"Teaching" Hospitals Today?

"This is a teaching hospital."

In a ‘teaching hospital’

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University of Chicago
ACLGIM Conference 2011
Current Challenges for Teaching

• Service demands
  – Duty hours

• Funding Crisis

• Transparency & Accountability
  – What are we teaching?

Increased Accountability

• MedPAC commissioned a RAND study of residency education

• How Are Residency Programs Preparing Our 21st Century Internists?

• RAND surveyed 26 IM programs
  – practice-based learning and improvement
  – systems-based care
  – interpersonal and communication
Conclusion of RAND report

• Teaching in these topics far short from that recommended
• Several facilitators & barriers to improvement:
  – Faculty time & expertise
  – available information technology
  – program’s setting
  – resident baseline knowledge, skills and interest
  – lack of evidence in educational methods and evaluation strategies

BARRIERS
TO TEACHING ON INPATIENT ???
Parabolic Curve for Learning

![Graph showing parabolic curves for different patient volumes.](image)

Haney EM, 2006

Our Mission:
Restore Service-Learning Balance
What Did Residents Do Before 2003?
Review of 16 pre 2003 Work Sampling Studies

- Marginal Educational Value 34%
- Teaching & Learning 15%
- Unspecified 16%
- Patient Care 35%
- Ordering tests
- Tracking down results
- Ancillary tasks (blood draw, transportation)


Additional staffing

Education

SERVICE
Studies of Physician Extenders

<table>
<thead>
<tr>
<th>Year</th>
<th>Author</th>
<th>Specialty</th>
<th>Solution</th>
<th>Duty</th>
<th>Felt</th>
<th>Sleep Hrs</th>
<th>Edu</th>
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<tr>
<td>1991</td>
<td>Simmer TL</td>
<td>IM</td>
<td>Physician/NP</td>
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<td>1994</td>
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<td>Critical care RN</td>
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<td>1999</td>
<td>Peckett WR</td>
<td>Surgery</td>
<td>Jr doctor asst</td>
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<td>1999</td>
<td>Henderson NC</td>
<td>Hospital</td>
<td>NP</td>
<td></td>
<td>+</td>
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<tr>
<td>1999</td>
<td>Jack B</td>
<td>Hospital</td>
<td>Night nurses</td>
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<td>2003</td>
<td>Podnos YD</td>
<td>Surgery</td>
<td>College grad</td>
<td></td>
<td>+</td>
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<td>Surgery</td>
<td>Trauma nurse</td>
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<td>NP</td>
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<tr>
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<td>Roy CL</td>
<td>IM</td>
<td>Hospitalist/NP</td>
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<td>0</td>
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<tr>
<td>2008</td>
<td>Buch KE</td>
<td>Surgery</td>
<td>NP</td>
<td></td>
<td>+</td>
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<tr>
<td>2008</td>
<td>Feinland JB</td>
<td>OB</td>
<td>Midwives</td>
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<td>Stahlfeld KR</td>
<td>IM</td>
<td>NP or PA</td>
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Average MERSQI 10.4 (3.27)

Workload – Solutions/Substitutes

- Physician extenders
  - NP or PA
- Hospitalists
- Midwives
- Health assistants (college grads)
- IV team
- Electronic medical records
- Other technology solutions

Block & Norton, 2008
What would Steve Jobs say?

Computers themselves, and software yet to be developed, will revolutionize the way we learn (and live!)

Point of care technology: iPad?

- 78% more efficient on the wards with their iPad
- 70% saved time with iPad (1h/day)
- 56% could attend more conferences

n=100 (99%)
Continued Inpatient Care

- Residents often check labs, order labs and review records from home

<table>
<thead>
<tr>
<th>Item</th>
<th>At least once/month</th>
<th>Frequently (&gt;3 times/week)</th>
<th>Post-call day</th>
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<tbody>
<tr>
<td>Checking labs</td>
<td>93%</td>
<td>45%</td>
<td>62%</td>
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<tr>
<td>Review old records</td>
<td>76%</td>
<td>17%</td>
<td>28%</td>
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<tr>
<td>Order inpatient labs</td>
<td>69%</td>
<td>14%</td>
<td>37%</td>
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<tr>
<td>Dictate discharge summaries</td>
<td>60%</td>
<td>10%</td>
<td>31%</td>
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What would Osler do?

The successful teacher is no longer at a height, pumping knowledge into passive receptacles

Get out there and teach!

[It] can be so hopelessly reparable that the only solution is to...

*blow it up and start over!!*
Radical Redesign: Redesign Initiative in Internal Medicine Residency

- 2 attending physicians
- Maximum 15 patients - representing a decreased number of total patients
- Funding - Dept of Medicine

Outcomes: Redesign Initiative in Internal Medicine Residency

- ↑ time spent on educational activities
  - 20.2% total time vs 10.4%, p<0.001
- ↑ attending satisfaction
  - 82.9% teaching skills well used
  - 92.6% learned from co-attending
Aliki Initiative: Johns Hopkins Bayview

- # patients admitted ↓50%
- Focus on patient centered counseling and treatment
- Call or visit patients after hospital discharge

Funding:

- Sustainability- more efficient care by hospitalists

Ziegelstein, Hellmann

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The New York Times

A $42 Million Gift Aims at Improving Bedside Manner

- Students and trainees
- Research
- Master clinicians-teachers

CHICAGO — Carolyn Buckhbaum still bristles about an arrogant physician who brazenly dismissed her summation about her almost decades ago. It turned out she was right. The physician was wrong.

“We all make mistakes,” she said. “But he never even apologized.”
Adding “Teachers” onto the Team

Providing attending physicians with literature searches changed treatment in 18% of the pts (12%-24%)

Lucas et.al, 2004
Can technology help?

- Useful in outpatient setting
  - where time crunched & attendance variable (Hopkins Model)

- Decision support?
- Social media (Facebook / Twitter)
- Games?
- Videos?

“Stealth” Teaching

- Screen saver message (update periodically)
- Cedars-Sinai MC cultured physician hands
  - Culture result was photographed and made into screen saver

Illustration by Paul Sahre and Loren Flaherty
The Charge...

- Small tweaks will not yield big results
- Now is the time for big ideas
- Disruptive innovation is key
- Be bold...

They are coming soon...
Acknowledgments

• Lisa Roshetsky, MD, MERITS medical education fellow
• Bhakti Patel, MD, Pulmonary / Critical Care fellow
• Rod Deano, MD, PGY3 Internal Medicine Resident
• Kathy Fletcher, MD, MS MCW
• Darcy Reed, MD, MPH Mayo Clinic