

PGY-1 Introduction to Quality Improvement and Patient Safety Curriculum Posttest

1. Name: _____
2. Year in Training during 2015-16 (circle one): PGY-I PGY-II PGY-III PGY-IV
 Other _____
3. Residency area
- Medicine
 - Surgery
 - Pediatrics
 - Med/Peds
 - Other _____

1. Overall how much do you agree with the following statements ... ? (Please circle one response)

	Strongly Agree	Somewhat Agree	Neither Agree nor Disagree	Somewhat Disagree	Strongly Disagree
... I believe quality improvement knowledge is important to my education	5	4	3	2	1
... I believe patient safety knowledge is important to my education	5	4	3	2	1
... I can identify the hospital leaders at University of Chicago	5	4	3	2	1
... I believe the hospital leaders at University of Chicago are accessible	5	4	3	2	1
... I have filed a report when my patients experienced an adverse event.	5	4	3	2	1
... I have been part of an event report filed by another team member (i.e. RN or resident on my team).	5	4	3	2	1
... I understand how to effectively follow up on event reports.	5	4	3	2	1
... I am confident in my ability to review a Quality Dashboard to identify an area requiring improvement.	5	4	3	2	1
... This curriculum improved my knowledge of patient safety/quality improvement at University of Chicago	5	4	3	2	1

1. Which of the following patient safety event reports would require the UCM to conduct a Root Cause Analysis (RCA)? (Circle correct answer)
 - a. A 67 year old patient admitted for GI bleeding and anemia falls on the way to the bathroom and breaks her hip. The patient recovers well.
 - b. A medical alarm on a telemetry monitor fails to activate during ventricular tachycardia event, the nurse is busy with another sick patient does not check on the patient, the patient dies. CORRECT
 - c. An unwrapped endotracheal tube within a code cart is used in the treatment of a patient who has stopped breathing in the MICU.
 - d. A type I diabetic adolescent patient presents in the ED with glucose spiked dangerously high. The patient is given an improper dosage of insulin and experiences a severe episode of hypoglycemia and is admitted to the MICU.
 - e. A patient presents to ER with abdominal pain, an abdominal aneurysm is identified, patient requires 10 units of packed red blood cells and dies on the operating table

2. What does the Risk Management team do when a significant active failure is identified in a safety event report? (Circle correct answer)
 - a. Report the event to the Joint Commission
 - b. Conduct a Root Cause Analysis
 - c. Contact the care team involved in the incident report for more information CORRECT
 - d. Perform a Failure Modes and Effects Analysis

3. A 21 year-old college student with a documented penicillin allergy is given doxycycline for yet another episode of Chlamydia. He develops a rash from the medication. This incident is best described as (Circle correct answer)
 - a. a potential adverse drug event
 - b. a preventable adverse drug event
 - c. a non-preventable adverse drug event. CORRECT
 - d. a latent error.

4. A root cause analysis meeting. (Circle correct answer)
 - a. addresses the list of event reports submitted each month
 - b. is a prospective method for detecting safety hazards
 - c. uses the systems approach to identify both active errors and latent errors CORRECT
 - d. finds the main cause of a patient safety event
 - e. is mandated by the Joint Commission to analyze all patient safety events

5. How many patient safety events have you been involved in reporting in the past 3 months? (Fill in the blank) _____

6. The Institute for Medicine (IOM) identified 6 core aims for improvement. These aims say that health care should be... (Circle correct answer)
 - a. Straightforward, Trusted, Easy, Effective, Efficient, Patient Centered
 - b. Straightforward, Timely, Effective, Accessible, Equitable, Patient Centered
 - c. Straightforward , Timely, Easy, Efficient, Equitable, Patient Centered
 - d. Safe, Trusted, Effective, Efficient, Accessible, Patient Centered
 - e. Safe, Timely, Effective, Efficient. Equitable, Patient Centered CORRECT

7. The Hospital Compare website... (Circle correct answer)
- Compares up to 5 hospitals at a time
 - Uses billing data to give hospitals feedback on performance
 - Compares patient satisfaction data between hospitals CORRECT
 - Compares liability awards between hospitals
 - Compares complication rates for doctors
8. Internal quality & performance measures at UCM are (Circle correct answer):
- Only used for malpractice defense and with legal's approval
 - Highly confidential and reported only to the Board of Trustees and senior leadership
 - available to select individuals with a need to know
 - available to any clinician who receives special approval
 - available to all employees and clinicians via the intranet CORRECT
 - posted on the publicly available website
9. Label the following Quality Measures as Structure, Process or Outcome Measures (1=Structure, 2=Process, 3=Outcome)
- | | |
|---|-------------|
| a. Percent of patients who receive flu vaccine | _____2_____ |
| b. Percent of kids with asthma who present to ER | _____3_____ |
| c. 30 day re-admission rate | _____3_____ |
| d. Number of CT scanners in a hospital | _____1_____ |
| e. Surgery patients whose preventive antibiotics were stopped at the right time | _____2_____ |
| f. Patient satisfaction scores | _____3_____ |
10. For 2016-2017 the University of Chicago Medicine Clinical Effectiveness Priority Scorecard includes the following measures EXCEPT: (Circle correct answer)
- Post-operative acute kidney injury CORRECT
 - Healthcare associated Clostridium Difficile diarrhea
 - Ambulatory care: Hypertensive management
 - Overall Hand Hygiene compliance
 - High risk ED patients who leave without being seen
11. In the Institute for Healthcare Improvement model of improvement "PDSA" stands for (Circle correct answer):
- Prepare, Develop, Study, Assess
 - Prepare, Do, Standardize, Assess
 - Plan, Do, Study, Act CORRECT
 - Plan, Develop, Simplify, Act
 - Plan, Develop, Simplify, Assess
12. A well written AIM statement should be (Circle correct answer):
- Targeted
 - Measurable CORRECT
 - Simple
 - Generalizable

Matching Hospital Leaders (Chose one leader for each position)

- 13. Chief Medical Officer & Vice President for Clinical Effectiveness
- 14. Vice President for Risk/Patient Safety and Chief Compliance Officer
- 15. Chief Quality Officer and Director, Center for Healthcare Delivery
Science and Innovation
- 16. Dean of Biological Sciences Division
- 17. University of Chicago Medical Center President
- 18. Executive Director Analytics, Improvement, and Insight, Center for Quality
- 19. Director, Risk Management & Patient Safety

20. Please give feedback about **what worked well** in the GME QI/PS curriculum

21. Please give feedback about what **could be improved** in the GME QI/PS curriculum
