

QUALITY IMPROVEMENT AND PATIENT SAFETY WEILL DEPARTMENT OF MEDICINE

Quality Structure

I. Oversight

The WDOM's Chairman, Executive Vice Chairman and PSO, along with Committee representatives, have responsibility for implementing and managing the QPS plan. To assist in this effort, the Medical College's Chief Quality and Patient Safety (QPS) Officer works collaboratively with the Department and New York-Presbyterian to ensure full integration of all patient safety and risk management initiatives, policies and procedures between the Weill Cornell Medicine/Physician Organization and NYP quality and patient safety programs.

The Vice Chair of QPS and Quality Assurance Committee Chair(s) are appointed by the DOM Chairman and are responsible to the Department Chair, Executive Vice Chair and Chief QPS Officer for establishing and implementing a departmental patient safety and risk management plan in accordance with Medical College policies and procedures. They are assisted in these activities by the Quality and Patient Safety Specialist assigned by NYP and an improvement specialist WDOM.

II. Vice Chair, Quality and Patient Safety: Jennifer I. Lee, M.D.

The responsibilities of the Vice Chair for QPS include but are not limited to:

- A. Development and implementation of a patient safety plan in accordance with the Medical College patient safety plan that is integrated with the NYP and PO Quality and Patient Safety plans
- B. Assessment of patient safety risks, establishment of processes to mitigate risk and monitor compliance with processes
- C. Appointment to the Quality Improvement Patient Safety Committee representatives from the Divisions within the Department of Medicine nominated named as members
- D. Collaboration with the Quality and Professional Review Chair(s) in the review of patient safety adverse events, including near-misses, deaths, complaints and lawsuits and facilitating investigations and corrective actions as necessary
- E. Collaboration with the PI specialist to ensure compliance with NYP and national quality and patient safety guidelines
- F. Research and establishment of best practices as goal for clinical performance
- G. Reporting results of monitoring activity to Department Chair, WCM/PO and NYP Chief QPS Officers and identifying patient safety concerns for consideration in the credentialing and reappointment process
- H. Serving as departmental representative on the NYP Executive QPS Committee and/or appointing a designee

- I. Education of faculty, staff, patients and families in patient safety and risk management
- J. Facilitating collaboration with other disciplines to identify opportunities for patient safety research
- K. Serving as Department patient safety representative on various NYP committees such as Risk Management and Significant Events
- L. Overseeing and guiding the implementation of quality and patient safety projects across the department
- M. Development and maintaining personal expertise on patient safety and risk management; participation in national meetings and organizations focused on these topics

III. Quality Assurance Committee

Subcommittee I Chair: Richard Cohen, M.D.

Subcommittee II Chair: Henry Murray, M.D.

The responsibilities of the Department's Quality Assurance Committee and Chair(s) include but are not limited to:

- A. Appointment to the Quality Assurance and Professional Review Committee of peer-nominated representatives from the Divisions within the Department of Medicine named as members
- B. Collaboration with the Vice Chair of QPS and NYP QPS Specialist in the monthly review of adverse patient safety events, near-misses, complaints or lawsuits. Review of events to be conducted through assignment by the NYP QPS Specialist to the Quality and Professional Review Committee
- C. Determination as to whether the standards of care were met and whether process improvement measures are indicated to minimize or eliminate healthcare errors and improve quality of care
- D. Development of procedures for immediate review, investigation, and response to serious patient safety issues within 24 hours of the event, with *ad hoc* Quality and Professional Review committee meetings to be arranged as deemed necessary by the Department Chair or Vice Chair of QPS
- E. Recommendations for investigation and/or corrective actions presented to the Department Chair, Vice Chair of QPS
- F. Recommendations for improvement measures presented to the Vice Chair of QPS for further discussion at the Quality Improvement and Patient Safety committee meetings
- G. Reporting results of monitoring activity to Department Chair, Executive Vice Chair and Chief QPS Officer and identifying patient safety concerns for consideration in the credentialing and reappointment process