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“Hospitalist Best Practice”: An Intervention to Build Consensus and Standardize Evidence-based Practice

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Background

Deriving consensus about practice around clinical issues in the hospital has many advantages: patients receive similar care, trainees and colleagues hear consistent answers to clinical questions, and implementation of process improvement is more effective. However, physicians are often notoriously resistant to mandated standardization of practice by management.

Purpose

To develop a peer-led intervention to promote consensus building and standardization of practice in a hospitalist group.

Description

A group of 20 academic hospitalists held a weekly 50-minute luncheon conference called “Hospitalist Best Practice.” Each hospitalist was assigned to give 2 or 3 conferences/year. The assigned hospitalist chose a topic of their choosing, prepared a 25-minute presentation summarizing the recent evidence-based literature around the topic, any evidence of local practice and variation when available, and identified 2 or 3 specific and relevant questions in clinical practice. The presenting hospitalist then led a 25-minute discussion, inviting specialists to attend when appropriate, in an attempt to build consensus around one or more of these practice questions. The final 5-minutes were spent identifying next steps for the group and solidifying consensus statements. Each meeting is expected to generate 2-3 points of consensus which are posted on our website and included in a monthly practice report that every hospitalist signs.



Results

Averaged over the past 2 years, 76% of the hospitalist group attends each Best Practice and residents, fellows, healthcare team members, and specialists routinely attend. As a result of these 92 conferences, the group agreed to adopt 10 clinical tools and developed 6 new order sets, with more in development. The conferences also are a source for team building, developing shared culture, and have become a mainstay of our program.

Examples of topics

CLINICAL	EDUCATIONAL	OTHER
Diagnosis and treatment of hepatic encephalopathy	Providing feed-back to learners	Improving transitions of care
Appropriate use of intravenous iron	Advantages of bedside rounding	EHR issues
Appropriate targets for transfusion	Evidence-based literature around common physical exam findings	Patient satisfaction

Conclusions

A weekly peer-led discussion of recent evidence-based literature on clinical topics with identification of local variances can result in standardization of practice, adoption of clinical tools, and development of new order sets.

Category of “Best Practice” Presentations (n=92)

