

LSI Longitudinal Practice Manual 2017-2019



The Longitudinal Practice Program Contacts

Kristen Rundell, MD

Longitudinal Practice Program
Director

Kristen.rundell@osumc.edu

614-293-2700

Diana Bahner

Program Manager
1194 Graves Hall
333 W. 10th Avenue
614-292-2998
bahner.2@osu.edu

Dawn Ryan

Program Assistant
1198 Graves Hall
333 W. 10th Avenue
614-292-3119

Dawn.ryan@osumc.edu

leadserveinspire

● ● ● ● *Curriculum for Tomorrow's Medicine*

The 2017-2019 LeadServeInspire Longitudinal Practice (LP) Curriculum	3
Longitudinal Practice Clinical Experience.....	4
LP Basic Procedure Skills Training Program	4
General information	5
Teaching Notes.....	5
Huddle Cards	5
Resources	5
Patient Empaneling Process	6
Longitudinal Projects	7
Health Coaching.....	7
Objectives by Curricular Block.....	8
Direct Observation of Competence	11
LeadServeInspire Curriculum Overview	13
Features of Part One	14
Assessments in Longitudinal Practice.....	15
LeadServeInspire Curriculum Terminology	17
Frequently Used Websites	17
VITALS.....	17
LP Website.....	17
Faculty Development for Medical Educators (FD4ME)	18
Appendices	19
Sample Patient Empaneling Form	19
Sample Huddle Card	20
Sample: Preceptor Evaluation of Student	21
Sample: Student Evaluation of Longitudinal Practice Preceptor.....	22
Longitudinal Practice Calendar	

The 2017-2019 LeadServeInspire Longitudinal Practice (LP) Curriculum

The Ohio State University College of Medicine has a rich history of curricular innovation. As we prepare students for post-graduate training opportunities in institutions worldwide and meet the changes in healthcare, we must continuously improve and update our curriculum. The LeadServeInspire Curriculum will ensure that we develop physicians who will improve people's lives through personalized healthcare and service.

Goals of LP:

- Identify the importance of a personal clinician for the health of the patient
- Learn about office flow, procedures and facilitating patient care
- Apply knowledge and practice skills students have learned
- Practice the team approach to patient care and identify its importance in achieving successful health care outcomes

Key Features of LP:

- Basic Procedures/ Skills Based Training
- Integrated with Classroom Learning through Longitudinal Group (LG)
- Timely Communication of program information to Preceptors
- Online Evaluation of Student Performance

Longitudinal Practice Clinical Experience

The curriculum has at its center a team based clinical experience that will enhance the student's integration into clinical practice and teach them to apply foundational science concepts to patient care. Prior to their first preceptor experience each of the students will receive training in basic procedural skills to allow for a more active participation in patient care and allow the student to facilitate flow at the practice. They will also be required to exhibit competency in a history-taking OSCE (Objectives Standardized Clinical Examination) before starting at the practice sites. They will be learning and practicing history taking and physical exam skills in their weekly small group experience, Longitudinal Group (LG). This integration of small group learning and ambulatory practice is what makes this program unique for our students.

LP Program Dates:

- October 2017-February 2019 – approximately 2 half days/ month for 17 months
- 22 sessions during Part 1, includes 12 sessions in Year 1 and 10 sessions in Year 2
- Students will be assigned to LP1 or LP2 group, as well as a specific half day.
 - This corresponds to the week students are scheduled in the clinic
- Students are in the practice for a ½ day (4 hours) during their assigned weeks.
- See Appendix with calendar of dates

LP Basic Procedure Skills Training Program

Prior to coming to your practice students will be trained in a variety of procedures/skills. To access training modules students used, see our website:

<http://fd4me.osu.edu/lp-preceptors/skill-trainings>

- Vital signs
- ECG lead placement
- Visual acuity
- Injection technique
- Venipuncture/phlebotomy
- Sterile technique/universal precautions
- Respiratory measurement and treatment
- Oxygen administration/Pulse oximetry

General information

Students will begin in the practices in October and we expect them to work closely with the Nurse or Medical Assistant for the first two sessions. As the student's progress in learning, we expect them to work more closely with the physician preceptors. It's important to create opportunities for them to practice and hone their history and physical exam skills on normal patients.

Teaching Notes

Teaching notes will be sent via email at the beginning of each block and incorporate expected objectives and teaching resources. All teaching notes and resources may also be accessed at our FD4ME website. <http://fd4me.osu.edu/lp-preceptors>

Huddle Cards

Resource cards are provided for students at the beginning of each block to facilitate communication between students and preceptors. The student and faculty should meet at the beginning of each session and mutually establish which goals the student will accomplish at each session.

Resources

Along with our teaching notes, we include resources pertinent to the students' current curriculum, including physical exam checklists, instructional videos and other tools to help with teaching. These are also accessible on the FD4ME LP website.

Patient Empaneling Process

As part of the integrated learning process, students will be asked to empanel a patient that has a specific diagnosis or behavioral condition related to the foundational science and behavioral science they are learning during the block. Each student will be required to empanel a patient each block for potential presentation in Longitudinal Group. Empaneling is a process of choosing a patient for presentation in small group discussion in a de-identified manner. The following process should be used when students are empaneling patients in your practice:

- 1) The student will select patients and obtain patient consent to present data under the guidance of their preceptor. Under office supervision, the student will complete a form on each patient they empanel and bring the completed, de-identified form to their weekly small group sessions.
- 2) The forms are guides for small group discussion; these will not be collected by facilitators. See Appendix for sample form.
- 3) In small group, faculty facilitators will call on one student to present his/her empaneled patient. The facilitator will then ask other students about differences and similarities between their empaneled patients and the patient who was presented. Students can begin to appreciate the variability in health care settings and its effect on patient care. Discussion is meant to focus on the integration between the basic and behavioral sciences students are studying in the LSI Curriculum Blocks and the clinical assessment/management of patient cases at clinical sites.

Longitudinal Projects

Every student will maintain a mentored Educational Portfolio throughout the curriculum that will be used to foster reflective practice and showcase their achievements. An assigned faculty coach will meet regularly with each student to facilitate student self-reflection and stimulate self-directed learning. In addition, this will be completed over the course of the three part curriculum. These projects are designed to allow students to achieve competency in certain Core Educational Objectives as related to self-directed learning, interdisciplinary learning, leadership, understanding health systems, health informatics and scientifically based inquiry.

Health Coaching

Health Coaching instills in the student the skills and practical experience to become proficient in health coaching. During Year 1, students will explore health coaching concepts; essential skills for effective health coaching; and the role that health coaching plays in chronic care. Subsequently, students will practice health coaching skills through a peer activity and OSCE, in a simulated setting, which are designed to prepare students for their health coaching role with patients.

The student experience with patients is in the Cardiopulmonary Disorders Block. Students will work with their preceptor to select a local patient for health coaching. The patient should have either a chronic medical condition or sedentary lifestyle with interest in making a health behavior change. Students meet three times with their patient for one-on-one meetings, where they will assist the patient to make steps toward improved health. Meetings should be scheduled at a separate time from the longitudinal practice time. Students will identify a patient by January 26, 2018. If a student anticipates they will be unable to identify a patient by the assigned deadline they may request a volunteer patient from the Health Coaching Coordinator. Near the end of the Cardiopulmonary Disorders Block, students will have a Longitudinal Group(LG) session facilitated by a professional health coach, where they will have an opportunity to discuss barriers, successes, and refine health coaching skills. At the end of Year 1, students will meet with their LG student group to assess and integrate the lessons learned in Health Coaching.

<http://fd4me.osu.edu/lp-preceptors/health-coaching>

Objectives by Curricular Block

Year 1

Foundational Sciences 2-October: 1 session

- Meet members of the office, introduce self and understand roles of different providers
- Respectfully communicate with patients, staff, and other team members
- Review office policy and procedures with office manager
- Shadow the MA or designee, understand their role
- Independently perform MA functions (Intake, Vital Signs)
- Practice interviewing patients and obtain CC and HPI

Bone and Muscle Disorders-October-December: 3 sessions

- Respectfully communicate with patients, staff, and other team members
- Perform one supervised procedure (ECG, visual screen, phlebotomy)
- **Direct observation of obtaining chief complaint and history of present illness, WITH feedback**
- Practice documenting a patient's HPI (does not need to be in the EHR)
- Practice knee or shoulder PE

Items in Bold require direct observation. These items will be completed on the student iPad by the preceptor and logged by student.

Cardiopulmonary Disorders -January-March: 4 sessions

- Respectfully communicate with patients, staff, and other team members.
- Practice back/spine PE
- Practice cardiopulmonary focused ROS as appropriate for chief complaint
- Practice cardiac PE
- Practice pulmonary PE
- Practice oral presentations of histories and physical exams
- Practice STAGE framework for oral presentations with preceptor (Style, Timing, Audience, Goals, Elicit)
- Work with preceptor to select health coaching patient. If not available due to patient population, obtain volunteer patient from health coaching coordinator.
- Practice supporting patients in changing health behaviors
- **Direct observation of obtaining past medical history including medication and allergies, WITH feedback from preceptor**

Neurologic Disorders– March-April-May: 4 sessions

- Respectfully communicate with patients, staff, and other team members.
- Practice taking a neurologic focused history
- Practice neurologic PE
- Independently use the musculoskeletal, cardiopulmonary, or neurologic focused ROS as appropriate for chief complaint
- Practice collecting information on the self-management needs of patients with chronic illness
- Practice collecting information on behavioral and psychological issues for patients
- **Direct observation of obtaining family history and social history, WITH feedback**
- **Direct observation of cardiopulmonary or neurologic focused physical exam on a patient, WITH feedback**

Year 2

Gastrointestinal and Renal Disorders- August-September: 3 sessions

- Discuss with office how to assist patients in connecting with peer support groups or other appropriate community resources, for example: hospice, social service agencies, and home healthcare and behavioral / mental health resources.
- Discuss with office how practice follows-up on referrals, labs, X-rays, and other patient services
- Practice abdominal pain ROS
- Practice the PE techniques listed for the abdomen
- **Direct observation of cardiopulmonary physical exam on a patient**

Endocrine and Reproductive Disorders- October-November: 3 sessions

- Identify how the office conducts referrals to obtain imaging or consultation with subspecialists
- Work with office to preapprove an insurance claim for procedure or identify the charges for one visit and one procedure
- Work with office staff that take patient calls to schedule timely appointments to provide continuity of care.
- **Direct observation of abdominal exam on a patient**

Host Defense- November-February: 4 sessions

- Use the website introduced in Longitudinal Group to develop an evidenced based personal care plan for one patient for health prevention/maintenance at point of care.
- Practice a complete history including CC, HPI, ROS, PMH, FMH, Social history
- Review with one patient the management of a chronic health issue
- Practice a basic assessment and plan on 3 patients
- Practice 2 oral presentations to preceptor

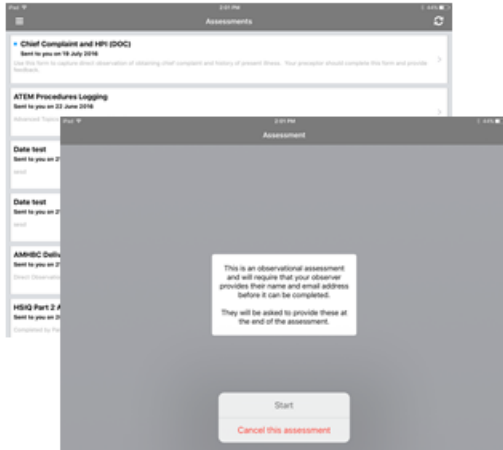
Direct Observation of Competence

Students are required to log completion of the LP objectives using an electronic tool called My Progress. All students will synch their iPads at the beginning of the block to load that block's objectives. Most objectives are self-reported by students; however, we will ask you to directly observe the student once per block.

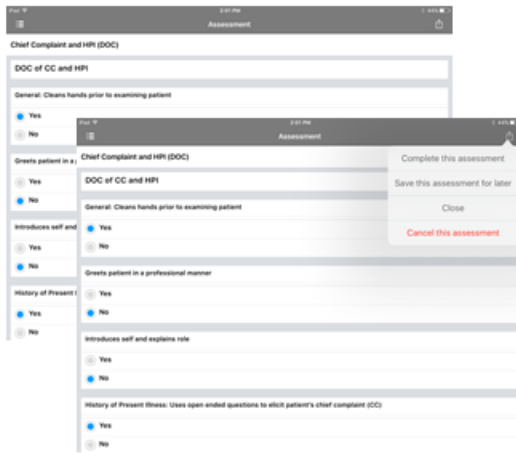
The student will queue up the appropriate form on their device. Most preceptors observe the student complete the specific task; then complete the form with the student at a later time when there is time for feedback.

This is a formative process and we encourage you to provide feedback to assist students in their development of skills. You do not need an account to complete the form; simply type in your name and email address. After submitted, you will receive email verification from MyProgress. If you completed the form, you do not need to do anything. If you did not submit the form and are receiving an email confirming that you did, please contact Diana Bahner as soon as possible.

The screen shots below depict the step-by-step process.

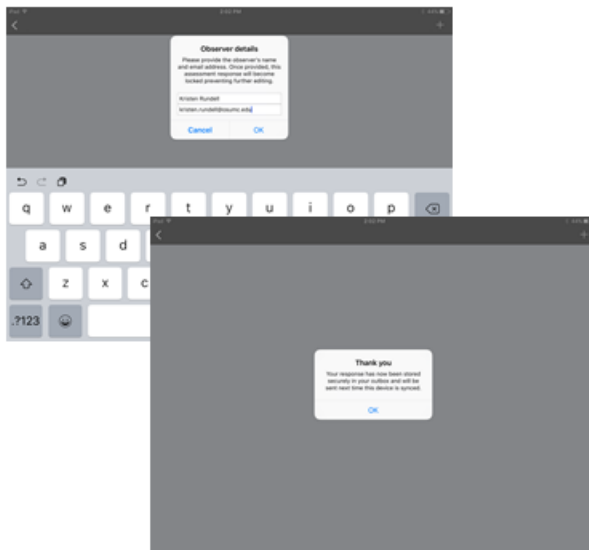


1) The student will cue up the assessment form and hands you his / her iPad



2) Complete the form.

When finished click on the upload button in the upper right and choose "Complete this assessment"



3) Enter your name and email address and click okay.

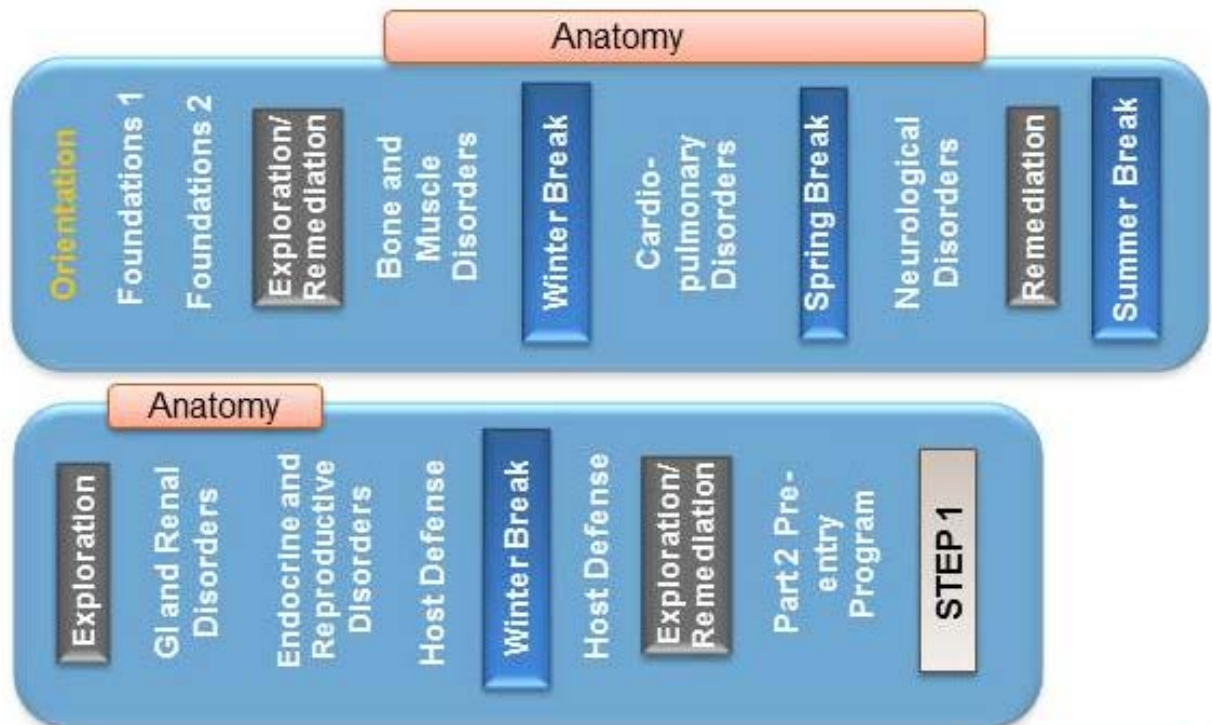
Return the iPad once you have the "Thank you" screen.

LeadServeInspire Curriculum Overview

The LeadServeInspire Curriculum provides an opportunity to develop instruction that integrates foundational sciences, clinical sciences, and behavioral sciences to provide more contextual relevance for students.

- Instruction is integrated to provide greater contextual relevance for students.
- Increased emphasis on multiple teaching methods designed to promote active learning.
- Foundational science content will be reinforced in Parts 2 and 3.
- Anatomy is taught concurrently and integrated into the individual blocks throughout Year 1 and Year 2.
- Student projects throughout are designed to emphasize core educational objectives and teach lifelong learning skills.
- Students will get early clinical exposure to patients in clinical practices.

FIGURE 1: TIMELINE FOR PART 1



Features of Part One

Part 1 will be divided into 9 blocks covering the major foundational sciences topics and is approximately two months shorter than the previous Med 1 and 2 years. All essential basic and behavioral science components will be covered with these concepts being revisited later in Parts 2&3. Anatomy will be taught longitudinally, with anatomical concepts being tightly integrated with histology, physiology, pathology and clinical applications covered during each block.

Early Clinical Experience

- Students will get early clinical exposure which will reinforce foundational science concepts
- Students will be in a practice one half-day every other week for 17 months.
- Students will participate in a half-day Longitudinal Group session 3 hours every week on either a Monday or Wednesday
- Students receive skills based training in Medical History Taking, Physical Examination and a Basic Procedures Training Program

Evaluation and Assessment

All students will achieve competency in all Core Educational Objectives (CEOs). Each aspect of each CEO will be measured at some point in the curriculum. The measures will be based on learning objectives and independent from learning methods. The Educational Portfolio will be used to foster self-directed learning and individualization of educational plans.

Core Educational Objectives

Patient Care

Medical Knowledge and Skills

Practice-Based and Life-Long Learning

Interpersonal Communications

Systems-Based Practice

Professionalism

Assessment Weeks

- At the end of each block a week of assessments will include computer based Multiple Choice Question (MCQ) exams and Objective Structured Clinical Exams (OSCE).
Note: Students will not be assigned to be in your practice during assessment weeks.
- Longer blocks (Neurological Disorders, Cardio Pulmonary Disorders, and Host Defense) will also have a mid-block assessment.

Assessments in Longitudinal Practice

Students are expected to progress through this two year program as they gain increased competence with history and physical exam skills. Each preceptor will be asked to intermittently evaluate the students online to assess the students' progress. The assessment questions directly reflect the core competencies and are meant to assess the student's attendance, performance and successful completion of target objectives. The evaluations by the preceptors are integrated into the overall grade at the end of each curricular block.

Several types of Assessments will be used to monitor achievement of learning outcomes of the Longitudinal Practice component of LSI, including Attendance, Clinical Preceptor Assessments, Direct Observation of Competence, and Student Logs.

- **Attendance** will be reported for each Longitudinal Practice session. Students will be responsible for logging this information. We understand the need for some flexibility in preceptor scheduling. If necessary, it is the student's responsibility to set up a makeup time that is convenient for both the student and the preceptor.
- **Clinical Preceptor Assessments** will allow LP preceptors to report summary observations of important student behaviors in the practice. These are sent approximately 3 weeks prior to the end of the block in order to have completed forms by assessment week grading. (More information on page 16.)
- **Direct Observation of Competence** will be used in the practice to assess student performance of key clinical skills with a real patient. Some of these may be completed by other members of your staff. Students will have the assessment forms loaded on their iPads and these will be used to complete the assessments. These are **formative only** and intended to give students insight on the application of knowledge they are learning in the classroom.
- **Student Logs** will be used to track the types of patient encounters students experience and the skills they perform during each block. Students log their completed objectives through the timesheets in MyProgress.
- Each Curricular Block will end with an **Assessment Week OSCE** that will measure whether students have become proficient at professional behaviors, communication & patient care skills across cases and contexts. **Students will be practicing these skills at the LP sites, while the OSCE is the mechanism for testing their competency.** The OSCEs are evaluated by the Longitudinal Group leaders.

Clinical Preceptor Assessments of Students

Preceptors will be asked to assess student progress by completing an online assessment. The first assessment will be completed at the end of Bone and Muscle and then at the end of each block. In Year 2, the students will be evaluated for their performance in GI/ Renal and Endo/ Repro at the end of the Repro block. A sample assessment is included in the appendix.

We will also request your feedback on the LP Program at the end of Year 1 and Year 2 so we can continue to improve our process and communication.

Students will be also asked to complete an assessment on the preceptor at the end of Year 1 and Year 2. A sample of the assessment is included in the appendix. We will provide summary information at the end of Year 1 to preceptors, and a complete report at the end of Year 2.

Curricular Block	CPA due date
Bone & Muscle Disorders*	12/11/17
Cardiopulmonary Disorders	3/5/2018
Neurological Disorders	5/14/2018
Endocrine and Reproductive Disorders	11/5/2018
Host Defense	2/11/2019

*The first assessment is not part of the students' formal grade.

Students not meeting objective competencies.

If you have any questions or concerns regarding the performance of the student, please contact Diana Bahner or Kristen Rundell. Most concerns are addressed immediately and require no intervention. Occasionally a student may have difficulties that require intervention. If this occurs the guidelines of the student handbook for Part One of the LSI curriculum will be followed.

LeadServeInspire Curriculum Terminology

Term	Definition
Academic Program	Parts of the curriculum e.g. Part One Foundational Sciences
Curricular Block	A multiple week section of a program e.g. Bone & Muscle Disorders, Cardiopulmonary Disorders
Longitudinal Group (LG)	Focused developmental tasks students work on in weekly groups throughout the curriculum relating basic and behavioral sciences to the practice of medicine
Longitudinal Practice(LP)	Students are scheduled for ½ a day every other week to a practice site to apply basic science and clinical skills development. Objectives for LP are closely aligned and reinforced in LG.
Longitudinal Projects	Focused developmental tasks students work on throughout the curriculum e.g. Health Coaching
OSCE	Objective Structured Clinical Examination – This will measure whether students have become proficient at professional behaviors, communication & patient care skills across cases and contexts

Frequently Used Websites

VITALS

VITALS is the College of Medicine's Student Information System. This system is used to evaluate the students, preceptors and program, as well as track student completion in certain activities. Longitudinal Preceptors have **instructor accounts** in this system in order to evaluate student performance. At designated points in times you will receive an email notification from the VITALS system with a link to an evaluation of the student(s). The link will take you directly to the evaluation form and you will not need to log-in.

If you have any issues accessing the evaluation forms you should contact Dawn Ryan.

LP Website

<http://fd4me.osu.edu/lp-preceptors/>

We have created a website that contains all of the objectives and resources that are sent through the year. We also highlight the current curriculum on the front page as well as a teaching tip.

Faculty Development for Medical Educators (FD4ME)

Faculty Development for Medical Educators is a series of interactive, e-learning modules devoted to improving the knowledge, attitudes and skills of medical and allied health faculty in the important domain of teaching. Visit the site at: <http://fd4me.osu.edu/>

Earn Category I CME credit - Modules of interest to Longitudinal Practices:

- [Teaching Students in the Ambulatory Setting I: Getting Started](#)
Cynthia Ledford, M.D.
- [Teaching Students in the Ambulatory Setting II: Patient Care Skills](#)
Cynthia Ledford, M.D.
- [Teaching Students in the Ambulatory Setting III: Evaluation and Feedback](#)
Cynthia Ledford, M.D.
- [Direct Feedback and Coaching in Medical Education](#)
Sorabh Khandelwal, M.D.

Most modules are linked to longer video presentations and/or power point presentations.

There will be a faculty development workshop offering CME category I credit for new and continuing preceptors offered in the fall. The workshop will cover the topics of student evaluation, working with a student in a busy practice and working with a student that is not meeting the benchmarks. Teaching medical students in your office is Category 2 credit and a letter from the College is sent to you on an annual basis.

Appendices

Sample Patient Empaneling Form

NEVER PRESENT INFORMATION THAT MAY IDENTIFY THE PATIENT IN ANY MANNER.

Date:	
CC:	
HPI:	
ROS:	
Meds:	Allergies:
PMHx:	FHx:
SHx:	Surgeries/Hospitalizations:
Physical Exam:	
Lab Results:	
Assessment:	
Plan:	

Sample Huddle Card

FOUNDATIONAL SCIENCE II

ONE MINUTE LEARNER HUDDLE – PRECEPTOR

Session 1

Have this brief discussion with your student before the first session starts

- Have the student prepare for this conversation
- You and the student can preview the schedule and charts

1. GOALS: Remember to be specific!

- The student should identify and introduce themselves as a student partner of a longitudinal practice, meet members of the team and understand their roles.
- Briefly review the office policy and procedures
- Student should respectfully communicate with patients, staff, and other team members.
- Student should practice interviewing patients and obtaining CC and HPI

2. GETTING GOING: When, how and who should the student see?

- Have the MA/designee help the student select patients to see, review schedule
- The student should room patients with MA or designee for the first session.

3. HOW MUCH AND HOW LONG?

- How much of the visit should the student do on his/her own?
- How long should the student spend with each patient?

4. QUESTIONS:

- When is a good time to discuss questions the student has?

Sample: Preceptor Evaluation of Student

SAMPLE: Preceptor Evaluation of Student

Instructions: Thank you for your contributions to the Longitudinal Practice experience for Lead.Serve.Inspire students. Please rate the performance of the student based on your direct observations to date. Each item described the specific behaviors that you might observe.

Question 1 of 5 – Mandatory: Works effectively with healthcare team members and staff.

- Disruptive to the team
- Sometimes lacks consideration for team members
- Functions as a cooperative, productive member of the team
- Establishes good rapport with healthcare team, takes some initiative to improve teamwork
- Establishes tone of mutual respect & dignity, and significantly improves team dynamic

Question 2 of 5 – Mandatory: Is reliable, dependable, and accountable for own actions.

- Unexplained absences, unreliable, or tardiness
- Often unprepared, can be inattentive
- Fulfills responsibility, accepts ownership of essential roles in care
- Seeks responsibility; views self as an active participant in patient care
- Seeks and accepts full responsibility, and is self-directed

Question 3 of 5: Mandatory Develops relationships with patients and families

- Occasionally ineffective in developing therapeutic relationships
- Inconsistent in use of listening, narrative or non-verbal skills to build relationships
- Often demonstrates respect through listening, verbal and non-verbal skills
- Interpersonally engaging, builds strong therapeutic relationships with ease
- Establishes highly effective therapeutic relationships adapting to patients' different needs
- Maintains highly effective therapeutic relationships even in challenging circumstances, adapting and managing complex situations. i.e. cultural or emotional states

Question 4 of 5 – Mandatory: Positive Reinforcement

Please identify 1-2 things this student did well and should continue to do.

Question 5 of 5 – Mandatory: Next Steps

Please identify 1-2 things this student might do to improve.

Sample: Student Evaluation of Longitudinal Practice Preceptor

Instructions: Please complete this evaluation of your Longitudinal Practice preceptor **based on your personal opinion and experiences**. Your responses will be reported in aggregate with classmates to provide faculty with information about how to improve their teaching. You may also communicate any confidential concerns you might have to the Longitudinal Practice Director, Kristen Rundell at kristen.rundell@osumc.edu

This teacher ...

- was enthusiastic
- treated me with respect
- treated others with respect (students, residents, staff, patients)
- created an atmosphere that encouraged students to admit their limitations
- observed the student's performance
- gave feedback
- developed a plan for improvement with the student
- asked the student to identify their goals, interests and needs.

Rating scale (n/a, strongly disagree, disagree, disagree/ agree equally, agree, strongly agree)

This teacher ...

- treated me with respect
- treated others with respect (students, residents, staff, patients)

Rating scale: Yes/ No

How would you rate this teacher's overall teaching effectiveness?

Rating scale: Poor, fair, good, very good, excellent

Name 1-2 things that this teacher did, and should continue to do, that helped you learn

Identify 1-2 ways in which this teacher might improve