Introduction:
In accordance with ACGME Common Program Requirements, residents must “systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement.” As such, “The program director must ensure that residents are integrated and actively participate in interdisciplinary clinical quality improvement and patient safety programs.”

The University of Colorado Denver School of Medicine (UCDSOM) Graduate Medical Education Committee (GMEC) requires each ACGME accredited residency and fellowship program to develop policies to ensure all residents are involved in Quality Improvement/Patient Safety (QI/PS) activities.

Definition:
Quality Improvement/Patient Safety activities include but are not limited to the following:

- Quality Improvement/Patient Safety Conferences (e.g., Morbidity and Mortality)
- Participation in institutional Quality Management Committees
- Grand Rounds
- Patient Satisfaction Surveys
- Core Measures
- Utilization Management
- Elective Quality Improvement rotations (e.g., LEAN)
- Scholarly activity resulting in implementation of initiatives to improve patient quality and safety of care

Policy:
Each residency and fellowship program must ensure each resident participates in Quality Improvement/Patient Safety activities. The level of participation will vary depending on the functional role of the resident or fellow in patient care and the QI/PS activities currently underway within the clinical setting and institution.

1. At a minimum, every training program must incorporate Quality Improvement/Patient Safety Conferences (e.g., Morbidity and Mortality) into its curriculum, including use of the prescribed Patient Safety/M&M/Occurrence Review Form if applicable to the institution.
2. At least annually, in conjunction with the Annual Program Evaluation, the Designated Institutional Official for GME will provide the GMEC with a report of QI/PS activities as they pertain to the residents and the teaching programs.
3. The DIO will address any concerns identified regarding insufficient QI/PS involvement.