



ABFM Quality Improvement Ideas for Non-traditional Clinical Settings

The ABFM Self-Directed Clinical pathway allows physicians to develop their own quality improvement project to get Performance Improvement credit for ABFM certification and 20 credits of CME. You do not need to have continuity to use this pathway. For more information about completing the Self-Directed Clinical pathway go to:

<https://www.ohioafp.org/education/abfm-family-medicine-certification/>

ER/Urgent Care

Special Considerations: Use chart review of 10 sequential patients (before and after intervention). As there is not continuity, a much shorter interval is reasonable.

Improvement Project ideas:

- Reducing wait times
- Improving communication with a patient's primary care physician
- Setting up appropriate follow-up with primary care physician
- Appropriate antibiotic usage for respiratory infection
- Timely completion of records

Hospitalist

Special Considerations: Consider using Medicare quality measures and certification measures as this data is already being collected

Improvement Project ideas:

- Reduced readmission rate
- Improved communication with primary care doctor
- Improving patient education/engagement for a certain condition
- Improving sugar control for diabetic patients
- Timely documentation

Locum Tenens

Special Considerations: As time in a location, access to data, and ability to make changes to the system may all be limited, intervention may be fairly short and may often focus on the physician rather than patient outcomes.

Improvement Project Ideas:

- Reduced time required for documentation
- Improving communication with other clinical staff
- Scheduling follow-up (to improve continuity of care)
- Use of appropriate community resources

Medical Director (such as Hospice or nursing home)

Special Considerations: Work may be focused on other clinicians rather than one's own patients

Improvement Project ideas:

- Timely completion of records

- Appropriate documentation for medications (such as pain medications or antipsychotics)

- Documentation of advanced directives

- Appropriated records sent with patient for primary care/specialty office visits

- Adequate communication with primary care physicians

Nursing Home Practice

Special Considerations: Using Medicare quality measures and certification measures as this data is already being collected

Improvement Project ideas:

- Appropriate prescribing of antipsychotics

- Fall prevention

- Wound prevention

- Timely signing of orders

- Timely completion of records

Prison Medicine

Special Considerations: Limitation on the data that can be collected and limited ability to change the system

Improvement Project ideas:

- Reducing time to complete charting

- Involvement of nursing staff in patient education

- Addressing institutional policies to improve inmate health

- Having old records available at the time of visit

- Establishing follow-up after release

Telehealth

Special Considerations: Limited staff to interact with patient, limited continuity

Improvement Project ideas:

- Appropriate antibiotic usage for respiratory infections

- Appropriate lab monitoring for new medications (such as antihypertensives)

- Appropriate follow-up of abnormal tests

- Communication with primary care physician

- Appropriate follow-up plan established for patients with acute illness