

Tammy McCausland:

This is Tammy McCausland. Thank you for joining me for SROA Soundboard, SROA's new podcast series. I'm joined here in conversation today with Sarah Lombardi, regional, quality, and safety coordinator for the Department of Radiation Oncology at Yale New Haven Hospital. Welcome, Sarah.

Sarah Lombardi:

Thank you, Tammy, for having me.

Tammy McCausland:

What does a quality and safety coordinator do?

Sarah Lombardi

A quality and safety coordinator performs event reviews and classifies, based on some sort of hospital standardized classification system. We conduct confidential one-on-one interviews with staff members involved in safety events. We're tasked with presenting facts of the event in an unbiased manner. So we want to protect the staff member's confidentiality, as well as the confidentiality around the event. But we want to be able to communicate to staff members and our team of what is involved in a safety event to further shared learning opportunities and prevent recurrences.

The other part of my role is quality. So, I look at all of the work process, workflows, how we can improve our processes, as well as bring about positive changes to our safety culture, and our culture of accountability and change within our environment.

Another part of my role is to communicate safety concerns to leadership and really be a change agent to safety concerns addressed by our staff members. We're tasked with recognizing at-risk behaviors and communicating those risks, regardless of who's involved, whether it be managers or physicians. Really, it's about doing the right thing and bringing those concerns forward to the appropriate people.

Tammy McCausland:

Why is it an important role to have in an organization?

Sarah Lombardi:

It's important to have in the organization because you want to be that leader and drive that culture change and that communication around behaviors that prevent errors, prevent safety concerns from happening, as well as driving the improvement opportunities.

Managers are typically tasked with a lot on their plate in regard to budgets, staffing, et cetera. So, by having a dedicated role to a quality and safety person, you really can drive that culture change that's needed.

Tammy McCausland:

What are the biggest challenges you face in your position?

Sarah Lombardi:

The biggest challenges that I face was that my background is in radiation therapy as a radiation therapist. Typically, this role, quality and safety, has always been performed by a physics lead or the

direct manager. I'm actually not a manager, and that's really what's recommended to investigate any sort of safety events, because you want to establish that trust and decrease that culture of blame.

By being that unbiased person, when you are trying to get the facts of something involved in an event, you want to provide that comfortable environment to the person so that ... They're already going to feel like they're going to get in trouble, so you want to try and diminish that as much as possible. And so me, not being a manager and being able to have that unbiased approach and create that relationship, it lessens that potential for the person that made the error to feel like they're going to get in trouble.

Tammy McCausland:

In your role, do you use tools like root cause analysis and other things related to that?

Sarah Lombardi:

Yes. In transitioning from a therapist to this role, I really immersed myself in a lot of training throughout the first year, because I had to prove to my peers that I could maintain that trust and that unbiased. I had to prove to the managers that I could handle the confidentiality, and handle the role. And I had to prove to my physician in leadership that I would have enough expertise in the field to be able to really move our culture forward. So yes, I really immersed myself in a lot of different training methods, especially HRO training.

I took a root cause analysis training class, as well as apparent cause analysis, common cause analysis. So, I really did extensively learn interviewing and investigational techniques and skills.

Tammy McCausland:

Do you feel the role of a quality and safety coordinator is given enough priority in an organization, especially in cancer care?

Sarah Lombardi:

That's a tough question. I'm a little bit biased because I know that my organization is really at the forefront. I think as a whole, we're talking about safety more in organizations. I think that there's the opportunity to expand this role outside of just the direct manager or the physicist involved. I think there's the opportunity to grow this role as a more prominent member of the radiation oncology culture, versus just having it be part of somebody else's role.

Tammy McCausland:

In your facility or at your organization, do you have a quality and safety committee that you also work with?

Sarah Lombardi:

Yes. Within my department, I am the co-chair of the quality and safety committee, our QI committee partnered with one of our physicians. Also at the oncology level, as at the service line level, I am the representative for radiation oncology to report, along with all other oncology quality improvement projects and safety concerns. We also, at an organizational level, have quality committees which we participate. There's really three tiers to the quality committees and safety committees that I do facilitate and participate in.

Tammy McCausland:

Do you have a reporting system that you use if there is an incident? Also, do you report nationally and to the ASTRO RO-ILS system?

Sarah Lombardi:

Yes. We do have both. We participate in an organizational incident learning system, which I feel is a little bit limited to the field of radiation oncology. So yes, we do participate with ASTRO RO-ILS. I use those case studies as part of education and feedback to staff. And also, the classification more specifically of royals, because it allows us to trend our events, I think, more accurately than the organizational incident learning system.

Tammy McCausland:

The title of your presentation was The Evolving Role Of A Quality And Safety Coordinator. Why is the role evolving?

Sarah Lombardi:

I believe that it's evolving because now, it's going beyond just the direct manager or the physicist. More radiation therapists are getting tasked with this role, or this role is really being created for them because they're really the critical frontline staff members at identifying and catching errors. They have that communication and handoff process with pretty much every modality with the department. And they're a critical piece in process improvement, workflow improvement, and really, being that patient advocate and protecting that patient. So I feel that this role is really evolving from those previous leaders to now more of a background in radiation therapy.

Tammy McCausland:

Safety and radiation therapy has come a long way since the New York Times articles and the publication of Safety Is No Accident. If the New York Times did a follow up series today, do you think most centers would get a passing grade?

Sarah Lombardi:

I do, I do. I think with the accreditation programs, especially APEX Accreditation really coming to the forefront of accreditation standards, and more centers really dedicating their practices to meeting those quality and safety standards that accreditation does represent, I do think that we've come a long way within our field in terms of quality and safety, and that's really part of everybody's program moving forward. So, I do.

Tammy McCausland:

What would you like radiation oncology administrators who weren't at your presentation to know?

Sarah Lombardi:

I would like them to know more about what the role can provide for their departments. So instead of it just being a process to look at events when they do happen, it really can be a designated role that could positively impact a lot of different disciplines. Really, there is a specialized approach to it. You want to really move your safety culture forward, and the way to do that is by having that leader or role model to really institute that change and keep reinforcing safety behaviors and improvements within our processes to protect our patients.

Tammy McCausland:

It's been a pleasure to speak with you today, Sarah. Thank you for your insights.

Sarah Lombardi:

Thank you very much.

Tammy McCausland:

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