



Practice Management Boot Camp

Grant Family Medicine Residency
Program

Columbus, Ohio

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OBJECTIVES

- ③ ... identify core components/obligations of the Program Requirements for training in the Management of Health Systems.
- ③ ... review ideas for innovation in the “Practice Management” curriculum.
- ③ ... discuss methods to assess competency within the “Practice Management” curriculum.

BUT WHAT ABOUT THE GOAL?

- ◎ Lots of “Practices” to choose from
- ◎ The “Practice” being prepared for is constantly evolving
- ◎ This is it !
 - ◎ Future of the resident – personal career
 - ◎ Future of Family Medicine
 - Information Systems, Team Approach, Quality and Safety, Redesigned Offices, Comprehensive Practice...

... identify core components/obligations of the Program Requirements for training in the Management of Health Systems.

Objectives

GENERAL ORDERS

ACGME Program Requirements

Management of Health Systems

- ① 100 hours
- ① management and leadership instruction
- ① didactic and practical settings

ACGME PROGRAM REQUIREMENTS

Key Points

- ⊙ Residency must have strategies to demonstrate that residents have mastered skills
- ⊙ FMC as the primary site for this teaching
- ⊙ Individual and practice reports (productivity, financial, patient satisfaction, clinical quality)
- ⊙ Monthly attendance of business meetings
- ⊙ Participation in projects to improve the quality of care and service delivered

ACGME PROGRAM REQUIREMENTS

⊙ Management Curriculum

- ⊙ Billing, Budget, Staffing and Scheduling
- ⊙ Customer satisfaction
- ⊙ Determining value
- ⊙ Clinical quality
- ⊙ Tort liability
- ⊙ Alternative practice models
- ⊙ Computers
- ⊙ Employment law

⊙ Leadership Curriculum

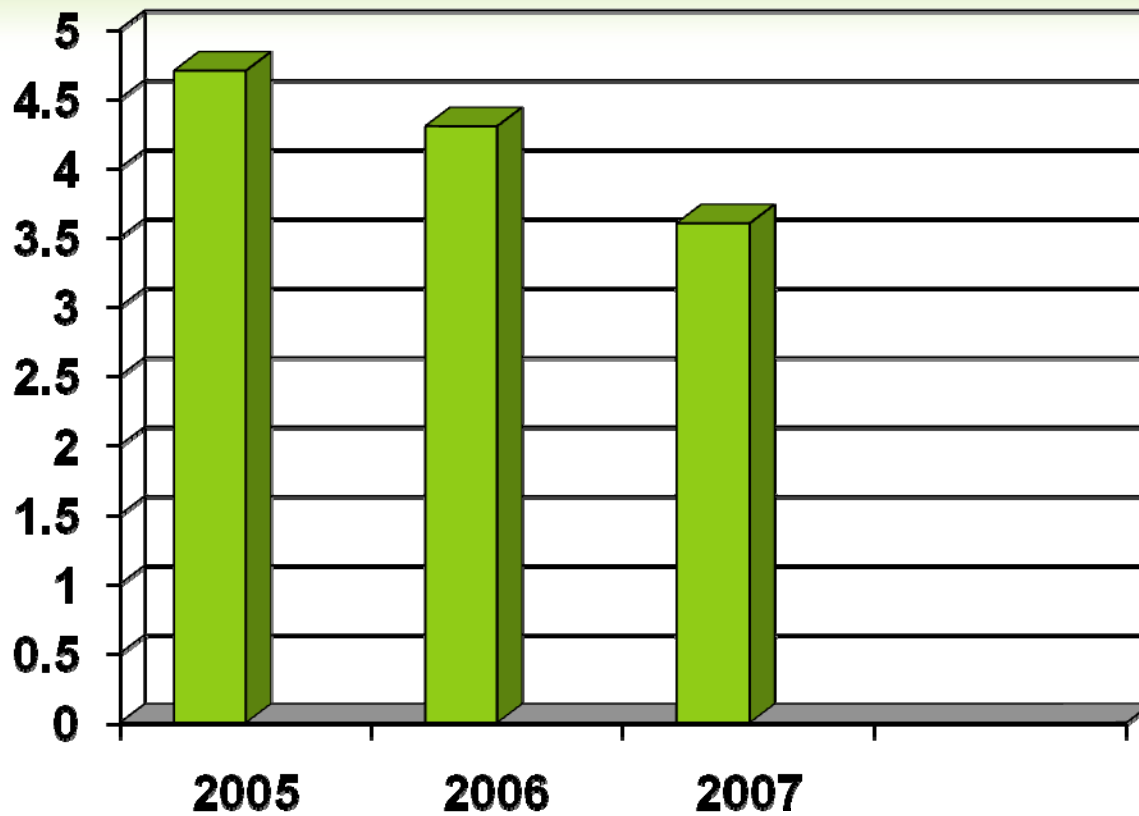
- ⊙ Clinical practice
- ⊙ Hospital medical staff
- ⊙ Professional organizations
- ⊙ Community/advocate for public health

FAILED OPERATIONS

- ◎ Kellerman R. Practice Management Training in Family Practice Residencies. 1983.
 - “The majority of third year family practice residents graduating in 1980 felt inadequately trained in nearly all aspects of practice management.”
- ◎ Frank RA. Practice Management Education –Are Residency Programs Properly Preparing Physicians for the 21st Century? 1993.
 - “Several surveys indicate that third year physician residents and recent graduates felt that their training in practice management skills was inadequate and that they felt unprepared in this area.”
- ◎ Rose EA et al. 1999.
 - 18% programs provided less than the required 60 hours

CASUALTIES ON OUR HOMEFRONT

Year End Evaluations



THE COMBAT CONTINUES -

- ⦿ Friendly Fire

- ⦿ RPS Criteria for Excellence

- ⦿ The Outcomes Project

- ⦿ ACGME Competencies

- ⦿ Do the residents achieve the learning objectives set by the program?
 - ⦿ What evidence can the program provide that it does so?
 - ⦿ How does the program demonstrate continuous improvement in its educational processes?



OUR BATTALION

- ⊙ Program Overview
 - ⊙ “Community Based” in Columbus, OH
 - ⊙ 12-12-12 (usually)
 - ⊙ “Unopposed”
- ⊙ Curriculum Overview
 - ⊙ 13 four-week rotation blocks
 - ⊙ Some Integrated Curriculums (Practice Management, Research...)

PREVIOUS CAMPAIGNS

- ⊙ Prior “Practice Management” Curriculum
 - ⊙ Limited Orientation topics
 - ⊙ Coding sessions during PGY 1 rotation.
 - ⊙ Center meetings
 - ⊙ Reading list
 - ⊙ Individual meetings with recruiter
 - ⊙ PGY 2 Didactic sessions (1/2 day/month)
 - ⊙ Variable interest
 - ⊙ Competing responsibilities
 - ⊙ Challenging environment

ABORT

- ③ Increasing requirements and decreasing time
- ③ Prior poor success
- ③ Transitioning faculty

... review ideas for innovation in the “Practice Management” curriculum.

Objectives

OPERATIONS

- ◎ Year 1
 - ◎ Orientation (Medical Records, IT/EMR, Risk Management)
 - ◎ Coding Sessions (during Ambulatory block)
 - ◎ Monthly Didactics (Legislative Advocacy, EMR issues, Preparing for a Deposition, Patient Education)
 - ◎ Monthly Center Meetings (productivity, office finances, office flow issues, coding, EMR usage)

OPERATIONS

- ⊙ Year 2
 - ⊙ Retreat Topics (CV prep, Practice Options)
 - ⊙ August Session (QA- PPM/ABFM)
 - ⊙ Monthly Didactics
 - ⊙ Center Meetings

OPERATIONS

- ⊙ Year 3
 - ⊙ Retreat (CV, Job Search, Committees)
 - ⊙ Support Group (License, Boards, Leadership)
 - ⊙ Monthly “Post Geriatrics” Sessions (Cash Control, Small Business Banking relationships, Office design, Medical Staff responsibilities, Maintenance of Certification, P4P)
 - ⊙ Monthly Didactics
 - ⊙ Center Meetings
 - ⊙ QA Project – METRIC

PRIORITY MISSION

- ⦿ Week Intensive

 - “Boot Camp”

 - ⦿ Week long Practice Management course
 - ⦿ “Faculty” run
 - ⦿ Reading list covering topics, mostly from Family Practice Management

BOOT CAMP

- ① Day 1 - “Welcome to your life”
- ② Day 2 - “Money, Money, Money, Money ”
- ③ Day 3 – “The Honeymoon is Over ”
- ④ Day 4 – “Being in Charge”
- ⑤ Day 5 – “If I Had Only Known”

BOOT CAMP

Strategic Planning

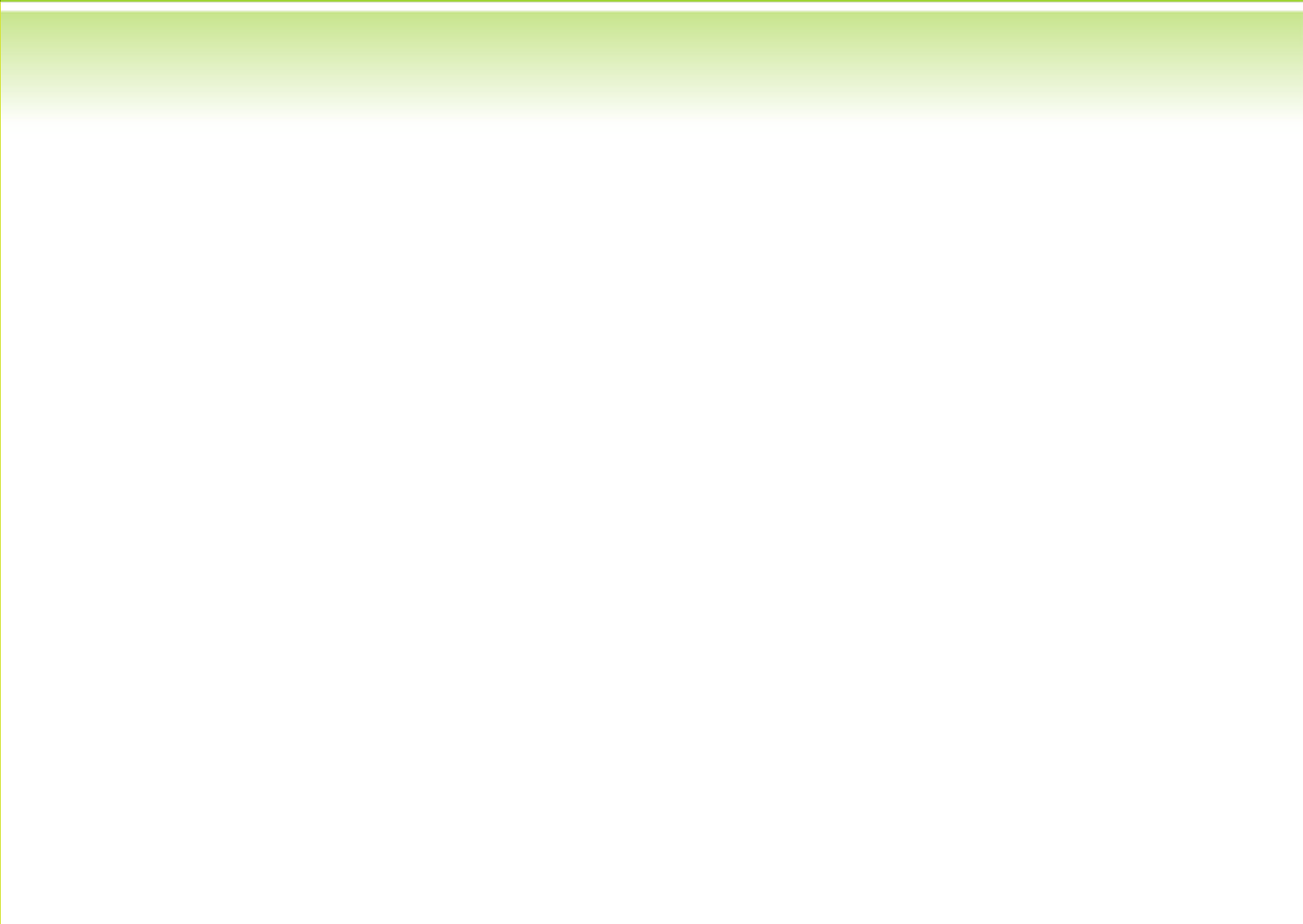
- ① Invite spouse/ significant other to money lectures
- ① Bring food and drinks
- ① Themes
- ① Invite favorite former residents
- ① PM Coordinator
- ① Contacts

ENLISTED LIFE

- ⊙ AM lectures/panels
- ⊙ Lunch together
- ⊙ PM clinics/office/post call/reading time
 - 2-3 office/clinic half days
 - 1 post call day
 - 2 reading half days- guaranteed

LOGISTICS

- ⊙ August- week/5 days
- ⊙ No Vacations/Conferences
- ⊙ Any resident with graduation date in the next 18 months
- ⊙ Accounts for 28 hours
 - Attendance logged
 - Reading List time
- ⊙ Office 2-3 half days that week
- ⊙ Significant time from Practice Management coordinator/staff



...discuss and review methods to assess competency within the “Practice Management” curriculum.

Objectives

GOALS AND OBJECTIVES COMPETENCY BASED

- ③ How do you really know if they are competent now?

GOALS AND OBJECTIVES COMPETENCY BASED

- ① Patient Care
- ① Medical Knowledge
- ① Practice Based Learning and Improvement
- ① Systems Based Practice
- ① Professionalism
- ① Interpersonal and Communication Skills

GOALS

- ① Awareness of opportunities and understanding of career choices
- ① Understanding of the healthcare system and the physician's roles
- ① Preparation to successfully enter the workforce and assume leadership roles in the practice, system, community
- ① Preparation to practice productively and with high quality, continuously evaluating and improving their practice
- ① Awareness of responsible and ethical practice and understanding of the legal system as it relates to the medical community

ASSESSMENT METHODS

- ③ Patient Care
 - Responsibility for Continuity visits, practice meetings and procedure documentation for credentialing
- ③ Medical Knowledge
 - Lecture attendance and “test”
- ③ Practice Based Learning and Improvement
 - EMR proficiency, ABFM –PPM, QI/A project

ASSESSMENT METHODS

- ③ Systems Based Practice
 - Billing and coding proficiency, compliance with system processes
- ③ Professionalism
 - Conference and committee attendance, “patient satisfaction”
- ③ Interpersonal and Communication Skills
 - Written and verbal communications relating to job search

BEST TACTICS...

OUR A-TEAM

- ◎ Curricular study
 - regulations and recommendations
 - resident needs
 - program capabilities
- ◎ Competencies as guidelines for curriculum development
 - Attempts at objective assessment measures
- ◎ Maintain an integrated curriculum with more focus on key components at specific times in residency
 - Boot Camp
 - Center Meetings
 - R3 Monthly sessions
 - QA/QI Projects

IN THE RESERVE(S)

- ⊙ Next Steps
 - ⊙ Program Improvement Methods (currently just year end/alumni surveys)
 - ⊙ Evaluations based on “competence” vs. completeness
 - ⊙ Faculty review of CVs
 - ⊙ Worksheets to check progress
 - ⊙ Portfolios

VICTORIES FOR ALL...



THANK YOU

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