



# Direct Observation of Internal Medicine Resident Staffing: Formalizing an Informal Process

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## PROJECT OBJECTIVE

☑ Cultivate the knowledge, skills, and attitudes to ensure effective, safe, and educational staffing of new admissions between senior residents and interns on the inpatient medicine service.

## BACKGROUND

### STATEMENT OF PROBLEM

- Near-peer "staffing" occurs hundreds of times during a resident's training and is typically informal, unstructured, and unobserved by attending physicians.
- Attendings use Mini-Clinical Examinations (Mini-CEX) to evaluate residents' history taking, professionalism, patient communication, and systems-based practice.
- Mini-CEX do not address other skill sets critical to effective clinical practice, such as peer communication, team-based practice, and educational proficiency.
- Observation, though Mini-Clinical Examination (Mini-CEX), of near-peer teaching while staffing new admissions is a unique opportunity to evaluate and provide feedback regarding these critical skills.

### NEEDS ASSESSMENT

- 2018-2019 ACGME Resident Survey: CU Internal Medicine residents were **below national average in positive feelings about feedback on their assignments and data on their practice habits**
- In review of current educational literature, the use of a mini-CEX for staffing is a novel approach to addressing this gap in resident training

#### Needs assessment Survey

Have you ever had any formal education about how to staff a new inpatient admission with a junior colleague (i.e. an intern or medical student)?

Do you have a structured approach to staffing?

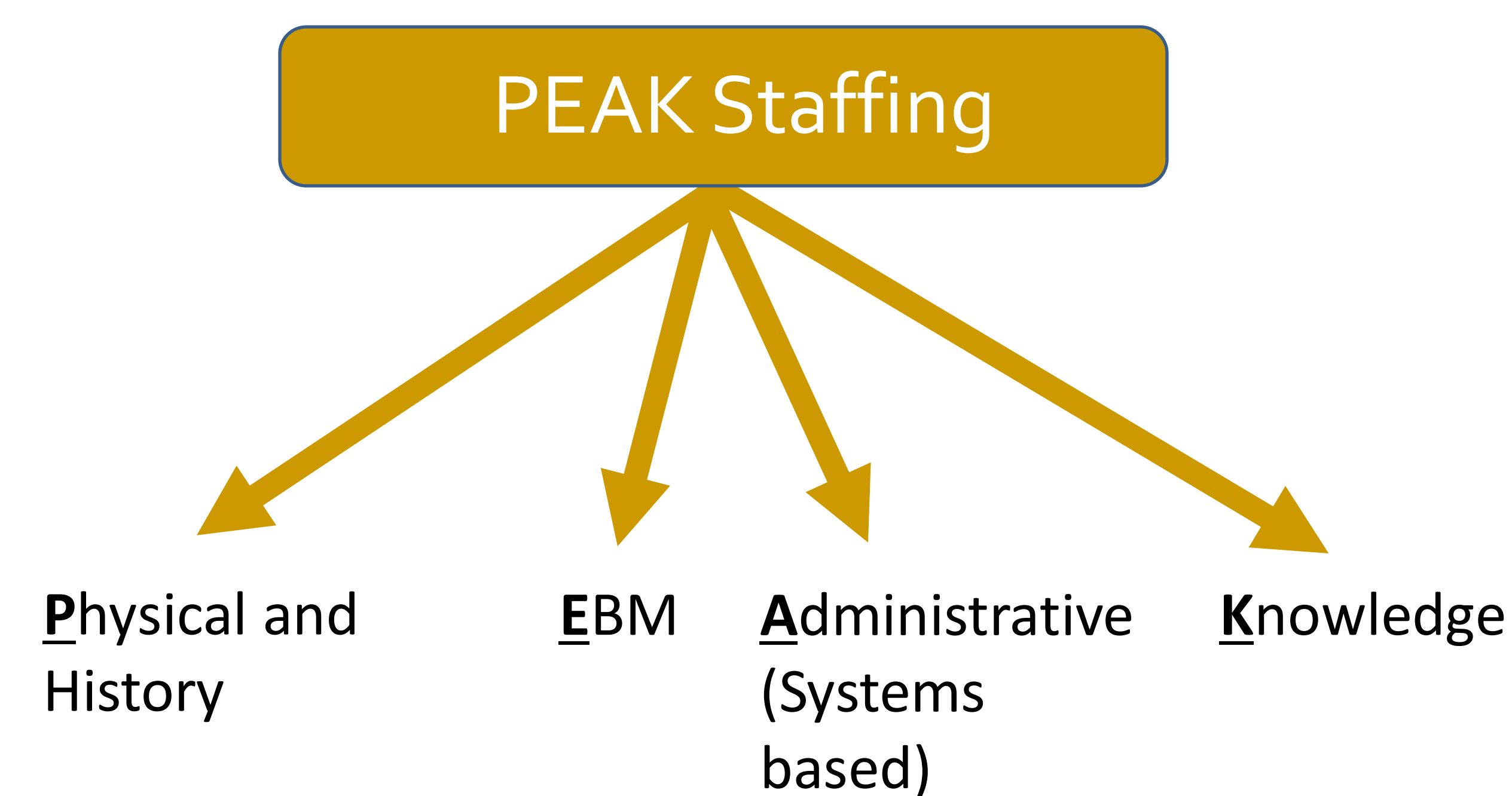
How comfortable do you feel with staffing patients with junior colleagues?

What would be helpful to learn about how to staff a new admission with an intern or medical student?

## INNOVATION OBJECTIVES

### PROGRAM DESIGN

- Interventions will take place over entirety of academic year including didactic lectures, **PEAK** staffing education and implementation of mini-CEX
- **PEAK** Staffing: Expert clinician developed standard for educational goals during resident staffing that include 4 realms of teaching



#### IM Residency Bootcamp

- Survey incoming interns and rising R2/R3 residents on prior staffing education
- Provide didactic teaching to intern class on **PEAK** staffing

#### Mini-CEX

- Perform Mini-CEX with focus on **PEAK** staffing principles during inpatient rotations at the RMR VAMC
- Survey resident attitudes and comfort with staffing as it evolves during their residency training

#### Analysis

- Compare attitudes and comfort with staffing between residents who participated
- Observe trends and feedback from residents on **PEAK** staffing feedback

## DISCUSSION

**Creating a curriculum for staffing has many facets that can impact and improve resident education**

### Evolving

- As the mini-CEX are performed, resident and attending feedback will continue to improve the **PEAK** staffing paradigm as well as the didactic session during resident bootcamp

### Learner Centered

- Interventions are focused and tailored to the individual learner
- Feedback and education on staffing can be immediately implemented into a resident's daily work without added evaluation or didactics
- As residents improve their teaching during staffing, these best practices will disseminate through the residency program through near peer teaching

### Novel

- Currently there is no formalized monitoring or evaluation of how senior residents are teaching junior students. The mini-CEX, with a focus on **PEAK** staffing education, allows for these interactions to be observed and improved
- Improving staffing can help increase patient safety during admission, a traditionally vulnerable transition of care

### Adaptable

- The generalizability of the **PEAK** staffing system and the ease of use of mini-CEX will allow this project to be adapted by other residency specialty programs

## REFERENCES

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