Curriculum Content Report: Continuing / Continuity of Care

May 16, 2013

Prepared by: Cindy Lybrand, M.Ed.

Definition: Continuity of care is the process by which the patient and the physician are cooperatively involved in <u>ongoing [continuing] health care management</u> toward the goal of high quality, cost-effective medical care. Source: <u>AAFP</u>

Related Topics / Key Words: Homecare, Delivery of HealthCare, Treatment Cost, Medical Record Systems, Electronic Health Records

ED-13: The curriculum of a medical education program must cover all organ systems, and include the important aspects of preventive, acute, chronic, *continuing*, rehabilitative, and end-of-life care.

Curricular Changes related to topic: None

National Standards and/or models for Curricular Content:

Defining and Measuring Interpersonal Continuity of Care Annals of Family Medicine VOL. 1, NO. 3, September/October 2003 www.annfammed.org

GHRI Chronic Care Model

<u>The Patient Handoff: A Comprehensive Curricular Blueprint for Resident Education to Improve Continuity of Care</u> Acad Med. Author manuscript; available in PMC 2013 April 01

Enhancing Continuity in Care: An Implementation of the ASTM E2369-05 Standard Specification for Continuity of Care Record in a Homecare Application 2006

Outcome Data:

2012 Program Directors' Survey:

SYSTEMS-BASED PRACTICE

1	Being a patient advocate	3.73	0.64
2	Comprehension of community health and epidemiology	3.48	0.58
3	Understanding the importance of quality improvement measures and commitment to patient safety	3.37	0.6
4	Awareness of the types of available healthcare coverage	3.32	0.56
5	Appreciation for providing cost effective care	3.36	0.64

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AAMC Graduation Questionnaire 2012:

2012 Medical School Graduation Questionna

FAAMC

13. Do you believe that your instruction in the following areas was inadequate, appropriate, or excessive: (Continued)

		Ratings			
		Inadequate	Appropriate	Excessive	Count
Continuity of care					
East Tennessee	2008	25.0	70.8	4.2	48
East Tennessee	2009	22.9	77.1	0.0	48
East Tennessee	2010	12.2	87.8	0.0	49
East Tennessee	2011	20.9	76.7	2.3	43
East Tennessee	2012	10.3	87.2	2.6	39
All Schools	2012	17.7	80.8	1.5	12,824

Review of Required Curriculum:

Query on depth of coverage by year from New Innovations:

Year 1		Year 2		Year 3		Year 4	
Basic Intermediate Advanced	0.00 0.00 0.00	Basic Intermediate Advanced	0.00 0.00 1.00	Basic Intermediate Advanced	1.00 2.00 2.00	Basic Intermediate Advanced	1.00 0.00 0.00
		Introduction to C Report Topics IC	Clinical Psychiatry : P				
Continuity of	Patient Care						
Year 1		Year 2		Year 3		Year 4	
asic ntermediate Idvanced	0.00 0.00 0.00	Basic Intermediate Advanced	0.00 0.00 1.00	Basic Intermediate Advanced	1.00 2.00 2.00	Basic Intermediate Advanced	1.00 0.00 0.00
				Surgery : Report	Topics SURG		
Continuity	of Patient Care						~
Year 1		Year 2		Year 3		Year 4	
Basic Intermediate Advanced	0.00 0.00 0.00	Basic Intermediate Advanced	0.00 0.00 1.00	Basic Intermediate Advanced	1.00 2.00 2.00	Basic Intermediate Advanced	1.00 0.00 0.00
				Community Med	icine : Report		
				Topics ComMed			

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Continuity of Patient Care

Year 1		Ye	Year 2		Year 3		Year 4	
Basic Intermediate Advanced	0.00 0.00 0.00	Basic Intermediate Advanced	0.00 0.00 1.00	Basic Intermediate Advanced	1.00 2.00 2.00	Basic Intermediate Advanced	1.00 0.00 0.00	
				Family Medicine FMED	: Report Topics			

Psychiatry : Report Topics PSYCH

Year	Course / Clerkship	Depth	Content Description at Session Level
M2	Intro to Clinical Psychiatry	A	 Impact of the physician-patient relationship and communication skills on continuity of care including barriers to continuing care as a result of these issues Use of Motivational interviewing for continuing care of behavioral health problems like nicotine use, obesity, hypertension, diabetes type II, use of alcohol and other drugs of abuse use, etc. Communication techniques useful for facilitating discussions for continuing care with patients on sensitive health topics like sexual behavior, sexual dysfunction, substance abuse, etc. Levels of care for patients with substance abuse, with emphasis on the importance of the chronic disease model of continuing care. Communication strategies for screening for, assessment of, and ongoing medical management of patients with suicidal ideation. Ongoing medication management of patients with major depression, anxiety disorders, bipolar disorders, and psychotic disorders. Models for the management of the somatoform disordered patient. Psychotherapy treatments for various disorders and importance of psychotherapy as a maintenance treatment for some psychiatric disorders.
M3	Surgery	В	Continuity of care is incorporated when the students develop a patient treatment plan that includes consultation and therapy. The student also must demonstrate learned patient care activity (to include a patient treatment plan) to their health care team based on their learned didactic sessions, reading, case studies, given case presentations, and morning rounds.
	Community Medicine	I	Continuity of care is incorporated when the student develops a patient treatment plan with the hospitalist that includes working with the medical, nursing, social work and discharge nursing team to make assessments and plans for a hospital patient. Continuity of care is also a focus of lectures and discussions on nursing home and end-of-life care for patients and families.
	Pediatrics	I	Continuity of care in Pediatrics is established by working with NICU on discharges and setting up a treatment plan that is coordinated for multiple specialisst and on occasions they are then able to follow up with these patients in the clinic. Other forms of continuity of care is in the asthma action plans and setting up follow up in patients in the hospital at the time of discharge. When students are in the clinic and patients return we ensure that the previous student sees the patient for follow up as well.
	Family Medicine	A	Healthcare reform, primary care role, home visit report [follow-up on patient] with additional follow-up with other team members. Students see same patient throughout hospital stay as well as often times see patients in >1 setting (ex. Hospital and Office; Hospital and Home; Office and Home). Working with faculty and residents with continuity of patient care in the clinics.
	Psychiatry	A	Description pending from Drs. Patel & Cancellaro