



# Entrustable Professional Activities

## EPA 5 for Pediatric Hospital Medicine

### EPA 5: Apply Science of Safety Concepts in Advocating for Pediatric Patients Within the Hospital System

#### Supervision Scale for This EPA

1. Trusted to observe only
2. Trusted to execute with direct supervision and coaching
3. Trusted to execute with indirect supervision and discussion of information conveyed for most simple and some complex cases
4. Trusted to execute with indirect supervision but may require discussion of information conveyed for a few complex cases
5. Trusted to execute without supervision

#### Description of the Activity

Pediatric hospitalists work at the intersection of many care settings. Because of this unique position, they must take responsibility for promoting patient safety and collaborating with others to develop systems that reduce harm at the individual and system level.

The specific functions which define this EPA include:

1. Knowing the common types and causes of pediatric patient safety events and common mitigation strategies
2. Using a shared language to promote interprofessional team-based patient safety behaviors
3. Applying tools to identify latent patient safety threats and address patient safety issues
4. Promoting and role modeling a culture of safety
5. Advocating for pediatric specific patient safety initiatives at the unit, hospital, or health system level

#### Judicious Mapping to Domains of Competence

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Personal and Professional Development

#### Competencies Within Each Domain Critical to Entrustment Decisions

PC 11:	Using information technology
PC 12:	Providing role modeling
ICS 3:	Communicating with health professionals
SBP 4:	Advocating for quality care
SBP 5:	Working in interprofessional teams
SBP 6:	Identifying system errors



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PPD 4:	Adjusting to change
PPD 6:	Providing leadership to improve care

### Context for the EPA

**Rationale:** Hospital systems and hospitalized patients are becoming increasingly complex. Pediatric patients are at increased risk for medical errors and other safety events. Because pediatric hospitalists work at the intersection of many care settings, they are uniquely positioned to promote patient safety and help develop systems that reduce harm.

**Scope of Practice:** Pediatric hospitalists need to have a strong foundation in patient safety principles and utilize tools to promote, participate in, and lead patient safety initiatives. Because institutions may vary in their orientation towards pediatric patients, pediatric hospitalists must be prepared to highlight the vulnerabilities of pediatric patients and advocate for systems that promote safe care regardless of the practice setting. Pediatric hospitalists must practice, role model, and teach patient safety behaviors within interprofessional teams to promote a culture of safety.

### Curricular Components That Support the Functions of the EPA

1. Knowing the common types and causes of pediatric patient safety events and common mitigation strategies
  - Knows the types of medication errors and risk factors that are unique to pediatric patients
  - Identifies and describes how system issues such as unwanted variability in care and failed communication impact patient safety
  - Names the common patient safety practices including order sets, practice guidelines, electronic health record (EHR), barcoding, time-outs, etc.
2. Using a shared language to promote interprofessional team-based patient safety behaviors
  - Uses common terminology such as harm, adverse medical event, preventable error, latent safety threat, reliability, situation awareness, shared mental model
  - Works effectively and collaboratively within the team to promote safety by reducing process complexity, building in redundancy, improving team functioning, and identifying team members' assumptions
  - Consistently uses best practice communication within interprofessional teams such as closed-loop communication
  - Discloses safety events clearly, concisely, and completely to patients and caregivers
3. Applying tools to identify latent patient safety threats and address patient safety issues
  - Proactively identifies sources of potential harm including environmental and personal factors that affect ability to render safe care
  - Uses tools such as failure mode effects analysis (FMEA) and root cause analysis (RCA) to investigate potential or actual safety events
  - Actively contributes during ad hoc and sentinel event reviews
  - Participates in and leads quality improvement activities directed at enhancing the safety of hospitalized children



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### 4. Promoting and role modeling a culture of safety

- Describes the elements necessary for a culture of safety
- Integrates safety principles and behaviors into daily processes of care and procedures (e.g., medication reconciliations, infection precautions compliance)
- Engages patients and families in identifying and addressing patient safety threats to prevent harm
- Uses the institution's safety reporting system to report patient safety events
- Explicitly calls attention to role modeling behaviors that promote patient safety

### 5. Advocating for pediatric specific patient safety initiatives at the unit, hospital, or health system level

- Uses patient safety language and data to highlight patient safety threats and opportunities to institutional leadership
- Identifies hospital environments or processes that lack an appropriate focus on children and takes steps to advocate for pediatric specific needs
- Participates on key committees related to patient safety
- Effectively escalates patient safety issues along the chain of command

## EPA and Curricular Components Authors

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