

The Leadership Forum

Words of Wisdom Doing the Safety Dance at Graduate Schools in the United States

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Devoted readers of ACLGIM's *Leadership Forum* are keenly aware that health systems across the United States are struggling for solutions to the persistent issues of unexplained clinical variation, poor outcomes, and rising costs to payers and patients. In recent years, population health has emerged as a broad-based response to these challenges, with quality and safety as a key component.

Despite a decades-long focus on the issue of medical error, the healthcare system's response to the challenge has been mediocre, and according to the *British Medical Journal* medical error is now the *third* leading cause of death, after cancer and heart disease.¹ For years, quality and safety offerings were relegated to occasional 1-2 day conferences or special in-service workshops, which are just not rigorous enough to prepare health care professionals to provide the type of quality care patients expect and deserve.²

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patients but also lead to new and exciting career opportunities for ambitious mid-career healthcare professionals. Jefferson College of Population Health (JCPH), with certificate and master's degree programs in healthcare quality and safety, is one of six such degree-granting programs in the United States—the others are Harvard Medical School, George Washington University, University of Alabama at Birmingham, University of Toronto, University of Illinois at Chicago, and Northwestern University—with more on the way.

These programs emerged in response to the infamous 1999 "To Err is Human" report published by the Institute of Medicine (now the National

Academy of Medicine) and the patient-safety movement of the past two decades.³ They have also been fueled by the mandates of the Affordable Care Act to "bend" the healthcare cost curve and to reduce hospital readmissions. Quality and safety programs provide an opportunity for career advancement for general internists and others with a passion to reform the system. Many graduates go on to satisfying careers, including chief quality officers, directors of quality and safety, and vice presidents of medical affairs at their existing institutions or elsewhere.

In a way, you might say that these schools are doing the "Safety Dance," to quote the title of a 1980s song by Men Without Hats, the one-hit-wonder pop group. To those readers of a certain age, the lyrics "we can dance if we want to/we can leave your friends behind" are familiar; "Safety Dance" even made a cameo appearance on the hit medical drama *House* (season six, episode six, "Known Unknowns"). Today, healthcare professionals who are *not* doing the safety dance are the ones who will be left behind if they do not get

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on the bandwagon and comply with the Centers for Medicare & Medicaid Services' mandated reforms to improve the health of patients and the overall patient experience.

During healthcare quality and safety programs, healthcare professionals learn important methods for improving quality and safety, including low-tech solutions—such as developing new and improved checklists (made famous by Atul Gawande)—and high-tech solutions, such as evaluating technology, electronic medical

records, and information systems to support decision-making and workflow within and across healthcare settings. With specific guidelines to reduce central line-associated infections and unexplained clinical variation—and with the mandate to reduce hospital readmissions—the safety bar has been raised. Let's dance!

References

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