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Getting Engaged: Efforts to Increase Housestaff Event Reporting

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Background

- Residents traditionally are under-engaged in event reporting through institutional channels
- The ACGME Clinical Learning Environment Review prioritizes this issue, and is establishing national benchmarks
- In 2015 the Housestaff Quality and Safety Leadership Council selected Increasing Error Reporting as their clinical quality initiative.

Cause analysis

Barriers to Reporting Related to Education Awareness and Lack of Meaningful Feedback about Resulting Change

Perceived Importance of Event Reporting varies by Resident Specialty

Intervention - Education

Created a peer to peer education module and pocket cards on adverse events and reporting process
Piloting of adverse event review in lunch

Intervention - Marketing

Visibility Campaign – posters and proposed screen saver

Intervention - Feedback

Proposed: Newsletter for increased transparency around errors and resulting improvements at the point of care
Proposed: GME and Clinical Departmental Dashboards for physicians get feedback on their engagement
Piloted: Council involvement in event review

Results

- Immediate increases seen in reporting after “on the ground” educational and marketing interventions
- Increased reporting correlated with the amount of effort by council members
- Sustained increases in reporting were limited by cumbersome IT and competing time commitments

Conclusions

- Sustained change will involve institutional collaboration and buy-in to adopt council recommendations.
- The PI department and institutional leaders are supportive, but additional resources will be required for streamlining the reporting process and providing adequate feedback on reporting.
- Residents appear to report within physician hierarchies instead of through the institution. Faculty buy in and incorporation into the daily patient care and educational workflow is vital.

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References