



Weill Cornell Medicine

Reimagining CQI: A Data-Driven Approach to Accreditation and Strategic Planning

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Our Presenters



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Session Overview



Approach to CQI and Mission Based Strategic Planning



Lessons Learned



Takeaway Questions: Strategic Planning Discussion



Goals and Learning Objectives

Goal

- Share approach to alignment of the medical school accreditation requirement for CQI to mission based strategic planning

Learning Objectives

- At the end of workshop, participants will be able to
 - Describe the accreditation requirement for strategic planning and CQI
 - Outline several approaches to strategic planning in the context of this accreditation requirement
 - List 2 – 3 challenges and opportunities in aligning identified needs with this process





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Approach to CQI and Strategic Planning



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Weill Cornell Medical College (WCMC)



Campus

- Upper East Side “Scientific Corridor” neighborhood in NYC
- Parent university in Ithaca (225 miles)
- Additional campus in Doha, Qatar (6700 miles, 7 hour time difference)



Student and Faculty Demographics

- 423 Medical students (MD and MD-PhD)
- 900+ PhD and Masters students
- FT Faculty: Nearly 2000
- Departments: 27, multiple Institutes



Clinical Partners

- New York-Presbyterian Hospital: WCM and CUMC
- 10 additional clinical affiliates, one in Houston (1500 miles)



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Liaison Committee on Medical Education: Standard 1



*A medical school engages in **ongoing strategic planning and continuous quality improvement processes** that establish its short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve educational program quality, and ensure effective monitoring of the medical education program's compliance with accreditation standards.*



STRATEGIC PLANNING AND CONTINUOUS QUALITY IMPROVEMENT

CQI: Data Driven Approach to Strategic Planning

Triangulate, synthesize, visualize key data

Report to key stakeholder groups
Proactive vs reactive



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Determine action items and monitor key performance indicators and outcomes

New programs, processes,
policies and are they effective

CQI Team: LCME and Beyond

2018

Office of Curriculum

Data: LCME specific data and course evaluations

Data management: Course evaluation platforms, initial data visualizations

Content Expertise: Medical Education, Education Technology Group, ITS

2020- date

Office of Education Research, Outcomes, Innovation

Data: Longitudinal outcomes database with LCME specific KPI's+

Data management: identifying gaps/redundancies/synergy across datasets and technical platforms, central medical education IRB, enhanced data visualization

Content Expertise:+ Qualitative research, +QI,

Key Data Sources: LCME and Beyond

External benchmarking

Graduation Questionnaire

Internal data

Independent Student Analysis

Course evaluations: Course content, teaching faculty (effort and quality)

Learning environment

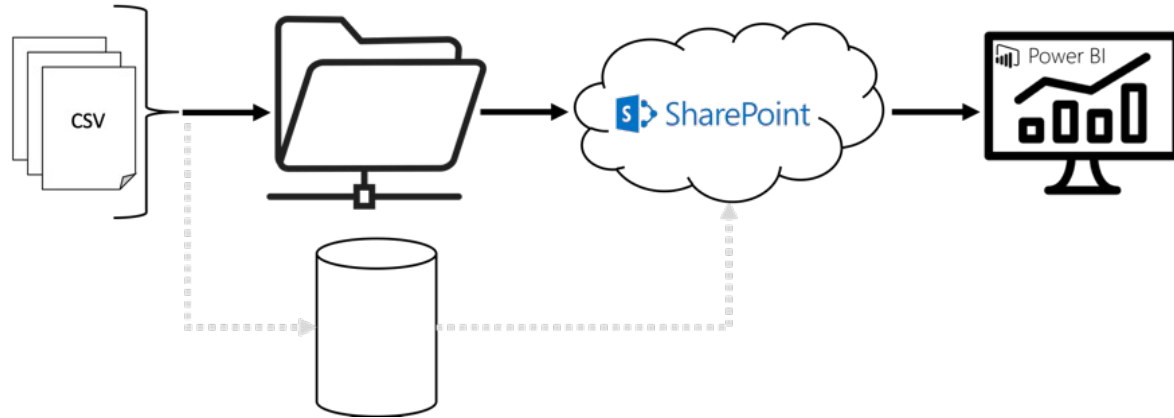
Scholarship: Student publications, mentors by department, faculty scholarship in education



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Technology Solutions, Approaches, and Processes

- Document management for the LCME self-study
- Roll out of OASIS, iSeek, and other LCME priorities
- Built supporting systems for Continuous Quality Improvement



Dashboard

Description [As part of the accreditation process, LCME asks institutions to commit to a culture of continuous quality improvement (CQI), to monitor compliance with LCME standards on an ongoing basis and to perform a formal self-evaluation of their medical education program and the academic environment in which students learn. WCM has launched several key initiatives as part of our commitment to quality improvement. We have identified key performance indicators that will be displayed on a dashboard.

Our goal is to create a resource to inform initiatives in sustaining WCM's commitment to excellence in patient care, scientific discovery and the education of future physicians in New York City and around the world. This is a project which WCM is continuously developing; it is our hope that this is valuable institutional resource.]

LEGEND	
GQ data	Internal Survey
<50th Percentile	<3.5
50th percentile	3.5-3.9
>=75th percentile	>=4.0

NUMBER TREND FROM PREVIOUS YEAR	
▲ Up	
▼ Down	
▬ No Change	

Key Performance Indicator (KPI)	Status Trend Comparison			Trend from previous report year
	WCM AY 2015-16 Status	WCM AY 2016-17 Status	WCM AY 2017-18 Status	
LCME Standard Descriptions				
Standard Descriptions				
Standard 1: Satisfaction with the Quality of the Medical Education				▲
Standard 2: Satisfaction with the Quality of the Medical Education				▼
Standard Descriptions				
				▲
				▲



Student Lifecycle and Advising



MSPE Builder (Abraham, Myra)

PDF Preview Data fields Raw Data (Per2) On-screen Preview (Per2)

University Medical School
October 1, 2022

IDENTIFYING INFORMATION
Myra Abraham is a fourth-year medical student at the University Medical School.

Noteworthy Characteristics

- Myra been an avid runner and completed one marathon for each of the years that she was in medical school. She qualified for the Boston Marathon which she is aiming to run next spring.
- Myra steps up as a leader when she feels she can make a change, and has served as a Deans Council representative, a leader in her advising society, and a co-chair of a local high school health scholars organization.
- Having seen firsthand the impact of health disparities in the region, Myra has invested a tremendous amount of his extracurricular

**NOTEWORTHY CHARACTERISTICS
AUTOMATICALLY INTEGRATED**

Choose a new task

Kathleen Adams
Grad year: 2021
Campus A

Choose a learner
Phase
Academic year

Highest Step 1 score
22775
CSB score

Highest Step 2 CK score
72
CSB score

MCAT
499.47
99th percentile

Average final numeric score
82.3%

of low performance scores
22

Most recent Step 2 CS score
-

Grade summary

Final letter grade	# of times grade received
Pass	11
High pass	8
Fail	2

Score distribution

Detailed review
Select activity type(s) to review
Assignment
Comments for the Dean's Letter
Exam - Internal MCQ
Exam - External

View trajectory of performance
View performance trends
View detailed performance on act...
View all low performing scores
View summative low performing sc...

Final numeric and letter grades for Adams, Kathleen (5707) (BETA)
For each course/ clerkship, you will see the final letter grade and final numeric score that the learner received. Additional columns show statistics for the cohort.

Course/ clerkship name	Final letter grade	Final numeric score	Mean	Median	Std Dev	Min	Max	N
Totals								
16/17 Human Gross Anatomy (HGAN 1486)	High pass	91.00%	86.32%	87.00%	8.38%	65.00%	99.00%	99
17/18 Pathology (PATH 2585)	High pass	92.00%	87.16%	88.00%	7.85%	67.00%	99.00%	99
18/19 Obstetrics & Gynecology - Campus A (OBGY 322)	High pass	89.00%	87.82%	87.00%	6.64%	75.00%	99.00%	33
18/19 Pediatrics - Campus A (PEDS 324)	High pass	89.00%	86.12%	86.00%	6.31%	73.00%	96.00%	33
17/18 Clinical Medicine (CMED 8056)	High pass	87.00%	86.33%	87.00%	8.30%	65.00%	99.00%	99
16/17 Histology (HIST 1335)	High pass	86.00%	85.43%	86.00%	8.31%	65.00%	99.00%	99
16/17 Foundations (FDN 1567)	High pass	85.00%	86.72%	88.00%	7.72%	66.00%	99.00%	99
16/17 On Doctoring I (DOCT 1234)	High pass	85.00%	86.32%	86.00%	8.11%	65.00%	99.00%	99
19/20 Surgery - Campus A (SURG 328)	Pass	84.00%	86.63%	89.00%	8.77%	65.00%	88.00%	35
16/18 Family Medicine - Pediatrics & OB/GYN 3235	Pass	83.00%	86.30%	86.00%	8.60%	65.00%	90.00%	33

Lessons Learned – Operations



Phased approach to implementation. Created an office of Education Research, Outcomes and Innovation within Medical Education.



Engaged stakeholder groups across the organization to include students, faculty, leadership, other administrative units.



Created a data warehouse for education related data. Worked closely with Institutional Reporting to ensure alignment of data reporting.



Established a strategic planning process across the offices of Medical Education to include proactive budgeting.



Lessons Learned – Project Management



Create a program to ensure sub-projects provide benefits that contribute to the overall strategic plan



Transparency is key. Shared overview across all sub-projects.



Engage medical school administrative subject matter experts (SME), and staff at all levels of the organization early on.



Collaborate and be pragmatic. A phased, flexible and thoughtful approach will allow you to be creative & innovative.





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Takeaway Questions: Strategic Planning Discussions



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Discussion Topics

1. Where within your institution/organization does strategic planning currently live?
2. Who are the key stakeholders who are engaged within your institution/organization(s) to develop the strategic plan? Are there other groups who should be engaged in the process?
3. Has your institution used a CQI approach to strategic planning? If so, have there been lessons learned?
4. How might you determine institutional areas of strength or gaps in an approach that will meet the 1.1 LCME requirement and also inform a broader strategic plan?





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