



NCC Pediatrics Continuity Clinic Curriculum: Process Improvement—Overview

Overall Goals:

ACGME Competency: Practice Based Learning & Improvement:

“Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and continuously improve patient care based on constant self-evaluation and life-long learning.”

American Board of Pediatrics: Requirement for Maintenance of Certification:

“To maintain board certification, diplomates must participate in an ABP certified (i.e. meets ABP standards for methodological rigor and successful improvement) quality improvement activity for MOC (maintenance of certification).”

Overall Objectives:

- Residents will work within their assigned continuity groups (5) to design and implement a quality improvement/process improvement (QI/PI) project focusing on some aspect of their practice— in the outpatient, inpatient, or community setting.
- Residents will learn the FOCUS-PDCA process and use this model as a guide for developing their projects. They will also appreciate the importance of QI/PI to their future practice.

Overall Timeline:

| <u>Dates</u> | <u>Event</u> |
|---------------|---|
| Week Aug 15 | PI Project Overview |
| Week Sept 26 | PI Team Meeting |
| Oct 7 | PI Proposal Presentation @ Morning Report |
| Week Oct 31 | PI Team Meeting |
| Week Dec 12 | PI Team Meeting |
| Week Jan 23 | PI Team Meeting |
| Feb 3 | PDCA Cycle 1 Presentation @ Morning Report |
| Week Mar 5 | PI Team Meeting |
| Week Apr 9 | PI Team Meeting |
| Week May 21 | PI Team Meeting |
| May 29 | PDCA Cycle 2 Presentation @ Morning Report |



NCC Pediatrics Continuity Clinic Curriculum: PI-Meeting 2 & Case-Day

Pre-Meeting Preparation:

- Review [PI Overview Module](#)
- Complete **FOCUS-PDCA** worksheet for your group's selected topic
- Select *one of your continuity patients* to present for Continuity Case-Day. Review the question prompts on page 5.

Conference Agenda:

- Compare **FOCUS-PDCA** sheets & prepare **Oct 7th** proposal presentation
- Time permitting, discuss resident and/or staff cases (see p. 5).

Post-Conference Agenda:

- Complete **Oct 7th** proposal presentation → *Email to Candice by 1600 Oct 6th*
 - **5 min** PowerPoint per group, followed by 5 min questions
 - Structure presentation according to **F-O-C-U-S** part of acronym
 - Select continuity group member to deliver presentation at MR

2011-2012 Continuity Groups

| Monday | Tuesday | Wednesday | Thursday | Friday |
|------------------|---------------|-----------|-----------------|-----------------|
| Lindsey | Slocum | Thompson | Klein | Weeks |
| Vasta | Sigmon | Schuldt | Senozan | Gupta |
| Bay | Pavey | Wilson | Torres | Hiraldo-Delgado |
| Wagner | Royall | Alexander | Hajiaghamohseni | Jaskiewicz |
| Ghanjanasak | Lozada | Zuber | Carter | McDonnell |
| Stering | Cunningham, B | Lorkowski | McElveen | Choi |
| Seide | Cunningham, M | Steele | Paz | Adams |
| | | | Garcia | Costa |
| Anderson | Foxx | Hepps | Cooper | Carr |
| Gordon | Powell | Higginson | Hawley | Coll |
| Gorman | Stokes | Labow | Kimball-Eayrs | Lopreiato |
| Merker/Pitchford | Vogt | | | Melzer |
| Serwer | | | | |

FOCUS P-D-C-A

Performance Improvement Model to Identify and Solve Problems and Processes

The FOCUS phase
helps to narrow the team's attention to a discrete opportunity for improvement.

| | | |
|----------|-------------------|--|
| F | FIND | <i>Find a process that needs improvement.</i> Define the process and its customers. Decide who will benefit from the improvement. Understanding how the process fits within the hospital's system and priorities. |
| O | ORGANIZE | <i>Select a team who is knowledgeable in the process.</i> Determine team size, members who represent various levels in the organization, select members, and prepare to document their progress. |
| C | CLARIFY | <i>Clarify the current knowledge of the process.</i> Define the process <u>as it is</u> and <u>as it should be</u> . Team reviews current knowledge and then must understand the process to be able to analyze it and differentiate the way it actually works and the way it is meant to work. |
| U | UNDERSTAND | <i>Understand the causes of variation.</i> Team will measure the process and learn the causes of variation. They will then formulate a plan to data collection, collecting the data, using the information to establish specific, measurable, and controllable variations. |
| S | SELECT | <i>Select the potential process improvement.</i> Determine the action that needs to be taken to improve the process (must be supported by <u>documented evidence</u> .) |

The P-D-C-A phase allows the team to pursue that opportunity and review its outcome.

| | | |
|----------|--------------|---|
| P | PLAN | <i>Plan the improvement/data collection.</i> Plan the change by studying the process, deciding what could improve it, and identifying data to help. |
| D | DO | <i>Do the improvement/data collection/data analysis.</i> Execute the plan on a small scale or by simulation. |
| C | CHECK | <i>Check the data for process improvement.</i> Observe the results of the change. Document the results of the change. Modify the change, if necessary and possible. |
| A | ACT | <i>Act to hold the gain/continue improvement.</i> Implement the change if it is working. If it fails, abandon the plan and repeat the cycle. |

FOCUS P-D-C-A
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A **ACT**



Continuity Clinic Case Day

Select an interesting or challenging patient to discuss with your continuity group. Solicit feedback and guidance regarding your management.

1. Who is your patient? (Give a one-liner)
2. How long have you been following him/her?
3. What are the major issues you've been addressing? Medical? Psychosocial?
4. What questions do you have about your patient? Diagnoses? Treatment?
5. What are your plans for following-up with your patient?

Self Reflection: How have you applied the previous modules (Health Maintenance, Immunizations, Nutrition, and Development) to your continuity patient(s)?