Improving Neuromuscular Blockade Monitoring Compliance via QuizTime

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ASPIRE Quality Improvement Program

Data/Technical Team

- Validate cases (*n*=14 faculty)
- Troubleshoot issues
- Collaborate w/MPOG Team
- Feedback Email Enrollment

Task Force Team

- Conduct Monthly Meetings
- Focus & Maintain Initiative
- Identify ASPIRE Metrics (*n*=27)

Feedback Emails-April

Question Development Team

- Utilize Template
- Collaborate w/QuizTime office
- Create & Curate 20 MCQs
- QuizTime Enrollment

QuizTime Launch-May

N

2021

Analyze
DataAugust

Communication

- Grand Rounds
- Weekly Newsletter
- Division Meetings
- REDCap Surveys

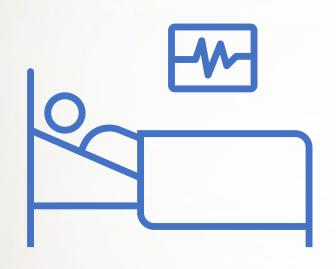
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REDCap Survey-June

Participation

- Pilot *n=25*
- Quiztime n=400
- Feedback Emails *n=403*

Why and Who?



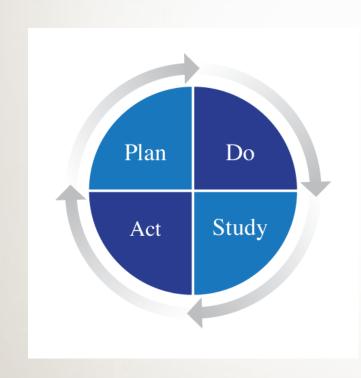
Phase I: Pilot (n=25)

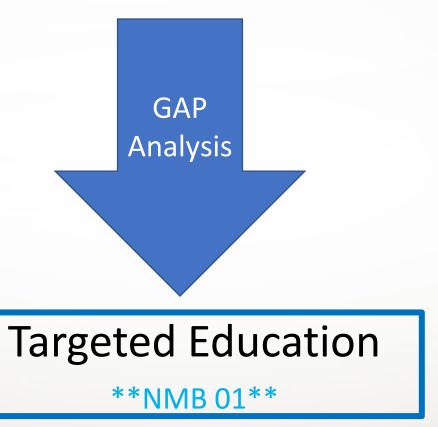
Phase II: Entire department (n=400)

- Attending physicians
- CRNAs
- Residents and Fellows

What and When?

Current Departmental Practice Data





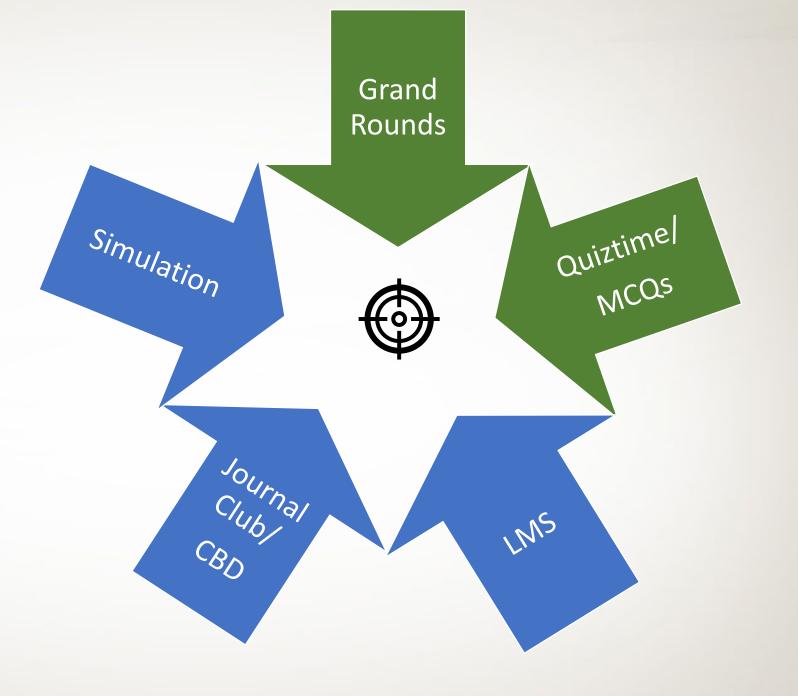




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How?

Traditional and novel methods of education delivery

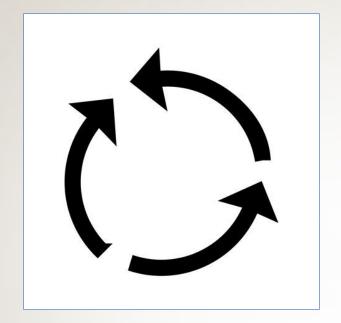




2021 Rollout & Timeline

- January 18: Validation of use cases completed
- January 22: VUMC data uploaded into the MPOG central database
- January 27: a 3-month pilot rollout began, including QuizTime
- January 29: Introduction to ASPIRE Metrics, survey sent out to pilot group
- March 31: Pilot rollout ends, feedback analyzed
- April/May: Departmental-wide rollout to all providers, including QuizTime
- August/September: Performance monitoring, collecting feedback, data analysis







Retrieval Based Practice



Spaced Education

Evidence-based educational concepts

- Learning takes place over time, with rest periods
- Small doses of learning, content when convenient
- Recalling from memory, strengthens connections





ASPIRE Quality Improvement Task Force

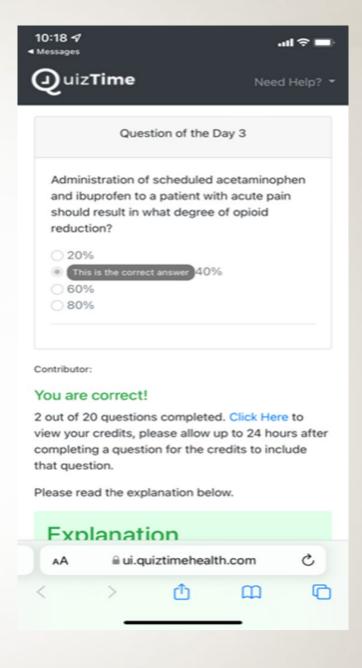
Neuromuscular Blockade Monitoring (NMB 01) Module

May 10th-June 4th

- 1 Multiple Choice Question/day (n=20)
- Monday-Friday
- Email or Text
- 1 AMA PRA category 1 creditTM

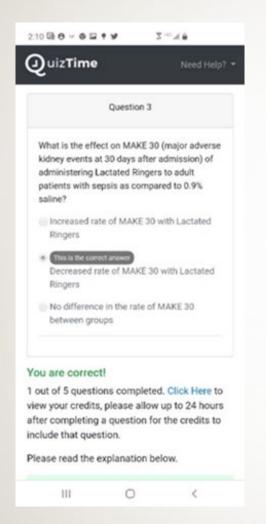
If you are not receiving MCQs or would like to opt out,

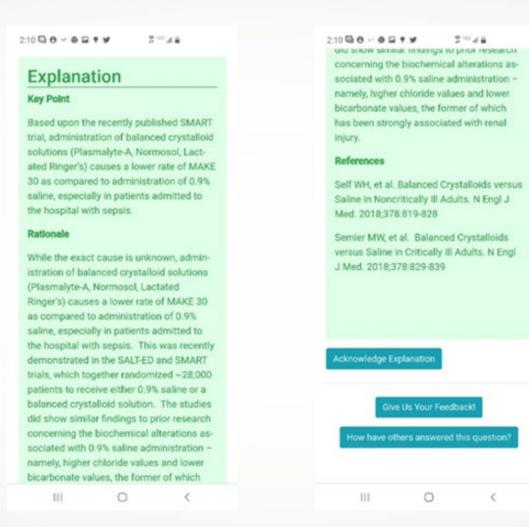
Email leslie.c.fowler@vumc.org

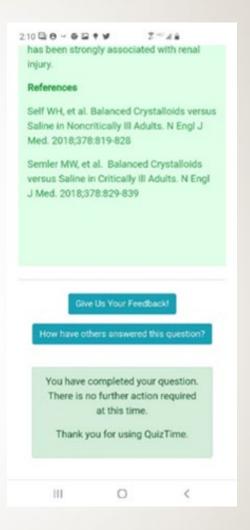




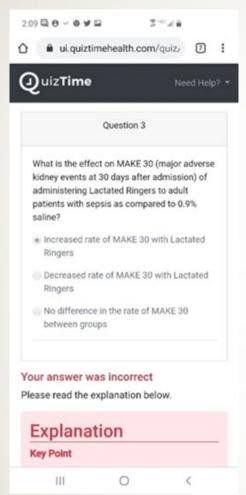
Learning Experience Design







Learning Experience Design







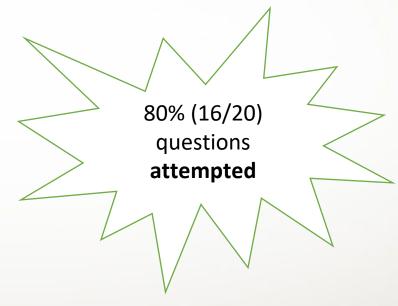
Enrollment versus Participation

- Phase I (n=25)
- Phase II (n=400)

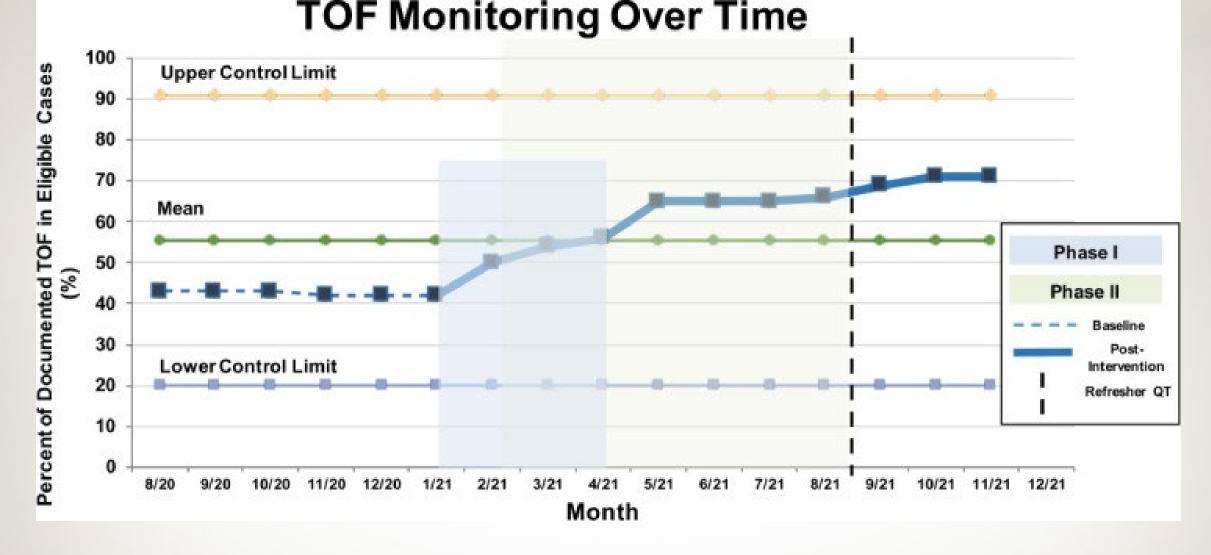
- Phase I (n=24) 96%
- Phase II (n=292) 73%

Learners eligible to claim continuing education credit.

- Phase I (n=11) 46%
- Phase II (n=132) 45%







TOF monitoring rate increased from baseline (shown as the horizontal dashed line) over the course of Phase I (blue box) and Phase II (green box). The vertical dashed line depicts the time the Refresher QuizTime was implemented. The solid line depicts postintervention improvement in TOF, with continued increase after Phase II concluded.



60%

40%

References

- Kerfoot BP, Turchin A, Breydo E, Gagnon D, Conlin PR. An online spaced-education game among clinicians improves their patients' time to blood pressure control: a randomized controlled trial. Circ Cardiovasc Qual Outcomes. 2014;7(3):468-474. doi:10.1161/CIRCOUTCOMES.113.000814
- Magarik M, Fowler LC, Robertson A, et al. There's an app for that: a case study on the impact of spaced education on ordering CT examinations. J Am Coll Radiol. 2019;16(3):360–4.
- McEvoy MD, Dear ML, Buie R, et al. Embedding learning in a learning health care system to improve clinical practice. *Acad Med* . 2021;96(9):1311–4.
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