UTILIZING A LONGITUDINAL CARE TOOL (LCT) TO TRACK CURRICULUM ACROSS THE CONTINUUM (WORKSHOP)

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Objectives

Explain the need for longitudinal care considerations in PA education. (3-4 minutes)

Describe the longitudinal care tool and how it can be incorporated. (11 minutes)

Utilize the LCT template to design a longitudinal curricular plan for a specific educational topic

- Reinforces important topics across the curriculum

- Adds value and continuity as the instruction builds upon itself throughout the entire length of the program

- Ensures that essential disease processes are included and sufficiently covered within the curriculum

- Longitudinal care is designed to guide and prepare PA students to become competent providers and provide exceptional care across the life span.

- Looks at the lifetime risk verus the snippet of care at one visit (patient-centered care).
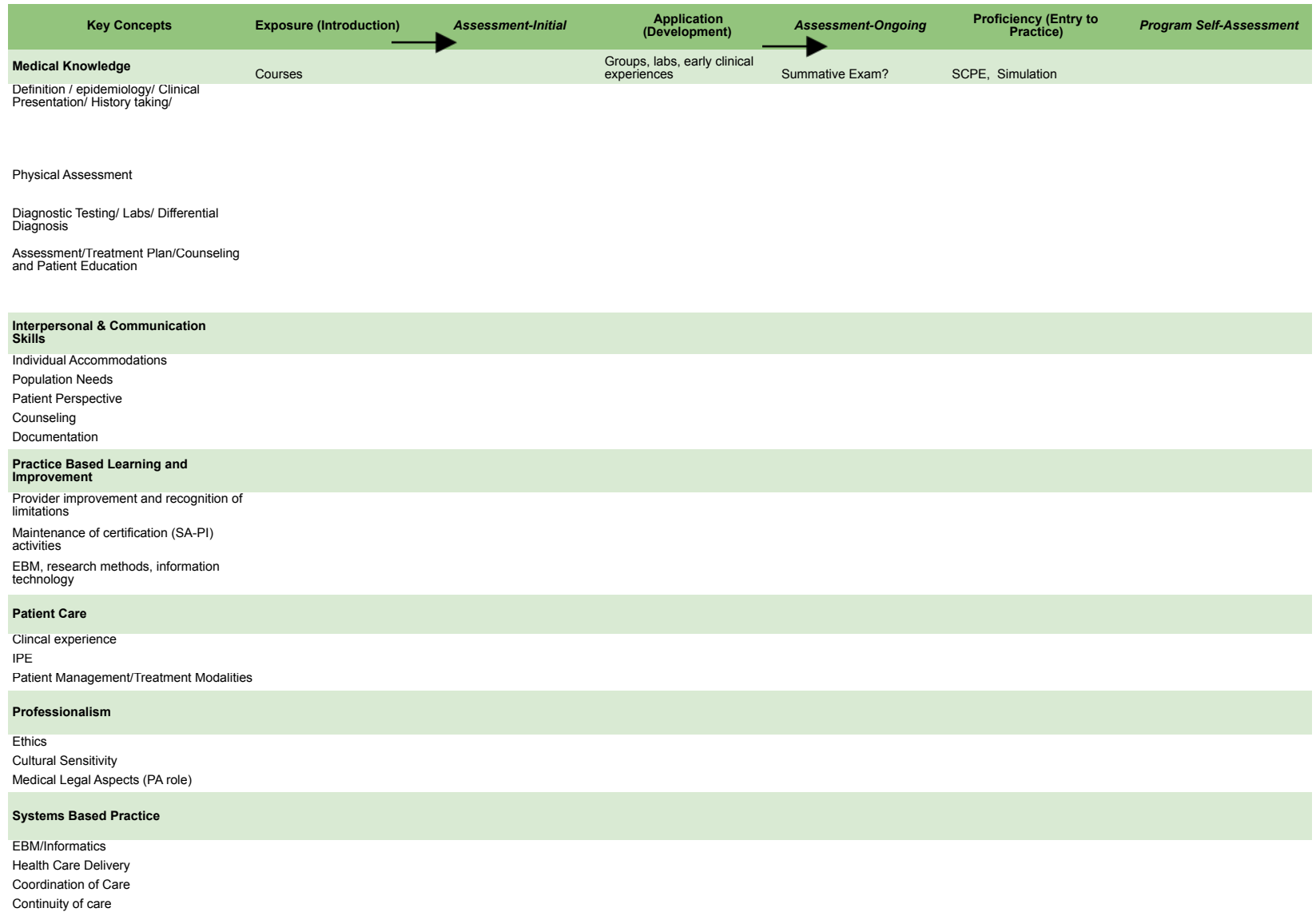
What is the longitudinal care tool (LTC)?

- Tool that looks at the pieces of curriculum across the continuum

- Reinforces integration of clinical and didactic education

- Provides a model for patient-centered longitudinal care

- Curriculum mapping tool

- Correlates with the competencies

Why?

- The CC is tasked to help provide resources and curriculum tools.

- Strategic look at the curriculum and think outside the box for resources to assist with clinical site shortages

- Provide continuity

- Benchmark PA student education

- Fulfill ARC-PA standards

Original Template

Key Concepts	Exposure (Introduction)	*Assessment-Initial*	Application (Development)	*Assessment-Ongoing*	Proficiency (Entry to Practice)	*Program Self-Assessment*
Medical Knowledge	Courses		Groups, labs, early clinical experiences	Summative Exam?	SCPE, Simulation	
Definition / epidemiology/ Clinical Presentation/ History taking/						
Physical Assessment						
Diagnostic Testing/ Labs/ Differential Diagnosis						
Assessment/Treatment Plan/Counseling and Patient Education						
Interpersonal & Communication Skills						
Individual Accommodations						
Population Needs						
Patient Perspective						
Counseling						
Documentation						
Practice Based Learning and Improvement						
Provider improvement and recognition of limitations						
Maintenance of certification (SA-PI) activities						
EBM, research methods, information technology						
Patient Care						
Clincal experience						
IPE						
Patient Management/Treatment Modalities						
Professionalism						
Ethics						
Cultural Sensitivity						
Medical Legal Aspects (PA role)						
Systems Based Practice						
EBM/Informatics						
Health Care Delivery						
Coordination of Care						
Continuity of care						

Key Concepts	Exposure (Introduction)	Assessment	Application (Development)	Assessment	Proficiency (Entry to Practice)	Program Assessment
Medical Knowledge	Courses		Groups, labs, early clinical experiences	Summative Exam?	SCPE, Simulation	
Definition / epidemiology/ Clinical Presentation/ History taking/	basic science courses, groups, Team based learning, online modules, reading assignments	LO: Define epidemiology, pathophys, and clinical presentation. Identify pertinent lab/ dx tests. Method: Standardized tests, quizzes, peer presentations,	Practice applying skills through patient contact, simulation, presentations, role play	LO: Demonstrate sufficient medical knowledge to pass summative examination and PANCE. Method: OSCE, Team based projects, Capstones, Standardized exams	continuous self directed learning through practice, SA/PI activities, CME	
Physical Assessment	Clinical Assessment Course, early clinical experiences	LO: Demonstrate appropriate PE technique both in a full PE and a focused PE Method: Physical Examination testing	Practice skills and participate and demonstrate proper and pertinent Physical Exam in the classroom. Continue to develop and apply skills the SCPE.	LO: Demonatrate a well organized and appropriate physical examination technique for full and focused problem. Method: OSCE, Clinical application during SCPE and assessed by preceptor	Apply appropriate physicial exam skills throughout career and document findings.	
Diagnostic Testing/ Labs/ Differential Diagnosis	Clinical Medicine courses/Lab Medicine	LO: Demonstrate knowledge of laboratory methods, ability to choose appropriate tests/labs pertinent to a specific clinical scenario,	Clinical Assessment, Clinical Medicine courses. Develop skills in determining appropriate lab/dx test to order in cases in didactic year. Develop skill in	LO: Demonstrate ability to appropriately order and interpret pertinent labs/Dx Test for a chosen medical condition. Method: OSCE, Case based learning	Demonstrate a well organized and supported differential diagnosis. Demonstrate prrofiency DD in standardized testing, summative examination	
Treatment Plan	Pharm, clin med,	LO: Identify components of the treatment plan. Method: Standarized exams, presentations, early clinical experiences.	Order and interpret appropriate labs/dx tests. Develop treatment plan based on clinical information and findings.	LO: Develop a well-organized and pertinent treatment plan based on H&P, Labs/Dx test and DD. Demonstrate proficientcy in applying pharmacological, physical, surgical, nutritional, social approaches to treatment. Method: OSCE, SCPE as assessed by preceptor.	Create an appropriate treatment plan including medical, social, pharmacological, and surgical components or each patient in a standard period of time.	

Physical Assessment	Clinical Assessment Course, early clinical experiences, with initial focus on recognizing the Obese patient and considering Obesity-specific challenges to performing an adequate physical exam. **Methods: teach accurate height, weight and BMI measurements.**	LO: Demonstrate specific approaches and modifications of the PE technique for Obese patients both in a full PE and a focused PE **Method: Physical Examination testing, using an obese model patient. Special considerations when examining the obese patient; the bed, chairs or exam room. Highlight importance of a thorough exam and how to properly exam the obese patient.**

Obesity Example

Diagnostic Testing/ Labs/ Differential Diagnosis	Clinical Medicine and Lab Medicine Courses._____ **Methods: Use of BMI, etc. and limitations in application. Consider secondary causes of Obesity; Endocrine workup for secondary obesity, DEXA, etc. for measuring lean body mass. CVD risk-related lab studies,**	LO: Demonstrate knowledge of laboratory methods, ability to choose appropriate tests/labs pertinent to a specific clinical scenario._____ **Method: Students to evaluate 2 cases, one of "garden variety" Obesity and one secondary to Hypothyroidism. Demonstrate historical questions to delineate primary from secondary Obesity; Evaluate possible options to assess hypothryoidism; List appropriate labs and their interpretation that would be appropriate for primary Obesity.**	Clinical Assessment, Clinical Medicine courses. During Clinical Year._____ **Method: Develop skill in determining cost-effective, pertinent labs/dx tests to order in the SCPE; Evaluate an obese patient and present to preceptor the patient's category of obesity, appropriate lab testing, if any, and discuss 3 types of secondary Obesity.**	LO: Demonstrate ability to appropriately order and interpret pertinent labs/Dx Test for Obesity._____ **Method: OSCE, Case based learning scenarios, SCPE as assessed by preceptor. Assess the community's resources/services for addressing the chronic disease and its contributing factors.**	Demonstrate a well organized and supported differential diagnosis. Demonstrate profiency DD in standardized testing, summative examination
Assessment/Treatment Plan/Counseling and Patient Education	Pharmacology and clinical medicine courses in the didactic curriculum; SCE	LO: Identify components of the treatment plan. **METHODS: Standarized exams, presentations, early clinical experiences.**	Order and interpret appropriate labs/dx tests. Develop treatment plan based on clinical information and findings.	LO: Formulate the most likely diagnosis. Develop a well-organized and pertinent treatment plan based on H&P, Labs/Dx test and DD. Demonstrate proficiency in applying pharmacological, physical, surgical, nutritional, social approaches to treatment. **METHODS: OSCE, SCPE as assessed by preceptor. Assess the community's resources/services for addressing obesity and its contributing comorbiidities.**	Create an appropriate treatment plan for the obese patient, including Dietician referral, safe exercise activities. Provide comprehensive education on the long term risks of Obesity and provide realistic goals and timeline for improvement. Discuss with the patient the role of pharmacological, and surgical options, focusing on when such therapy would be instituted for that particular patient. **METHODS: Formulate a plan for obese patients to self-manage this chronic disease and its risk factors integrating the patient, family, community, and health systems resources, barriers, and solutions. What are solutions to overcome the identified barriers?**

Interpersonal & Communication Skills						
Individual Accommodations	terminology, clinic/exam space, language translator, accomodations for physical and psychological limitations (may relate to practice improvement)	LO: Describe approach to accommodate patients, approach communication; Method: Written exam, group discussion	Practice approach/communication	Method: Written exam, standardized patient; Feedback through faculty, standardized patient, self-assessment	Demonstrate comprehensive, patient-centered communication skills to evaluate and co-create management plan with patient	
Population Needs	assessment and knowledge of community resources; assessment and knowledge of population's health needs, strengths	LO: Discuss how to assess individual/community resources (pop health); Method: Written exam, group discussion	Practice approach/communication	Method: Written exam, standardized patient; Feedback through faculty, standardized patient, self-assessment		
Patient Perspective	biopsychosocial approach, health belief model	LO: Describe how to assess indiviudal patient's perspective, life context, belief to inform counseling; Method: Written exam, group discussion	Practice assessment of patient perspective, life context, and beliefs	Method: Written exam, standardized patient; Feedback through faculty, standardized patient, self-assessment		
Counseling	Counseling theories, including motivational interviewing, stages of change , goal-setting, self-monitoring, stimulus control, cognitive skills; mental health resources for referral	LO: Describe counseling techniques; Method: Written exam, group discussion	Practice counseling strategies	Method: Written exam, standardized patient; Feedback through faculty, standardized patient, self-assessment	Patient survey data	
Documentation	practice guidelines, billing (system)	LO: List practice guidelines, identify billing codes; Method: Written exam, group discussion	Practice documentation	Method: Written exam, standardized patient; Feedback through faculty,	Patient health outcomes	

Practice Based Learning and Improvement						
Provider improvement and recognition of limitations	Lectures/cases, group projects related to [condition]. Likely to be in Behavioral Medicine courses.	LO: Recognize potential provider abilities and limitations. LO: list best practices relating to [condition]. Method: papers, assignments, simulations.	Care for individual patients in a mindful way, applying results from care of other patients with [condition].	LO: evaluate quality of care and gaps in knowledge/ experience. Method: Use Pt log or EHR to collect information to assess quality and quantity of care for [condition].	Continual SA-PI to support own education.	
Maintenance of certification (SA-PI) activities	Lectures, group projects related to [condition]. Professional Practice courses.	LO: State PA MOC requirements. Method: quizzes, discussions	Develop a framework for MOC activities, based on patient contacts in clinical year.	LO: develop proposal to improve knowledge/skills relating to [condition]. Method: (e.g.) provider/student portfolio	Ready for postgraduate MOC activities on 10 yr cycle.	
EBM, research methods, information technology	Lectures/cases, group projects related to [condition]. Formal EBM courses (see below).	LO: EBM competency, basic EHR access (see below)	Use IT/EHR, etc. to formulate plans for practice improvement.	Method: Use Pt log or EHR to collect published information to be used for practice improvement.	Locate, appraise, and integrate evidence from scientific studies related to their patients' health.	

Systems Based Practice- Liz					
EBM/Informatics	Intro to EBM/ intro to EHR in a formal format (lectures, case studies, group projects) **METHODS :Could have cases specifically on obesity and its effects in EBM. Group projects to discuss the aspects of healthcare delivery for obese patients, as well as health issues related to obesity.**	LO: Formulate answerable clinical questions related to patient care; locate pertinent literature; appraise literature. LO: demonstrate navigation of EHR and retrieval of pertinent patient information. Methods: Presentations, practical demonstrations of proficiency, written assignments **METHODS: EBM cases, EBM case presentations. Could have EHR cases based on obesity and retrieving information from consultants based on obesity. The written assessment could be related to obesity and the literature currently.**	Supervised patient practice, creating answerable questions related to specific patient. Locate appropriate EHR information. **METHODS: Could have an EHR case within EBM, or any other appropriate course**	LO: Identify and assess research related to diagnosis, prognosis, prevention, etc. for specific patient problems, documented in write-ups. LO: utilize EHR to derive population data relevant to patient care. Methods: written assignments/ oral presentations. **METHODS: EBM Case project, EBM team projects on topics, such as obesity, the consequences of obesity, the healthcare costs of obesity, etc.**		Currently do not have EBM project or EHR team projects

Patient Care						
Clincal experience	shadowing, OSCEs, SIMs, case studies	LO: Encounter real or simulated patients with primary care complaints. Methods: preceptor evaluations, case write-ups	Practice evaluating, diagnosis and formulating evidence-based treatment plans.	LO: Demonstrate appropriate clinical managemnet of a primary care patient while working effectively as a member of the healthcare team.Methods: SCPE preceptor evaluations, peer evaluations, OSCE, SIMs	Make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence and informed clinical judgement.	
IPE	lectures, case studies, SIMs, small groups, role playing, grand rounds, health fairs	LO: Recognize and define the contributions of other team members in patient care. Methods: peer reviews, preceptor evals, case write-ups, reflections	Practice working in cooperation with others who provide care to the patient	LO:Effectively express one's opinions to other members of the health care team while working to develop treatment plans. Methods: hospital rounding and care coordination write-ups, SCPE preceptor evaluations	Support quality collaborative practie by communicating effectively with patients, families and other heathcare team members.	
Patient Management/Treatment M	lectures, , early clinical experiences,case write-ups, SIMs	LO: Recognize the management considerations involved in complex patient care. Methods: preceptor evals, case write-ups, SIMs, OSCEs	Practice formulating health care plans for various patient populations.	LO: Design health care treatment plans for primary care complaints while evaluating the efficacy of the plan and promotes longitudinal medical care for the patient. Methods: OSCEs, SIMs, SCPE preceptor evaluations, clinical documentation	Develop care management initiatives that support any health care needs that are unique to the patient population being served	

Professionalism						
Ethics	ethics course work, online modules, clinical vignettes, role playing	LO: Recognize and discuss potential ethical dilemmas in patient care scenarios. Methods: Standardized tests, written essays, peer discussions and presentations	Practice approaching clinical cases with some basic ethical framework	LO: Appraise clinical scenarios for clinical scenarios for ethical dilemmas and determine the appropriate response. Methods: OSCEs, SIMS, SCPE preceptor evaluations, reflections	Demonstrate the ability to identify ethical considerations, analyze these situations and attempt to find resolution in difficult ethical situations.	
Cultural Sensitivity	coursework, interviewing techniques, self-assessment, role playing	LO: Recognize cultural differences in patient expectations based on cultural beliefs. Methods: peer reviews, standardized testing, essays	Practice recognizing cultural conflicts regarding different beliefs towards health and illness	LO: Detect potential cultural barriers in patient care management and demonstrate an interviewing style that elicits another's perspective. Method: SCPE preceptor evaluations, OSCE and SIM cases, clinical vignettes	Facilitates the development of a medical plan which addresses any cultural conflicts regarding beliefs toward health and illness for diverse populations.	
Medical Legal Aspects (PA role)	coursework, note writing, clinical vignettes, journal review, role playing	LO: Cite examples of potential medical legal precedence. Methods: essay, note writing evaluations, journal reviews	Practice documenting patient encounters to ensure accuracy and documentation standards are met	LO: Assess potential clinical legal pitfalls in medical practice. Methods: SCPE preceptor evaluations, OSCEs and SIM cases, clinical vignettes, journal reviews, note writing	Produce legally sound medical documents . Employee evidence-based medical practice techinques that are in compliance with state and federal law.	

Systems Based Practice						
EBM/Informatics	Intro to EBM/ intro to EHR in a formal format (lectures, case studies, group projects)	LO: Formulate answerable clinical questions related to patient care; locate pertinent literature; appraise literature. LO: demonstrate navigation of EHR and retrieval of pertinent patient information. Methods: Presentations, practical demonstrations of proficiency, written assignments	Supervised patient practice, creating answerable questions related to specific patient. Locate appropriate EHR information.	LO: Identify and assess research related to diagnosis, prognosis, prevention, etc. for specific patient problems, documented in write-ups. LO: utilize EHR to derive population data relevant to patient care. Methods: written assignments/ oral presentations.	Apply evidence to patient and assess result of that application, adjust according to results. Apply EHR data to appropriate longitudinal patient care.	
Health Care Delivery	Lectures/cases, group projects relating to problem (reimbursement issues, access to care). ACO and PCMH concepts.	LO: Discuss the role of payor systems in patient care. LO: Define the role of the PCMH in managing [condition]. LO: Identify components of an ACO. Method: Exams, presentations, group exercises	SCPE, navigation of systems related to patient care and access to care. Develop appreciation of complexity of multiple payor system.	LO: Derive payor information from the EHR. LO: Identify resources for low-resource patients. LO: Identify cost of care for a patient in the practice, and determine the cost and coverage of co-pays.	Aware of payors, coding & billing, reimbursement levels. Efficient resource allocation. Enhance patient flow.	
Coordination of Care	Lectures/cases, group projects relating to referral options and specialty practice	LO: Identify appropriate referral options for [condition]. LO: Describe follow up communication between PCP and referrals. Method: Exams, presentations, group exercises	Understand the need for referrals and how to ensure that they are appropriate. Effectively use the EHR for making and tracking referrals.	LO: Define thresholds for referral for [condition], and appropriate referral sites. LO: Model appropriate communcation/ interactions with consultants. LO: Place referrals using the EHR. LO: Name 3 community resources for patients. Method: Patient-specific case studies/presentations, use of EHR.	Make appropriate referrals, and continue with communication among PCP and referrals.	
Continuity of care	Patient safety didactic instruction	LO: Describe issue related to patient safety and transfer of care responsibility. Method: Exams, presentations	Critically observe patient hand-offs, continuity. Learn best practices related to patient safety.	LO: Demonstrate effective communication and transfer of care responsibility. LO: Identify system triggers for actions. LO: Analyze incidents of poor continuity of care. Method: Demonstrations, debriefings, case presentations.	Incorporate clear bidirectional communication in patient care transfer and in chart notes. Appropriate follow up arranged.	

Things to consider when using the LTC

- Are all competencies created equally?
- Which competencies are you focusing on?
- Where do you teach obesity (insert your topic here) in the curriculum?
- Or where don't you teach it ?
- When do you teach it?
- How do you teach it? Methods
- How do you assess it ?
- What do you do with the assessment?
- Is there a gap analysis?

Topics:

- Audience participation

- Ideas for curricular evaluation

- Work individually or in small groups

- Active discussion encouraged

- Facilitators will answer questions

Discussion

- Ease of usage

- Feedback

- Themes

References

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