

VISTA: Curriculum and Culture Change to Cultivate Physicians of the Future

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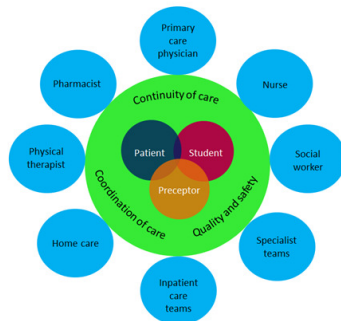


Consortium projects

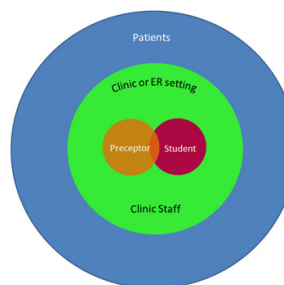
- UNITE: Understanding Nursing: Inter-professional Team Experiences:** M1s shadow nurses during inpatient shifts to build inter-professional understanding and collaboration
- Yammer™:** M4 micro-blogging project to unify students at geographically disparate sites and identify themes of value, improvement, safety, team training, and advocacy
- Inter-professional Discharge OSCE:** M2 experience with patient discharge requiring inter-professional communication
- Ambulatory Horror Room:** Design an ambulatory horror room to improve medical student of safety hazards in clinic settings (e.g., medication reconciliation, workload, diagnostic error)
- Patient Centered Longitudinal Experience:** M1s are partnered with high cost, high need patients in a mentored, longitudinal (9-month) clinical experience that fosters patient-centered learning
- Opiate Use Screening and Naloxone Distribution:** MS1s will be trained to screen for opiate use and distribute Naloxone to eligible Emergency Department patients as part of an inter-professional QI initiative

Patient-Centered Longitudinal Experience

Patient-Centered Model



Traditional Model



What did students learn?

	<u>Patient-Centered</u>	<u>Traditional</u>
Focus of learning	Patient-Centered	Biomedical
Roles and relationships	Relationship-building Patients as teachers	Clinical skills Physician teachers
Context of care	Care fragmentation / coordination	Barriers to care

Patient Perspectives

"They actually take the time to listen and interact with me and sincerely get to know me as a person as well as patient."

"If I can help them any kind of way to be better people in whatever they choose to do in the medical field, I'd like to do that."

Student Perspectives

"The visits hit home how debilitating it can be to live with a chronic condition, but also how demanding our demands on patients in terms of medical interventions can be."

"Patient families do so much to coordinate their loved one's care... This experience has made me all the more committed to do what I can to lighten that load for my future patients."

Opiate Use Screening / Naloxone Distribution

The O.P.I.A.T.E Project: Outpatient Principles In Addiction Training and Education

Who should get naloxone?

- Overdose (current)
- Prior Overdose
- Illicit Opioids (i.e. heroin, fentanyl)
- Opioid Prescriptions (>50 MME)
- Interactions (i.e. Benzodiazepines)
- Drug Treatment (current or former)

For MME calculator and related tools, download: "CDC OPIOID Guideline" App

Patients can utilize the Illinois Helpline:

<https://helplineil.org/> 833-2FINDHELP

Pictured: Front and back of pocket card

- M1 students trained to screen for opioid use disorder and risk for overdose during low resourced ED shifts (Friday through Sunday, 2-10:30p and 10:30p-6a)
- Patients who screen positive are provided video-based education on naloxone utilization and naloxone kits at discharge

Need/Gap Addressed

- Consortium projects address leveraging the value-add role of the medical student
- Utilizing students in poor resourced environments coupled with Health Systems Science (HSS) education
- Generalizable strategies for education and assessment for sharing throughout the Consortium
- Opportunity for utilization in both UME and GME environment

Institutional Contact

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