pediatrics</td>
<td>Increase number of new outpatients</td>
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<tr>
<td>Pediatrics</td>
<td>Standardize response to behavioral escalation</td>
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<tr>
<td>Family Medicine</td>
<td>Reduce provider documentation burden and simultaneously maintain or increase patient access</td>
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<tr>
<td>Family Medicine</td>
<td>Appropriate coding compliance for hospital discharge patients</td>
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<tr>
<td>Transfusion Medicine</td>
<td>Decrease intraoperative RBC transfusions utilization for CV surgery</td>
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<tr>
<td>Radiation and Gynecologic Oncology</td>
<td>Completion of definitive chemoradiotherapy in cervical cancer patients</td>
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<tr>
<td>Cardiology</td>
<td>Reduce inappropriate blood transfusion in cardiology inpatients</td>
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<tr>
<td>Cardiology</td>
<td>Reduction in exam cancellation rates</td>
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<tr>
<td>Inpatient</td>
<td>Improve nurse-provider closed loop communication</td>
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<tr>
<td>Obstetrics and Gynecology</td>
<td>Access standardized perinatal care for patients at risk of preterm labor</td>
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<tr>
<td>Transplantation</td>
<td>Reduce medication reconciliation errors for lung transplant patients</td>
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<tr>
<td>Transplantation</td>
<td>Improve lab result verification for kidney transplant patients</td>
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</tbody>
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PRELIMINARY FEEDBACK
Prior to and after each module (in brackets) participants were asked:

How confident are you in your ability to:

- Describe the IHI Model for Improvement (1)
- Map out a plan for your QI project (1)
- Interpret a process chart (2)
- Describe how flow charts and process maps fit into IHI Model for Improvement (2)
- Discuss how run chart analysis ties into IHI Model for Improvement (3)
- Describe how value stream mapping serves as a strategic tool in the planning phase of QI (3)
- Identify the correct control chart to use for various scenarios (4)
- Effectively analyze charts to determine if the improvement efforts have been effective (4)
- Discuss the limitations of various control charts (4)
- Develop an appropriate change management strategy to align with your project goals (5)
- Sustain, leverage, and build upon the momentum that has been generated by your QI project (5)
- Apply the concepts of the IHI Model for Improvement to your project (5)
- Present the highlights of your QI project to the sponsors (5)

Summary of results of all evaluation questions:

CONCLUSION
1. A successful QI course was developed and was facilitated by the partnership between a practice plan and a CME/CPD Department.
2. This model serves as the basis for ongoing alignment of QI initiatives.