Continuous Quality Improvement

**Senior Leader:** Medical School Dean  
**Responsible University Officer:** Vice Dean for Education & Academic Affairs  
**Policy Owner:** Director of Accreditation, Compliance & Continuous Quality Improvement  
**Policy Contact:** Director of Accreditation, Compliance & Continuous Quality Improvement

**POLICY STATEMENT**

As part of the University of Minnesota Medical School’s (UMMS) commitment to the highest standards of quality, this policy ensures systematic evaluation of the educational program to promote efficiency, effectiveness, and ongoing improvement.

**REASON FOR POLICY**

This policy ensures the UMMS engages in continuous and intentional processes that support medical educational program improvement and ensures a positive outcome during accreditation review.

This policy also ensures the UMMS meets Liaison Committee for Medical Education (LCME) accreditation requirements as follows:

**Element 1.1: Strategic Planning and Continuous Quality Improvement.** "A medical school engages in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes used to improve programmatic quality, and ensure effective monitoring of the medical education program’s compliance with accreditation standards."

**PROCEDURES**

This policy identifies CQI activities including:

- Efforts to engage in ongoing monitoring of accreditation standards
- Efforts to coordinate quality improvement initiatives associated with deficiencies in meeting LCME Standards

Monitoring of UMMS medical education program elements as they relate to this policy will occur regularly. Areas of monitoring include, but are not limited to:

- Identification of risk areas based on current LCME Standards and Elements
- Ongoing citations of Standards or Elements from prior accreditation visits
- Institutional strategic plan objectives that impact the medical education program, services, or resources in such instances where they overlap or align with accreditation standards

**Scope**
UMMS understands that CQI is an integral part of all efforts within the school to develop programs and services to prepare students to become the highest quality physicians and to meet requirements of external agencies. While this Policy may serve as a useful model for other improvement efforts within the UMMS, CQI not directly associated with LCME Accreditation requirements are outside the scope of this policy.

Roles

**Vice Dean for Education & Academic Affairs:** Continuous Quality Improvement efforts related to the educational mission of the school and associated with compliance with LCME requirements, are the responsibility of the Office of Medical Education (OME) under the purview of the Vice Dean for Education and Academic Affairs. Priorities for CQI efforts as they relate to this policy will focus on areas that have direct impacts on undergraduate medical education and the undergraduate medical student experience.

**Medical Student Education Committee (MSEC):** The MSEC and its subcommittees are charged with full and absolute responsibility for the continuous quality improvement (CQI) processes in the design, review, evaluation, and policies associated with the curricular program as a whole. This includes curricular content, methods of pedagogy and assessment, and setting standards of achievement for successful graduation from the medical education program.

**CQI Steering Committee:** Chaired by the Vice Dean for Education & Academic Affairs, the CQI Steering Committee has oversight in monitoring compliance with LCME Standards, setting accreditation-related priorities, obtaining progress reports from relevant stakeholders on compliance with, or improvement plans related to, LCME Standards and Elements. Intentionally flexible, membership to the CQI Steering Committee should reflect a broad range of stakeholders across all aspects of the educational program. It is also expected that members will serve on the LCME Executive Task Force during Institutional Self-Study periods, whenever possible. The CQI Steering Committee should provide updates to the Dean and the Dean’s Leadership Team, at a minimum annually.

**Office of Accreditation and Continuous Quality Improvement (OACQI):** Under the Director, The Office: 1) provides overall direction in establishing systems for ongoing monitoring of LCME compliance; 2) serves as liaison to the LCME regarding accreditation-related questions; 3) supports the CQI Steering Committee and the Vice Dean for Education & Academic Affairs in accreditation-related efforts; 4) collaborates with the MSEC and with other offices of the medical school to advise on LCME requirements and maintain compliance in their charges; 5) develop and implement CQI initiatives as part of an overall quality management system; 6) coordinate all administrative tasks associated with accreditation Self-Study periods.

**Quality Management:**

Effective Quality Management is predicated upon utilizing systematic approaches to monitoring performance (quality planning), identifying areas for improvement (quality assurance and quality control), and developing interventions and methods for measuring the impact of those interventions (quality improvement). Quality Management is founded in the context of available data including, but not limited to, the most recent version of the Data Collection Instrument (DCI), previous accreditation reports, LCME Status Reports, AAMC Graduation & Year Two Questionnaires, Independent Student Analyses, Executive Summaries, and internally generated data. In addition, needs assessments and root cause analyses will be conducted, as needed.
**ADDITIONAL CONTACTS**

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<tbody>
<tr>
<td>Primary Contact</td>
<td>Name</td>
<td>Phone</td>
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<tr>
<td>Project Manager</td>
<td>Ali Niesen</td>
<td>Phone</td>
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**DEFINITIONS**

**Quality Management (QM):** UMMS defines Quality Management as a formalized system of documenting and evaluating components of its services and programs for the purposes of maintaining or achieving desired outcomes and levels of quality. Specifically, QM helps coordinate and direct UMMS’ activities to meet established quality standards within the context of accreditation requirements, and improve its effectiveness and efficiency in those areas on a continual basis. CQI is a component of a QM program.

**Continuous Quality Improvement:** Within the context of this policy, continuous quality improvement refers to ongoing efforts to motivate improvements in efficiency, effectiveness, quality, or performance as they relate to accreditation standards. These efforts should be systematic as well as data and outcomes driven.

**Strategic Plan:** Reference to the Strategic Plan in this context can occur at the organizational level (medical school), or departmental level (Undergraduate Medical Education) into which LCME-related CQI efforts should feed and to which CQI efforts should align.

**RELATED INFORMATION**

For more information on the Liaison Committee on Medical Education (LCME) and accreditation resources visit their site at [www.lcme.org](http://www.lcme.org).

For Information on the CQI Initiative of the University of Minnesota Medical School, visit: [https://www.med.umn.edu/continuous-quality-improvement-initiative](https://www.med.umn.edu/continuous-quality-improvement-initiative)

**HISTORY**

**Policy Created:** September, 2018

**Policy Approved:** Associate Dean, UME, July, 2019

**Policy Approved by:** Vice Dean, Education and Academic Affairs, July, 2019

**Policy Approved by:** CQI Steering Committee, July, 2019

**Policy Reviewed/Updated:** CQI Steering Committee, January, 2021

**Policy Reviewed/Updated:** Vice Dean, Education and Academic Affairs, October 2022