Effective: 7/1/2023; Revised: 7/1/2024; 7/1/2025

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VUMC QUALITY IMPROVEMENT ACTIVITIES

VUMC supports and maintains integrated, systematic, and comprehensive improvement programs, policies and processes designed to enhance the effectiveness, appropriateness, efficiency, quality and processes of patient care. Systematic monitoring and evaluation of care is conducted at various levels in the organization in which House Staff are active participants. These include activities which include, but are not limited to morbidity, mortality and improvement conferences, root cause analysis, departmental meetings and other ad hoc groups and meetings and associated communications and processes. Specific medical staff functions are monitored hospital-wide and reported on a regular basis to the clinical services, Medical Executive Committee, Quality and Patient Safety Committee of the VUMC Board, and other groups as needed. An Executive Medical Director of Patient Safety of Vanderbilt University Hospital and Adult Ambulatory is an appointed member of the Graduate Medical Education Committee (GMEC), and a provision of summary information of patient safety reports and other applicable reports will be submitted to the GMEC at least annually. Updates on patient safety events will also be presented during clinical Morbidity, Mortality and Improvement conferences.

It is imperative that patient safety events be reported for purposes of patient safety and quality improvement. House Staff must report events in a timely manner, in any of the following ways:

- Utilizing the Vanderbilt Event Reporting Incident Tracking and Analysis System (VERITAS) https://veritas.app.vumc.org/
- Directly contacting the Office of Risk and Insurance Management.
 They can be reached by calling 615-936-0660 during normal business hours or by calling 615.878.0705 if after hours or urgent.
 - You may also call the hospital operator to be connected to Risk Management.
- Compliance concerns may be reported by calling the VUMC Compliance Integrity Line 866.783.2287 or on-line at https://secure.ethicspoint.com/domain/media/en/gui/58859/index.html.

House Staff may seek additional support from appropriate members of the leadership, such as the program director or DIO.

Any information, materials, incident or other reports, statements, memoranda, or other data which are generated in connection with quality improvement activities are subject to the Tennessee Patient Safety and Quality (Medical Peer Review) statutes (T.C.A. §63-1-150 and T.C.A. §68-11-272)