

# Advocate Lutheran General Hospital, Park Ridge, IL

## Process Improvement and the ACGME Annual Program Evaluation: Teaching the Teachers

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**Background:** Process improvement science (PIS) is relatively new to healthcare, and the Advocate Lutheran team identified the need for instruction and incorporation of PIS at the GME level. This study was designed to share knowledge and develop skills in PIS by having residency program directors (PDs) and associate program directors (APDs) complete an educational program on PIS and use these concepts and tools to prepare the required ACGME annual program evaluations (APE).

**Methods:** Investigators developed a pre- and postintervention survey to measure 18 participating PDs' and APDs' knowledge of and attitudes toward PIS application in evaluation and curriculum programs. The team conducted 4 education sessions, and trained, independent reviewers analyzed the APEs from the 2 years prior to the intervention (2010 and 2011) and the year following (2012).

**Results:** The survey revealed subjects reported either an increase in using or no knowledge of PIS practices, including PDSA models, fishbone diagrams, and process-mapping techniques. Not all subjects completed the pretest and/or attended the education sessions, which may be a factor in the PIS knowledge result. APE metrics revealed the content and format of data provided on APEs varied and some content was copied and pasted year to year. Little evidence of dynamic or process improvement existed in APEs over 3 years. The 2012 APEs did not reflect an impact from the educational sessions.

**Conclusions:** The study confirmed the need for education on PIS through a program that can serve those with a variety of skill levels and busy schedules. The team will next revise the APE instructions and integrate APEs into performance reviews. The PDs and faculty will continue to help develop PIS knowledge and skill programs.

### FINAL WORK PLAN – Advocate Lutheran General Hospital (Team 1)

Overall Goal for NI III/Elevator Speech	Our team's goal was to utilize a necessary and relevant activity (the APE) to assess, educate, and evaluate our PDs and APDs about PIS and PIS activities as scholarly projects.
Needs Statement	This goal was important because (1) to teach residents and fellows, the program leadership must demonstrate competence; (2) APEs have been identified as an area for improvement; and (3) scholarly activities are a common citation for our GME programs.
Vision Statement	In March 2013, we will see the outcomes of our success by having presented our work at the annual Research Day, by having quantitative and qualitative results, and by having the draft of a paper.
Measures	We determined the success of meeting our goal by measuring knowledge and APEs. Our pre- and postintervention measures were (1) survey via Survey Monkey prior to and following the educational sessions and (2) review of the APE for the 2 years prior to the intervention and the fall after the intervention. Response to our presentations, our poster, and team reflection will provide measures.
Success Factors	The most successful component of our work was team collaboration, commitment to regular meetings, and accomplishing our tasks. We began with the end in mind with respect to IRB review/scholarly project. We were inspired by one another and the importance of the work.
Barriers	The largest barriers we encountered were (1) assistance in scheduling with the medical education office, (2) buy-in (attendance) by the PDs and APDs, (3) a small N, and (4) 6-month time span for intervention (too long). Also, we experienced PD and APD turnover during this time. We worked to overcome this by perseverance, email reminders, and the use of SharePoint as a document repository (with dubious success).
Lessons Learned What is the single most important piece of advice for another team embarking on a similar initiative?	Get sponsorship from or participation with the DIO and director of medical education and commitment from PDs and APDs. Narrow the time frame for your intervention.