

Value-Added Student Roles that Align Education and Health System Needs

#psusync #changemeded

IAMSE Webcast Audio Seminar Fall 2015 Series

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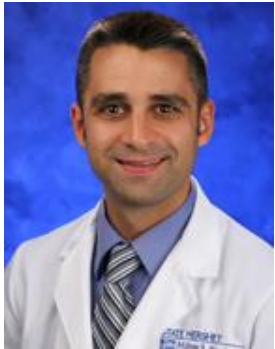
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Session Objectives:

1. Describe the ongoing transition from a two-pillar to three-pillar education model focused upon basic, clinical, and Healthcare Delivery Science.
2. Define “value-added medical education” and discuss its’ implications.
3. Conceptualize a new research agenda for “value-added” medical education.
4. Describe one educational model in Healthcare Delivery Science with the use of student patient navigators.



Objective 1:

1. Describe the ongoing transition from a two-pillar to three-pillar education model focused upon basic, clinical, and Healthcare Delivery Science.

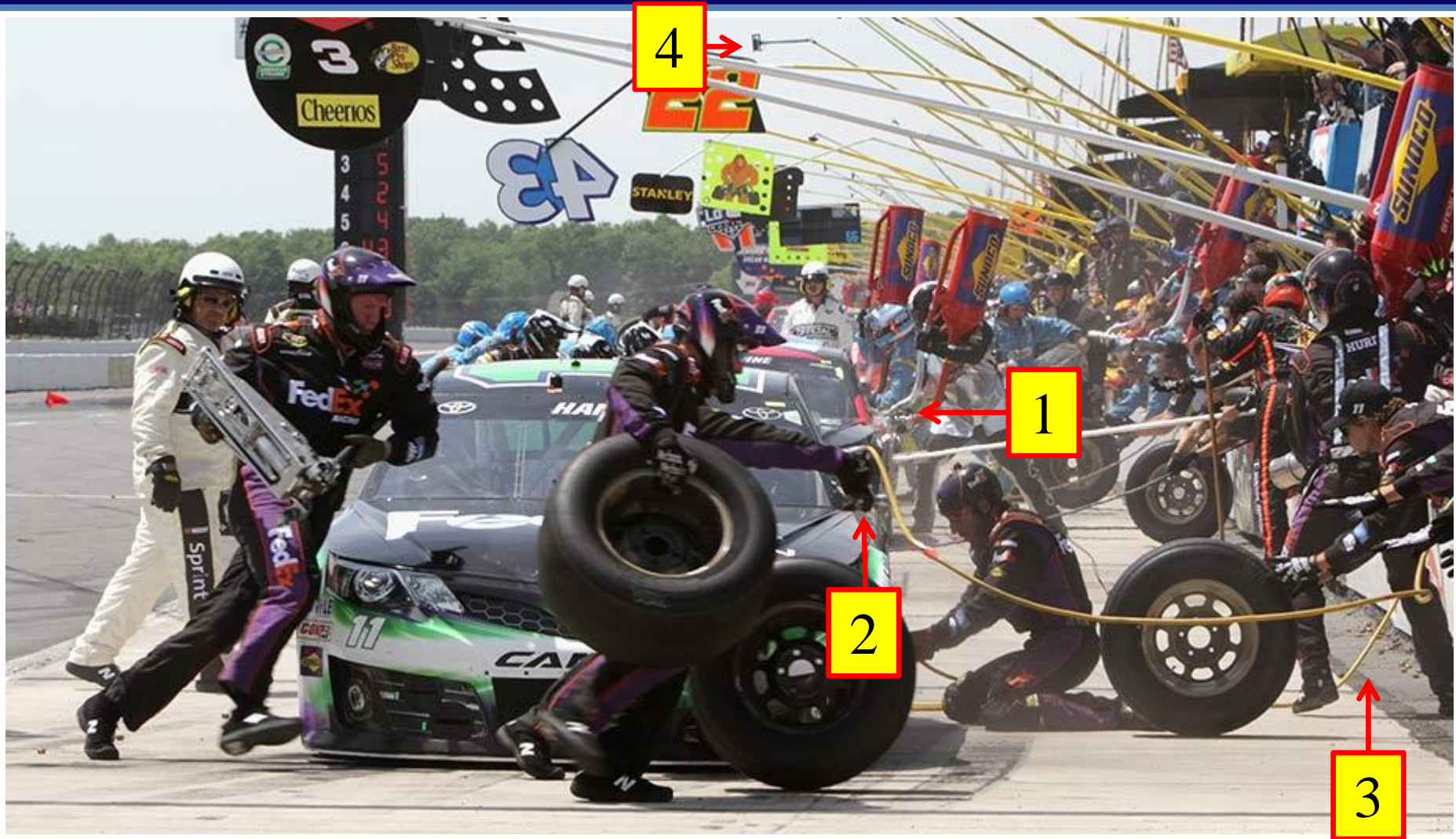


Describe US Healthcare:

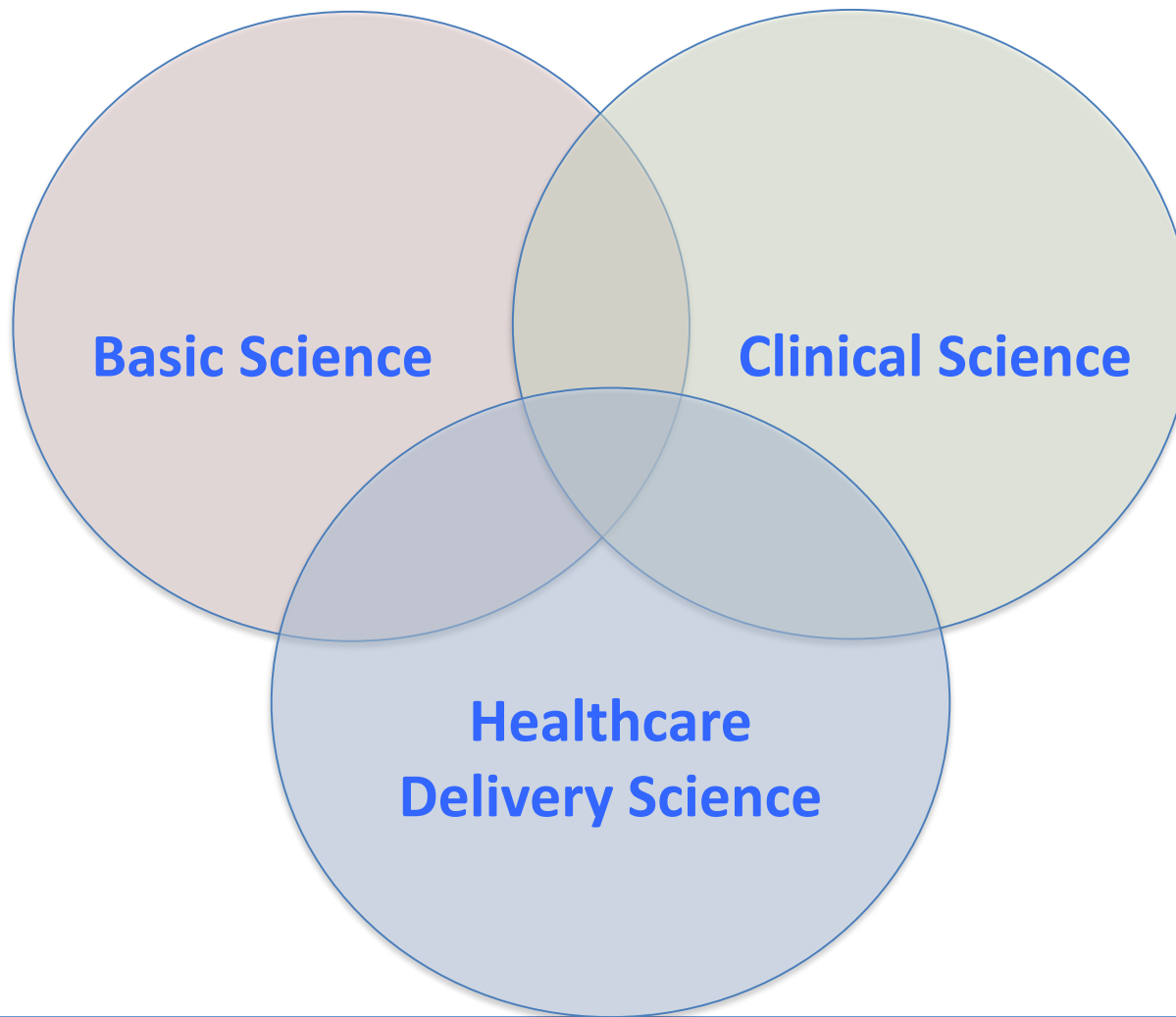
expensive
physician-centric
hurried
insufficient
inefficient
choppy
rushed
confusing
unsafe
uncoordinated
not-patient-centered
low-quality
chaotic
burnt-out-providers
wasteful
insurance-driven
siloed
costly
GDP18
complicated



The 12-Second Pit Stop



A New Triad



What are the Healthcare Delivery Sciences?

Population
Health

Informatics

Transitions

Policy

Quality
Improvement

High-Value
Care

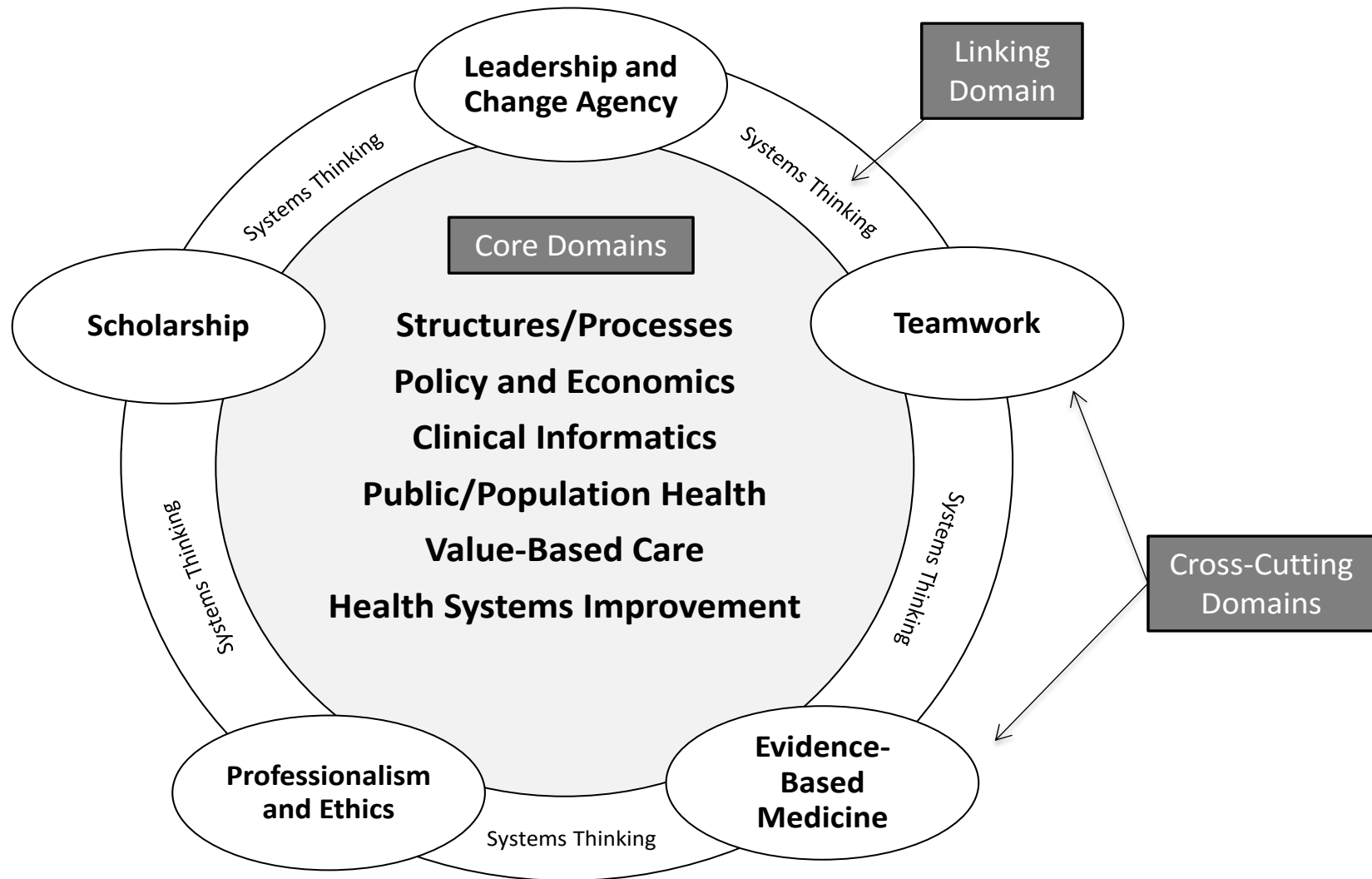
Patient Safety

Teamwork

“Other”



Healthcare Delivery Science



Objective 2:

1. Describe the ongoing transition from a two-pillar to three-pillar education model focused upon basic, clinical, and Healthcare Delivery Science.
2. Define “value-added medical education” and discuss its’ implications.



Are medical students an asset or liability to the health system?



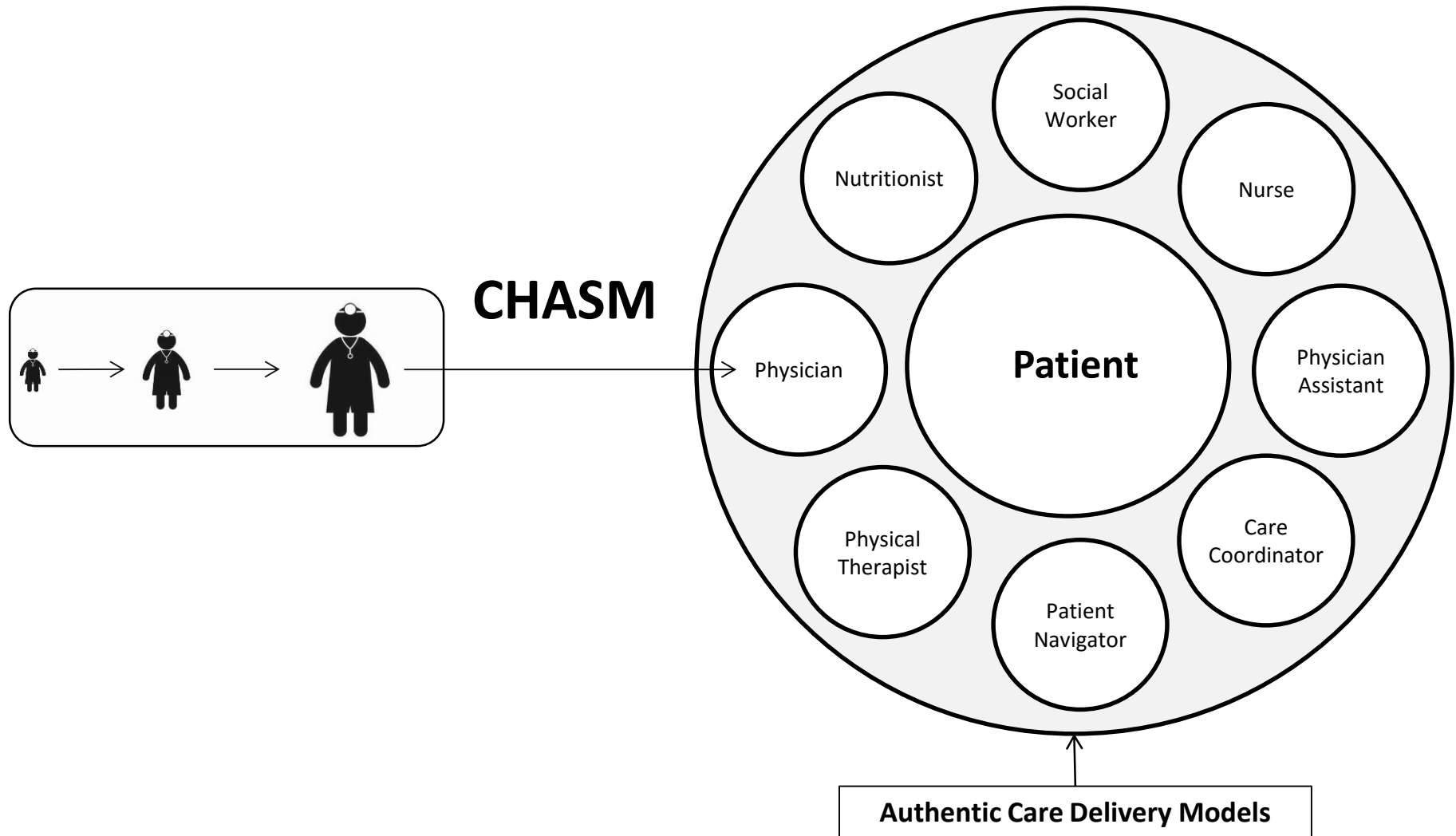
Definition of Value-Added Medical Education:

“Medical student roles that are experiential and authentic, and have the potential to:

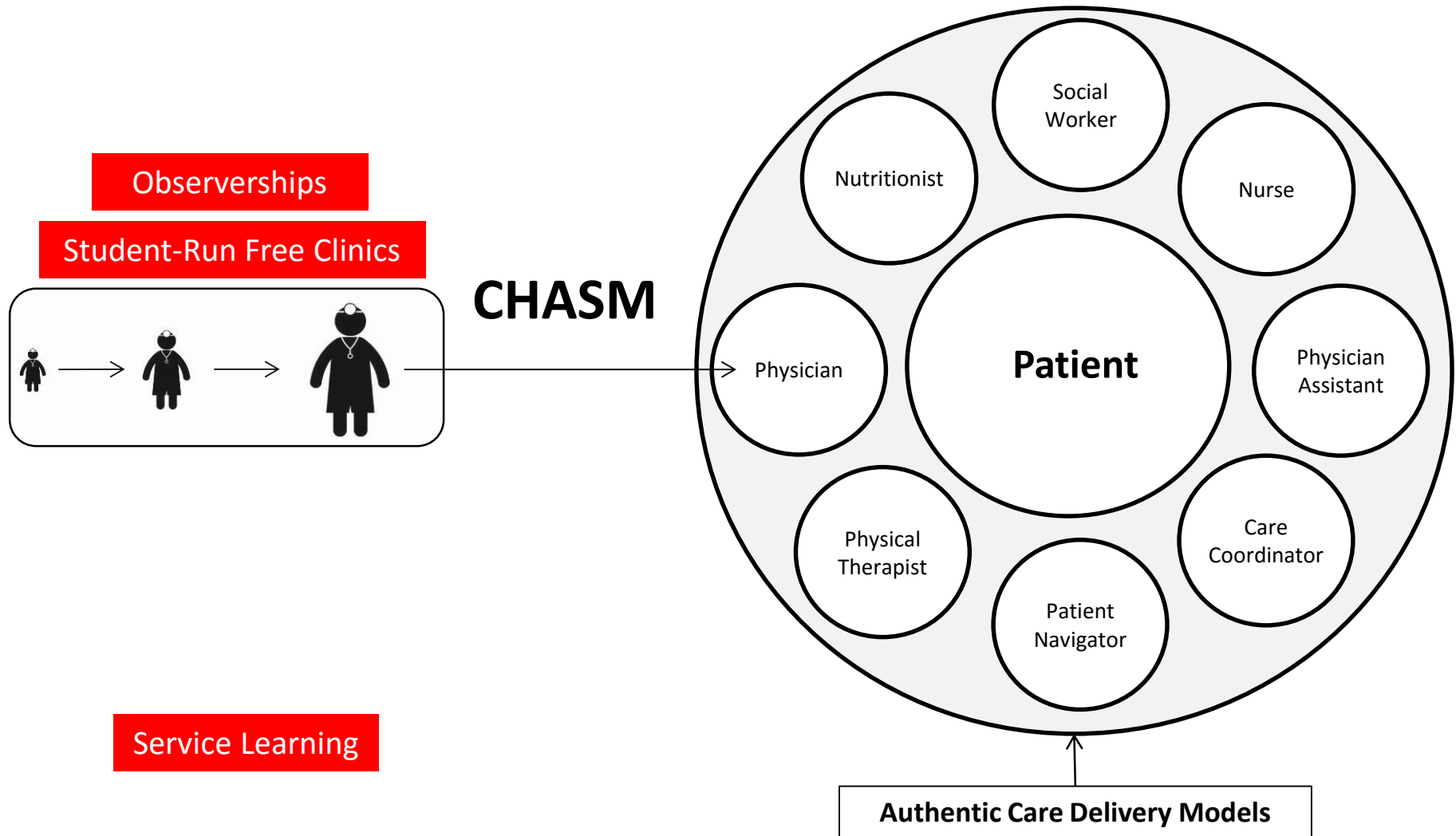
- 1. Have a positive impact on outcomes related to patients, populations, costs of care, or other processes within the healthcare system, and,*
- 2. Enhance student knowledge, attitudes, and skills in the Clinical or Healthcare Delivery Sciences.*



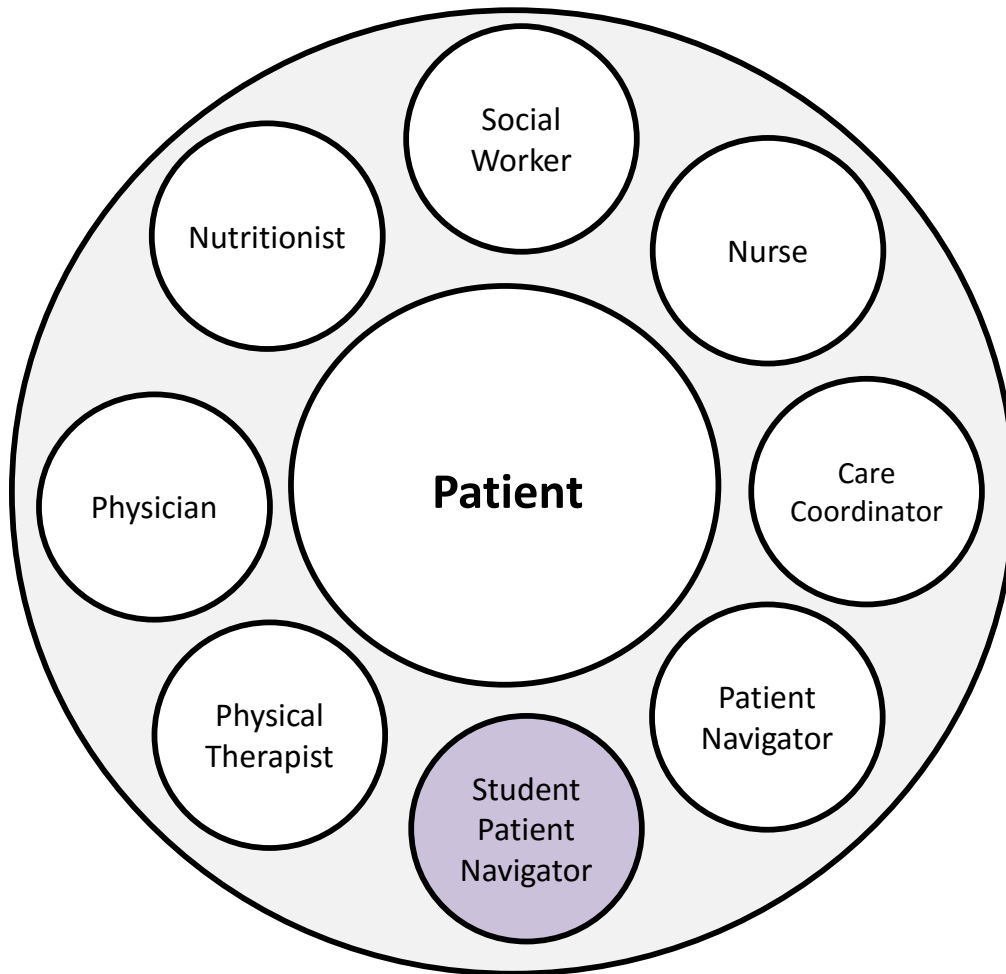
The Current Medical Education Model: The Mini Physician Model



The Current Medical Education Model: The Mini Physician Model



Getting Students on Teams: The “Ball Bearing” Model



TASKS
Monitoring progress with care plans
Facilitating access to services
Patient education
Patient assessments
Performing medication reconciliation
Partnering with patients for health coaching
Facilitating communication
Improving clinical processes



Objective 3:

1. Describe the ongoing transition from a two-pillar to three-pillar education model focused upon basic, clinical, and Healthcare Delivery Science.
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3. Conceptualize a new research agenda for “value-added” medical education.

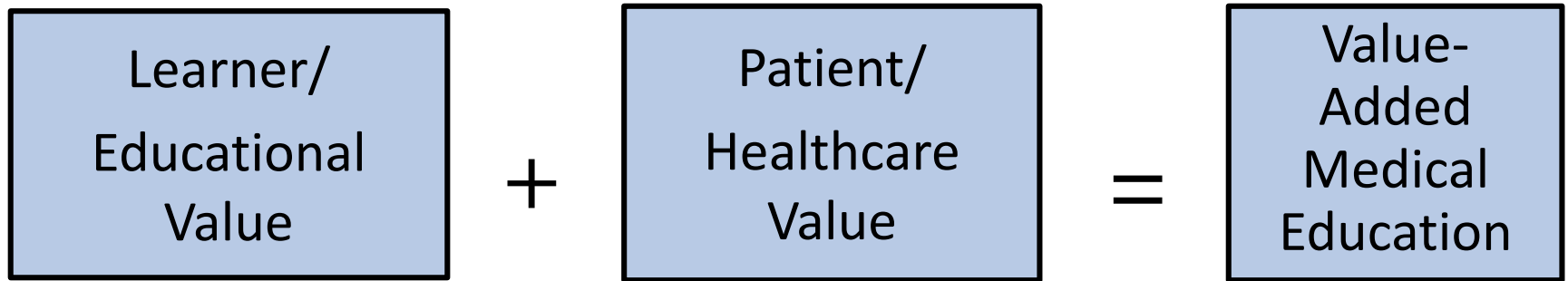


From Traditional to Value-Added

- **Traditional evaluation**
 - Long-term outcomes/impact of education evaluated distally or not at all
- **Educationally sensitive patient outcomes**
 - Connecting medical education with patient outcomes is critical
- **Value-added medical education evaluation**
 - Evaluating patient outcomes while learner is engaged in educational program



Value-Added Medical Education



Value-Added Medical Education:

- Value to Patient or Healthcare *through* Learner's work
- Value to Learner *while* they work



It's Not Just about Learner Outcomes...

Type	Benefit	Cost
Educational System <ul style="list-style-type: none">• Learners• Medical Educators• Medical School Curriculum	<ul style="list-style-type: none">• Improved learner knowledge, skills, abilities• Enhanced learner professional identity formation	<ul style="list-style-type: none">• Additional faculty/staff time to direct program• Competing demands of curriculum• Competing demands of board examinations
Health Care System <ul style="list-style-type: none">• Patients• Clinical or Community Site• Clinical educator	<ul style="list-style-type: none">• Improved patient care experience• Improved patient outcomes• Enhanced services offered	<ul style="list-style-type: none">• Reduced productivity of clinical educator• Discomfort/dissatisfaction of pt with program• Additional resources needed

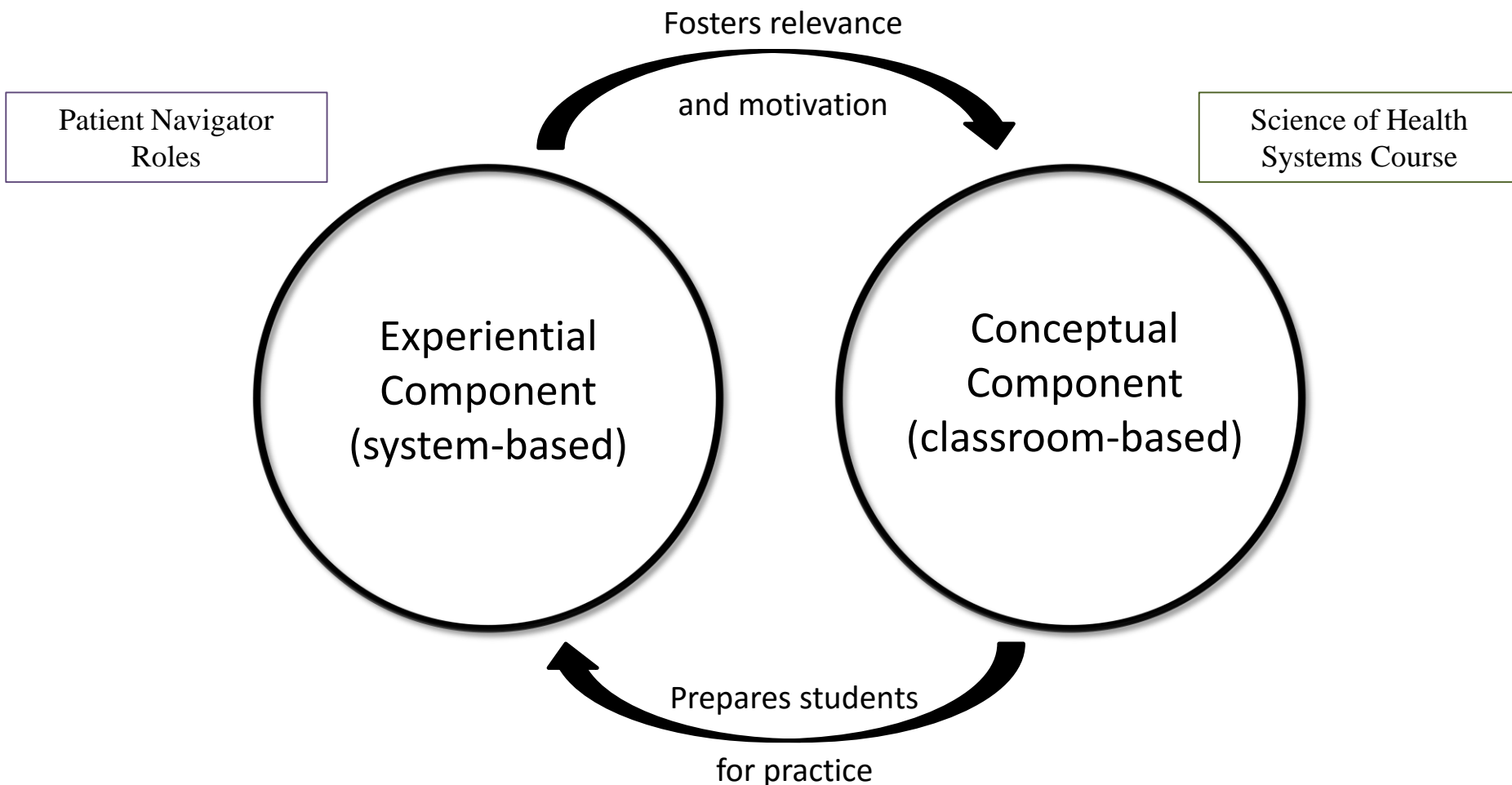


Objective 4:

1. Describe the ongoing transition from a two-pillar to three-pillar education model focused upon basic, clinical, and Healthcare Delivery Science.
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4. Describe one educational model in Healthcare Delivery Science with the use of student patient navigators.



Penn State's Systems Navigation Curriculum



Gonzalo, Wolpaw, et al. *Academic Medicine* 2015

Freeman. Patient navigation: a community centered approach. *Cancer education*, 2006.

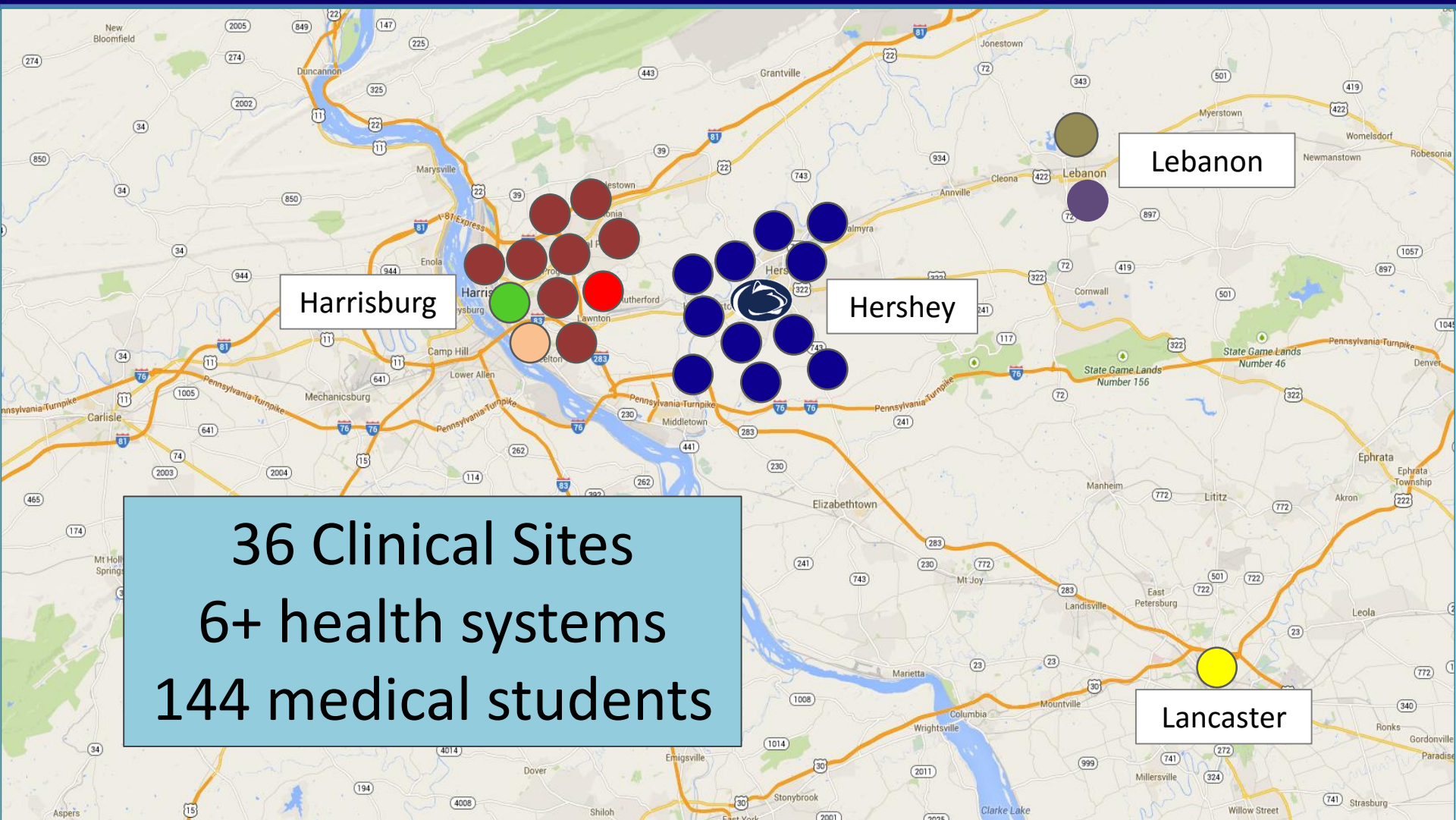
Freund et al. National Cancer Institute Patient Navigation Research Program. *Cancer* 2008.

Science of Health Systems Course

Module #1	Patient Navigation
14hrs	
Module #2	Health Systems
12hrs	
Module #3	Healthcare Reform
12hrs	
Module #4	Population and Public Health
14hrs	
Module #5	Socio-Ecological Medicine
12hrs	
Module #6	Performance and Quality Improvement
12hrs	
Module #7	Leadership and Change Agency
12hrs	
Thread #1 28hrs	Evidence-Based Medicine
Thread #2 14hrs	Teamwork and Leadership



Clinical Sites for Patient Navigation: South-Central Pennsylvania



Patient Navigator Sites and Examples

Inpatient Setting
Acute Rehab Hospital Transitions Program
Emergency Department
Internal Medicine Discharge Program
Psychiatric Hospital Discharge Program
Skilled Nursing Transitions Program
Surgical-Oncology Transitions Program
Outpatient Setting
Breast Cancer Program
Heart Failure Clinic
HIV Clinic
Inflammatory Bowel Disease (IBD) Clinic
Internal Medicine Clinic
Family Practice Outreach Program
High-Risk Outreach Clinic
Patient-Centered Medical Home
Spine Clinic
Surgical Weight Loss Program
DOH Tuberculosis Clinic
Palliative Care Program

Psychiatric Hospital Discharge Program

Students work with recently discharged patients to assess their care plan, identify barriers, and provide emotional support.

High-Risk Outreach Clinic

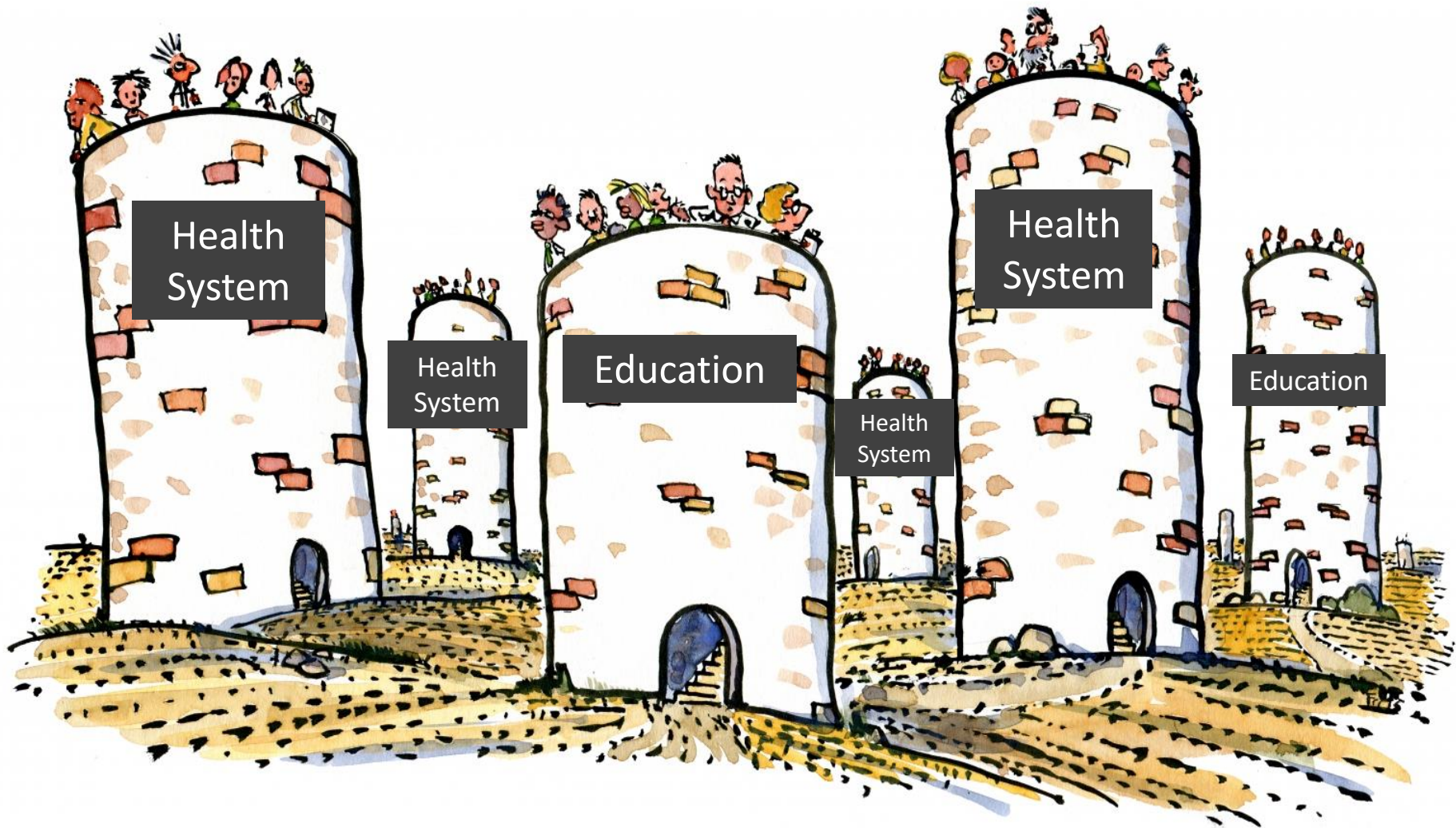
Students are linked with high-risk patients to make home visits and identify/resolve barriers to care (e.g. transportation, insurance).

Patient-Centered Medical Home

Students partner with patients and monitor their progress through home visits, attending appointments and follow-up phone calls.



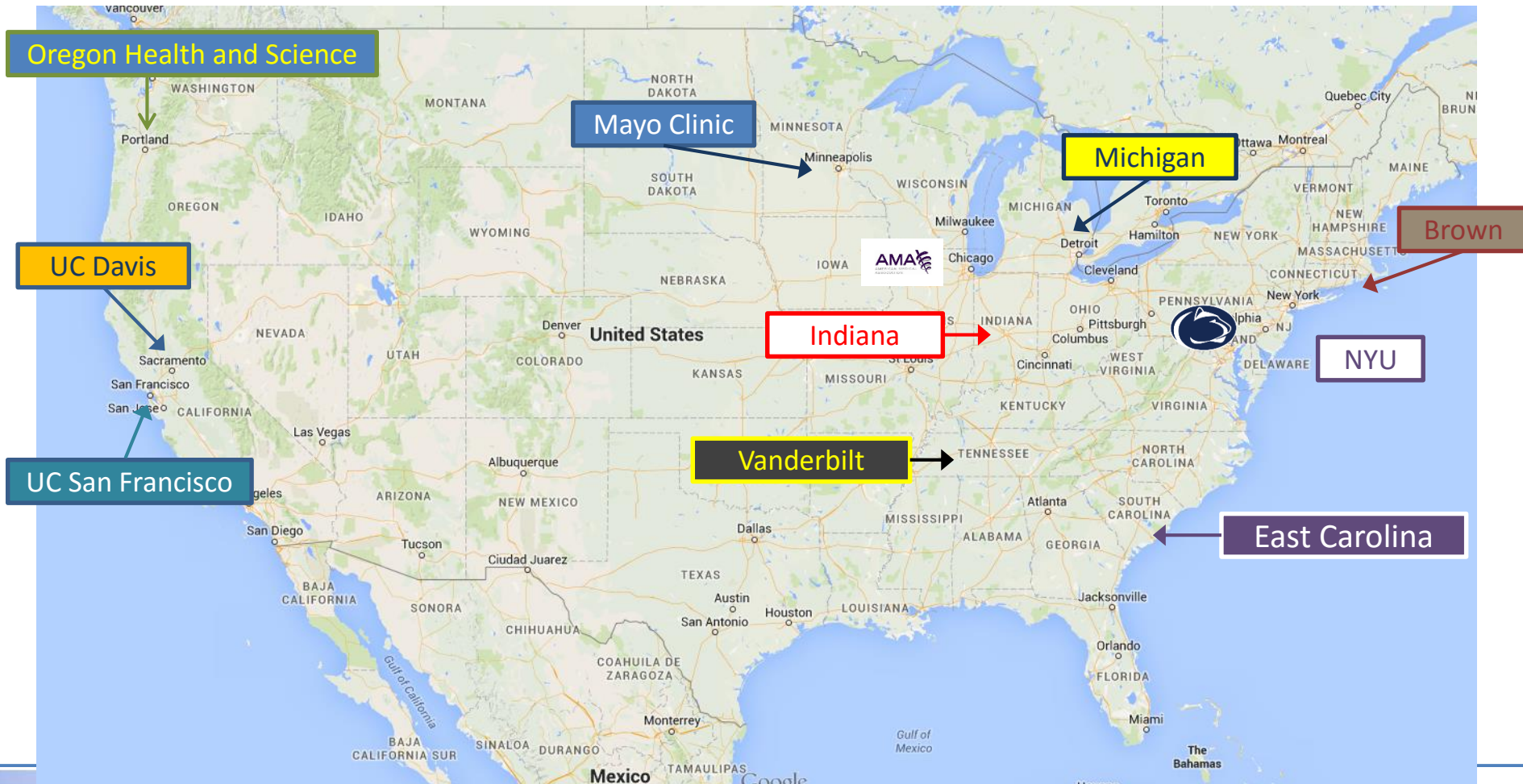
The Silo of Medical Education



Acknowledgements



AMA Accelerating Change in Medical Education



Thank you for your attention!
Any questions?

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