# **M&M Systems Issues**

#### What is it?

- o Requirement during the PGY 3 IM Residency
- o Focused project to address system issues and/or areas needing QI based on a specific case
- o Based on your insights on patient care problems and knowledge of the process of care here at Summa

## What do I need to do to complete this requirement?

| Step 1 – Target Change (anything from residency- need specifics by October)                                   |                                     |  |
|---|-------------------------------------|--|
| Pick a focused area that needs change or improvement. Think about your own experience with an adverse         |                                     |  |
| event, delays that impacted patient care, or compromised patient safety. Talk with your advisor or other      |                                     |  |
| faculty about projects that are ongoing that need your experience to support improvement.                     |                                     |  |
| Describe Focused Area:  | o Case Study                        |  |
|   | ○ Case Series (<5 cases)            |  |
|   | • Case Series (<5 cases)            |  |
|   |                                     |  |
| Step 2 - Grand Rounds Presentation (Nov-Jan)  |                                     |  |
| You will be scheduled for a presentation of your case study or project that illustrates a gap in quality. The |                                     |  |
| presentation should include your recommendations for feasible and meaningful intervention or change. You      |                                     |  |
| are expected to generate discussion during Q&A to promote other ideas and a critique of your ideas.           |                                     |  |
| Date of Your Presentation:  |                                     |  |
| Step 3 – Attend one Education Committee Meeting (Nov-Jan)   |                                     |  |
| You will be scheduled to attend the ECM directly following your presentation to discuss specific strategies   |                                     |  |
| for leading change, contacts or mentors for the project, relevant quality committees and next steps. During   |                                     |  |
| this time, you will create a project charter that will be reviewed with Mike Oravec. See powerpoint slide for |                                     |  |
| project charter.  |                                     |  |
| Date You Will Attend Education Committee:   |                                     |  |
| Step 4 – Implement Change (Nov-Mar)   |                                     |  |
| You will <b>follow through</b> to participate and promote the system change by active involvement in the      |                                     |  |
| hospital's quality committee or working behind the scenes to change processes of care.                        |                                     |  |
| Action Steps:   | Mentor:                             |  |
|   | Resource Contacts:<br>QI Committee: |  |
| Step 5 – Report Back (Mar-Apr)  | Q1 Committee:                       |  |
| A date will be scheduled for you to return to the ECM to report on progress and/or obstacles encountered.     |                                     |  |
| You may be asked to present your project at the Resident Business Meeting, Quest for Quality Rounds, or       |                                     |  |
| during a CLER visit.  |                                     |  |
| Date You Will Report Back to Education Committee:   | Summarize Accomplishment:           |  |
| -   | -                                   |  |
| Resident Name:  |                                     |  |
|   |                                     |  |

### **M&M Systems Issues**

1. How do I put together an M&M presentation?

Great question! See the pre-made powerpoint slides on imsumma.org.

2. How do I know I have a good case?

Morbidity and Mortality cases generally fall within 4 realms- communication, coordination of care, escalation of care, and workload. Your M&M presentation can focus on a serious event (reached the patient and caused harm) or a 'near miss' (reached the patient, but did not cause harm).

#### **Examples:**

- Patient with anaphylaxis in office and no EPI in PYXIS
- Patient with hip fracture after DEXA several years ago showed osteoporosis and patient was not started on bisphosphonate
- Patient on med team given narcotics overnight when team did not want patient to have any secondary to unclear sign out note

Talk to a faculty member if you have any questions regarding your case. Faculty members will have cases in mind that you could potentially use as well, but keep in mind, these should be YOUR cases.

3. Can I present an on-going QI project or research project?

Yes, but both must be based on a specific case. These must be substantial projects that have a large scope and should be already on-going prior to your presentation (i.e. you started a project PGY1 year and want to present it during your PGY-3 year). Quality improvement and research projects must be formatted into an M&M presentation. You MUST talk to Mike Oravec prior to deciding to present one of these. Keep in mind that QI/Research projects may involve IRB considerations that may complicate your timeline for completion (talk to Mike about this as well).

4. Can I work with a colleague?

Yes. You may work in groups of 2-3 if you are doing a QI or research project. You may NOT work together on a case study. Case series will be determined on a case by case basis. Please clear this with Mike Oravec before your start.

- 5. Do I have to implement my solution prior to my presentation?
  - NO. The focus of your presentation should be on the case, problem, and *potential* solutions. You will garner other potential solutions from attendees of your M&M presentation.
- 6. What do I do with the form on the next page?

Please give it to a member of the faculty present at your presentation; they will take it from there.

# **Morbidity and Mortality Conference Peer Reviews**

| Date of pres | entation:   |
|--------------|---|
| Presenter:   |   |
| Patient name | e/DOB or medical record number:   |
| Number assi  | gned for quality of care (please circle):   |
| 1            | (ideal care)  |
| 2            | (documentation issues that did not impact patient care)   |
| 3            | (did not meet standard of care, but did not impact outcome or harm the patient—e.g. resulted in transfer to telemetry for additional monitoring, required additional testing, or prolonged hospital stay) |
| 4            | (did not meet standard of care and did effect outcome or harm the patient)  |
| Brief comme  | entary about the case and reasons for assigning level 3 or 4 (if so assigned):  |
|              |   |
|              |   |
|              |   |
|              |   |
|              |   |
|              |   |
|              |   |

Please return this form to Mike Rich in the Department of Medicine

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