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Title

Student Interns Save Time of Providers Caring for Geriatric Patients at Home

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Background

UCSF Care at Home (CAH) serves medically complex, homebound older adults in San Francisco. This project evaluated how CAH could deploy interns to assist with GUIDE assessments and flu vaccinations.

- GUIDE = GUIding an Improved Dementia Experience
- GUIDE requires pre-visit completion of the Zarit Burden Interview (ZBI)
- ZBI assessments take about 20 minutes
- Incomplete surveys can delay enrollment and consume valuable provider time

The Patient Support Corps (PSC) trains undergraduates to work as interns with UCSF care teams. Interns work on special projects, backlogs, seasonal surges, and quality improvement. Eighty percent of students come from populations facing income and opportunity barriers. Interns work for credit or a stipend.

Project Goals

The primary goal was for interns to increase pre-visit ZBI completion rates. They did this by calling caregivers and either sending a link or administering the ZBI verbally over the phone. Interns documented completed ZBIs in the electronic health record and routed the score to providers.

Secondarily, interns aimed to prevent wasted provider time during home flu vaccination visits. They did this by contacting patients in advance to confirm, cancel, or reschedule appointments before the scheduled visit.

PROBLEM STATEMENT: The UCSF Care at Home program serves a medically complex, homebound geriatric population that requires substantial care coordination. When patients don’t complete required pre-visit assessments (the Zarit Burden Interview), providers may need to administer the survey during the appointment, reducing time available for direct patient and caregiver care. Secondarily, during flu season, Care at Home manages a surge of work related to home flu vaccinations. Without a process for confirming, canceling, or rescheduling geographically planned home visits, providers may get to the appointment only to have the patient decline or cancel, which wastes provider time.

INTERNS COMPLETED 71 OF 85 (83%)
OF CAREGIVER BURNOUT ASSESSMENTS
AND CONFIRMED 137 of 159 (86%) FLU VACCINES
BEFORE PROVIDER VISITS, AVOIDING WASTED TIME

Project Plan and Intervention(s)

Primary Project: GUIDE Program Support
Our hypothesis was that deploying interns would increase pre-appointment ZBI completion. From 3/25 to 4/26, care coordinators and physicians trained 7 interns on ZBI.

- Seven interns called or sent MyChart messages to caregivers
- Interns administered ZBIs and documented results in the EHR
- Interns also routed the ZBI score to providers via the EHR
- Providers scheduled caregiver appointments, knowing ZBI was complete

Secondary Effort: Flu Vaccination Support
During flu season, our hypothesis was that interns could capably call patients to confirm, cancel, or reschedule vaccination appointments.

- From October to December 2025, 11 interns contacted geriatric patients using a master schedule organized by patient geography.

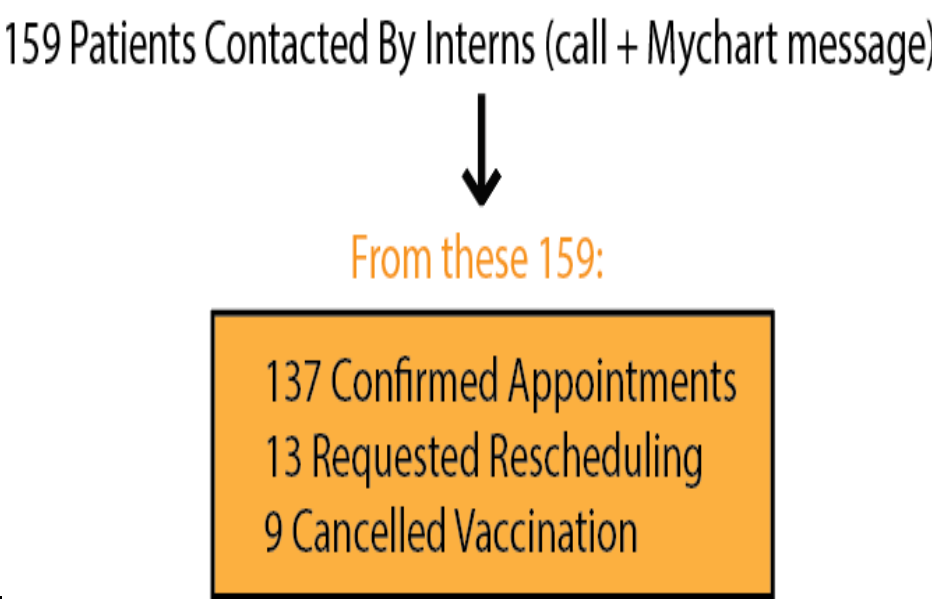
Project Outcomes, Results & Impact

Primary Project Outcomes:
The CAH nurse manager provided interns with a list of GUIDE-enrolled caregivers identified through Electronic Health Record data.

- Between March 2025 and April 2026, interns contacted 71 of 85 (83%) GUIDE caregivers and administered the ZBI prior to the provider home visit

Secondary Effort Outcomes:

- During the 2025 flu season, the CAH team created a master schedule of 235 geriatric patients for five providers to complete home flu vaccinations. From 8/25 to 12/25, interns contacted 159 patients (67%), absorbing this workload to confirm vaccination appointments.
- Clinical outcome: Of 159 patients contacted, interns secured 137 confirmed visits; 13 were rescheduled and 9 declined. Providers ultimately vaccinated 134 patients (98% of confirmed visits), with 1 no-show and 2 day-of cancellations.



Conclusions, Next Steps, & Lessons Learned

Conclusions: This Care at Home and Patient Support Corps collaboration integrated interns into structured caregiver assessment and preventive care workflows. Student support improved care for patients and caregivers, and addressed a seasonal surge in workload related to a flu vaccination campaign.

Next Steps:

- Interns will aim to further improve on the rate of caregiver burnout assessments completed pre-visit (currently 83%)
- For the flu campaign, interns will aim to contact a higher proportion of the geriatric home-bound patient population (currently 67%)

Lessons Learned: Student support improves care for patients and caregivers by increasing Care At Home capacity for special initiatives (e.g. pre-visit completion of caregiver burnout assessments) and seasonal surges. Students acquired skills related to patient communication, professionalism, scheduling, and software (APeX/EPIC electronic health record, Jabber telephony, Excel, Research Electronic Data Capture).