An Innovative Population Health and EMR Curriculum

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INTRODUCTION

- Health systems are investing in informatics to improve patients' health and align with quality focused reimbursement models
- Resident physicians need training to use these Electronic Medical Record (EMR) tools
- Teaching these skills in resident primary care clinic is challenging due to limited time
- We developed and implemented a curriculum to address this gap

OBJECTIVES

- Use the EMR to identify and address population health care gaps at a clinician panel level
- Develop and assess resident skills in practicebased learning and systems-based practice through a novel longitudinal multi-site population health curriculum











We implemented an innovative EMR-based population health curriculum.

Identify Need	 ACGME requirements Health system metrics Interest in EMR Skills
Build Team	 Health system leaders Residency program leaders Faculty preceptors Chief Resident
Decide Targets	Health system prioritiesResident learning needs
Implement	 Identify provider panel patients in need of intervention Use EMR tools to address gap (portal messages, letters, orders) Guides included teaching points
Analyze	 Resident surveys EMR data Patient outcomes



RESULTS

- Curriculum introduced to over 150 residents
- Initial survey response indicated most residents (81%, n=21) were not comfortable with panel management prior to curriculum

DISCUSSION

- Residency program support was critical to integration and legitimacy of curriculum
- Health system leaders supported implementation. System priorities aligned with resident learning needs, e.g., hypertension, diabetes, and cancer screening
- Asynchronous curriculum allowed for flexibility in delivery but limited resident engagement

NEXT STEPS

- Deliver and analyze end-of-year survey assessing resident confidence in EMR skills and perceptions of the curriculum
- Narrow number of target metrics to focus efforts and reinforce concepts
- Improve resident engagement by integrating into clinic flow
- Evaluate impact on patient outcomes at clinic and provider level



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