Scope: Applies to all University of South Florida Morsani College of Medicine ("USF MCOM") residents and fellows ("Residents") in Accreditation Council for Graduate Medical Education ("ACGME") accredited and non-accredited/non-standard programs as appointed through the House Officer Contract issued by the USF MCOM Graduate Medical Education Office ("GME Office").

Background: Patient safety and quality improvement are critical aspects of residency and fellowship training programs. The goals of this policy are to ensure Residents are educated on, integrated with, and are provided feedback on patient safety and quality improvement initiatives.

Definitions: Safety event: An adverse event, near miss, or other event resulting from unsafe conditions in the clinical care setting. May also be referred to as a patient safety event; previously referred to as adverse event in the Common Program Requirements.

Policy: The Sponsoring Institution is responsible for oversight and documentation of Resident engagement in the following:

- Patient Safety: Per ACGME Institutional Requirement III.B, the Sponsoring Institution must ensure that Residents have:
  - access to systems for reporting errors, adverse events, unsafe conditions, and near misses in a protected manner that is free from reprisal; and
  - opportunities to contribute to root cause analysis or other similar risk-reduction processes.
- Provide faculty, Residents, and interprofessional team members with summary information of their institution's patient safety reports.
- Quality Improvement: The Sponsoring Institution must ensure that Residents have:
  - access to data to improve systems of care, reduce health care disparities, and improve patient outcomes; and,
  - opportunities to participate in quality improvement initiatives.

Procedure

Patient Safety

A culture of safety requires continuous identification of vulnerabilities and a willingness to transparently deal with them. An effective organization has formal mechanisms to assess the knowledge, skills, and attitudes of its personnel toward safety in order to identify areas for improvement.

Reporting, investigation, and follow-up of safety events, near misses, and unsafe conditions are pivotal mechanisms for improving patient safety, and are essential for the success of any patient safety program. Feedback and experiential learning are essential to developing

true competence in the ability to identify causes and institute sustainable systems-based changes to ameliorate patient safety vulnerabilities.

The program is responsible for engaging its faculty, and residents and must:
1. Actively participate in patient safety systems and contribute to a culture of safety.
2. Know their responsibilities in reporting patient safety events and unsafe conditions at the clinical site, including how to report such events.
3. Participate as team members in real and/or simulated interprofessional clinical patient safety and quality improvement activities such as root cause analyses or other activities that include analysis, as well as formulation and implementation of actions and may also include:
   a. Safety review meetings
   b. GME Quality Improvement/Patient Safety Committees
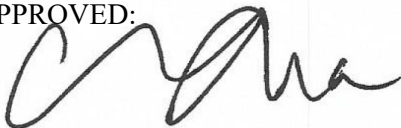   c. Peer Review Committees

Quality Improvement

Access to data is essential to prioritizing activities for care improvement and evaluating success of improvement efforts.

The program, including its faculty and Residents, must:
1. Receive data on quality metrics and benchmarks related to their patient populations to ensure that quality metrics used by the Sponsoring Institution are shared with residents/fellows and faculty members.
2. Have access to data to improve systems of care, reduce health care disparities, and improve patient outcomes.
3. Have opportunities to participate in quality improvement initiatives.
4. Provide any additional quality improvement requirements as specified by their ACGME specialty specific review committee.

APPROVED:

Senior Associate Dean, Graduate Medical Education / DIO

Date of Origin	Effective	Revision/GMEC Approval:	Originally Policy #
09/2023	10/2023	10/2023	N/A