Peer assisted learning (PAL) project for intern development

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A STRATEGY TO IMPROVE PRE-ROUN丁DING COMFORT & EFFICIENCY FOR INTERNS

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Problem Identification

A common complaint among intern and upper level house staff is the lack of training interns receive regarding efficiency of the pre-rounding process and training with the Electronic Medical Record (EMR). Additionally, the ward teams are often burdened with work and find it difficult to provide extra support to new or struggling team members.

Background

Little systematic review exists regarding the impact of EMRs on medical education. A time motion study found that internal medicine interns spent only 12% of their time direct patient care while 64% of their time was indirect patient care, including 40% time in front of the computer. This was a significant change from studies prior to 2003, and implementation of EMRs is likely one contributing factor. In our experience, there is significant variation in resident practices and efficiency which has become more apparent in the era of new duty hour requirements. In one study, use of structured EMR-generated rounding reports was reported to save 44 minutes per day.

Innovation

Senior residents identified as highly efficient and familiar with the EMR collaborated with the chief residents to develop a series of "best practices" templates outlining efficient pre-rounding techniques. Senior residents on electives were then paired with interns new to an inpatient ward or critical care service to pre-round for the first two days of the rotation. This provided a supportive environment for teaching how to implement the efficient techniques. This Peer Assisted Learning (PAL) provides opportunity for much needed one-on-one training for new interns without placing an undue burden on the rest of the team.

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Background

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Discussion

Post-intervention voluntary questionnaires showed the majority of interns felt slightly or very uncomfortable with the pre-rounding experience before the intervention. After participation in the PAL program all interns felt comfortable with pre-rounding process, with an average 40 percent improvement on a 5-point Likert scale (figure A). A similar pattern was seen with interns' perceptions of efficiency, whereby after the intervention, 100 percent of interns rated themselves as either efficient or very efficient, also reflecting a 40 percent increase on a 5-point Likert scale (figure B). Before the intervention, all interns rated their pre-rounding quality as either average or below. Post-intervention, 75 percent of interns rate their pre-rounding quality as average or above. After the intervention, there was a shift of the perceived pre-rounding quality to above average (figure C). Another area of specific improvement was reflected in intern understanding of the EMR. Before the PAL intervention, 75 percent of interns described their familiarity with the EMR as below average, but after one-on-one training with a peer, all interns described their understanding of the EMR as average or above with 50 percent considering their familiarity as above average or high quality, representing a 20-40 percent overall improvement (figure D).

Results

Post-intervention voluntary questionnaires showed the majority of interns felt slightly or very uncomfortable with the pre-rounding experience before the intervention. After participation in the PAL program all interns felt comfortable with pre-rounding process, with an average 40 percent improvement on a 5-point Likert scale (figure A). A similar pattern was seen with interns' perceptions of efficiency, whereby after the intervention, 100 percent of interns rated themselves as either efficient or very efficient, also reflecting a 40 percent increase on a 5-point Likert scale (figure B). Before the intervention, all interns rated their pre-rounding quality as either average or below. Post-intervention, 75 percent of interns rate their pre-rounding quality as average or above. After the intervention, there was a shift of the perceived pre-rounding quality to above average (figure C). Another area of specific improvement was reflected in intern understanding of the EMR. Before the PAL intervention, 75 percent of interns described their familiarity with the EMR as below average, but after one-on-one training with a peer, all interns described their understanding of the EMR as average or above with 50 percent considering their familiarity as above average or high quality, representing a 20-40 percent overall improvement (figure D).

References


Participant Comments

• “Great program, really helpful for me to learn the VA system.”
• “I think the biggest benefit was in seeing how to efficiently find things in the EMR. A lot of time can be lost looking for simple pieces of information without this knowledge. The 2 day format is really good too. This way, the senior resident can show the intern where to find things one day and then the intern can have a chance to practice the process while having someone there for back-up to answer any questions...”
• “The efficient pre-rounding handout is pretty helpful and nice to have to refer to ...I’m more of a visual learner so nice to have something to refer to...”