***North Carolina Chapter of the American College of Physicians***

***Educational Project Proposal: Update 2016***

**Title of educational project:** STAR (Safe Transitions Across caRe): A Resident Curriculum

**Name of Institution where project will be conducted:** Wake Forest School of Medicine

**Name of project leader:** Kirsten Feiereisel, MD and Nancy Denizard-Thompson, MD

**Project Summary:**

Hospital systems are being challenged to reduce readmission rates and improve transitions of care. In many instances, inpatient and outpatient care operate as separate silos without effective coordination of care and communication. As educators, it is essential that we provide residents with tools to improve their understanding of transitions of care. By shifting the paradigm of clinical medicine to an integrated continuum of care, the goals of care are shifted towards ensuring safe transitions from the hospital and reintegration of patients into their community and medical home. This project will offer an innovative curriculum that incorporates resident education at all stages of the transition.

Learning to transition patients safely across clinical domains is a critical component of patient care. Interns and residents will participate in STAR educational seminars which will be offered on several dates to accommodate all learners. The first STAR seminar will provide a brief introduction and simulates the inpatient discharge process using a discharge planning tool that enhances patient safety and trains residents on key elements of a successful discharge. The second STAR seminar will introduce a hospital follow-up prompt tool for use in clinic to inform residents about issues that may prevent readmissions and ensure that patients have safely transitioned to their home. The tools have a dual purpose of educating learners while enhancing patient safety. The tool is a pocket card that preceptors and residents will use as a prompt to identify key transitions of care pitfalls and omissions. One side of the tool is for hospital interdisciplinary discharge planning and the other side is focused on the hospital follow-up visit.

Faculty need to be proficient in engaging and training residents as well therefore similar seminars were offered to faculty who attend on the general internal medicine teaching services and/or precept in the outpatient continuity clinics .

Brief education sessions will introduce the discharge planning tool to the other key members of the inpatient interprofessional team, specifically key nursing personnel, case managers and clinical pharmacists. Knowledge of the important issues to address with discharge planning allows these team members to participate more actively and collaboratively in the discharge planning process.

**Project Update:**

We presented two posters at the Society of General Internal Medicine national meeting. We were approached by Mark Linzer, Director of the Division of General Medicine at Hennepin County Medical Center in Minneapolis, who shared our work with his team working on transitions of care. We presented our workshop “It’s bigger than just the visit: A resident and faculty ambulatory transition of care curriculum” at the Association of Program Directors in Internal Medicine (APDIM) annual national meeting in April 2015. We used the allocated $1200 for travel and dissemination of our work. This workshop received excellent reviews from faculty in attendance. Following our presentation we were invited to submit a manuscript on our workshop for the AAIM Insight quarterly publication. This is published in the current issue 13:4 (see attached). Interest has been expressed in having us present our work at Internal Medicine Grand Rounds at Moses Cone. We used additional funds for a faculty development workshop in summer 2015.

**Next Steps:**

We will continue to hold training seminars for interns, residents and faculty at our institution and continue to use the funds to support these events. We will be using funds to complete the chart review and data analysis regarding clinical documentation. We will be developing our second manuscript to submit for publication.