

Open School

Quality Improvement Curriculum Checklist

✓ **Establish buy-in from key stakeholders.**

Leaders of Open School integration efforts consistently underscore the importance of gathering support from across their organizations, at all levels. Seek buy-in from students, curriculum and program directors, faculty, deans, quality and clinical leadership, trainees, and staff. Ideally, you should strive to develop a multi-tiered network of ongoing support.

✓ **Decide on the integration objectives and how you will assess learning outcomes.**

As with any improvement effort, you'll want to maintain an outcomes-focused approach for your program, with the needs of your learners at the center. Follow the advice you would give anyone at the outset of an improvement project: Set an aim, stating what you are trying to accomplish, for whom, and by when; establish key measures you'll track; and start with a small test of change.

✓ **Determine the learning facilitators and how they will share responsibility.**

Consider: To what extent will the education be a coordinated effort, taking place across different classes, professions, or levels of training? It's likely your organization has underutilized assets to help teach this material. For example, quality committees comprising people who have studied improvement for years and may be eager to share their knowledge. Look also to ward leadership and nursing and physician leaders.

✓ **Determine the audience for the training and whether it is required or optional.**

What level of learners will you target: students, trainees, professionals, leaders, or some combination? Will you aim to reach all the individuals in the selected population(s) or just some, perhaps those who express interest? If the training is optional, how will you invite people to join?

✓ **Decide if there will be an interprofessional component.**

Quality and safety issues are virtually always interprofessional by nature. Whenever possible, provide learners with opportunities to work with colleagues from across disciplines and levels of

training. The mix could include nurses, physicians, physician assistants, pharmacists, administrators, managers, students, trainees, and other staff.

✓ **Determine the time frame for the educational programming.**

Quality and safety training can take place within a classroom or across years of curricular programming. It can take place in the clinical setting or outside of it, on workers' own time. Whether you plan for the training you provide to span one month, six months, or 18 months, ensure there is sufficient time for learners to do the work, such as by providing protected time from other clinical duties or training. If you are a faculty member who is adding courses to an already packed curriculum, think of what you can shorten or remove, or how you will build in time for students to complete additional assignments.

✓ **Select the most important topics to cover.**

Taking time to get acquainted with the breadth of content available from the Open School may help you envision your ideal curriculum; every course has stated learning objectives that you can match to your own goals for the training. You may want to start by assigning courses in one topic area (e.g., patient safety, quality improvement, or population health) or one introductory course in a few different areas. After some early success (defined by positive feedback from students, for example), you can gradually expand to other content areas or more advanced coursework.

✓ **Select learning format(s) and source(s).**

The Open School courses provide strong foundational knowledge in the areas of quality improvement, patient safety, and several other health care improvement topics. Supporting that course learning with additional reading, group discussion, and/or activities and projects in and outside of the clinical setting can raise learners' confidence and proficiency. Think of how you can connect the courses to these other types of learning opportunities.

✓ **Decide if the training will have an experiential (i.e., project-based learning) component.**

Experts and experienced faculty in quality and safety training programs strongly recommend pairing didactic content with opportunities for learning application. If you want to provide these opportunities, you should recruit coaches and map out the steps you expect learners to accomplish. In the clinical setting, engage the clinical leadership (e.g., physician and nursing) and staff in the units or clinics where the projects will occur. In the community setting, identify areas of need and potential partnerships.