UW Geriatrics Continuity Clinics

Description: This continuity of care geriatric clinic occurs over 10 months of the geriatric fellows training. The geriatric fellow identifies a faculty mentor and spends the year working in that provider's clinic co-managing patients. Fellows typically see 4-6 patients per half day. As a training facility, the largely female UW patient population complements the VA Continuity clinic which is largely male.

Supervisor__ To be determined by fellow in first month of fellowship – talk to Dr. Barczi__

Goals
To become competent in rendering continuing care, coordinate specialty care, provide preventive care and assist in end of life planning in a community-based clinic. Fellows will also be exposed to administrative and billing aspects of ambulatory care.

Objectives and Steps to Evaluate Competency in this Objective
The fellow will be able to
(Medical Knowledge)
- describe accepted guidelines that pertain to chronic disease management and care of the vulnerable elder
- apply relevant knowledge from the fields of internal medicine, psychiatry, neurology, dermatology and urology to the primary care of older patients
As measured by 1) global rating scales completed by faculty clinic mentors at 6 month intervals, 2) participation in quarterly board review sessions with program director with direct observation of responses to questions taken from the Geriatric Review Syllabus © of the American Geriatrics Society.

(Patient Care)
- integrate state-of-the-art approaches in managing common geriatric syndromes (e.g. dementia, urinary incontinence, osteoporosis, falls, dizziness, pain) into an office-practice setting
- demonstrate proficiency in determining level of service during patient visits (to be capable of appropriately completing Medicare billing)
- practice age appropriate prevention and patient safety principles including immunizations, injury prevention, cancer screening, medication reconciliation and falls risk reduction
- apply common geriatric assessment screening tools and instruments into primary care practice
As measured by 1) global rating scales completed by faculty mentors at 6 and 12 months

(Interpersonal and Communication Skills)
- discuss end of life planning, advance directives and re-location issues with older adults in a compassionate and efficient manner
- learn how to conduct an effective patient-family meeting
As measured by 1) global rating scales completed by faculty mentors at the end of the rotation, 2) multisource appraisals completed by SW and nursing

(Professionalism)
- determine the interdisciplinary needs of patients and formulate a plan of care both as the geriatric physician and as a member of the team
As measured by 1) global rating scales completed by faculty mentors at the end of the rotation, 2) multisource appraisals completed by SW and nursing

(Systems-based Practice)
- understand the principles of care management across the clinic setting, hospital setting and home setting including interaction with home care organizations and services
- learn how to make appropriate use of community resources

As measured by 1) global rating scales completed by faculty mentors at the end of the rotation, 2) multisource appraisals completed by SW and nursing

(Practice-based Learning and Improvement)
- use results of patient surveys to modify the approach and interaction with patients
- review patient surveys that provide the patient’s perceptions of the providers communication strategies, professionalism and capacity to provide understandable patient education

As measured by 1) fellow-created commitment to change statements to respond to any areas of potential improvement based upon the results of the patient surveys, 2) option to complete a performance improvement project (fall PIP)

Type of Clinical Encounter
Clinic evaluation of patient with supervision by faculty preceptor (the fellow will review the medical record, interview and examine the patient, synthesize information and then present the case to a geriatric faculty member)

Teaching Methods
Mini-didactic sessions with faculty and other learners
Case-based learning (case discussions with faculty preceptor)
Individual study using listed references and web-based materials
Multimedia learning
e-learning

Patient Characteristics/ Mix of Diseases
The patients seen in the UW Geriatrics Primary Care clinics are typically community-dwelling older adults (average age 80) with 65% women. The typical patient may have 5 or more chronic health problems and be on >8 medications. The disease mix includes a constellation of diabetes, sensory impairments, osteoporosis, dementia/ cognitive impairment, depression, insomnia, gait/ mobility disturbance, chronic heart disease, COPD, arthritis, chronic kidney disease.

Procedures
Cognitive assessment using standardized neuropsychological tools
Affective screening
Functional assessment using standardized tools
Gait and balance assessment using Tinetti gait and balance scales
Small office procedures for primary care
UW Geriatrics Continuity Bibliography:


I have read and reviewed the goals and objectives for this rotation.

_________________________________________  ________________________________________
Fellow Signature                          Faculty Signature