Our Mission
We provide physicians with the opportunity for meaningful professional development to enable them to help every child live the healthiest and most fulfilling life possible.

Our Vision
To be an innovative leader in professional development, research, quality improvement, medical education, and the delivery of compassionate care for children and their families.

Our History
Seattle Children’s Maintenance of Certification (MOC) Program has been a member of the American Board of Medical Specialties’ (ABMS) Multi-Specialty MOC Portfolio Approval Program since 2012.

Letter from our Director

Seattle Children’s MOC Program seeks to improve provider knowledge, engagement, participation, and skills in quality improvement (QI). We had another successful year, offering opportunities to collaborate on QI initiatives that enhance and optimize patient care.

In 2019, the projects offered through our program focused on a range of topics, from antibiotic prescribing practices, to improving physician sleep habits, to addressing issues of equity and inclusion in the delivery of healthcare. In addition to Part 4 MOC credit for physicians, we were pleased to introduce Continuing Medical Education (CME) credit for Physician Assistants (PAs).

As we look ahead, our program will continue to engage physicians and PAs in QI projects and education, providing them with the skills to improve their practice while facing the many challenges that confront us.

Sincerely,

Joel S. Tieder, MD, MPH
What is the Seattle Children’s MOC Program?

- An institutional resource to improve patient and family-centered outcomes through lifelong learning.
- Approves and maintains a portfolio of qualifying Part 4 MOC projects for nearly all ABMS specialties.
- Helps Seattle Children’s establish quality improvement projects that meet MOC recertification requirements for faculty and affiliated physicians.
- Engages and teaches quality improvement skills to Seattle Children’s-affiliated physicians through project-based learning.
- Awards Part 4 MOC credit to Seattle Children’s-affiliated physicians who participate in MOC projects within our portfolio.
- Supports and coaches qualifying QI projects and QI leaders.

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- Equity, Diversity, and Inclusion (EDI)
- Improve NICU Admission Temperatures Collaboration
- SHEEP
- Increasing Influenza Vaccination Rates
- Inpatient Reading
- PCP Handoff Improvements
- SCCN Asthma
- Spirometry 360
- Use of Individualized Provider Feedback to Improve Antibiotic Prescribing
- Attending Observations of Resident Handoffs

16 Scholarly Impact
Our four Quality Improvement Coaches bring diverse expertise in QI, creative thinking and research. They are the backbone to our MOC projects, support to our MOC Project Leaders and teams. MOC QI coaches:

- Develop impactful and meaningful QI projects
- Obtain, display, and evaluate process and outcome measures
- Learn and apply QI skills
- Create scholarly work when applicable

Sahar Rooholamini, MD, MPH
MOC QI Coach

Joel Tieder MD, MPH
MOC Program Director and QI coach

Jim Stout, MD, MPH
MOC QI Coach

Jimmy Beck, MD, MEd
MOC QI Coach

Joel Tieder MD, MPH
MOC Program Director and QI coach
Program Growth

The Seattle Children’s MOC Program has been a Multi-Specialty MOC Portfolio Approval Program (Portfolio Program) with the American Board of Medical Specialties since 2012. The MOC program has witnessed substantial growth and has expanded from offering MOC opportunities to pediatricians to all ABMS member boards. As of 2019 the SCH MOC Program has been able to offer Category 1 PI-CME credit for Physicians Assistants, thanks to a collaborative agreement between the National Commission on Certification of Physician Assistants (NCCPA) and the American Board of Medical Specialties (ABMS) Multi-specialty MOC Portfolio Program.

This year we did see a slight dip in attestations but that was partly due to the roll out of a couple very large collaborative projects that will complete in 2020. One of the projects is a national collaborative with 15 different organizations participating. We anticipate our number to raise again during the 2020 year. The MOC Program continues to experience large interest in physician’s self-care/reduce burnout projects and building MOC project models for large collaborative projects, regional and national.
"By increasing my awareness of the multitude of ways in which bias (racial, socioeconomic, gender) impacts my care of patients, this project has caused me to stop and think, to be intentional, about how best to create a therapeutic alliance with each patient and family I see." – MOC participant

April – November
11 participants from 5 divisions

Project Leader
Shaquita Bell, MD

Project Summary

The aim for this project was by November 2019, participants will improve EDI awareness and actions from baseline to attestation (via survey response). Participants were asked to complete a self-assessment survey throughout the course of the project. The survey was comprised of five questions: 1) When I experienced what I perceived as a culture barrier, I took steps to break down the barrier. 2) Considered how the concepts of privilege and oppression may play into my relationship with a patient/family. 3) Modeled what I learned in EDI training with junior colleagues and/or trainees. 4) Thought about cultural and/or religious assumptions that I may be making about a patient/family. 5) Thought about the benefits and burdens of a plan for patient/family.

Highlight:

- Winner of “Greatest Impact” award of 2019
- Winner of “Best Project” award in 2018
- Participants continue to value the opportunity to discuss with their peers about their thoughtful and meaningful through the experiences of this project. Interest in scaling to national collaborative.
Project Leader
Elizabeth Jacobson MD

Project Summary
The aim for this project was to increase the percentage of inborn very low birth weight infants admitted to each site’s NICU from the delivery room with admission axillary temperature in goal range (36.5-37.5 °C) by 15% at each site and to at least 65% across the network in one year, then sustain for at least 6 months.

Highlights:

- Unique opportunity for community physicians to participate in a Children’s portfolio MOC project
- Winner of “Best QI Teaching” award in 2019
- Engaged team who demonstrated high levels of QI learning that plans to continue project through 2020

"It was most important to me to gain familiarity with the structure and concepts behind quality improvement projects, as I did not have a strong background in this area. Those concepts were modeled and reinforced during the group meetings, when the project leaders presented data and other information to our group.” - MOC Participant

May - November
10 participants from 4 NICUs

Project Leader
Linda Wallen MD

UWMC
Admit Temp Run Chart: May 21, 2019 to Dec 30, 2019

Project Summary

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- Engaged team who demonstrated high levels of QI learning that plans to continue project through 2020
The aim of this project is to decrease the Likert-scaled average on three questions related to sleep beliefs by 20%. This project was an innovative pilot developed in partnership with Drs. Jenny Taylor and Beth Villavicencio as part of their work in wellness for attending physicians. Following a CBT-I model, participants attended meetings, kept sleep diaries, and implemented interventions to improve their sleep.

**Highlight:**

- Winner of “Best Project” award in 2019
- This project continues to be a very popular project in the Children’s portfolio with a broad range of subspecialists participating, including spread to outreach/regional clinics
- Excellent leadership coupled with engaged participants and meaningful data
- Winner of “Best Project” award in 2017

**Project Summary**

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- Excellent leadership coupled with engaged participants and meaningful data
- Winner of “Best Project” award in 2017
Project Summary

The aim of this project was to ensure ≥90% coverage of influenza vaccination rates among USNWR populations in SCH outpatients. Under the leadership of Matthew “Boots” Kronman and Annika Hofstetter, this project has reached nearly all ambulatory divisions at the hospital and influenced substantial change in workflow and engagement in providers. Participants during the “off season” identify barriers and plan interventions in their clinics, and during the “on season” practice just-in-time problem solving to ensure every child is screened and has access to vaccination.

Highlight:

- This project continues to be a very popular project in the Children’s portfolio with a broad range of subspecialists participating, including spread to outreach/regional clinics
- Excellent leadership coupled with engaged participants and meaningful data
- Winner of “Best Project” award in 2016
"I learned about the iterative process of quality improvement, how to assess impact and plan/implement changes to achieve goals/outcome measures." - MOC Participant

March - September
11 participants from 7 divisions

Project Summary

The aim of this project was to improve rate of book delivery by at least 50% to eligible patients on general medical teams 1, 2, 3, 6/7 in six months. This project strived to improve adherence to established protocols through coaching and evaluation of the process of getting the books to families. All participants completed the Reach Out and Read online training program, engage medical teams to improve the rate of book delivery, and identify barriers and ideas for further improvements.

Highlights:

- Unique ongoing work to improve delivery of care and family experience
- Survey responses collected by MOC participants gives project leaders insight as they look to expand the Reach Out and Read program to more areas of the hospital
PCP Handoff Improvement

"Was great for Allegro to learn what our PCPs want for communication and to work on getting discharge summaries more consistently"– MOC participant

May – November
12 participants from 7 clinics

Project Leader
John Schreuder, MD, FAAP

Was Call Made Timely?
Previously 83% timely, overall now 85%
Numerator = 83 yes responses
Denominator = 98 calls to PCP

Project Summary
The aim of this project was to increase “Warm Handoff Rate” via phone call hospitalist to primary care provider within 48 hours of patient discharge, from 43% to 65% by September 1, 2019.

Highlight:
- Gathered valuable feedback from PCPs to create recommendations around identifying when ‘warm’ handoffs are needed/preferred
- Unique opportunity for community physicians to participate in a Children’s portfolio MOC project
"The interventions improved the quality of preventative care provided to these patients and families. It empowered families to better understand when to seek clinic evaluation and treatment and how to recognize and initiate home treatment." - MOC Participant

April - November

76 participants from 8 clinics

Project Leader
Sheryl Morelli, MD, FAAP

Project Summary

The aim for this project was to decrease asthma exacerbations* for patients 5-18 years of age in the Seattle Children's Care Network by 5% by December 31, 2020 (group would like to capture 2 respiratory seasons)

*Defined as hospitalization or emergency dept. visit for asthma, outpatient visit coded as asthma with exacerbation or status asthmaticus, outpatient visit for asthma with oral steroid.

Highlights:

- Continues to be one of Children's Portfolio largest community participants

- This meaningful project provides unique opportunity for community physicians to engage on similar outcomes
"The most important concept I learned from participating in this QI Effort is how to coach a patient to perform spirometry and how to read pulmonary function testing due to the training modules that educated me on how to interpret different results." - MOC Participant

### Project Summary

The aim for this project was that 6 months from baseline, 60% of all spirometry tests will be of adequate quality. Spirometry 360 is a unique distance learning program to facilitate implementation of routine spirometry testing to aid in asthma management in primary care clinics. The curriculum has been implemented worldwide. MOC is offered through the Children’s portfolio for interested participants.

### Highlights:

- Unique opportunity for community physicians to participate in a Children’s portfolio MOC project
- Spirometry continues to be a role model project for distance learning and MOC opportunities
- Dr. Jim Stout was named the 2019 UW Medicine Inventor of the Year. This award recognized his work on Spirometry 360 and the impact it has had on improving health care.

### Ongoing

4 participants from 1 clinic

### Project Leader

Jim Stout, MD, MPH
“I learned that providers are open to individualized feedback on their antibiotic prescribing and there was great engagement on what antibiotic prescribing behaviors most impact their patients. I learned we need to sit down with divisions to understand what additional behaviors they would like feedback on to improve care.” - MOC participant

July – November
8 participants from 4 divisions

**Project Summary**

The aim of this project was to reduce targeted clinical behaviors by 10% within each participating medical/surgical division by November 2019

**Highlight:**

- This project was well lead and provided valuable QI activity
- Participants were highly engaged and found the data to be meaningful
- Great opportunity for physicians to be involved across divisions

<table>
<thead>
<tr>
<th>Peer Group</th>
<th>Prescribing Behavior</th>
<th>FY18 Q4</th>
<th>FY19 Q4</th>
<th>Decrease &gt; 10%</th>
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<tbody>
<tr>
<td>Cardiac Critical Care</td>
<td>Beta-lactam/Beta-lactamase Inhibitor Use</td>
<td>70.83</td>
<td>61.77</td>
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<td>IV Vancomycin Use</td>
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<td>29.51</td>
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<td>4.04</td>
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<td>IV Vancomycin Use</td>
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<td>Double Anaerobic Coverage Use</td>
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<td>1.441</td>
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<td>Hospital Medicine</td>
<td>PTZ/VAN Use</td>
<td>1.433</td>
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<td>PTZ/VAN Use</td>
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<td>IV Vancomycin Use</td>
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<td>33.71</td>
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<td>IV Vancomycin Use</td>
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<td>130.4</td>
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<td>IV PO (Administration of highly bioavailable agent)</td>
<td>0.9027</td>
<td>0.7848</td>
<td>-13%</td>
</tr>
</tbody>
</table>

**Project Leaders**

Katie Bridger, PharmD
Nicole Poole, MD, MPH
Scott Weissman, MD
When asked if this is a valuable use of Attending’s time it was rated an average of 3.8 on a scale of 1-4 with 4 being the most valuable.

**Project Summary**

The aim of this project was to increase the number of inpatient rehabilitation service resident/fellow handoff to overnight on call coverage on Mondays and with new patients observed by attending physicians to three times a month by November, 2019.

**Highlights:**

- Participants appreciated that the communication strategies and felt it would be possible to increase the aim to greater than three sign-outs per month.
- As a result of this project, attendings will routinely observe resident handoffs to encourage best practices.
Seattle Children’s Maintenance of Certification (MOC) Program

Publications:


Ancillary Services Utilization

Presentations:

- Using Peer Coaching to Reduce Inappropriate or Duplicate Laboratory Testing; **James O’Callaghan**, Kirsten Beck, Brian Cartin, Glen Tamura, Susan Hunt, Elisabeth Villavicencio, Joel Tieder
  - Hospital Medicine 2017 (HM17), Las Vegas, NV, May 1-4, 2017; poster presentation, presenting author **James O’Callaghan**
  - Pediatric Hospital Medicine 2017 (PHM17), Nashville, TN, July 20-23, 2017; poster presentation, presenting author **James O’Callaghan**

Clinical Standard Work (CSW) – Diabetes Ketoacidosis (DKA)

Publications:


Presentations:

- CCTR Science Day 11 April 2013, Seattle: Ismail H, Cochrane K, Paris C, **Koves IH**. Hypoglycemia Reduction during Diabetic Ketoacidosis with the two-bag system.


DKA- A continuous infusion of improvement in the era of electronic medicine. Royal Children's Hospital, Melbourne, Australia, December 2013.

CONNECT

Presentations:


Cyclophosphamiderecurring infusion pathway practice improvement (CRIPPI)

Publications:


Dialogue on Acute Respiratory Tract Infections (DART)

Presentations:

Echocardiography Appropriateness

Presentations:


Equity, Diversity, and Inclusion (EDI)

In progress:


Handoff Coaching

Presentations:


Head CT Utilization for Pediatric Head Trauma Patients

Publications:


Presentations:

Seattle Children’s
Maintenance of Certification Program
Scholarly Impact


Hepatitis B Newborn Immunization Rate

Presentations:
- May 2016. Villavicencio, CE; Taylor, J “Birth Dose Hepatitis B Vaccination Rates in a Community Hospital Setting”; Pediatric Academic Societies, Poster presentation.

Improving NAS in Community Hospitals

Publications:

Presentations:
- Parlaman J, Deodhar P, Sanders S, Jerome J, McDaniel CE. Improving Care for Infants with Neonatal Abstinence Syndrome: A Multicenter, Community Hospital Based Study.

P-HIP (Pediatric Hospital Improvement Project)

Presentations:

Rounding Coach

Presentations:

- Rooholamini S., Ruedinger E., Jensen D., Tieder JS. Faculty Peer Observation and Coaching to Improve Patient- and Family-Centered Rounds. Pediatric Academic Societies (PAS) Annual Conference, Baltimore, MD (poster presentation) and Quality Improvement Forum, American Board of Medical Specialties Conference, Rosemont, IL (poster presentation), May 2016.