



Improving Continuity of Care in Internal Medicine Residency Clinic

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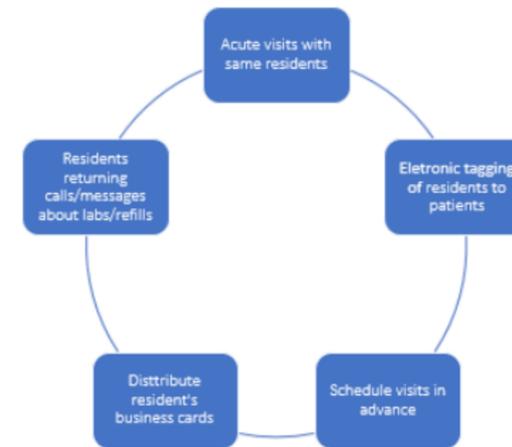
Background

- Ambulatory training is an essential part of an Internal Medicine (IM) Residency Program.
- American Board of Internal Medicine (ABIM) requires residents to maintain continuity of care for a cohort of patients during their 3 years of training.
- Quality of care surveys often show significant dissatisfaction among the patients due to inability to see the same resident primary care provider (PCP) regularly.
- The major reasons include the inability of residents to attend ambulatory clinics during critical care, inpatient and night medicine rotations, failure of the patients to comply with resident's assigned clinic days and scheduled visits, and the acute visits between the scheduled appointments.
- This makes it hard for the patients to identify with their resident PCP. Our quality improvement project aimed at evaluating the patient satisfaction level after improving continuity of care with same resident PCP.

Methods

- This is a retrospective study evaluating the percentage each patient was seen by same resident PCP.
- Over 7 years, the following initiatives were introduced with the goal of increasing the continuity of care by: (1) electronic tagging of the residents to their patients via the electronic medical record (EMR) system, (2) developing a system for acute visits in between the scheduled visit with same resident, (3) encouraging residents and patient to schedule visits in advance, (4) distributing resident PCP business card among the patients, and (5) ensuring resident PCP are more involved in returning phone messages, reviewing labs, and providing refills.
- The percentage was then compared with the satisfaction level as assessed by the patient surveys at 6 months, 1- year and 7 years period. The data was analyzed using Bonferroni procedures.

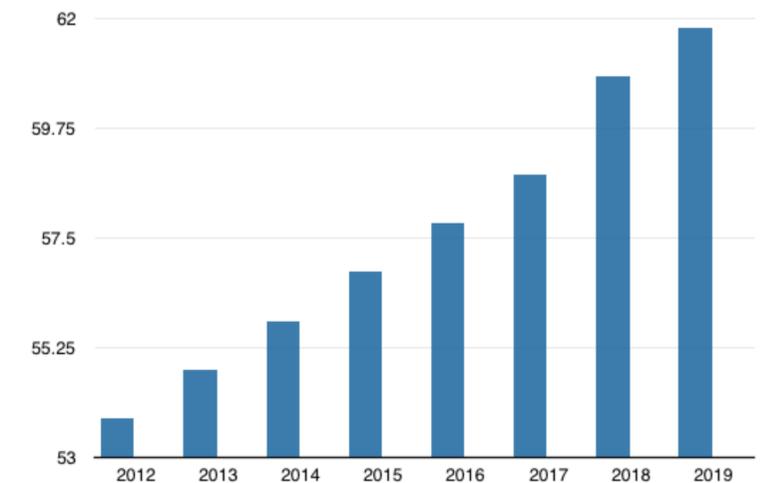
Methods



Results

- We analyzed 1100 clinic visits between 2012 and 2019.
- The results showed an increase in patients being seen by the same provider from 53.8% to 61.8% over the 7 years period after deploying the initiatives. This was statistically significant with a P-value of 0.004.
- This increase in percentage correlated with significant improvement in patient satisfaction regarding waiting time, politeness and communication by the doctor, and evaluation by the doctor as demonstrated by the patient survey.

Results



Conclusions

- We conclude that patient's satisfaction as well as resident fulfillment increase by improving the continuity of care with same resident PCP.
- This continuity of care enhances the patient-resident relationship that is fundamental for providing adequate primary care service.