



Implementing Quality Improvement in the Med-Peds Resident Continuity Clinic

Mary Catherine Turner, MD, FACP, FAAP

Rishita R. Yeduri
 Brody School of Medicine
 LINC Distinction Tract
 Greenville, North Carolina 27858
 248 890 9666
 yedurir15@students.ecu.edu

CARE SETTING

This project was primarily set in ECU Physicians Adult & Pediatric Care Clinic where resident continuity clinic was held 4 afternoons a week. There were four different teams, each consisting of residents, 1-2 faculty members, and 1 CNA.

STRENGTHS

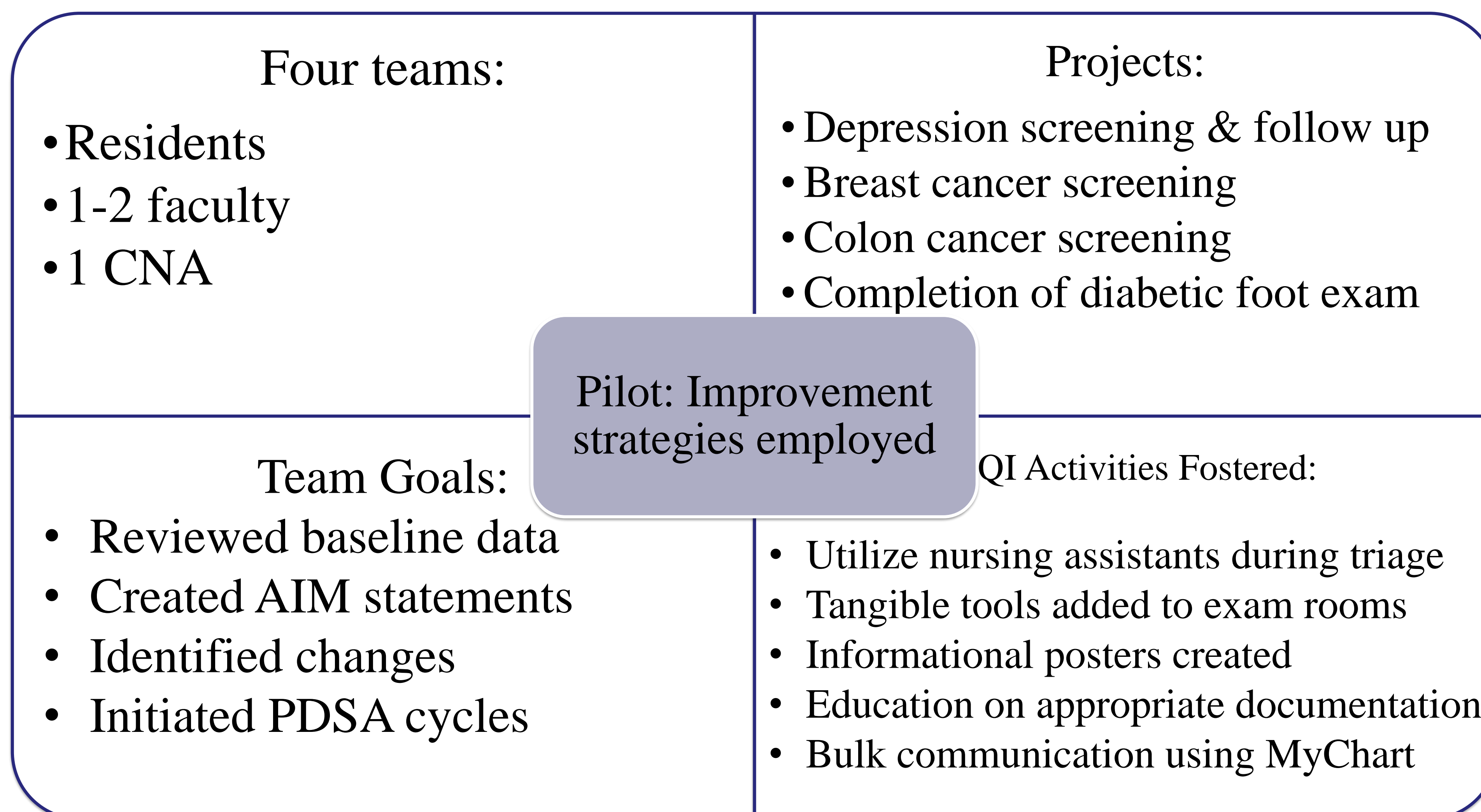
The strengths of this project could transcend into other QI projects. For example, every team started on a small scale and expanded those changes clinic-wide. The teams utilized nursing assistants during triage to address health maintenance items, added tangible tools to patient exam rooms, and put informational posters about screenings in the clinic. All these interventions improved the efficiency the projects.

DETAILS & INTERVENTIONS

Each of the four teams selected from the following projects:

1. Depression screening and follow up
2. Breast cancer screening
3. Colon cancer screening
4. Completion of diabetic foot exam

Several educational sessions were held during weekly pre-clinic conferences to provide appropriate resources. The residents completed IHI Open school modules and PDSA worksheets. All providers were informed on documentation of PHQ-9. MyChart was used to communicate with patients who were not in the clinic. Upon completion of this year-long project, the team tracked if the implemented changes led to improvement. Pre and post surveys of reported knowledge, skills, and confidence in QI were conducted on the residents. ACGME survey results in areas of scholarly activity, QI participation, and provision of practice habits data were also analyzed. Finally, improved scores on meaningful use reports generated by ECU were analyzed.



PROJECT AIM

By May 31, 2017, all Med-Peds residents will have completed one QI project in resident continuity clinic that addresses a Quality Metric outlined by the Brody SOM Enterprise Quality Committee

OPPORTUNITIES

Initially there wasn't nursing leadership support which led to Nurse Assistant Scheduling issues. Some areas of improvement include increasing attendance of residents at the team meetings and completing IHI QI modules per timeline.

RECOMMENDATIONS

- Utilize nursing leadership to promote QI projects and continue expanding on nursing staff participation
- Have a more specific aim statement that focuses on one or two projects as opposed to four projects at once
- Have a well-structured flipped classroom approach so everyone is informed even if they miss team meetings