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### BACKGROUND

❖ UNCMC is a health care organization committed to providing high value care to the patients and their families who choose our institution to fulfill their health care needs. Efforts related to quality and safety have intensified over the past 5-10 years involving many employees from numerous departments and divisions. While UNCMC provides outstanding care to our patients, the organizational structure of quality and safety at our institution is siloed, poorly aligned, and lacks a clear infrastructure for resource allocation, data reporting and escalation of key issues to senior leadership.

### PURPOSE

❖ To reorganize the organizational infrastructure around quality and safety in order to be integrated and aligned across our medical center.

### METHODS

❖ Senior leadership reached consensus for a quality and safety reorganization after assessment of UNCMC's current infrastructure and the infrastructure of leading AMCs.  
 ❖ A new Office of Quality Excellence (OQE) was established with 6 different workstreams with specific defined aims.  
 ❖ Any employee with a "quality" job title was integrated into OQE.  
 ❖ Over a period of 6 months, widespread communication on the new office including one-on-ones with most affected teams commenced.

### RESULTS

Deployable Project Team	Peer Review	Clinical Data Management	Infection Prevention	Patient Safety Office	Quality Improvement
<p><b>Mission:</b> Manage urgent or unanticipated QI projects deemed priority by executive leadership.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ Immediately investigate issues (and potential issues) identified by OQE QI personnel</li> <li>❖ Overall direction, coordination, implementation, execution, and completion of multiple, high-level quality improvement projects</li> </ul>	<p><b>Mission:</b> Provide oversight and establish expectations for measuring and evaluating practitioner competencies.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ Developing standards for individual SOM department competency review processes including a mitigation process as necessary</li> <li>❖ Ensure SOM departments have access to data and tools to evaluate practitioners' clinical competency</li> </ul>	<p><b>Mission:</b> To provide high quality clinical data for purposes of external reporting, national benchmarking, and collaborative learning.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ CMS reporting, inpatient and outpatient quality and interoperability including chart abstraction as necessary</li> <li>❖ Develop and maintain executive level external registry dashboard as part of quality data portfolio</li> <li>❖ Management of surveys for accreditation and hospital rating purposes</li> </ul>	<p><b>Mission:</b> To promote a healthy and safe environment by preventing transmission of infectious agents among patients, staff, and visitors.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ Environmental rounding and outbreak investigations</li> <li>❖ Policy review and development</li> <li>❖ Education</li> <li>❖ Quality improvement focused on HAIs</li> <li>❖ Antimicrobial stewardship</li> </ul>	<p><b>Mission:</b> To promote and develop a highly reliable safety culture.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ Safe reporting and learning including daily safety huddles, RCAs, near misses, and morbidity and mortality conferences</li> <li>❖ Participation in Patient Safety Council and Patient Safety Organization</li> <li>❖ Promotion and consultation related to Just Culture and TeamSTEPPS</li> </ul>	<p><b>Mission:</b> To enable higher quality and safer patient care by partnering with health care professionals to drive process improvements, resulting in better patient outcomes.</p> <p><b>Areas of Responsibility:</b></p> <ul style="list-style-type: none"> <li>❖ Program management for organizational quality goals and high priority initiatives</li> <li>❖ Improvement coaching support for hospital service leadership teams and outpatient clinics</li> <li>❖ Analytics, including outcome dashboards and process measure reporting</li> </ul>

### DISCUSSION & NEXT STEPS

❖ Given that the reorganization involved approximately 110 employees from several different departments or divisions, clear communication about the new Office of Quality Excellence was critically important.  
 ❖ Because of the large impact of this effort, the OQE committed to be open and committed to respond to constructive feedback.  
 ❖ Considering that UNCMC participates in approximately 60 registries, the development of a centralized executive level registry dashboard that was meaningful to both senior leadership and clinical stakeholders has been challenging.  
 ❖ While the success of this project was relatively unimpacted by COVID-19, gaps remain in the deployment project team effort, integration of all registries into the new dashboard, and in at least 8 to 10 critical hires to fully execute all of the above.  
 ❖ Integration of quality efforts between the medical center and the physician practice plan has been critical to success and required improved communication between leadership over both organizations.