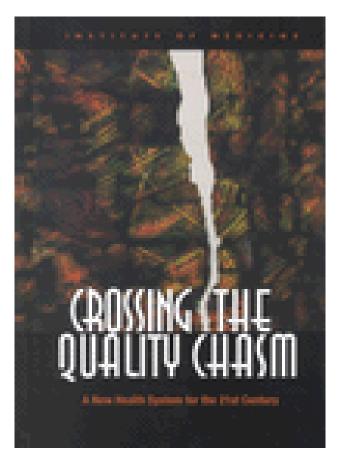
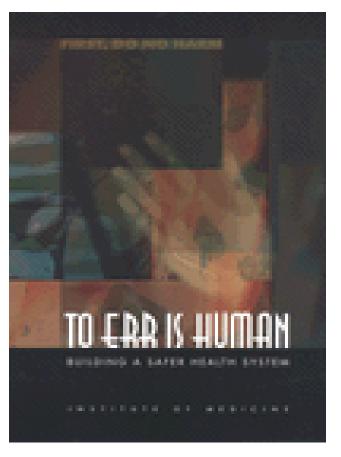
## Master of Science in Healthcare Quality and Safety (MS-HQS)

Susan DesHarnais, PhD, MPH Program Director Jefferson School of Population Health Philadelphia, Pennsylvania



## **Background and Need: 10 Years Ago**







## **Institute of Medicine Report 1999: To Err is Human**

• 44,000 to 98,000 deaths occur each year due to medical errors

• 100,000 deaths from hospital-acquired infections, 50% of which were preventable



## **Crossing the Quality Chasm Recommendations:**

- Redesign of care processes based on best practices
- Use of information technologies to improve access to clinical information and support clinical decision making
- Knowledge and skills management
- Development of effective teams
- Coordination of care across patient conditions, services, and settings over time
- Incorporation of performance and outcome measurements for improvement and accountability



## What has changed since these reports were published?



## Some process changes, due to

- increased public reporting of mortality, errors
- the beginning of pay-for-performance incentive plans
- the possibility of some types of health care reform
- the adoption of various sets indicators by governmental and quasi-regulatory agencies



## **But These Changes are Not Enough!**



### The 2004 Commonwealth Fund International Health Survey

- The 2004 Commonwealth Fund International Health Survey reveals missed opportunities by physicians to communicate effectively, involve patients in treatment decisions, and recognize patients' concerns or preferences (Schoen et al. 2004).
- 78% of patients discharged from the emergency department do not adequately comprehend important information or instructions, leaving them at risk of improperly managing their condition(s), and potentially experiencing harm. (National Priorities Partnership)



Clearly, there is a great need for well-trained professionals who have the detailed knowledge and skills to improve healthcare quality and safety, both at the institutional level and at the regulatory level.



#### School of Population Health, Thomas Jefferson University

New School, new Dean (David B. Nash, M.D., MBA) Several innovative degree and certificate programs

#### 2009

Masters of Science in Healthcare Quality and Safety

- Certificate in Healthcare Quality and Safety
- Masters of Science in Health Policy
- Certificate in Health Policy
- MPH Program

#### 2010

- Masters of Science in Chronic Care Management
- Doctoral degree in Population Health
- Education goes online



#### Masters of Science in Healthcare Quality and Safety: Our Program Goals

Our students will be prepared to

- Analyze, identify, interpret, and implement policies, care guidelines, and regulations relevant to quality and safety
- Apply measurement and analytical skills to propose, design, conduct, evaluate, critique, and identify healthcare quality and patient safety problems and develop appropriate quality improvement activities
- Apply advanced management and leadership skills to develop management and policy approaches that address problems in healthcare quality and patient safety



## **Our Target Audiences**

- Physicians, nurses, pharmacists, and other healthcare professionals
- People working in payer settings, including insurers, managed care
- Risk management professionals, attorneys
- Healthcare program administrators
- Health Information Technology professionals and analysts
- People working in public health, government or regulatory positions at the local, state, or federal level



## **Our Graduates Will Lead Quality and Safety Initiatives in:**

- -Hospitals
- Outpatient facilities
- Integrated delivery systems
- -Health insurance organizations
- Governmental health care agencies
- -Health policy research firms
- Community-based advocacy and service organizations



# **Two-Pronged Approach to Changing the Way Things Are Done:**

#### **Knowledge and skills management**

- Redesign of care processes based on best practices
- Use of information technologies to improve access to clinical information and support clinical decision making

#### **Cultural and behavioral changes**

- Development of effective teams and improved communications
- Coordination of care across patient conditions, services, and settings over time
- Incorporation of performance and outcome measurements for improvement and accountability



#### MS-HQS Curriculum (39 credits) Certificate in HQS (18 credits)

- U.S. Healthcare Organization and Delivery
- Health Law and Regulatory Issues
- Health Informatics
- Health Care Quality & Safety Measurement & Outcomes Analysis
- Organizational Behavior Change in Health Care
- Quality and Safety Tools and Methods
- Population Health Management\* (optional 7<sup>th</sup> course)
- Research and Evaluation Methods For Quality and Safety Improvement
- Advanced Applications of Quality and Safety Methods in Clinical Settings
- Economic Analysis in Health Care
- Capstone Courses (Seminar And Project)\*
- An elective



## **Unique Features of Jefferson Program**

- Second program of its kind in the U.S.
- Requires 3 years of clinical or related work experience before enrolling, as well as competencies in Statistics and Medical Terminology
- Access to an incredible network of organizations for capstone projects
- Access to leaders in the field as faculty and lecturers
- Availability of a sophisticated Simulation Center to engage students by the development of innovative teaching techniques



## **Comments and Questions**

