Defining Metrics for Clinical Excellence at Harvard Medical School

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BACKGROUND

- Clinical care delivery is integral to the tri-fold academic mission.
- Failure to recognize clinical excellence can lower faculty morale, harm institutional culture, and have adverse financial impacts.
- Clinical excellence needs to be recognized to retain talented clinicians in AMCs.

PURPOSE

To provide HMS and its affiliates with a range of metrics that can be used to define clinical excellence in the faculty promotion process.

METHODS

1. Perform narrative review of the literature defining clinical excellence

2. Understand how clinical excellence is being defined in other AMCs, including Yale, Johns Hopkins and Stanford

3. Distill findings into validated domains with proposed associated metrics

OUTCOMES

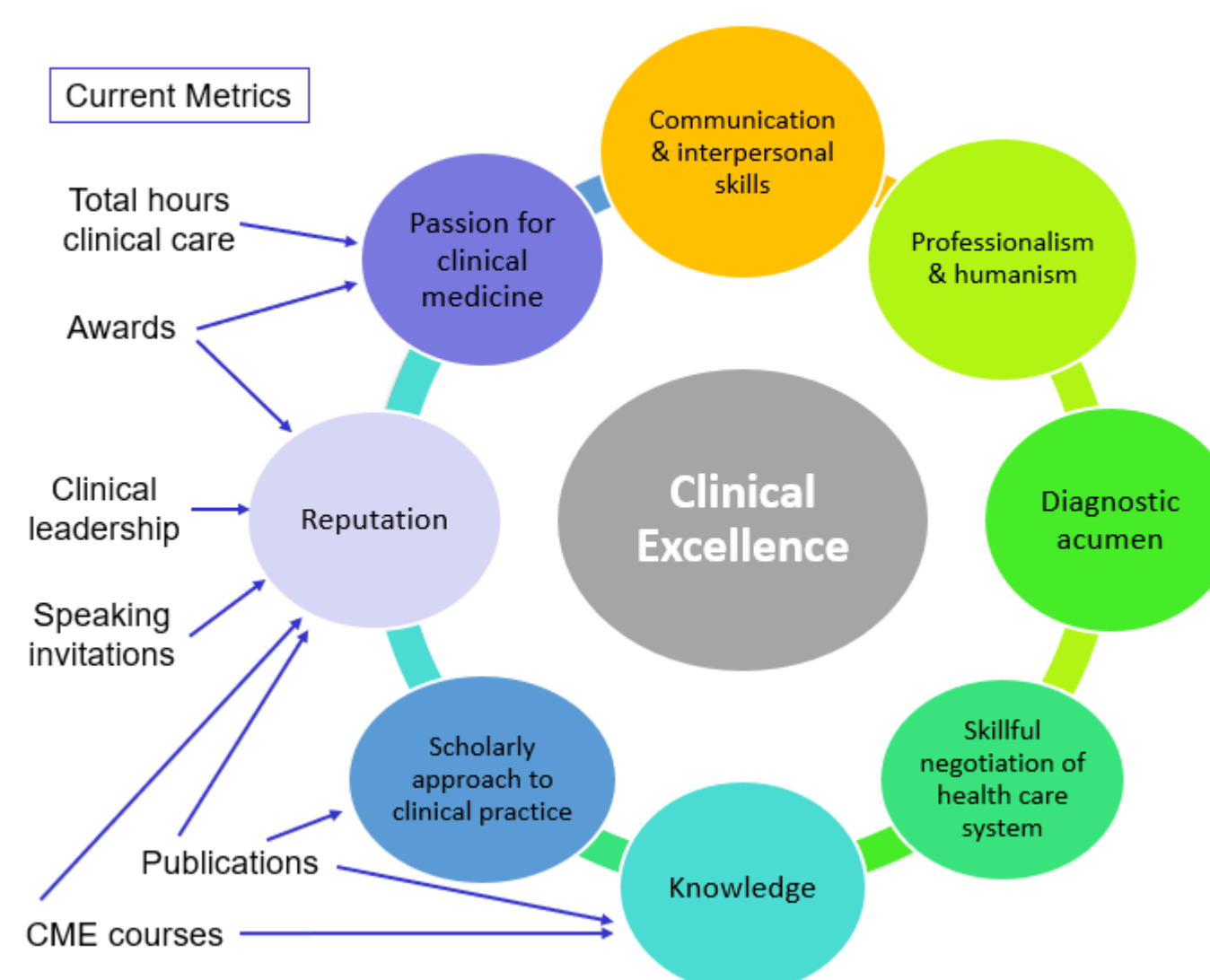Dreyfus model for skill acquisition: 5 steps
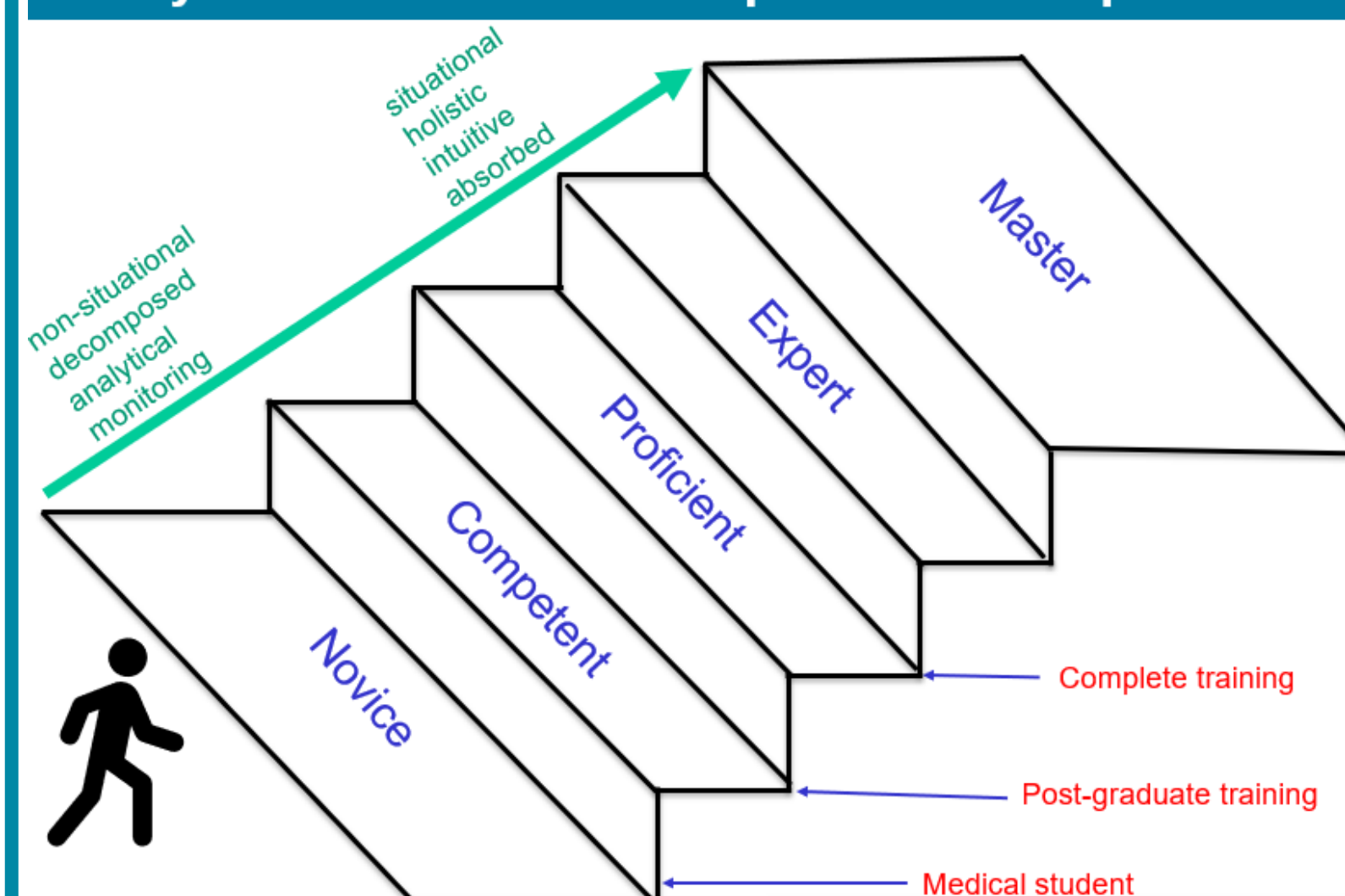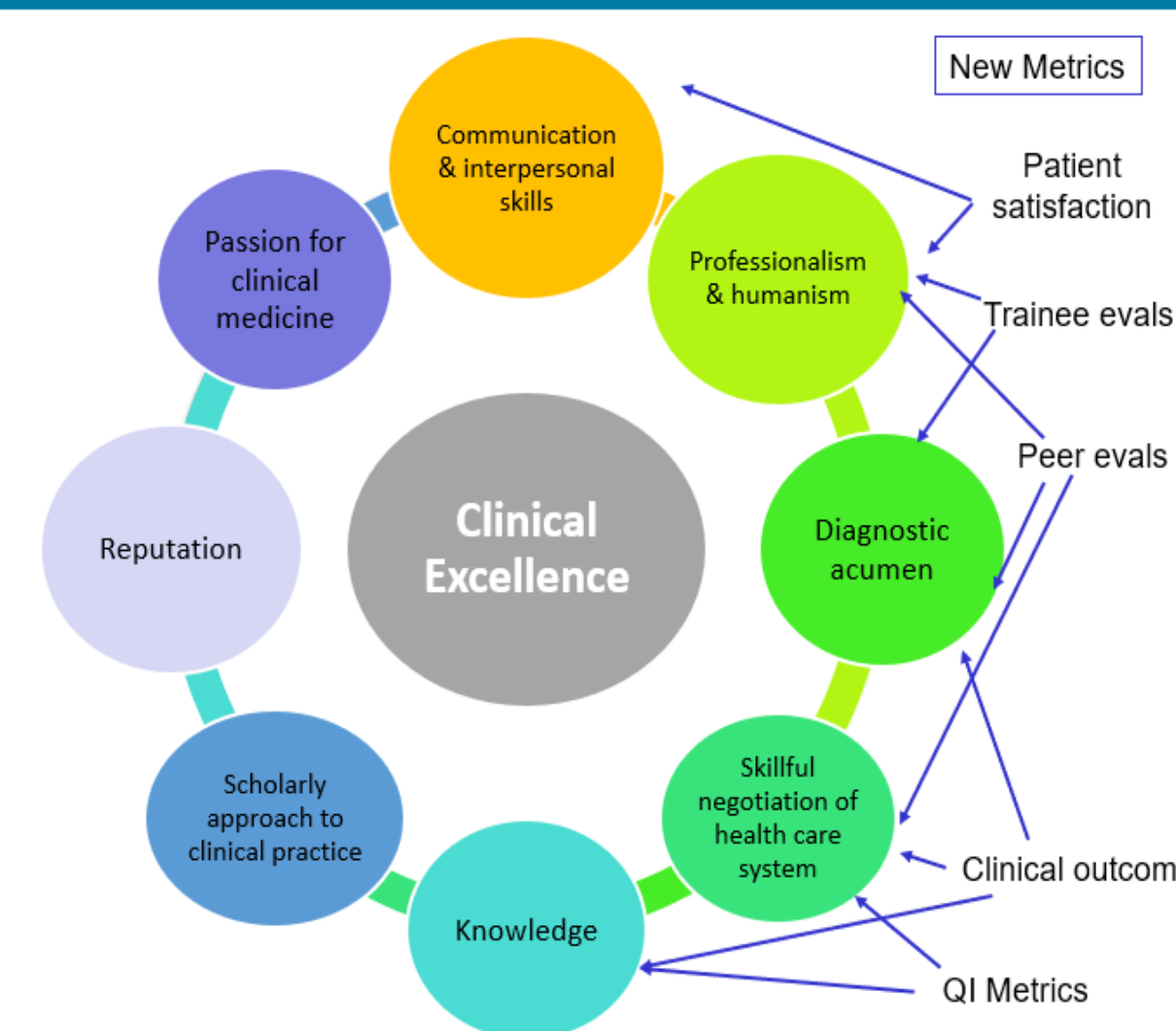

Eight domains of clinical excellence
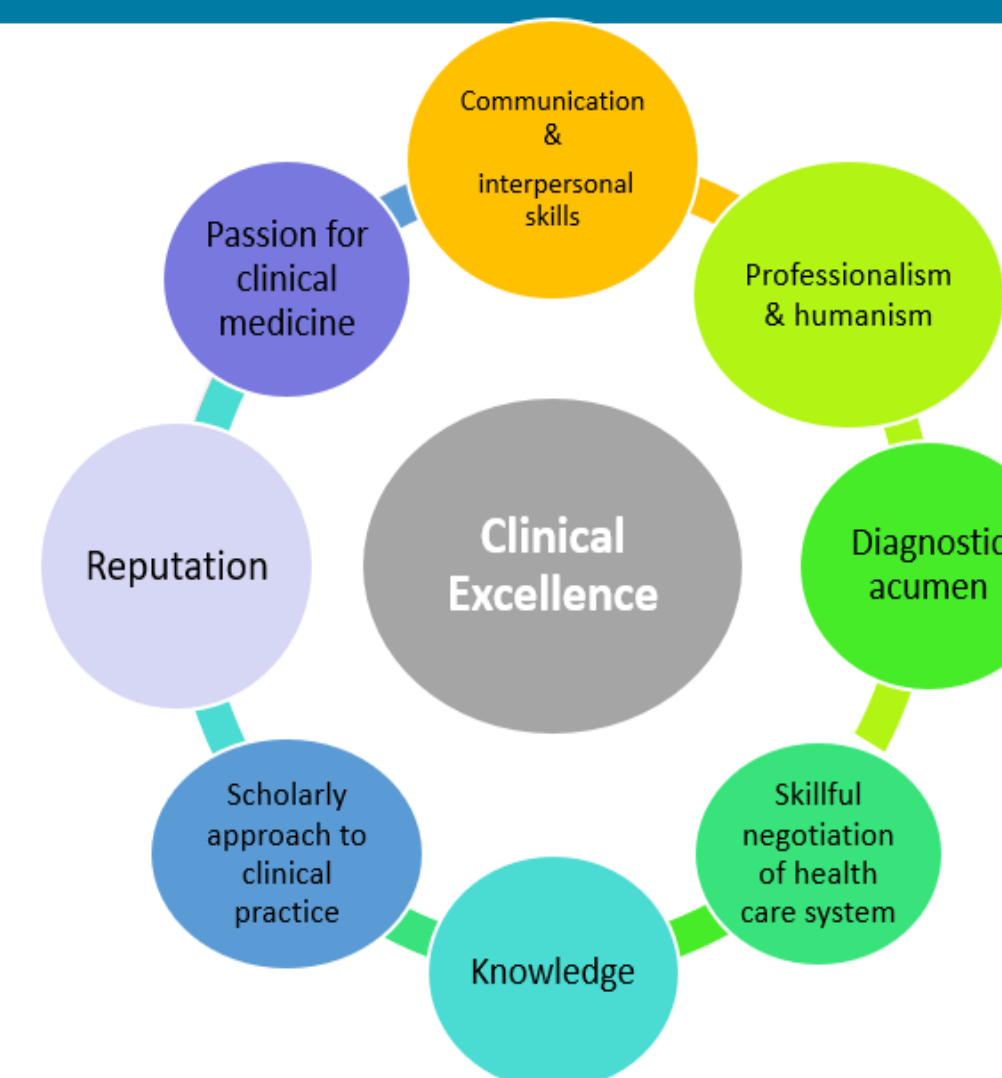
Recognition of Clinical Excellence in sister AMCs:
- Johns Hopkins: clinical portfolios
- Stanford: 360 evaluation from faculty, trainees, staff and patients
- Yale: Self-evaluation combined with evaluation from referring providers

Current metrics applied to 8 domains

New metrics applied to 8 domains

DISCUSSION

- Need to identify and address needs of key stakeholders (faculty impacted by recognition, opinion leaders, HMS leadership including Department Chairs, Dean's office, and University leadership).
- Identify solutions for potential barriers (availability of metrics data, willingness to share metric data, harmonization of metrics, resistance to culture change, financial and administrative ramifications

SUMMARY

- Clinical excellence can be defined and measured
- Sister AMCs have identified unique ways to recognize and reward it
- IAP paves the path for HMS to move toward defining and measuring clinical excellence for its faculty

ACKNOWLEGMENTS