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#### **Authors**

Adler, N  
Chipman, A  
Page Wills, C  
[et al.](#)

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## **70** An Innovative Approach to Quality Improvement and Patient Safety: A Resident-initiated and Administered Quality Improvement Committee

*Adler N, Chipman A, Page Wills C, Hern HG/Alameda County Medical Center - Highland Hospital, Oakland, CA*

**Introduction:** Knowledge of patient safety and quality improvement (QI) is fundamental to graduate medical education. With the ACGME's implementation of the NAS there is a requirement for resident involvement in harm reduction and QI.

**Educational Objectives:** We developed a QI curriculum centered on a novel resident-run quality review committee. The goals were to increase interest and participation in QI, improve knowledge of QI principals, and develop skills for performing a root cause analysis (RCA).

**Curricular Design:** This is a unique project, in that it is resident-initiated and administered. Using the six-step Kern process, we developed an interactive QI curriculum. Resident focus groups were conducted to identify knowledge gaps. EM faculty met with residents over a year to create educational goals. A systematic literature review was performed and a core curriculum and reader were developed. The cornerstone of this curriculum is a resident-run QI committee. The group consists of twelve residents, from various years, who have received didactic instruction in QI principals. The group meets monthly to perform RCAs on selected cases. The findings are disseminated to the residency via quarterly reports. When areas of knowledge gaps are identified, they are discussed with faculty and the topics are integrated into the residency curriculum. When systems errors are identified they are brought to faculty or staff involved and a strategy is devised to improve care. Finally, a list of projects is continually updated and used in departmental longitudinal QI projects.

**Impact/Effectiveness:** For the core group of residents on the committee there is significant instruction in QI and an opportunity to perform RCAs on a monthly basis. The dissemination of the findings allows for broader education of QI practices and open discussion of medical error. The project has resulted in improved patient care and empowers residents to report and discuss error as a mechanism for change.