

Improving Transitions-of-Care Training for Hospital Medicine Acting Interns

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Background

- TOC-related medical errors account for >\$12 billion/year in readmission expenditures alone to Medicare
- Medical specialty societies and MedEd accreditation authorities have suggested TOC competencies to be expected of practicing physicians and IM residents
- Most trainees report TOC training occurs "on the job" with adverse outcomes for patients
- Only a handful of TOC curricula have been published for medical students to bring them to or above the competency expected of entering PGY1s

Aim

- Given the need for trainees pursuing IM/Hospital Medicine to gain knowledge and skills for effective TOCs, develop a curriculum that
 - Is deployable during a 4-week hospital medicine acting internship (AI)
 - teaches AIs evidence-based TOC fundamentals
 - Improves the TOC process for patients discharged from the hospital by AIs

Proposed Curriculum and Outcome Measures

Self-Study (1.5 hours)

- Society of Hospital Medicine "Transitions of Care: Out of Hospital" Online CME Module
- Review of Systematic Reviews of Individual TOC Interventions
- AHRQ Review of Comprehensive TOC Models

Experiential Component

- Observed Discharge Planning Discussions with Patient/Caregivers (>= 2 Encounters/Patients)
- Post-Discharge Follow-Up Call (One Patient)

Reflective Exercise

- Presentation to Cohort, Course Director

On a scale of 1-5, rate your confidence in your ability to:

- Complete a medication reconciliation with a patient
- Identify important barriers a patient faces when transitioning from the acute inpatient setting to the outpatient setting
- Develop an appropriate follow-up plan for a patient on hospital discharge
- Discuss discharge plans with and provide post-discharge care education to patients and/or their caregivers
- Identify topics to review at post-discharge follow-up to confirm a safe transition from the inpatient setting

Discharge Education Observation Tool

Date: _____ Observer: _____

1. Patient Education:

Major diagnosis & hospital course explained; discussion of alert symptoms; available return to ED or other PCP; alert of current medications and problems

Above expected Expected Basic Needs to improve

2. Patient-Centered Care:

Elicits concerns about discharge and home support; assesses ability to carry out plan (med, transportation, insurance, etc); addresses concerns and questions; facilitates patient of communication with other providers; includes family if appropriate

Above expected Expected Basic Needs to improve

3. Medication Reconciliation:

Assessment of patient's ability to take meds (strength, frequency, health literacy); medication safety; needs to be confirmed; STOPPED medication and its control; NEW meds explained and be provided; instructions; how to take; report (C) (sig) not more complicated (i.e. needles, insulin)

Above expected Expected Basic Needs to improve

4. System-based Practice: (to not observed)

Involvement of team members (CM, DM, PT, etc) in discharge; follow up plan communication with other HCP; expectation and confidence of follow back that require follow-up (i.e. lab, etc) including which clinician will follow

Above expected Expected Basic Needs to improve

5. Communication Skills:

Appropriate language and terminology; avoidance of medical jargon; use of teach-back method; professional/interpersonal; non-verbal communication

Above expected Expected Basic Needs to improve

Areas for improvement/Comments: _____

Action Plan: _____

How much do you agree? This was a helpful educational experience

Observer: Strongly disagree 1 2 3 4 5 Strongly agree

Student: Strongly disagree 1 2 3 4 5 Strongly agree

Amount of Time observed: minutes

Anticipated Primary Outcomes

- >65% of students with improvement on self-rated confidence in TOC modalities pre vs. post elective
- >65% of students achieving "Expected" or "Above Expected" in Overall Performance on feedback from final observed discharge planning session

Future Directions

- Incorporate patient feedback into development of AI with controls derived from students opting out of module
- Investigate curricular bridge with MS3 IM clerkship
- Incorporate interprofessional learning with pharmacy, social work, and APP students

Thanks/Disclosures

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