

ISLC IMPACT REPORT

2019-2024



Letter from Our Leaders

Dear colleagues,

We are excited to present this five-year summary of the remarkable achievements of the Improvement Science Leadership Course. Through continuous learning and iterative change, and thanks to continuous support from the Department of Pediatrics, the ISLC is now a premier leadership and improvement science training program! We are proud of our steadfast commitment to develop leaders who can meet the demands required to deliver the highest quality care to our patients.

The accomplishments of our participants are truly inspiring. ISLC graduates not only achieve measurable and sustained improvements in their projects but also showcase their work on national platforms, including earning prestigious quality awards and delivering featured presentations on critical topics such as health equity. These successes highlight the dedication of our trainees and the durable impact of this program.

This report highlights:

- **Success across the six domains of quality:** patient safety, health equity, efficiency, effectiveness, timeliness, and patient-centered care
- **Broad skill and leadership development:** benefiting fellows, clinical and research faculty, medical directors, nursing and administrative staff
- **Impact of collaboration:** engaging with entities across our health system and beyond, including national quality and safety organizations

Looking ahead, we are committed to fostering an "all teach, all learn" environment that supports innovation, continuous improvement, and developing resilient leaders. Our vision is to continue shaping individuals who will drive meaningful change, inspire excellence, and set new benchmarks in healthcare quality.

We extend our heartfelt gratitude to the Department of Pediatrics leadership for their unwavering support throughout our journey. Their commitment is instrumental in enabling the ISLC to thrive and in fostering an environment where our leaders can flourish.

With gratitude,

Emily C. Sterrett, MD
Director of Improvement Science, Pediatrics

Heather McLean, MD
Vice Chair of Quality, Pediatrics



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Purpose

To develop **proficient leaders** who will **role model and apply** their skills to **execute** improvement, to **lead** project teams, and **achieve** measurable results

To grow our **culture and capability** to **meet the expectations** of our **patients, peers**, and the evolving climate of **quality-based healthcare**

Philosophy

All teach, all learn – Everyone is an expert at something, and everyone has something to learn! Maintain an open and humble classroom dialogue



Sharing – Regular, structured project presentations allow for longitudinal exposure and vicarious learning from a variety of project and problem subtypes

Classroom didactics – Fundamental principles must be taught using a structured approach



Coaching – Everyone and every team has different challenges, requiring the dynamic and professional skill of a dedicated coach

Project-based learning – Strengthens the investment by applying concepts to local priority problems

Structure

Competitive Application Process

Applicant-Identified Project Proposal

9-month Academic Calendar

Learn & Participate through:

Monthly Full-Day Classroom Sessions
Inter-Session Coaching Calls
Project-based Application of Learning
Structured Monthly Project Reports

Assigned a:
QI Coach,
Management
Engineer

Culmination:
Grand Rounds
Presentation,
Abstracts &
Manuscripts



Classroom Content

Variation	Run Charts
Reliability Theory	Statistical Control
Change Management	Charters
Profound Knowledge	SQUIRE 2.0
Data over Time	Business Case
Common Causes	FMEA
Special Causes	Pareto Analysis
Root Causes	PDSA Cycles
SMART Aims	PDSA Ramps
Key Drivers	Leadership
Process Maps	Humble Inquiry
Value Stream	Disparity & Equity
Waste	Model for Improvement
Standard Work	Fishbone
Lean	Measures
Six Sigma	A3

Evaluation

Impact on individuals - measured serially during the course using Kirkpatrick's 4-Level Model for Evaluating Training Programs (reaction to the participants' learning, behavior, and results)

Project progress - aim to achieve successful tests of change and measurable improvement prior to course completion, according to IHI Project Progress Assessment Scale

Sustainable engagement in QI - goal for participants to initiate, complete, or sponsor an additional project within one year of course completion

On average, participants' **knowledge** of common improvement tools went from minimal knowledge to **capability for analysis and application**.

KNOWLEDGE	Before	After
Model for improvement	2.43	4.17
Lean improvement	1.51	3.57
Six sigma	1.71	3.4
A3 thinking	1.4	3.89
Variation in data	1.69	3.91
Fishbone diagram	2.57	4.2
Pareto chart	1.77	4.21
Run chart	2.31	4.32
Statistical process control	1.49	3.8
Key driver diagram	2.37	4.33
Project charter	1.91	3.8
Process measure	2.51	4.15
Outcome measure	2.63	4.21
Balancing measure	2.26	4.12
Failure modes effect analysis	1.43	3.8
Process mapping	2.31	4.11
PDSA cycle and ramping	2.71	4.3
Squire guidelines	1.46	3.17
Root cause analysis	2.26	3.77
5 Whys	1.66	4.09

Knowledge score values: 1=No knowledge, 2=Knowledge, 3=Basic application, 4=Analysis & application, 5=Highly experienced, 6=Expert.
All changes statistically significant with $p < 0.001$.

CONFIDENCE	Before	After
Identifying gaps in health quality	2.91	3.63
Describing the model for improvement	2.37	3.69
Identifying characteristics of effective teams	2.83	3.69
Identifying effective and efficient strategies to conduct team meetings	2.69	3.71
Writing an aim statement for a QI project	2.8	4.06
Choosing an appropriate process modeling method	2.2	3.71
Describing one model for identifying measures for improvement	2.57	3.83
Describing the difference between common and special cause variation	1.8	3.66
Interpreting the basic components of run charts	2.51	4.06
Applying plan-do-study-act cycle methodology	3	4.11
Collaborating effectively with other professionals	3.49	4.23

Score values: 1=Not confident at all, 2=Not confident, 3=Reasonably confident, 4=Confident, 5=Very confident. *All changes statistically significant with $p < 0.001$.*

On average, participants' **confidence** with improvement concepts went from minimally confident to **very reasonably confident**.





SAFE



PATIENT-CENTERED



EFFICIENT



EQUITABLE



EFFECTIVE



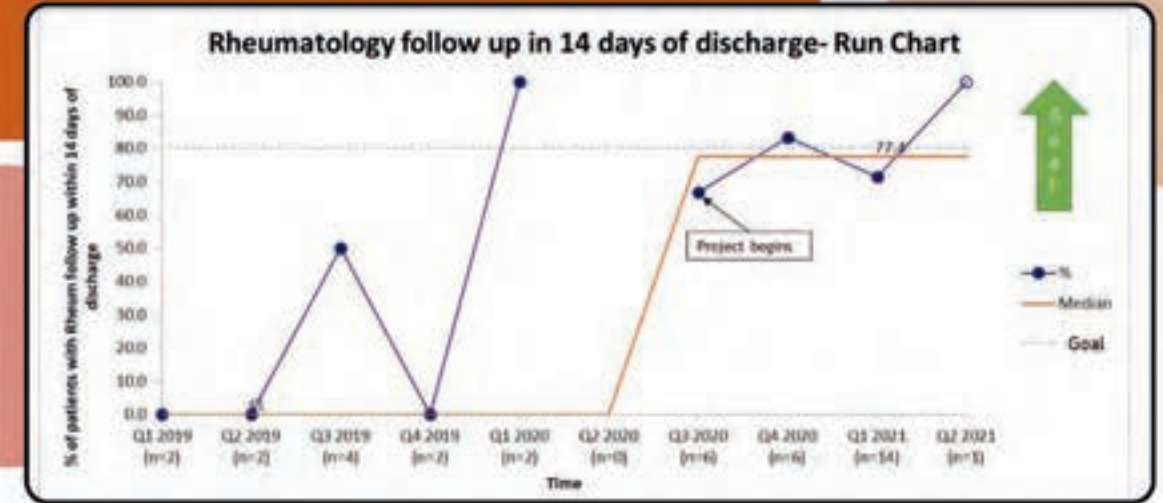
TIMELY



Safety

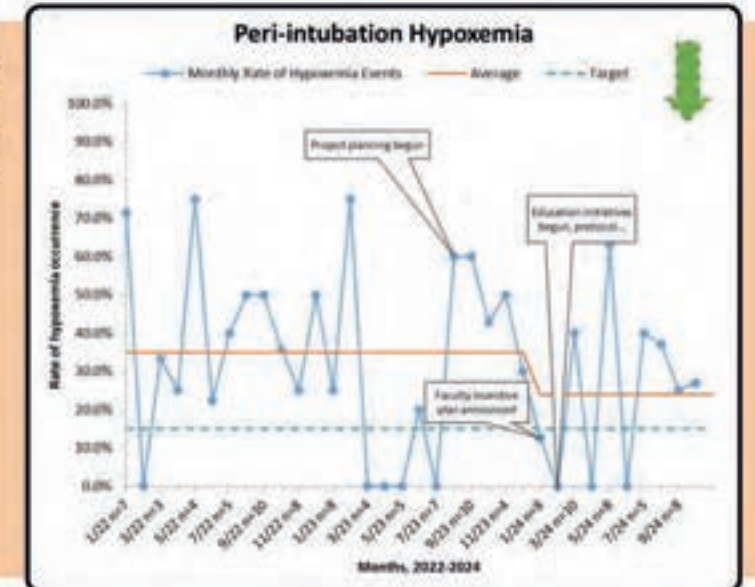
Kawasaki Disease

Improved access to outpatient follow up and echocardiogram for the highest risk population of patients



Optimizing Strategies for Airway Intubation Safety

Decreased the rate peri-intubation hypoxemia events by over 10%



Penicillin Allergy Delabeling

Laura Hampton
Kristina Nazareth-Pidgeon

In the first 12 months, 100 patients were risk stratified and 1/3 were candidates for delabeling

RESEARCH ARTICLE Improving the Documentation of Penicillin Allergy Labels Among Pediatric Inpatients

Laura Hampton MD, Laura Hampton MD, Kristina Nazareth-Pidgeon MD, Amy P. Stangor MD, Sara Lee, Howard A. Fricker, MD, James S. Roberts, MD, Tracy L. Swann, MD, Kristina Nazareth-Pidgeon MD

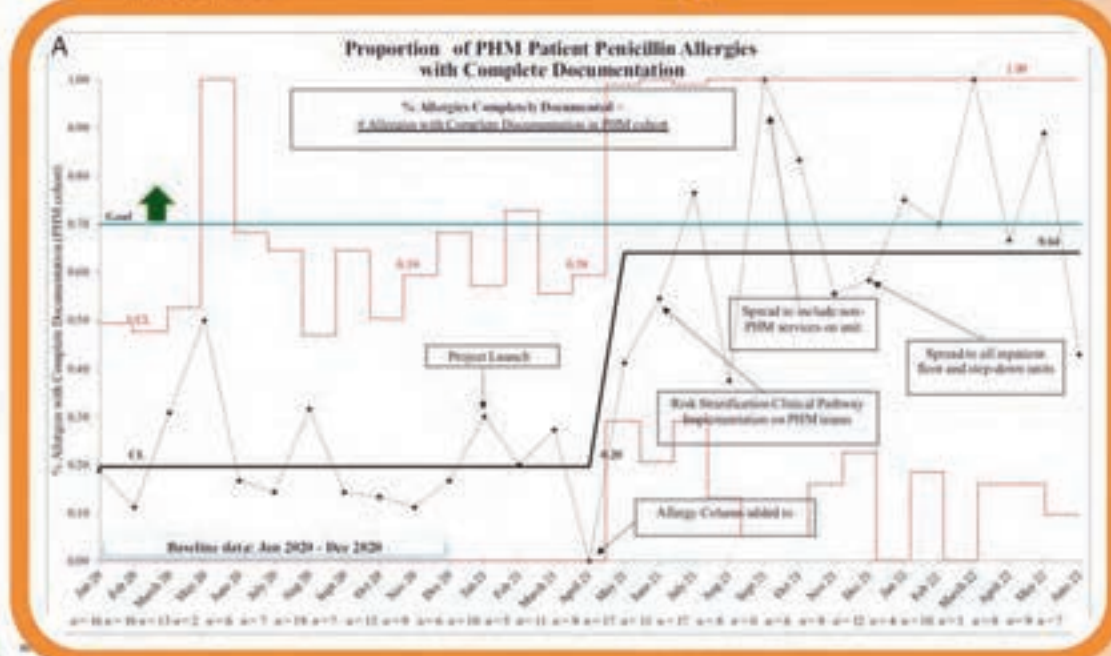
BACKGROUND AND OBJECTIVES: Penicillin allergy is the most common medication allergy, and the penicillin allergy label is commonly misapplied without adequate reaction history inquiry and documentation. Because penicillin allergy labels are often applied to children and carried into adulthood, we sought to increase the completeness of reaction history documentation from 20% to 70% for pediatric hospital medicine patients and from 20% to 50% for all other pediatric inpatients within 12 months.

KEY WORDS: Penicillin allergy, documentation, pediatric inpatient, quality improvement, risk stratification, clinical pathway, implementation, pediatric hospital medicine, allergy, allergy consult, allergy history, allergy testing, allergy testing results, allergy testing process, allergy testing protocol, allergy testing procedure, allergy testing form, allergy testing checklist, allergy testing tool, allergy testing software, allergy testing database, allergy testing system, allergy testing platform, allergy testing service, allergy testing provider, allergy testing organization, allergy testing association, allergy testing society, allergy testing conference, allergy testing symposium, allergy testing workshop, allergy testing seminar, allergy testing course, allergy testing program, allergy testing initiative, allergy testing project, allergy testing campaign, allergy testing effort, allergy testing endeavor, allergy testing enterprise, allergy testing operation, allergy testing organization, allergy testing establishment, allergy testing institution, allergy testing organization, allergy testing corporation, allergy testing company, allergy testing firm, allergy testing business, allergy testing industry, allergy testing sector, allergy testing market, allergy testing industry, allergy testing sector, allergy testing market, allergy testing industry, allergy testing sector, allergy testing market.

RESEARCH ARTICLE Association of Sociodemographic Factors With Reported Penicillin Allergy in Pediatric Inpatients

Laura Hampton MD, Laura Hampton MD, Kristina Nazareth-Pidgeon MD, Amy P. Stangor MD, Sara Lee, Howard A. Fricker, MD, James S. Roberts, MD, Tracy L. Swann, MD, Kristina Nazareth-Pidgeon MD

OBJECTIVES: Characterize the association of sociodemographic factors with reported penicillin allergy in pediatric inpatients.



"ISLC provided a transformative experience, equipping me with practical QI tools and a deep understanding of improvement science that I could immediately apply to my work. Participating in ISLC was invaluable; I gained insights from top experts and learned structured approaches to effectively lead quality improvement initiatives. ISLC has empowered me to mentor others in quality improvement, enriching my ability to drive meaningful changes in patient care."

-Kristina Nazareth-Pidgeon



Laura Hampton, MD

Assistant Professor, Pediatric Hospital Medicine
Medical Director, Children's Hospital Quality Improvement
Wellstar MCG Health Children's Hospital of Georgia
Medical College of Georgia



Kristina Nazareth-Pidgeon, MD

Assistant Professor of Pediatrics
Chair of the PHM Quality Committee
Co-chair of the Duke Safe Sleep Taskforce
Co-Lead for Duke AAP IMPWR Project



Mary Buckley, MD

*Assistant Professor, Pediatric Rheumatology
Associate Director, Pediatric Rheumatology Fellowship*



“The course transformed QI from ‘something you have to do’ to an integral and complementary part of clinical medicine. It took an innate drive to do things better and gave it structure and purpose...”

I now see QI as a part of my career path and am excited about the future possibilities.”



Reeti Kumar, MD

*Assistant Professor, Pediatric Nephrology
Program Director, Pediatric Nephrology Fellowship
Regional Medical Director of Creekstone Clinic*

“I learned how to carry out an impactful QI project from conception to fruition. I will never forget to ‘go to the Gemba’! ... The course helped me make meaningful connections across Duke and network with colleagues within the Department of Pediatrics and beyond.”



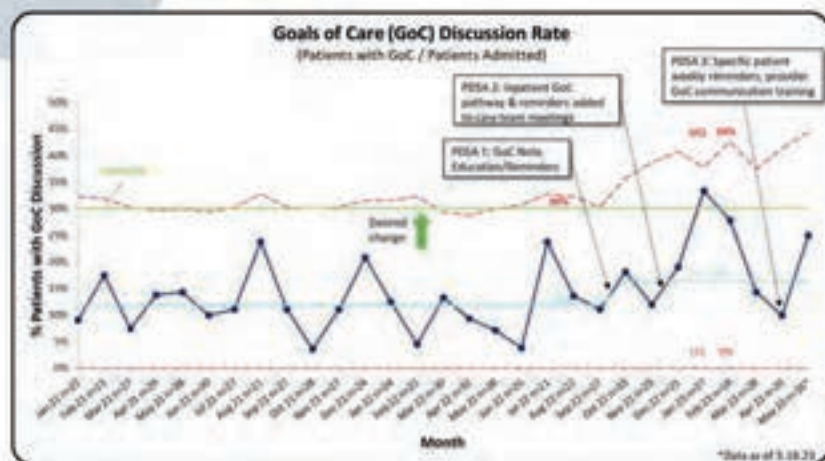
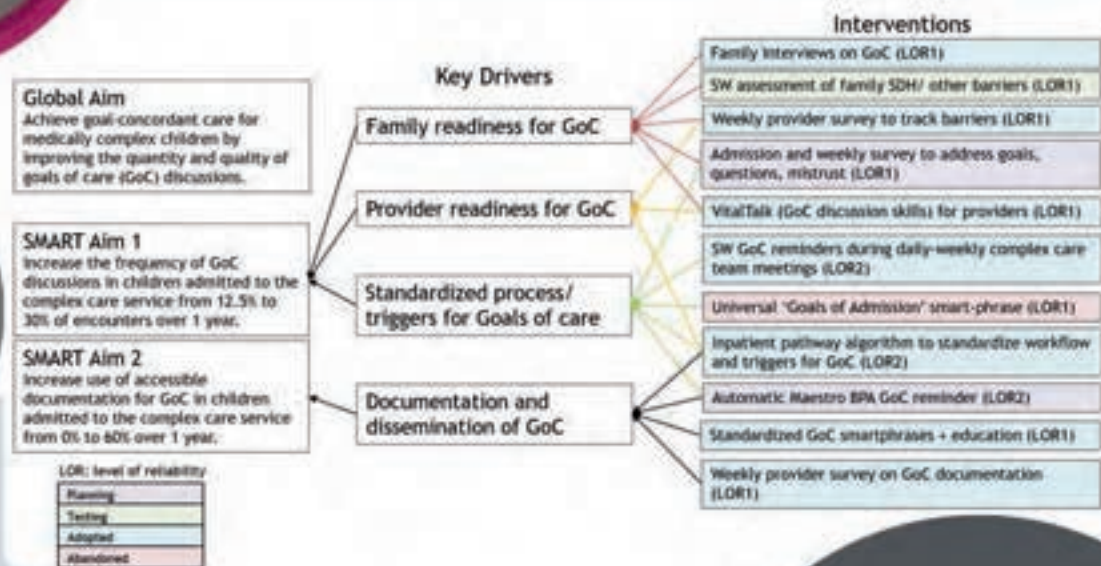
Ruchi Doshi, MD

*Assistant Professor of Medicine & Pediatrics
Co-Medical Director, Med-Peds Service Line
Director, Transition Taskforce*

“The skills I gained through ISLC garnered invitations to join regional and national boards, to further promote the hospital-based care of adolescents and young adults with childhood onset chronic illness.”

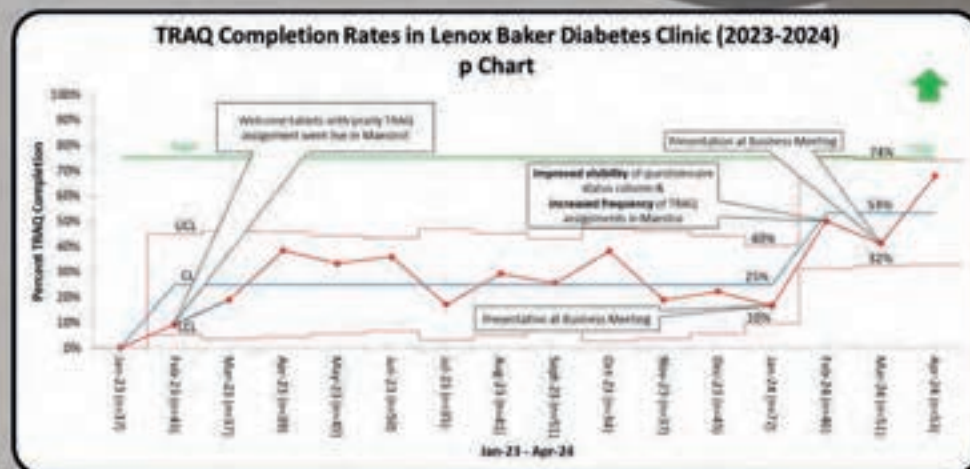


Patient Centered



Standardizing Goals of Care Conversations for Complex Care patients

Transition readiness assessment of adolescents for Type 1 and Type 2 diabetes in outpatient clinics



Bryan Monroe, MD

*Assistant Professor, Pediatric Hospital Medicine
Wake Forest University School of Medicine
Atrium Health Wake Forest Baptist Hospital*

“ISLC has been hugely formative in my approach to patient care and scholarship. Not only was the course well-taught and enjoyable, it helped me lead a successful, meaningful, and scholarly QI initiative.”



Alice Basin, MD

*Pediatric Endocrinology Fellow PGY6
Endocrinology Rep - DUH Transition Taskforce
Pediatric Endocrine Rep - DUH Glycemic Safety Committee*

“The project support I received inside and outside of the classroom helped build my confidence and expertise in QI research and further advance my project.”





“I have gained confidence in my ability to lead change and foster a culture of continuous improvement within my Department and day to day work... truly enhanced my effectiveness as a clinician, leader and faculty member.”



Melissa Campbell, MD

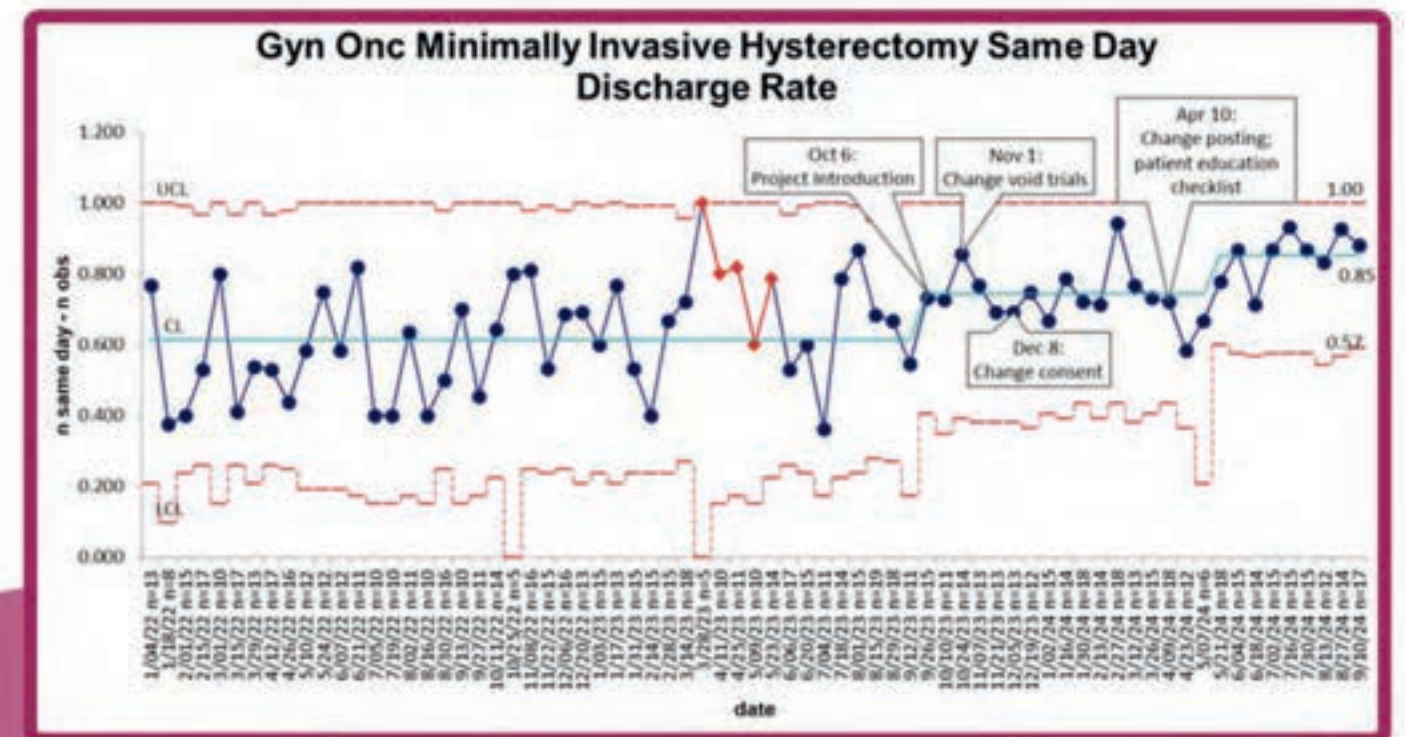
Assistant Professor, Pediatric Infectious Diseases,
Associate Medical Director, Pediatric Infection Prevention
Medical Director, Ambulatory Pediatric Infectious Diseases



Efficient

Same Day Discharge Rates for Minimally Invasive Hysterectomies in Gyn - Onc

Decreased length of stay and increased the same day discharge rate for minimally invasive hysterectomies following evidence-based, safe, and cost-effective care

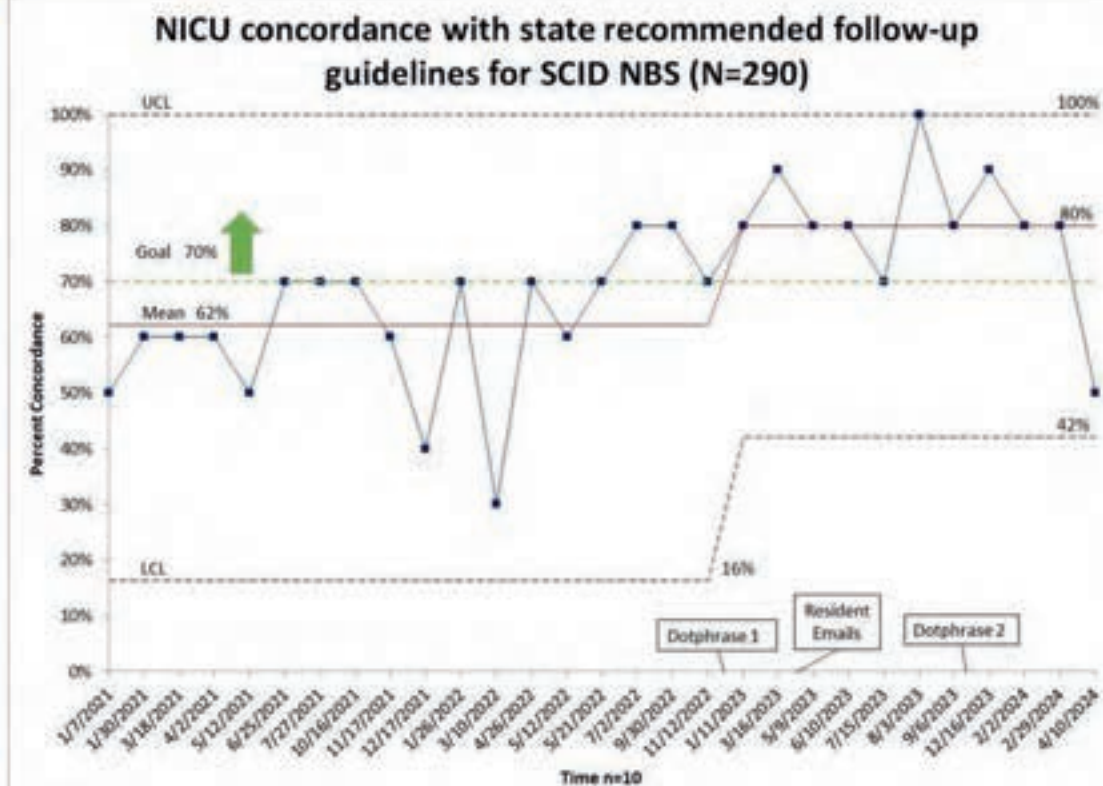


Improving CAre in SCID Screening: ICASS

Geoffrey Hall
Talal Mousallem



Reduced waste of SCID screening by improving concordance with national guidelines by a statistically significant 20%



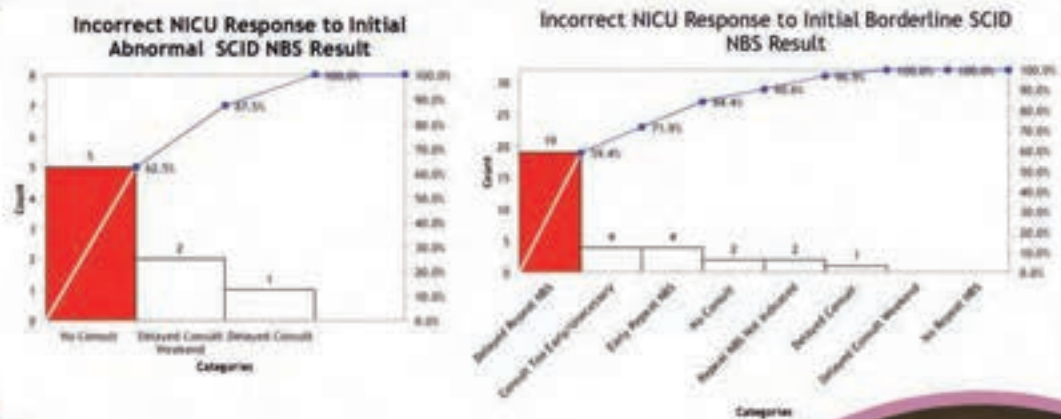
Geoffrey Hall, DO

PGY6 Allergy and Immunology Fellow



Talal Mousallem, MD

Associate Professor of Pediatrics, Allergy and Immunology
Associate Program Director, Allergy and Immunology Fellowship



Received the 2023 AAAAI Quality Adherence and Outcome Committee Award

Abstract presentation at the 2024 Annual Meeting of the American Academy of Allergy, Asthma & Immunology

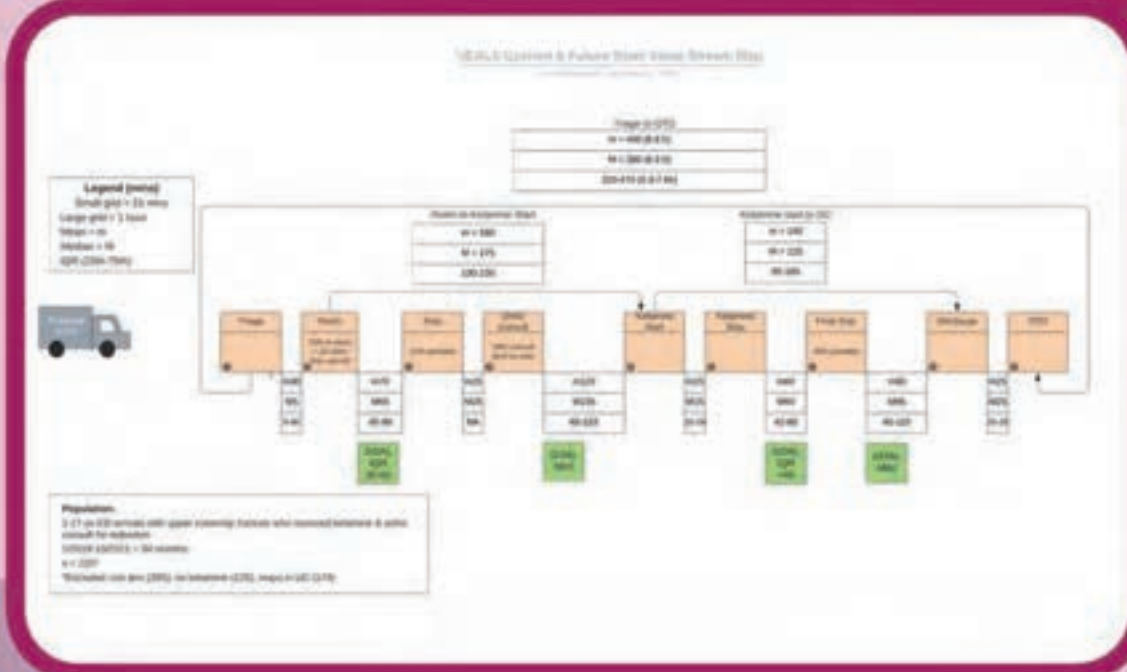


Decreasing ED Average Length of Stay: DEALS

Emily Greenwald & Neel Subramanian

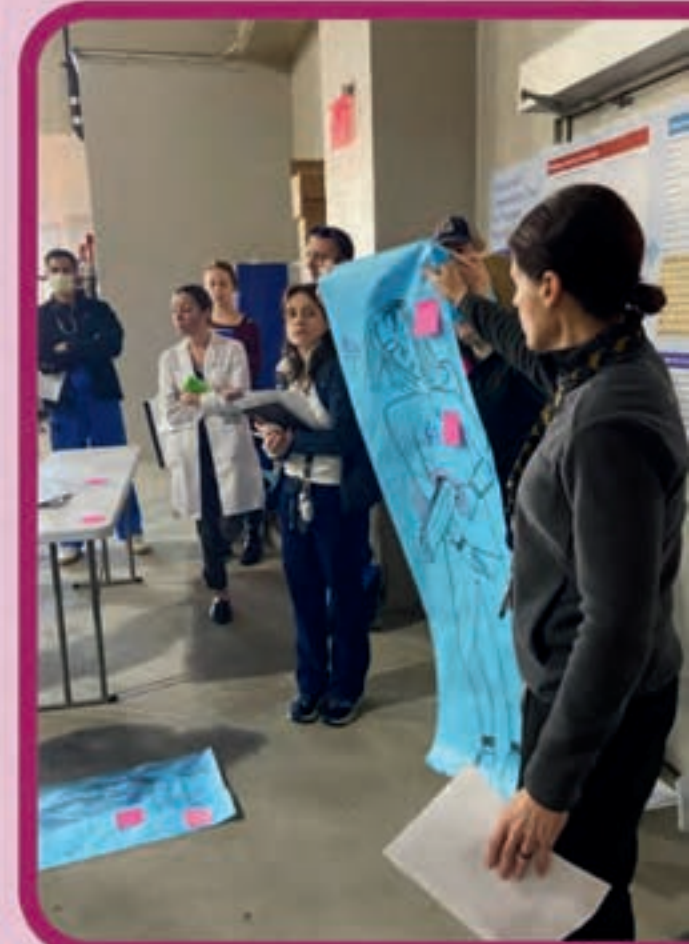


Reduced ED length of stay by 1 hour using value stream mapping



Awarded the Fulkerson Award at 2023 Duke Health Quality & Safety Conference

“ISLC not only imparted leadership skills to me, but also provided opportunities to work on significant projects that involved multiple stakeholders. Through these projects, I gained valuable experience in developing and leading teams, effectively collaborating to address complex issues.”
-Neel Subramanian



Emily Greenwald, MD

Assistant Professor of Pediatrics
Medical Director DUH Pediatric Emergency Medicine



Neel Subramanian, MD

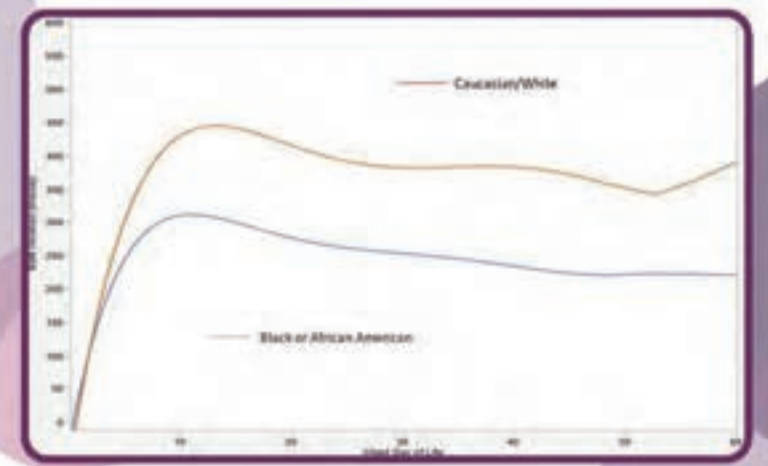
Assistant Professor, Pediatric Emergency Medicine
Emergency Services EPIC Champion, DUHS



Equitable



Mother's Own Milk
Improved discharges with mother's own milk to over 80%



Social Determinant Screening

Over 1,200 inpatients have been screened in multiple domains including food insecurity, financial strain, housing instability, and transportation barriers

Started a meal tray program to provide free meal trays to families throughout their hospital stay who screen positive for financial strain or food insecurity and have provided more than 4,500 meals to patients' caregivers

Postpartum Blood Pressure Monitoring

Kathleen Zacherl
 Laura Havrilesky
 Maddie Morello



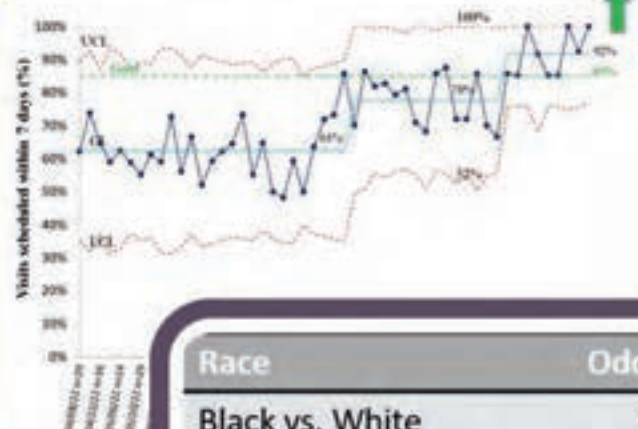
QUALITY IMPROVEMENT REPORT

Ensuring safe and equitable discharge: a quality improvement initiative for individuals with hypertensive disorders of pregnancy

Kathleen M. Zacherl¹, Emily Carper Sterrett,² Brenna L. Hughes,² Karley M. Whelan,³ James Tyler-Walker,⁴ Samuel T. Bauer,⁵ Heather C. Talley,² Laura J. Havrilesky⁵

ABSTRACT
Objective: To improve timely and equitable access to postpartum blood pressure (BP) monitoring in individuals with hypertensive disorders of pregnancy (HDP).
Methods: A quality improvement initiative was implemented at a large academic medical center in the USA for postpartum individuals with HDP. The primary aim was to increase completed BP checks within 7 days of hospital discharge from 65% to 100% in primary care.

WHAT IS ALREADY KNOWN ON THIS TOPIC
 Equitable access to postpartum care is challenging in the USA and hypertensive disorders of pregnancy are a major contributor to morbidity and mortality. Studies on individual



Race	Odds Ratio	Confidence Interval	P value
Black vs. White (pre-intervention)	2.2	1.36-3.60	0.001
Black vs. White (post-intervention)	1.6	0.74-3.49	0.228

Awarded the Kirkland Award at 2023 Duke Health Quality & Safety Conference.

Implementing interventions to address the large difference in no show rates for non-hispanic Black patients, Kathleen's team **eliminated this disparity between Black and White patients.**

“In a medical environment traditionally limited by the silo effect, I am truly grateful for the opportunity to experience this program and to contribute collaboratively across departments.”
 -Laura Havrilesky



Kathleen Zacherl, MD

Assistant Professor, Obstetrics & Gynecology
 Vice Chair of Quality, Obstetrics & Gynecology
 Medical Director, Labor & Delivery
 Chair, Perinatal QA/PI Committee
 UConn Health



Laura Havrilesky, MD

Professor, Gynecologic Oncology, Department of Ob/Gyn
 Director, Fellowship in Quality & Safety in Women's Health
 Associate Chair, Quality, Safety & Peer Review Committee
 Medical Director, 6300, DUH



Maddie Morello

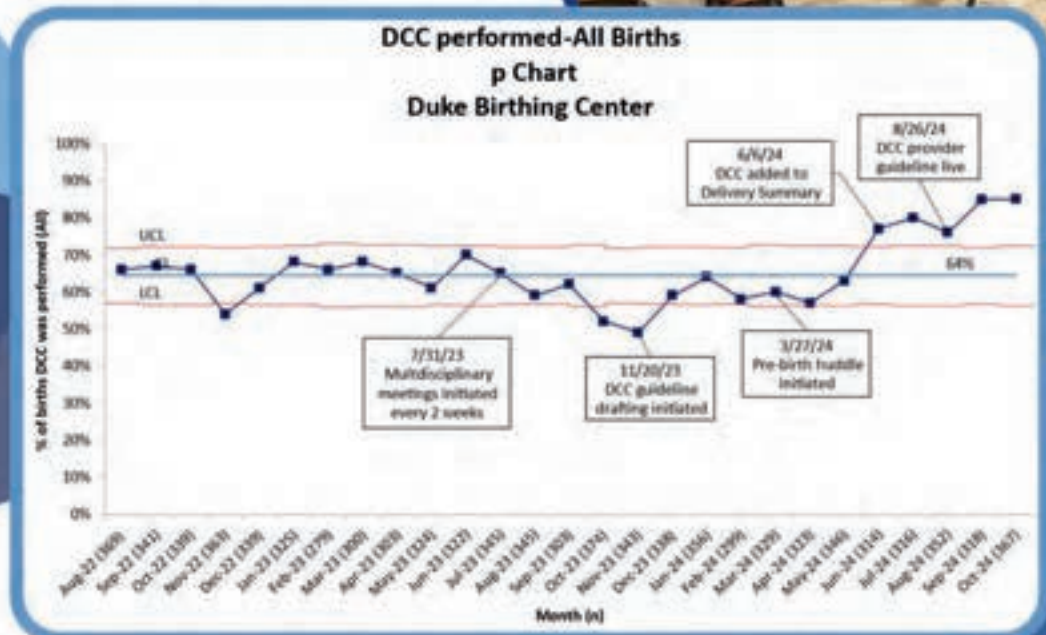
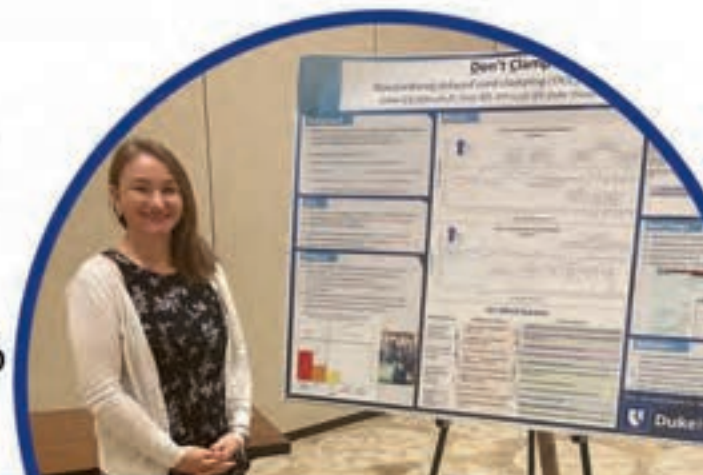
Manager of Quality & Safety, Department of Ob/Gyn



Effective

NICU Cord Clamping

Increased evidence based compliance with delayed cord clamping for over 80% of all births



Pneumococcal Vaccine in Outpatient Clinics

Nephrology outpatient clinics have vaccinated almost 400 patients



Keyaria Gray, MD

*Assistant Professor, Neonatal-Perinatal Medicine
Associate Medical Director, NICU*

“The ISLC program helped me evaluate everyday processes through the lens of quality improvement. I look for opportunities to use QI tools within administrative meetings to understand the needs of our staff and patient families. My goals have shifted to creating processes that result in sustainable change.”



Shatha Yousef, MD

*Assistant Professor, Pulmonology & Sleep Medicine
Director, Pediatric Cystic Fibrosis Center*

“ISLC reshaped my vision on how to look at processes in our practice, where no process is perfect and every outcome may have an improved pathway!”

“The ISLC course has played an integral role in my career... It provided me with the skillset to meld my interests in clinical research and patient safety... I have become a leader of quality improvement within the pediatric intensive care unit, and have had opportunities to share and disseminate this work throughout Duke University Hospital.”



Andrew McCrary, MD

*Associate Professor, Division of Pediatric Cardiology
Director, Cardiology Quality Improvement
Associate Director, Non-invasive Imaging Program
Co-director, Single Ventricle Care Program*

“In addition to the tools, ISLC connects early career faculty with department and health system leadership and resources enhancing career development potential.”



Palen Mallory, MD

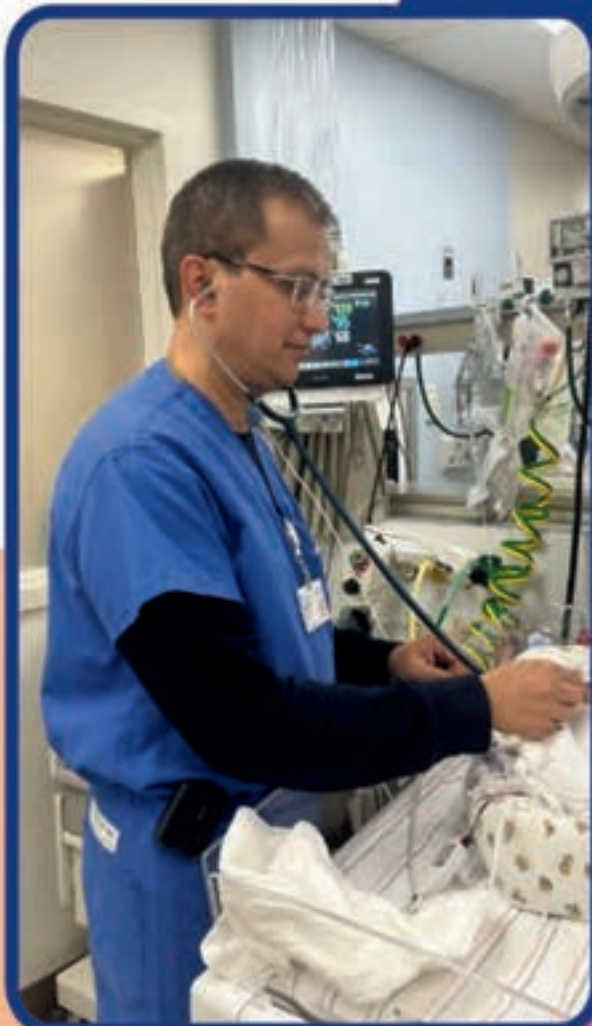
Assistant Professor, Division of Pediatric Critical Care



Kamlesh Athavale, MD

Associate Professor, Neonatal-Perinatal Medicine
Medical Director, Special Care Nursery, Duke Regional Hospital
Neonatal Medical Control, Duke LifeFlight

“The course content was exceptionally lucid and relatable since all the instructors are immersed in QI delivery in healthcare... With teams tackling a diverse range of topics, everyone had the opportunity to listen and learn from each other’s endeavors, thereby amplifying the collective knowledge... The most remarkable aspect is that the instructors continually refine and adapt course material based on participant feedback, enhancing the course perpetually.”



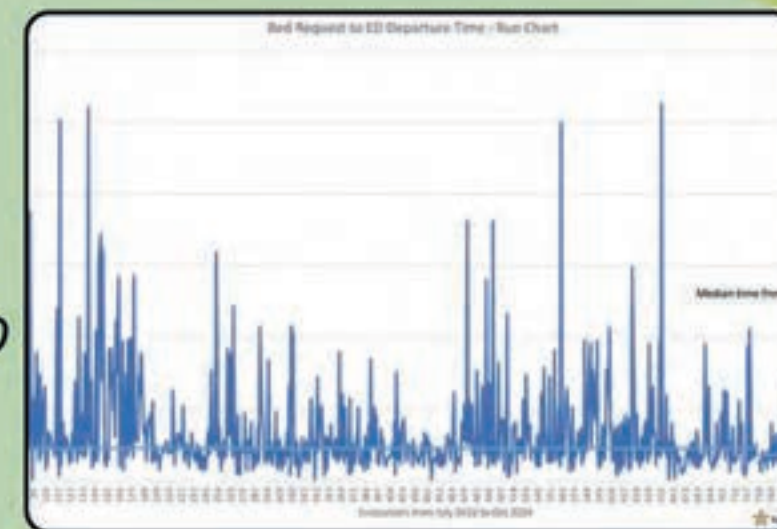
Timely

Status Epilepticus in the ED

Reduced the time from first-line medication to second-line anti-seizure medication by 75%

Patient Transfers from ED to PICU

Reduced median time from bed request to ED departure time by 20 minutes



Gastroenterology Scheduling

Reduced the number of steps in their process to streamline procedure scheduling in clinics



Carolyn Avery, MD

*Pediatric Director, Population Health Management Office
Co-Director Population Health, NC Integrated Care for Kids
Medical Director, Duke Med-Peds Residency Continuity Clinic
Co-chair, Duke Children's Primary Care Quality Collaborative*

“ISLC allowed me to advance my QI training while pursuing a project important to clinical care and residency education. Having such an opportunity within Duke, rather than needing to go external to the institution, allowed me to create relationships with future partners in the Department, project support staff, and technology services.”

Exciting times ahead!

Opportunities to spread our reach, develop our leaders, improve the experience of our staff and the outcomes of our patients - that's our future!



Duke Health Medical Directors

Children's - Pop Health - DHIP - Med-Surg - Emergency - DHTS



Omar Alibrahim
DCT 2B - PICU



Kamlesh Athavale
DRH Special Care Nursery



Carolyn Avery
*NC Integrated Care for Kids
Med-Peds - Continuity Clinic*



Melissa Campbell
*Ambulatory Pediatric
Infectious Prevention*



Michael Campbell
DCT 3A, Cardiac Imaging



Katherine Cashen
*Quality Improvement -
Ped Cardiac Critical Care*



Ruchi Doshi
Med-Peds Service Line



Emily Greenwald
DUH Ped Emergency Dept



Keyaria Grey
NICU



Laura Havrilesky
DUH 6300



Reeti Kumar
Creekstone Clinic



John Lyles
CHC Valvano Day Hospital



Andrew McCrary
*Quality Improvement
Cardiology, Imaging*



Kristina Nazareth-
Pidgeon
DCT 1A/2A,4B, Complex Care



Jennifer Sherwin
DCT 3B - PCICU



Neel Subramanian
*Emergency Services
Maestro Champion*



Shatha Yousef
Cystic Fibrosis Center



Muhammad Zafar
Epilepsy Monitoring Unit

Thank You!

Dr. Ann Reed

Susan Kline

Dr. Keith Mann

Dr. Angelo Milazzo

Aekta Raja

Pediatric Division Chiefs

Children's Service Line Senior Leadership

Department of Obstetrics & Gynecology

Duke Quality System

Performance Excellence

Dr. Victoria Parente

Dr. Lindsay Terrell



Staff

Management Engineers

Program management, coaching, lecturing, and data collection

Past Management Engineer support: Jason Deboy, Kelly Gagnon, & Madeline Crow



Camille DiCarlo
MISE



Blair Woody

Advisory Board



Keith Mann
VP of Continuing Certification, ABP



Katy Bartlett
Vice Chair, Faculty Development



Lisa Parnell
Past Medical Director for PHM, Complex Care



Kyle Rehder
Vice Chair, Education



Sameer Kamath
CMO, Duke Children's



Susan Kline
Vice Chair, Admin & Finance

Administrative Assistants

Coordinating classroom resources, CME & scheduling
Cohorts 1-5: Brittany Beverly, Winnie Watson, Pearlie Turner

Cohort 1 - 2019-2020



Kevin Rathke, Peter Malinosky – Neurology

Coach: Emily Sterrett

Reducing epilepsy clinic appointment lead times



Kristin Page, Christy Ragan – Pediatric Transplant and Cellular Therapy

Coach: Sameer Kamath

Establishing long-term outpatient follow-up for BMT patients



Carolyn Avery, Emily McCormick, Sara Page, Kiana Dailey – Primary Care

Coach: Katy Bartlett

Improved resident continuity in newborn well visits



Cohort 2 - 2020-2021



Kamlesh Athavale, Cheryn Johnson – Neonatology

Coach: Emily Sterrett

Reducing unnecessary NICU admissions for neonatal hypoglycemia



Andrew McCrary – Cardiology

Coach: Lisa Parnell

Improved feeding program for infants after heart surgery



Mary Boruta, Peter Malinosky – Gastroenterology

Coach: Heather McLean

Improved patient-level communication around invasive GI procedures



Laura Hampton & Kristina Nazareth-Pidgeon – Hospital Medicine

Coach: Sameer Kamath

Reduce unnecessary penicillin allergy labels for low/no-risk inpatients



Heather VanMater, Mary Buckley, Scott Mofield – Rheumatology

Coach: Katy Bartlett

Improved outpatient follow-up for Kawasaki disease

Cohort 3 - 2021-2022



Richard Chung - Adolescent Medicine

Coach: Carolyn Avery

Improving adolescent well visit completion rates



Colby Feeney - Hospital Medicine

Coach: Sameer Kamath

Increasing social determinants of health screening in pediatric inpatients



Reeti Kumar - Nephrology

Coach: Katy Bartlett

Increasing rates of transition readiness screening for adolescents with stage 3-4 chronic kidney disease



Deesha Mago-Shah – Neonatology

Coach: Lisa Parnell

Increasing rates of NICU discharge on mother's own milk feedings



Neel Subramanian, Emily Greenwald - Emergency Medicine

Coach: Heather McLean

Decreased length-of-stay for patients requiring sedated fracture reductions

Cohort 4 - 2022-2023



**Bryan Monroe & Mark Chandler -
Hospital Medicine**

Coach: Kristina Nazareth-Pidgeon
Goals of Care planning in pediatric
complex care services



**Geoffrey Hall & Talal Mousallem -
Allergy & Immunology**

Coach: Katy Bartlett
Management of abnormal SCID newborn
screening in the ICN



Loryn Wilson - Nephrology

Coach: Reeti Kumar
Pneumococcal vaccination in chronic
kidney disease

Cohort 4 - 2022-2023



Muhammad Zafar - Neurology

Coach: Emily Greenwald
Efficiency in seizure management in the ED



**Kathleen Zacherl & Laura Havrilsky &
Maddie Morello - Obstetrics & Gynecology**

Coach: Emily Sterrett
Postpartum hypertension monitoring after
hospital discharge



Shatha Yousef - Pulmonology

Coach: Heather McLean
Sleep Disorder screening in Cystic Fibrosis

Cohort 5 - 2023-2024



Laura Calvo & Keyaria Gray - Neonatology

Coach: Emily Greenwald

Increase delayed umbilical cord clamping for preterm infants



Palen Mallory - Critical Care

Coach: Emily Sterrett

Reduce oxygen desaturation events during endotracheal intubation



Brianna ter Haar & Melissa Campbell - Infectious Diseases

Coach: Colby Fenney

Increase guideline concordant HIV testing and PrEP in primary care



Caitlin Pinotti - Rheumatology

Coach: Mary Buckley

Increase capture of patient-reported outcomes among those receiving methotrexate

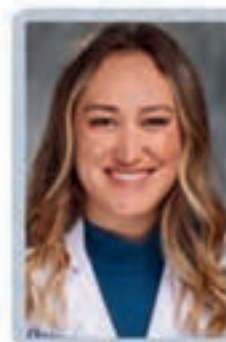
Cohort 5 - 2023-2024



Alice Basin & Ruchi Doshi - Endocrinology & Med-Peds

Coach: Carolyn Avery

Establish adult transition care for adolescents with diabetes



Pamela Peters - Gynecologic Oncology, Obstetrics & Gynecology

Coaches: Heather McLean & Laura Havrilesky

Reduce unnecessary post-operative hospitalizations following minimally invasive surgical procedures



Leonid Bederman & Omar Alibrahim - Critical Care

Coach: Katy Bartlett

Reduce transfer delays from the Pediatric ED to Pediatric ICU

Cohort 6 - 2024-2025



Reshma Patel & John Lyles - Gastroenterology

Coach: Kristina Nazareth-Pidgeon

Improve completeness & effectiveness of bowel preparation prior to colonoscopy



Samuel Littlejohn & Michael Jay Campbell - Cardiology

Coach: Katy Bartlett

Improve access and reduce no-show rates for cardiac MRI exams



Jennifer Sherwin & Katherine Cashen - Cardiac Critical Care

Coach: Kyle Rehder

Improve oral feeding among congenital cardiac infants before Stage 1 palliation

Cohort 6 - 2024-2025



Shital Patel & Kelly Rang - Neurology

Coaches: Mary Buckley

Improve access to Child Neurology clinic after first-time seizure



Vanessa Ford - Critical Care

Coach: Heather McLean

Improve blood culture testing stewardship in PICU



Chelsea Lockyear & Jamie Johnson - Neonatology

Coach: Emily Sterrett

Improve use of primary CPAP among preterm infants in the delivery room



Joseph Lafferty - Obstetrics & Gynecology

Coach: Laura Havrilesky

Improve environmental sustainability through re-usable tools for gynecologic exams

Making Connections

DUKE
QUALITY
SYSTEM

POPULATION
HEALTH

NATIONAL
IMPROVEMENT
COLLABORATIVES



HEALTH
EQUITY

DUKE HEALTH
TECHNOLOGY
SOLUTIONS

CHILDRENS,
ADULT, AND
WOMENS CSU

Duke Pediatrics Quality Program

