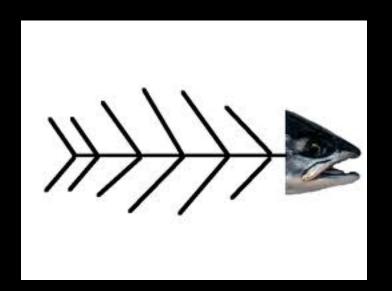
Stuart Jones, MD Sam Lin, MD Claudia Reardon, MD Art Walaszek, MD

University of Wisconsin School of Medicine and Public Health

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THERE'S SOMETHING FISHY GOING ON:
USE OF FISH BONE DIAGRAMS AS A QUALITY
IMPROVEMENT TOOL FOR PSYCHIATRY
RESIDENTS AND THEIR PROGRAMS

No disclosures

Objectives

- Describe how having residents participate in fish bone diagrams can help them to achieve a systems-based practice Milestone.
- Use a fish bone diagram to analyze the underlying contributory factors to a problem within their residency program.
- Identify next steps for incorporating the use of root cause analysis within a quality improvement curriculum for psychiatry residents.

Agenda

- Background
- Example of use of a fishbone diagram within a residency program
- Your turn!

Why QI as a tool for residency programs?

• OI is a systematic way to study a problem. It makes us more efficient in figuring out the causes of a problem, intervening with changes to try to fix the problem, and measuring if we actually made the problem better.

Why QI?



"Every system is perfectly designed to get the results that it gets."

-Don Berwick, MD

Former Administrator of Center for Medicare and Medicaid Services

Lots of QI tools...

- PDCA cycles
- Process maps
- Fishbone diagrams

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Fishbone Diagrams (=Ishikawa Diagrams, Cause and Effect Diagrams)

- Give us a way to explore <u>ALL</u> of the factors that could be causing a complicated problem, rather than just the most obvious ones
- This allows us to solve the problem more quickly and more completely, rather than just addressing part of it and having the problem run on and on
- Can reveal systems problems that will cause trouble again if not recognized/addressed
- Fishbone diagrams=brainstorming + mind map

Fishbone Diagrams: another (major) reason to care=MILESTONES!

SBP1. Patient Safety and the Health care Team

A: Medical errors and improvement activities

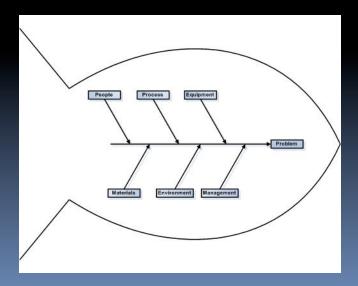
B: Communication and patient safety

C: Regulatory and educational activities related to patient safety

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Has not Achieved Level 1	Level 1	Level 2	Level 3	Level 4
	1.1/A Differentiates among medical errors, near misses, and sentinel events	2.1/A Describes the common system causes for errors	3.1/A Describes systems and procedures that promote patient safety	4.1/A Participates in formal analysis (e.g., root-cause analysis, failure mode effects analysis) of medical errors and sentinel events
	1.2/B Recognizes failure in teamwork and communication as leading cause of preventable patient harm	2.2/B Consistently uses structured communication tools to prevent adverse events (e.g., checklists, safe hand-off procedures, briefings)		
	1.3/C Follows institutional safety policies, including reporting of problematic behaviors and processes, errors, and near misses	2.3/C Actively participates in conferences focusing on systems-based errors in patient care		4.2/C Develops content for and facilitates a patient safety presentation or conference focusing on systems-based errors in patient care (i.e., a morbidity and mortality [M&M] conference)

Fishbone Diagrams: How to Do It

- Step 1: Identify the problem
- Step 2: Work out the major factors involved
- Step 3: Identify possible causes
- Step 4: Analyze your diagram



Step 1: Identify the problem

- Write down the exact problem you face (if appropriate, identify who is involved, what the problem is, and where/when it occurs).
- Then, write the problem in a box on the righthand side of a large sheet of paper, and draw a line across the paper horizontally from the box.
- This arrangement looks like the head and spine of a fish and gives you space to develop your ideas.

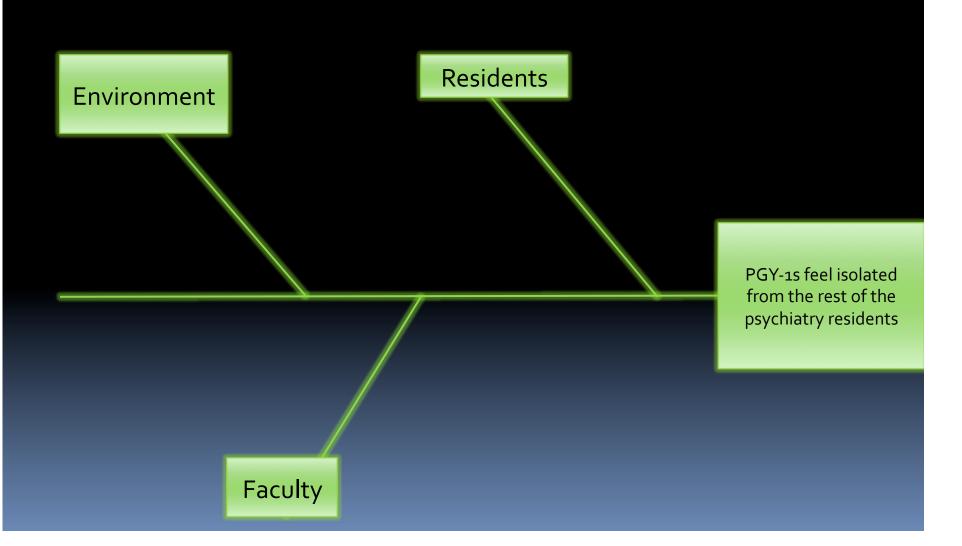
Step 1: Identify the problem

PGY-1s feel isolated from the rest of the psychiatry residents

Step 2: Work out the major factors involved

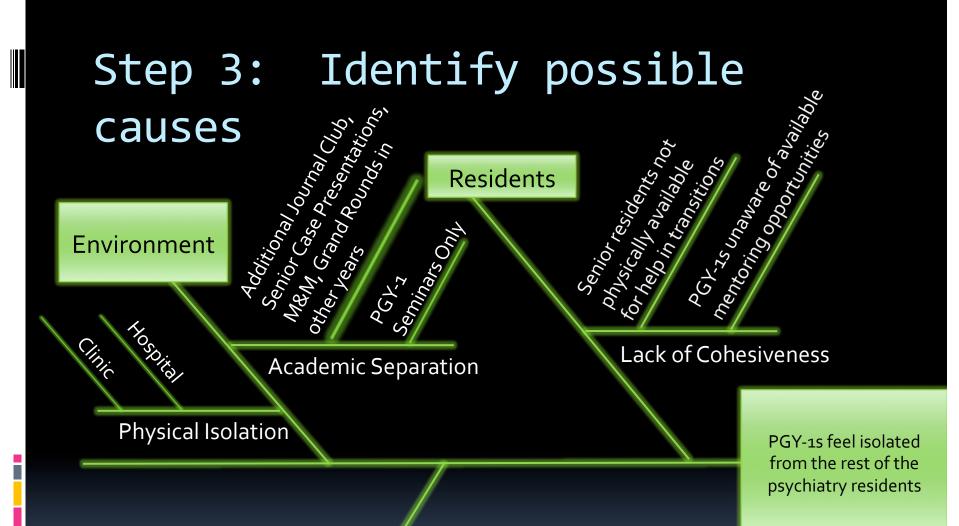
- These may be people involved with the problem, management, equipment, materials, environment, process, etc.
- Draw a line off the "spine" of the diagram for each major factor/category, and label each line.

Step 2: Work out the major factors involved



Step 3: Identify possible causes

- For each of the factors you considered in step
 2, brainstorm possible causes of the problem
 that may be related to the factor.
- Show these possible causes as shorter lines coming off of the "bones" of the diagram.
- Where a cause is large or complex, it may be best to break it down into smaller causes.
 Show these as lines coming off each cause line.



Resistance to perform tasks routinely delegated to residents

Separation between outpatient and inpatient faculty as well

Faculty

Step 4: Analyze your diagram

- By this point, you should have a diagram showing all of the possible causes of the problem that you can think of.
- You can now investigate the most likely causes further, which may involve meeting with stakeholders, sending out surveys/ emails, etc. This is designed to test which of the possible causes is/are actually contributing to the problem.

Step 4: Analyze your diagram

Physical Isolation

Environment

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Resistance to perform tasks routinely delegated to residents

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Step 4: Analyze your diagram PGV-15 Unamare of available

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Envir

What we did:

- Residency-wide seminars at outpatient clinic on Wednesday afternoons



- Some joint seminars for PGY-1s and PGY-2s
- Encouragement for PGY-1s to attend Friday conferences if clinical duties allow

Residents

Senior residents not for help in transitions physically available aninars Only

Lack of Cohesiveness

Mentoring opportunities

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What we did:

- Assign senior residents to inpatient psychiatric unit(s) for first several weeks to help with the transition to PGY-1 year
- Specific emails to PGY-1s about their assigned resident and faculty mentor
- PGY-1 chief resident spending some of his/her protected time at the hospital to help with problems/issues

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What we did:

- Faculty agreed to cover all inpatient clinical duties on Wednesday afternoons
- Encourage faculty to attend Friday conferences as clinical duties allow

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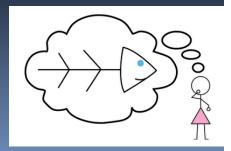
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Resist routin reside

Your turn!

- Think of a problem you are facing in your residency program (alone or with partner)
- Draw the spines on your fish for each major category of possible contributing factors Identify specific possible causes for each major "spine" and write them down
- Then we'll share as a group



Potential categories

- people/personnel
 - residents
 - faculty
 - staff
- management
- equipment
- materials
- environment

- surroundings
- safety
- skills
- culture
- methods
- process
- et cetera ...

Thank you!

- sjones5@uwhealth.org
- slin@uwhealth.org
- clreardon@wisc.edu
- awalaszek@wisc.edu