## **UC** Irvine

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#### **Title**

Primary Palliative Care Boot Camp Offers Just-in-Skill Building for Emergency Medicine Residents

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#### **Author**

Cooper, Julie

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2/3 of our graduates choosing to pursue fellowship. Medhub was used to collect resident written comments regarding the rotation. Feedback is uniformly positive, with residents stating that "publishing never looked so easy!"

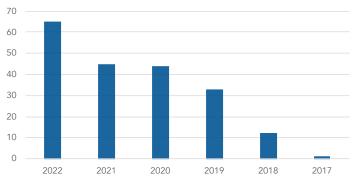


Figure. Number of residency publications by year.

#### Primary Palliative Care Boot Camp Offers Just-in-Skill Building for Emergency Medicine Residents

Julie Cooper

Introduction/Background: Emergency medicine residents routinely care for seriously ill patients. While Hospice and Palliative Medicine is a subspecialty of EM, the term "primary palliative care" is used to describe skills that are used by clinicians caring for seriously ill patients. Previous research has defined the skills most important to EM training but published curricula are lacking. We developed a "just in time" 4-week palliative care boot camp to teach PGY2 residents primary palliative care skills.

**Educational Objectives:** Learners will be able to: 1) define primary palliative care, identify patients with palliative care needs, initiate hospice evaluation 2) define the language of palliative care, 3) describe trajectories of life limiting illness, 4) describe the role of the interdisciplinary care team, and 5) use a talking map for goals of care conversations.

**Curricular Design:** Three weeks are a didactic curriculum with a content expert and address immediate questions and allow residents to share their experiences. The fourth week is a skills-based communication session focused on goals of care conversations. Table 1 shows the high yield topic breakdown.

**Impact/Effectiveness:** 77% residents reported prior communication skills training (at our institution). All learners "agreed" or "strongly agreed" that the objectives were met. For the communication session the majority of learners reported improved self-assessed confidence.

An advantage of this curriculum is that concentrated approach allows for integration of new skills when the skills are most

utilized. Limitations include that residents unable to attend miss the educational opportunity and faculty who have not had this education are not able to reinforce the concepts clinically.

As the role of primary palliative care in EM becomes better defined there will be a need to integrate these skills and concepts into all EM residencies and the boot camp format has proven a valuable educational tool

Table 1.

Hour	Topic	ACGME Milestones	Objectives	Format
1	Intro to Primary Palliative Care in Emergency Medicine	System navigation for patient centered care	Define primary palliative care and identify common ED presentations of patients with unmet palliative care needs	Small Group Lecture
		Physician role in healthcare systems	Define Advance Care Planning, Goals of Care, Code Status and Treatment Limitations and describe how these are codified in legal and medical documents	
			Interpret a POLST form and describe its use in acute care settings	
2	Prognosis and Trajectory	Diagnosis Treatment and clinical reasoning	Describe four common trajectories of life limiting illness  Define prognosis and describe 2 strategies to assess	Case Based Lecture
3	Chaplain Chat	System navigation for patient centered care	prognosis in ED patients with serious illness  Describe the role of the chaplain in the interdisciplinary care of seriously ill patients in the ED	Guest lecture
		Interprofessional and team communication		
4	Non Pain Symptom Management	Pharmacotherapy  Diagnosis, treatment and clinical reasoning	Choose appropriate first and second line treatment for seriously ill patients experiencing nausea and vomiting, dyspnea, or constipation (including opiate induced constipation) in the ED	Case based small group learning
5	Ask a Consultant	Interprofessional and team communication	Describe the role of the HPM clinician in the care of seriously ill patients in the hospital  Understand the role of HPM consultation in the emergency department	Case based guest lecture
6	Intro to Hospice	System navigation for patient centered care Physician role in healthcare systems	Describe the scope of hospice services and the settings where it can take place  Identify patients who may qualify for hospice and how to initiate a hospice evaluation	Guest lecture
			Provide goal concordant care to patients enrolled in hospice who present to the ED	
7-10	VitalTalk* Mastering Tough Conversations	Patient and family centered communication	Practice using a talking map for goals of care conversations with a simulated patient	Small group skills based practice

\*VitalTalk is a nonprofit that teaches serious illness communication skills using nationally trained facilitators.

# 9

#### Social Determinants of Health Patient Care Reflection in the Emergency Medicine Clerkship

Gabriel Sudario, Alejandro Aviña-Cadena, Alexa Lucas, Sangeeta Sakaria

**Introduction/Background:** Curricular interventions in social determinants of health (SDH) are often sporadic,[1]