

Quality and Safety

Quality and Safety (Q&S)

Our vision is to be a department in which every member can do their best work, with zero harm, and the highest quality care for every patient, every time.



Kerting Laurent, senior clinical biomedical engineer

Overview and Mission

The <u>Q&S team</u> analyzes the department's successes and failures to continually improve the quality of our care, build a culture of safety that protects patients and colleagues, and develop the next generation of Q&S leaders.

Our goals are to:

- Increase our presence by promoting quality assurance events, sharing positive feedback, and increasing our team's integration
- 2. Enhance QA/quality improvement through support and promotion of learning outside of the immediate Q&S team
- 3. Foster team wellness and mitigate burnout by continuing to support our clinicians

"Our mission is to learn from our successes and failures, continuously improve the quality of care we provide, commit to a culture of safety that protects our patients and colleagues, and to inspire and develop the next generation of quality and safety leaders."

FY22 Accomplishments



Yesupatham Santhakumar, lead cardiac technician

1.

New Program for Anesthesiologists. As part of CRICO, we instituted a program to encourage anesthesiologists to (1) learn about the other role groups on their teams and (2) translate this information into actionable teamwork behaviors. So far, 117 anesthesiologists have engaged colleagues in other role groups to learn about the interprofessional work. Participants were asked to commit to a behavior change and report back. Some of the implemented actions include improved communication, reduced burden, and allotted additional time to complete tasks. We presented this work at the International Anesthesia Research Society, Association of University Anesthesiologists, and the department's resident poster session.

2.

Critical Incident Debriefing Project. This is a multidisciplinary project with the Q&S Improvement Committee (QSIC) that has implemented an empathetic debrief within an hour after an intraoperative death or cardiac arrest. Its goals are to support the providers, gather critical information, sequester medications or devices (if necessary), and ensure that appropriate actions are taken for follow-up. We have trained multidisciplinary individuals to be debriefers and to help support all clinicians involved in the case.

3.

Q&S Restructure. We restructured our QSIC and M&M conferences. Our QSIC group now supports the success of resident-led QI projects by teaching established process improvement methodologies. At our monthly M&Ms, we now share data about QA events, relay positive comments, and summarize the most recent QA Committee meetings, all with the goal of enhancing transparency and teaching.