

Faculty Orientation to Clerkship Goals and Objectives

Misbah Keen, MD, MPH, MBI
Co-Director

Jeanne Cawse-Lucas, MD
Co-Director

Stephanie Drake
Program Administrator

Foundational Knowledge

Clinical Phase now goes from end of March to March

Students have all completed the Foundations phase, which includes:

1. Basic sciences
2. Foundations of Clinical Medicine curriculum
3. Primary Care Practicum (outpatient)
4. College Mornings (inpatient)
5. Ecology of Health and Medicine
6. Epidemiology and biostatistics

Goals

Learn and apply key components of the **Family Medicine approach to health care**:

- ✓ Biopsychosocial Aspects of Care
- ✓ Comprehensive Care
- ✓ Continuity of Care
- ✓ Context of Care
- ✓ Coordination and Integration of Care



Buffalo, WY

Objectives

1. Discuss:

The principles of care within the framework of family medicine & the critical role of family physicians within any health care system.



Objectives 2-4: Clinical Knowledge

2. Gather information, formulate differential diagnoses, propose initial diagnostic evaluation, and offer management plans for patients with common presentations within the within the framework of the family medicine.
3. Manage initial evaluation and follow-up visits with patients needing longitudinal care such as such as chronic disease and pregnancy, in a family medicine setting.
4. Collaboratively, with patient input, develop evidence-based health promotion/disease prevention plans for patients of any age or gender in a family medicine setting.



Objectives 5-6: Patient Centered Communication & Professionalism

5. Demonstrate use of patient centered communication skills during history taking, physical exam, use of electronic health records, and collaborative decisions making in an outpatient setting.
6. Demonstrate professionalism in the care of patients and families, and in interactions with the health care team and communities.



Family Medicine Clerkship

www.uwfmc.org

Medical Student Education

Family Medicine Clerkship

Info for Faculty

Awards

Info for Students

Site Information

About MSE

Courses

Family Medicine
Preceptorship

Family Medicine
Sub-Internship

Advising

Programs

Events

Resources

Contact

INFO FOR FACULTY



EOQ Meeting Dates

October 13, 2017

March 9, 10 2018

June 8, 2018

EOQ Newsletters

- October 7th, 2016 – Highlights
- March 3-4, 2017 – Highlights
- June 2, 2017 – Highlights

Administrative Tools & Resources

- **Family Medicine Syllabus 2017-18**
- **Clerkship Dashboard**
 - View student curriculum, rotation schedules, track assignments and find student emails
- **Clinical-GradingWorkbook**
 - The Excel Template is for use when calculating and averaging clinical scores.

Example:

E*VALUE link for grade submission

E*Value Portal
E*Value Clinical Scheduling & Evaluation System

(Please save this site to your favorites for logging into E*Value)

- E*VALUE PORTAL – Login for all Students and most UW Faculty, Residents and Staff (UW Net)
- E*VALUE WEBSITE – Login for non-UW Educators OR UW Educators or Staff who prefer "net authentication"

What is E*Value?

Evaluation Resources

- WRITE FMC Evaluation Process Overview
- FMC Evaluation Process Overview
- FM Feedback and Evaluation Form (Grade Anchors)
- MiniCEX – Effective Patient-Centered Care (EPCC), PCOF Form – Physician
- Evaluations manual
 - Daily Feedback Card #1
 - Daily Feedback Card #2
 - Daily Feedback Card #3

Objective 2

Effective Patient Centered Care (EPPC)

MINI-CEX for Family Medicine

Patient Centered Observation Form- Clinician version			
Trainee name _____		Observer _____	Obsrvn# _____ Date _____
<p><i>Directions: Track behaviors in left column. Then, mark one box per row: a, b or c. Competent skill use is in one of the right two right side columns. Record important provider / patient comments and verbal / non-verbal cues in the notes. Use form to enhance your learning, vocabulary, and self-awareness. Ratings can be for individual interviews or to summarize several interactions. If requested, use this form to guide verbal feedback to someone you observe.</i></p>			
Skill Set and elements Check only what you see or hear. Avoid giving the benefit of the doubt.	Provider Centered Biomedical Focus	↔	Patient Centered Biopsychosocial Focus
Establishes Rapport <input type="checkbox"/> Introduces self (before gazing at computer) <input type="checkbox"/> Warm greeting (before gazing at computer) <input type="checkbox"/> Acknowledges all in the room by name <input type="checkbox"/> Uses eye contact <input type="checkbox"/> Humor or non medical interaction	<input type="checkbox"/> 1a. Uses 0-2 elements		<input type="checkbox"/> 1b. Uses 3 elements.
	Notes:		
Maintains Relationship Throughout the Visit <input type="checkbox"/> Uses verbal or non-verbal empathy during discussions or during the exam <input type="checkbox"/> Uses continuer phrases ("um hmmm") <input type="checkbox"/> Repeats (reflects) important verbal content <input type="checkbox"/> Demonstrates presence, curiosity, intent focus, not seeming "rushed" and acknowledges distractions	<input type="checkbox"/> 2a. Uses 0-1 elements		<input type="checkbox"/> 2b. Uses 2 elements
	Notes:		
Collaborative upfront agenda setting <input type="checkbox"/> Acknowledges agenda items from other team member (eg MA) or from EMR. <input type="checkbox"/> Additional elicitation- "something else?" * X _____ * each elicitation counts as a new element <input type="checkbox"/> Asks or confirms what is most important to patient.	<input type="checkbox"/> 3a. Uses 0-1 elements		<input type="checkbox"/> 3b. Uses 2 elements
	Note patient concerns here:		
Maintains Efficiency using transparent (out loud) thinking and respectful interruption: <input type="checkbox"/> Talks about visit time use / visit organization <input type="checkbox"/> Negotiates priorities (includes provider agenda items) <input type="checkbox"/> Talks about problem solving strategies <input type="checkbox"/> Respectful interruption/redirection using EEE: Excuse your self, Empathize/validate issue being interrupted, Explain the reason for interruption (eg, for Topic tracking)	<input type="checkbox"/> 4a. Uses 0 elements		<input type="checkbox"/> 4b. Uses 1 element
	Notes:		

Formal Curriculum: fmCASES

- 40 interactive virtual cases:
 - 33 fmCASES (1-33)
 - 5 CLIPP (1,2,3,4,13)
 - 2 SIMPLE Cases (2,6)
- Use the fmCASES content area list to engage the students




Evaluation Process

Site Director collects feedback from preceptors about student's performance.



Site Director incorporates feedback into preliminary grade form considering depth, length of time, and when each faculty worked with the student.



Final grades are assigned by Clerkship Directors at the Seattle office based on the site's scores and final exam performance.

Grading

Student Evaluations are based on 11 scoring categories and the final exam

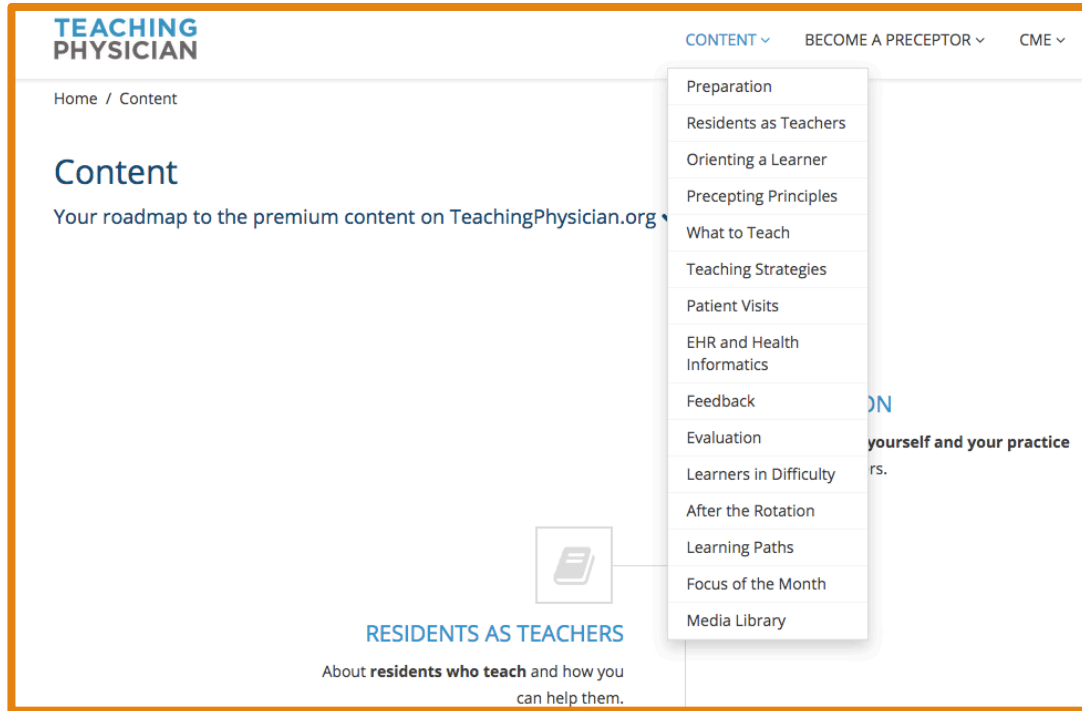
Knowledge of Subject Area
Data-Gathering Skills
Clinical Skills
Patient-Centered Care Skills
Management Skills
Integration Skills
Communication Skills
Relationships with Patients
Professional Relationships
Dependability and Responsibility
Educational Attitudes

Final Exam Scores

- **Honors** (82 percent and above) – grade adjustment: +0.1
- **High Pass** (75 to 81.9 percent) – grade adjustment: No adjustment
- **Pass** (55 to 74.9 percent) – grade adjustment: -0.2
- **Fail** (less than 55 percent) – Fail clerkship

NOTE: If you Pass on the Exam it is not possible to get Honors as a Final Grade

Stfm Teaching Physician



www.teachingphysician.org

username: uwfamedmse **password:** uwfamedpassword