QUALITY IMPROVEMENT

Clinical Process Improvement by Dr. Minjoung Go

Clinical Process Improvement (CPI) is a forum that provides continual learning and refinement of clinical decision-making skills. It takes a multidisciplinary approach, and the goal is to create a safe and collegial environment to generate thoughtful discussion. Through discussion, we hope participants will have the opportunity to review current evidence of pertinent clinical questions, understand challenges in a systems process, appreciate different perspectives in decision making, and learn key concepts in patient safety.

Our first CPI, a quarterly meeting, was held in October 2017. Dr. Jeffrey Ketchersid presented the first case—a patient with acute stroke. Stanford ValleyCare ICU, Neurology, and ED departments participated, and the meeting was successful. Our next CPI will be held in January, 2018. We plan to invite people from more departments to participate and contribute.

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Admissions/Consults/Transfers: Available 24/7

925-726-3001

Special points of interest:

PATIENT CARE
Hospitalist team continues strong LOS results even with increasing CMI

EDUCATION
Resident Rotation continues with multiple Stanford Internal Medicine Residents; 12+ PA student rotating through Stanford ValleyCare

SPOTLIGHT
Dr. David Svec named CMO of Stanford Health Care – ValleyCare Medicine.

Dr. Minjoung Go named Vice Chief of Medicine Department at Stanford Health Care-ValleyCare.
Let's go out there and have a fearless feedback session everyone!

I had the pleasure of attending the faculty development course led by Dr. Kelley Skeff and some of his students. It consisted of 6 sessions that focused on each of the educational categories, such as learning climate, control of session, feedback, etc.

It was an interactive experience that I shared with a compassionate group of palliative care fellows that made the sessions even more insightful. As our hospitalist group embarks on an active role in Stanford PA students’ education, I want to share some take home points on what I believe to be the most difficult to master but important categories of education: feedback. The word “feedback” often elicits a negative emotional response.

Effective feedback takes planning before the actual feedback. It begins with teachers knowing the specific standards at the learners’ level. This should be uniquely recognized for PA students, given most of us are familiar with only MD trainees. Second, there must be enough observation, or “evaluation” for the teachers to collect the data and assess the learner’s knowledge, skills, and attitude. Without enough observation, feedback based on an impression risks false labelling of a learner that may have a negative long-lasting effect. After sufficient “evaluation,” “feedback” is given as a description of learners’ actions without judgement on the learners’ themselves. Below are some pearls of effective feedback:

1. Establish an appropriate interpersonal climate and location for feedback
2. Establish mutually agreed upon goals at the beginning of teaching session
3. Elicit learner’s self-assessment to gauge learner’s insight and shape course of feedback. “How did that go for you?”
4. Reflect on observed behaviors by using specific examples and non-evaluative comments
5. Offer feedback soon after an observed task
6. Offer the right amount of feedback: only a few elements of information can be processed at any one time, especially under stress in both teachers and learners. It is often equated to “breaking bad news.” However, studies have shown that learners value feedback as a mark of good teaching and even perceive it as a top indicator of clerkship quality. What an important skill to master!

7. Attend to strong emotional responses to feedback: defensiveness, gratification, anger, etc.
8. Develop an action plan with learner to continue mutual goal achievement with your specific suggestions.

Let’s go out there and have a fearless feedback session everyone!

The Stanford ValleyCare Inpatient Physician Assistant Clerkship exposes students to hospitalist medicine. Our PA Students begin to develop the skills needed to accurately and efficiently assess, diagnose, and treat general medical conditions requiring hospitalization; while gaining an understanding of how to work in a community based academic care delivery system. They assist in care management, coordinating overall patient care by working closely with an interdisciplinary team to effectively care for patients during their hospitalization and provide for a safe transition at discharge. During this clerkship, PA Students improve upon their communication skills fostering effective communication with patients, families, colleagues, consultants, primary care physicians, and other allied health professionals. The Stanford ValleyCare Inpatient Physician Assistant Clerkship is meant to be a broad exposure to primary care in the hospital setting with the goal of building individual foundations of experience and knowledge in our students to which our patients will benefit from for generations.

More than twelve Stanford PA students completed the month-long rotation at Stanford ValleyCare this year.

Deconstruct the Fear of Feedback by Dr. Alice Cha

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Medical Mission in Haiti by Dr. Timothy Foeller

Our inaugural spotlight features Dr. Timothy Foeller. Dr. Foeller graduated from the University of Missouri at Kansas City School of Medicine and completed his residency at the Loyola University Medical Center in Chicago where he also served as chief resident. Before joining the Stanford Valleycare team, Dr. Foeller was a hospitalist at Elmbrook Memorial hospital in Milwaukee, Wisconsin, where he sat on the peer review committee and spent time teaching Marquette University students in the physician assistant program, as well as residents, that rotated through inpatient medical clerkships. Among his many roles at Stanford Valley Care, he is currently the director of our PA student teaching program.

Last September, Dr. Foeller and his wife, Megan, an OB-Gyn fellow at Stanford, travel to Haiti for an annual medical mission trip. Here he shares some photos from the trip.

Dr. Foeller setting up the operating room the day before clinic begins. The OR is set up in a corner of the complex on 3 wooden tables. The doctors typically will do several incisions of abscesses, set and cast broken bones, rarely deliver newborns, and other small procedures during their visit to Haiti.

Dr. Megan Foeller teaching a traditional birthing attendant class. Each year she teaches 20-25 traditional birthing attendants on basic safe delivery techniques, how to identify emergencies that require hospital evaluation. She also teaches basic neonatal care and lactation instruction to care for the neonates more effectively.

Dr. Foeller evaluating a man and his daughter in clinic. While there are many urgent, emergent conditions, much of the clinic is centered around primary care as well including HTN, arthritis pain, and well child checks.

Coming Soon

**Stanford ValleyCare Clinical Summer Internship (CSI)**
A 2-week medicine summer camp to launch summer of 2019

**Three Wishes**
Inpatient Palliative Care project to begin in spring of 2018