

Dear Office of Academic Affiliations,

I am the current Minneapolis VA Chief Resident in Quality and Safety (CRQS) for the medicine department. I want to tell you all a little bit about the CRQS position, why I became interested in it, and how I plan to incorporate what I learn from this year into my future career. The CRQS position is available for every residency program including, but not limited to, radiology, psychiatry, urology, PMR, surgical specialties, etc. Currently the Minneapolis VA only has 2 of the available CRQS positions filled—one for the internal medicine program (me) and one for the general surgery program (Paul Frydenlund).

I first learned about this position during my intern year. Prior to residency, I knew very little about quality improvement and patient safety—and to be honest, I'm guessing most of your eyes just glossed over the second you heard the words "quality improvement and patient safety". Mine used to do the same thing. It does not seem like a very exciting topic; however, I've quickly discovered it can be.

Medical error and the impact it has on patients, providers, and hospital systems is finally gaining some recognition. Yes, the data saying that patients are dying due to medical error has been around for years, but it has taken a while for people to start listening (IOM 1999 report 44,000 to 88,000 deaths/yr in US due to medical error; BMJ 2016 article "Medical error is the 3<sup>rd</sup> leading cause of death in the US" estimating 250,000 deaths/year). Reducing medical error by improving hospital systems is now a priority for the administration which makes it everyone's priority—and you could be involved with this change. You could be the voice that pushes your department to make meaningful change. You could help prevent patient harm and death.

The CRQS position gives you the time and resources to be able to learn how to make changes—because it is not easy. Administration often think they know how to make change, but they often don't have the training to make things happen. The CRQS position gives you a year to learn quality improvement tools (Plan-Do-Study-Act cycles, process map, fishbone diagrams), literature on patient safety, and apply this knowledge in your own institution. You can participate in root cause analyses, peer review, quality improvement projects, patient safety committees and truly be a voice for physicians and your specialty. By the end of this academic year, I will have attended 5 conferences (4 devoted to quality and patient safety), plan to present and publish several of my quality improvement projects in quality improvement journals and will have given several different lectures on patient safety/quality improvement, among the things I mentioned above.

I am guessing many of you are wondering why doing an extra year on a chief resident salary would be worth it. Quality and systems improvement is the future of medicine. If you can learn these processes and develop these skills now, they will serve you for the rest of your career. One year as a chief resident in quality and safety will make you a very desirable physician to hire at all institutions. These are the candidates that medical systems are looking for. They need people who are well-versed in the language of quality and patient safety and can make change. You could be the reason fewer patients die due to medical error each year. I believe a year as chief resident in quality and safety will lead you to a more fulfilling career as a physician.

Sincerely,

*Kay Ingraham*

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