

Moving beyond the Classroom: Designing Interprofessional Curricula for Primary Care Clinical Learning Environments

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**Department of Veterans Affairs,
Centers of Excellence in Primary Care Education**

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Academic Affiliations

Overview

Goal:

Explain some key elements for clinician educators to consider when designing a workplace-based interprofessional curriculum

Our presentation will:

- Describe a curricular framework for workplace learning in VA primary care.
- Describe examples of curricula designed to support interprofessional workplace learning, e.g. shared medical appointments for diabetes management and pain management.

The Workplace as a Curriculum?

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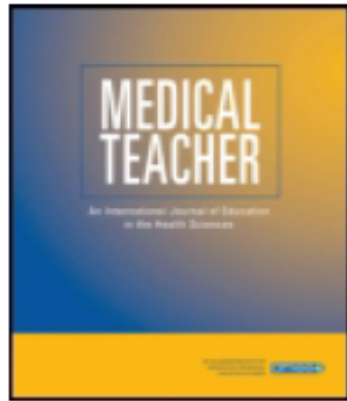




A Curriculum in the Clinic?

4 major components

- Aims/Goals/Outcomes
- Structure
- Content
- Process



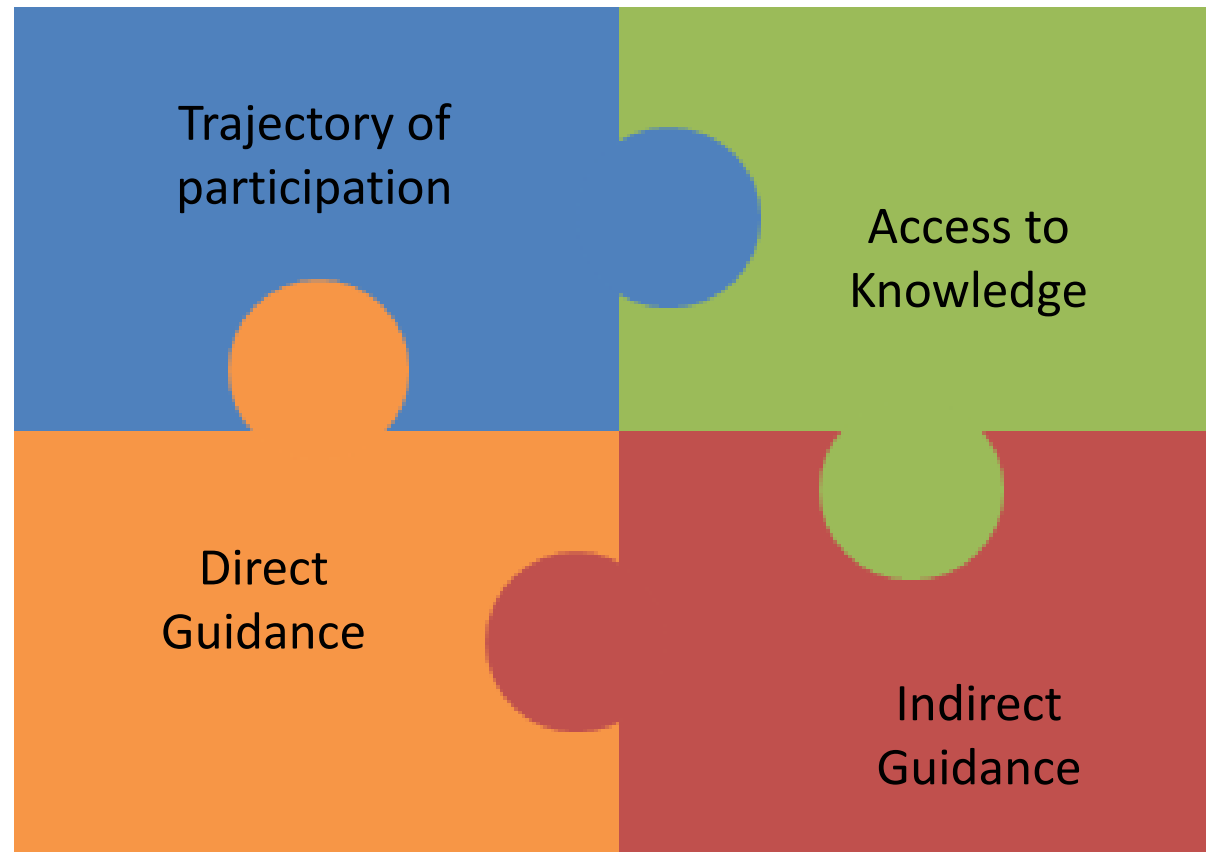
Curriculum development for the workplace using Entrustable Professional Activities (EPAs): AMEE Guide No. 99

Olle ten Cate, Huiju Carrie Chen, Reinier G. Hoff, Harm Peters, Harold Bok & Marieke van der Schaaf

A Workplace Curriculum is ...

“And organized set of experiences in a real-world setting that fosters the acquisition of competencies that are necessary to act as a professional.” (p984)

4 Features of a Workplace Curriculum



Implementation of a Chronic Pain Shared Medical Appointment (SMA) in the Center of Excellence Primary Care – VAMC Cleveland

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Shared Medical Appointments (SMA)

- Group visits/clinics: a system redesign in which clinicians see multiple patients together in the same clinical setting.
- SMAs are a subset of such clinics defined as “group of patients meeting over time for comprehensive care for a defining chronic condition or health care state.”*
 - Groups around diagnosis, age of patients or self-management strategies
 - Interdisciplinary team
 - Typically last 60-120 minutes
 - Time for social integration, interactive education, medication management

* Edelman, D, McDuffie et al, *Shared Medical Appointments for Chronic Medical Conditions: A Systematic Review, QUERI Evidence Based Synthesis Program, Washington DC, July, 2012*



QUERI

Shared Medical Appointments for Chronic Medical Conditions: A Systematic Review

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Overview

Trainee-Led Chronic Pain SMA

- Structure
 - Bi-Monthly- one women's group, one men's group
 - Group session 60-75 minutes
 - Present: Veterans, Medical Resident, Health Psychology Fellow, Health Psychologist, Attending Physician, Pain Psychologist
 - Primary Care conference room
 - Cognitive Behavioral Therapy Focus
 - Complementary Medicine Focus- yoga, mindfulness, relaxation, exercise
- Veterans
 - Chronic Pain
 - Multiple ED visits
 - No narcotic expectations
- Trainees
 - Health Psychology Fellows and Medical Resident Co-Lead
 - Medicine and Health Psychology Faculty present



Trajectory of Projection

- Learners participate interprofessional learning in the classroom



- Learners participate in SMAs as interprofessional team members



- Leading a Shared Medical Appointment with a interdisciplinary colleague- “Capstone” experience of Interprofessional residency



Intentional about Clinical Care driving Curriculum

- What do you need to know to help the veteran with chronic pain?
- Working premise: “Chronic Pain is Treatable, Not Curable”
- Minimize suffering and maximize **ACTIVITY**
 - Differences between chronic versus acute pain.
 - Review evidence based complementary health approaches to chronic pain.
 - Learn multiple means of self management of pain other than medications.
 - Review Pharmacological Management for pain
 - How to have a discussion about not prescribing narcotics.
 - Cognitive Behavioral Therapy.



Direct Guidance

- Health Psychology and Medicine Faculty present
- Peer to Peer learning
 - Prep before the session
 - Debrief after every session with the entire team
- Veterans' sharing experiences about pain management
- Learning Resources on CBT, mindfulness, relaxation, etc
- Collaborative Care Plan documented



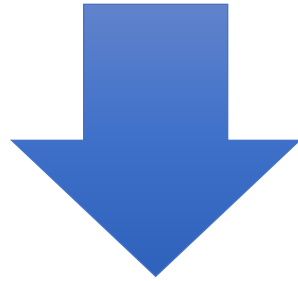
Indirect Guidance

- Feedback/ Outcomes
 - Veteran experience- satisfaction, return to SMA
 - Knowledge gained- theories of chronic pain
 - Reduce ER visits, no shows/discontinue consulted services
 - Preliminary data demonstrates **54% reduction** in ED visits for chronic pain concerns pre and post pain SMA visit.
 - Trainee
 - Appreciating team approach to pain management
 - Improved comfort level with MI and CBT techniques
 - Comfort with complementary health referrals



Designing a Workplace Curriculum

“Teaching”



“Facilitating Learning”

Goal of Workplace Learning

To develop the capacity to think and act in ways that permit learners to:

- **Resolve non-routine problems**
 - Establish foundation with routine problems
 - Distinguish routine from non-routine problems
- **Understand what constitutes appropriate action**
 - Develop judgment over time
 - Appreciate one's limitations, seek help
- **Become a full participant in the workplace**
 - Participation gradually becomes less peripheral
 - Milestones and entrustment decisions guide the process

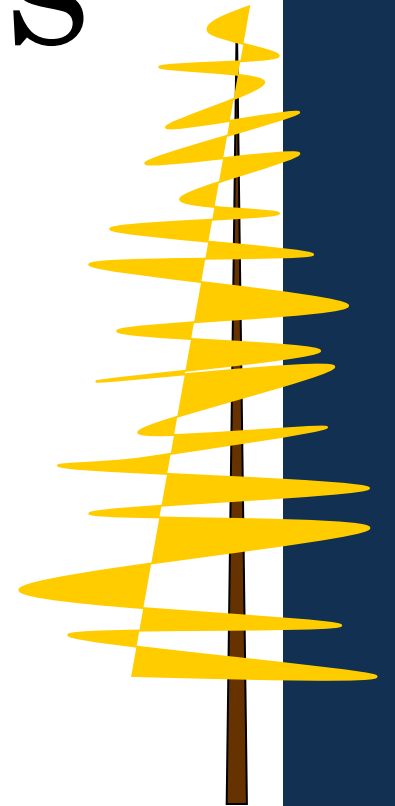
3 Phases of Workplace Curriculum Design



Trainee-Led Diabetes Shared Medical Appointment

Boise VAMC Center of Excellence in Primary Care Education

India King, PsyD & Amber Fisher, PharmD, BCACP



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<http://boisevacoe.org/>

Trainee-Led SMA: Background

Overall Training Goals:

1. Contribute to planning & execution of a SMA series
2. Understand the roles that each team member can play in a SMA
3. Improve confidence in teaching groups of patients

Learning Experience:

- Orientation
 - Group discussion-based
 - Trainee manual
 - SMA monthly “leader” assignment
- Patient recruitment
- 5 monthly SMAs
 - SMA documentation
 - Structured Consensus Reflection
 - Patient goal setting & coaching



Workplace Learning Design Template

Before (Prep)	During (Affordances & Engagement)	After (Reflection/ Debrief)
<ul style="list-style-type: none">• Develop learning outcomes• Provide orientation for both trainees and staff<ul style="list-style-type: none">• Explicitly share/discuss outcomes with trainees and staff	<ul style="list-style-type: none">• Active and purposeful engagement of learners• Appropriate supervision• Sequencing of activities• Effective group interactions	<ul style="list-style-type: none">• Share and compare experiences• Discuss process• Connect experience to learning outcomes

Trainee-Led SMA: Step One

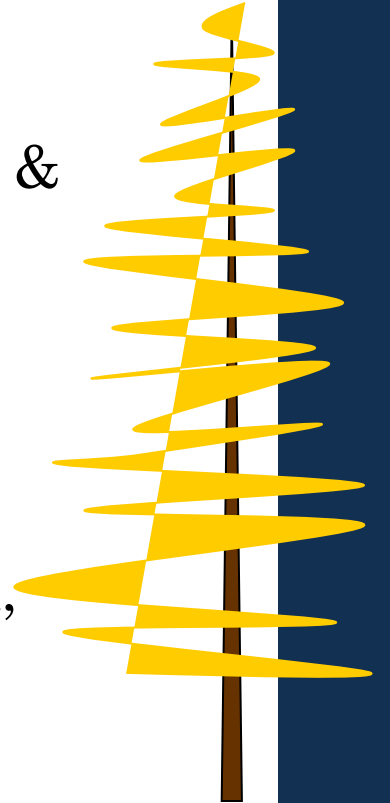
Before
(Prep)

Develop Learning Outcomes

- Training manual describes organizational and clinical roles
- Highlight importance of team-based goals and team functioning
- Trainee developmental level matches structure & learning expectations

Provide Orientation for Trainees & Staff

- Kick-off Orientation with IP trainees
- Led by IP faculty
- Facilitated discussion, both clinical and organizational roles (recruiting, documentation, organization, teaching, greeting, etc.)



Trainee-Led SMA: Step Two

During
(Affordances
Engagement)

Active & Purposeful Learner Engagement

- Team-based role delegation throughout the experience
- Success of visit determined by trainees' engagement

Appropriate Supervision

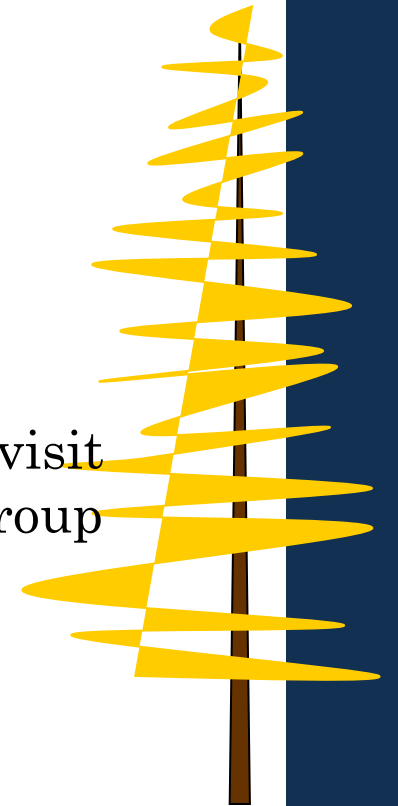
- Identified profession-specific supervisor
- Shared expectation by IP faculty to support trainees from multiple professions

Sequencing of Activities

- Explicitly assigned role transition each SMA visit
 - Identified monthly leader & additional group organizational roles

Effective Group Interactions

- IP-team based patient educational goals
- Success of each visit depends on effective teamwork



Trainee-Led SMA: Step Three



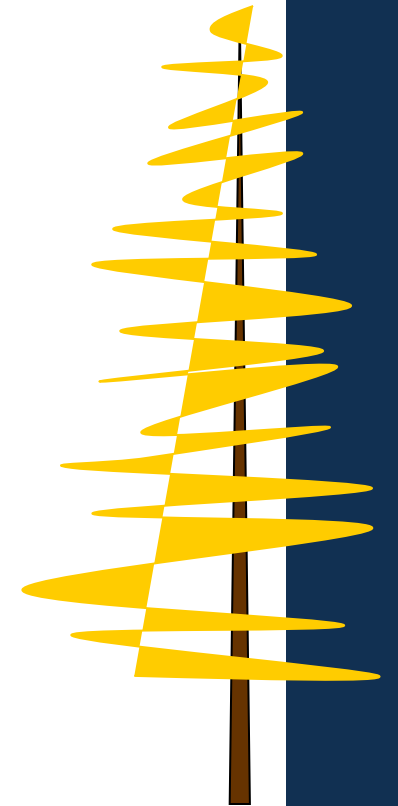
After
(Reflect/
Debrief)

Share & Compart Experiences/Discuss Process

- Following each visit– Structured Consensus Reflection
 - Example of what went well
 - Team-based goal for next visit
 - Shared with faculty

Connect Experience to Learning Outcomes

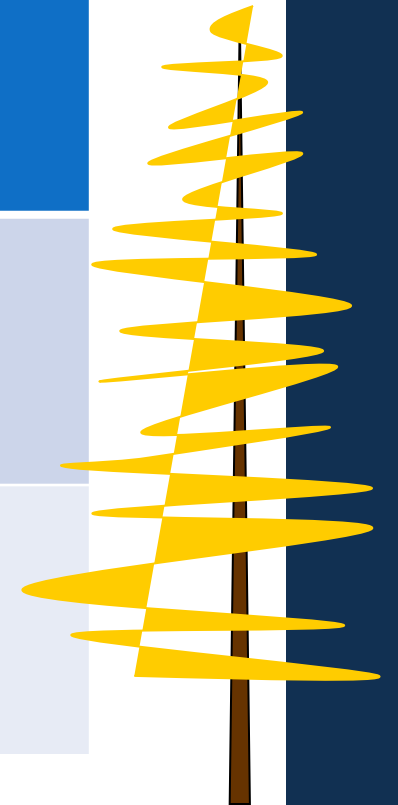
- Following SMA series
 - Focus group discussion



Trainee-Led SMA: Evaluation

- Workplace Learning → Opportunity to Assess Trainee and Patient Outcomes

	Pre/Post	Monthly – @ SMA	Post
Trainees	Interprofessional Valuing and Socialization Scale (ISVS)	Structured Consensus Reflections	Exit Reflections
Veterans	A1c @ goal BMI	Stanford Self-Efficacy Scale	Exit Interviews



Summary

- Preparing the workplace
 - Clarify roles and relationships with learners
 - Identify ways to make the workplace inviting, accessible
- Preparing the learner
 - Clarify goals, expectations, safety issues
 - Describe levels of participation (ways to be active, encourage questions)
- Guided learning strategies
 - Select tasks and activities that afford sequencing and scaffolding (progressive challenge)
 - Modeling, coaching, questioning
 - Reflection or debriefing

Thank you!

Questions & Discussion

What is Workplace Learning? A Framework

