

## **Today's Host**



@Maya\_Michigan

Maya M. Hammoud, MD, MBA

Senior Advisor, Medical Education Innovation American Medical Association

Professor and Associate Chair for Education Obstetrics and Gynecology University of Michigan Medical School





Association of American Medical Colleges 655 K Street, NW, Suite 100, Washington, DC 20001-2399 T 202 828 0400 aamc.org

March 17, 2020

#### Guidance on Medical Students' Clinical Participation: Effective Immediately

essential. Recognizing these extraordinary circumstances, starting immediately, the AAMC strongly supports our member medical schools in placing, at minimum, a two-week suspension on their medical students' participation in any activities that involve patient contact.

teaching hospitals work to address the steadily mounting challenges, including balancing the demands of clinical care with those of education, collaboration across all institutions is essential. Recognizing these extraordinary circumstances, starting immediately, the AAMC





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March 30, 2020

Interim Guidance on Medical Students' Participation in Direct Patient Contact Activities: Principles and Guidelines

Guidance: Unless there is a critical health care workforce (HCW) need locally, we strongly suggest that medical students not be involved in any direct patient care activities for the next two weeks, through April 13, 2020. The primary goals of this guidance are bending the curve for the public health of North America, conserving limited PPE supply to keep HCW and patients safe, and maintaining public and HCW safety given current testing availability.





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#### March 30, 2020

- Current medical students are students, not employees. Although they are on a path to becoming licensed MDs, they are not yet MDs.
- Medical students' participation in direct care of patients should be voluntary, not required.
- To ensure patient and student safety, students must always be appropriately supervised by faculty and other health professionals acting within their scope of practice.
- Opportunities to volunteer in direct patient care activities should be offered to students
   only if there is a critical HCW need for them to do so.
- The medical school should ensure that student volunteers are fully trained (or retrained)
  for whatever specific clinical roles they are asked to assume in the direct clinical care of
  patients.



# How hundreds of medical students are staying useful during COVID-19

By WILL CALLAN . 9 HOURS AGO









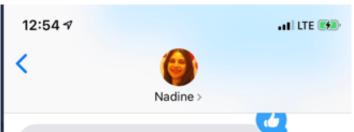


UM medical students sort through PPE at the hospitals' donation center on Plymouth Rd.

CREDIT ALI HAMMOUD, UNIVERSITY OF MICHIGAN MEDICAL SCHOOL

When hospital rotations were placed on hold due to the COVID-19 pandemic, many of Michigan's third- and fourth-year medical students wondered how they could stay useful.

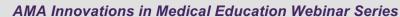
Within a few days, a handful of studentled volunteer groups popped up around the state, assisting medical workers and community members with tasks like mask-collection, childcare and food delivery.

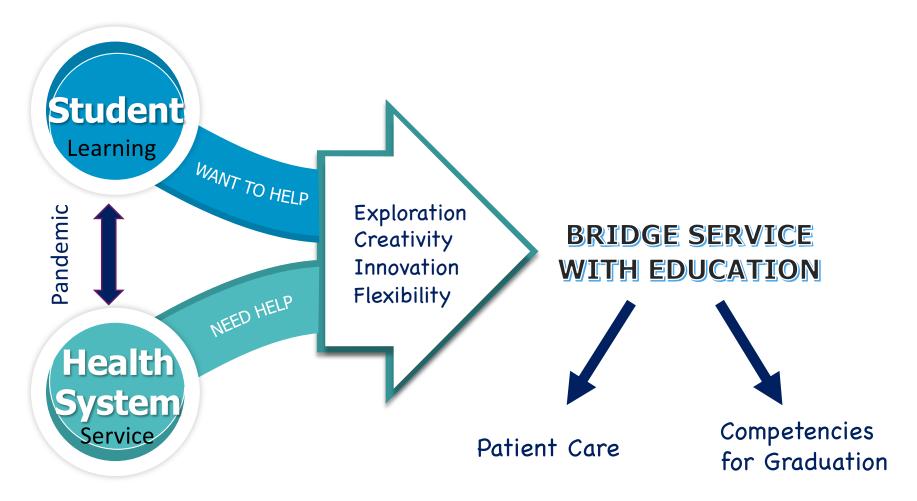


I am signed up to give blood on Monday, I signed up to help run the phone lines for the hospital, and I just signed up to help be a part of the Response Corps set up by my classmates.

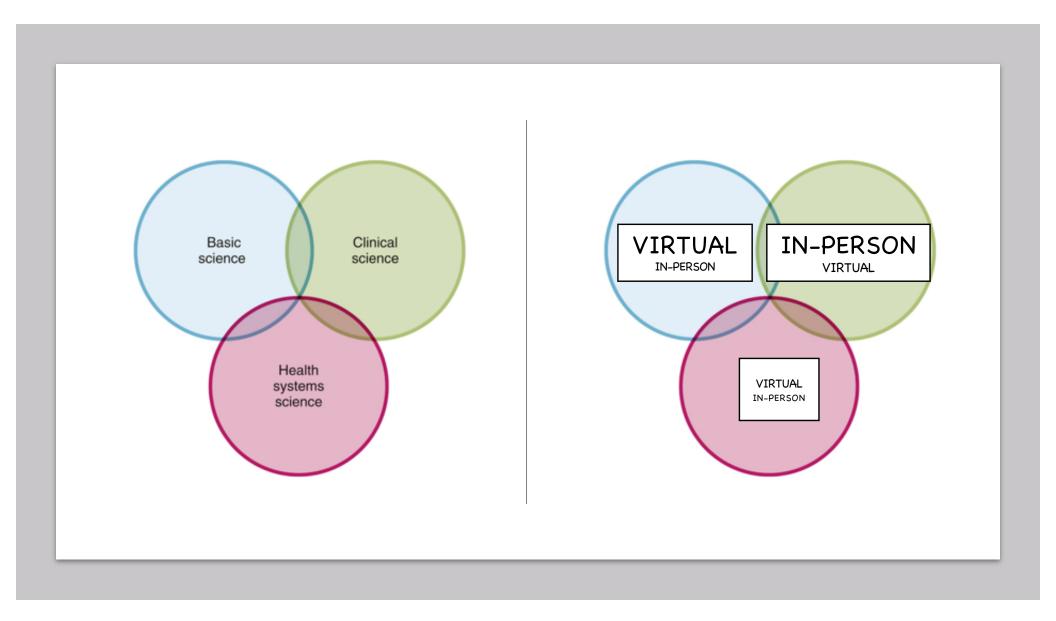
I finally feel like I have purpose again!

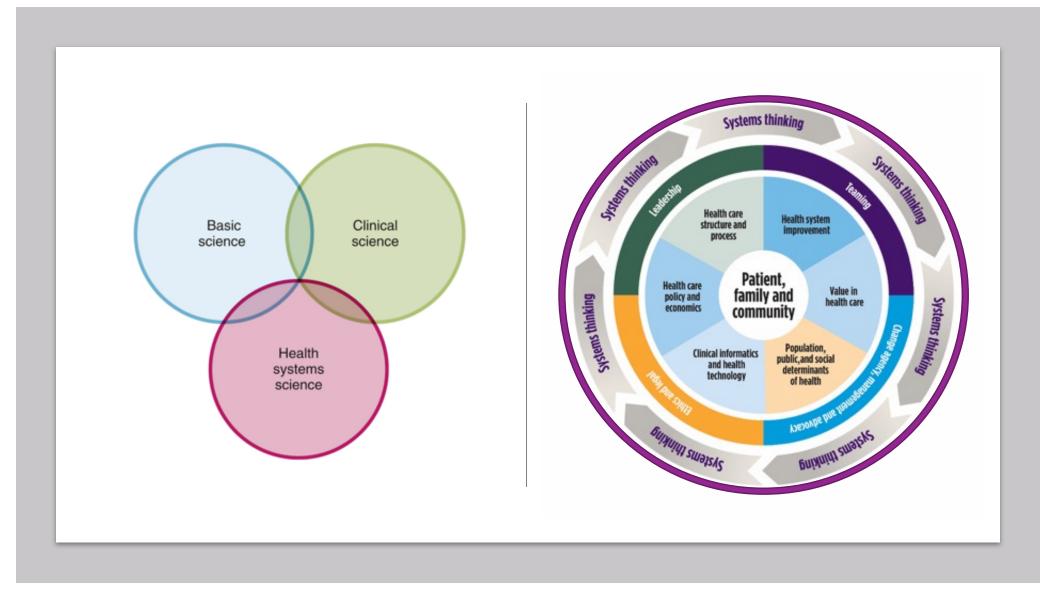












# Objectives



Describe the concept of value-added roles and how this differs from traditional student roles



Consider alternative student activities that develop competency in health systems science



Create alternative student activities that develop competency in discipline-specific clinical skills



Develop a process for co-producing learning opportunities (a) between learners and faculty and (b) between your medical school and the affiliated health system(s)





Susan Carlson, BSBA

Medical student, Class of 2021

University of Michigan Medical School



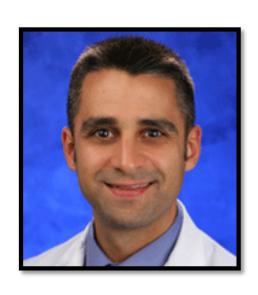


Catherine Havemann, BA

Medical student

Vanderbilt University School of Medicine





Jed D. Gonzalo, MD, MSc

Associate professor, medicine and public health sciences

Associate dean, health systems education, Penn State College of Medicine





Kimberly D. Lomis, MD

Vice President

Undergraduate Medical Education Innovations

**American Medical Association** 

@KimLomisMD





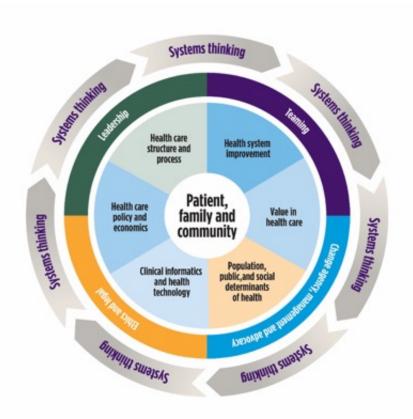
# AMA Innovations in Medical Education Webinar Series Value Added Roles

Jed Gonzalo MD MSc
Associate Professor of Medicine and Public Health Sciences
Associate Dean for Health Systems Education
Penn State College of Medicine

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#### Health Systems Science and Value-Added Medical Education



#### **Value-Added Medical Education**

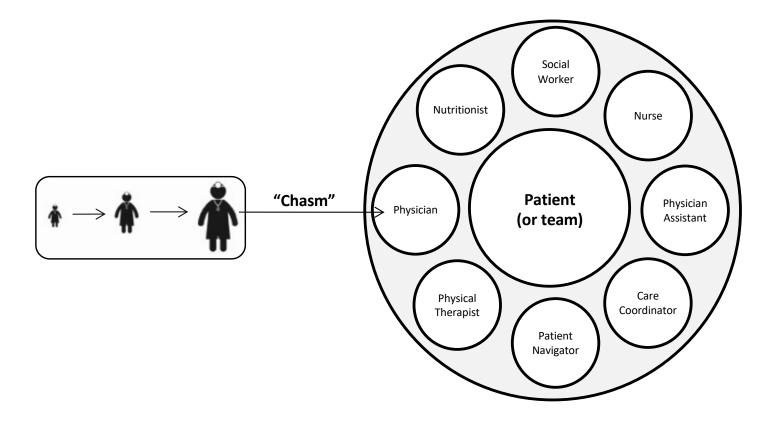
"Experiential roles that can positively impact individuals and population health outcomes, cost of care, or other processes within the healthcare system, while also enhancing student competency in Clinical or Health Systems Sciences."

Direct Patient Care					
History-taking					
Evidence-based medicine					
Patient education/advocate					
Value chief					
Care Extenders					
Clinical process extenders					
Patient navigator					
Safety analysts					
QI team extenders					
Population health managers					
Systems/Research Projects					
"Systems" Projects					

Gonzalo JD et al. Educating for the 21st-Century Healthcare System: Framework of Basic, Clinical and Systems Sciences. Acad Medicine. 2015. Gonzalo, et al. Identifying and Defining Curricular Content Domains for Health Systems Science. Acad Med 2016 Gonzalo, D Wolpaw, S Skochelak. Chapter 1. Health Systems Science. Elsevier. December 2016 Gonzalo JD, et al. How Can Medical Students Add Value? Academic Medicine 2017



#### Legitimate Participatory Roles in Clinical Communities of Practice





Category 1 – Contributions to Community Welfare					
Contact Tracer Process	Social Isolation/Connection Program [1,3]				
Educational Campaign	United Way Hotline [1,3]				
Educational Hotline	System-Wide Educators [2,3]				
Healthcare Volunteer Check Ins	Elder Community Care [2,3]				
Community Outreach	Community-Wide Educators [3]				
	Portable Handwashing Machines [3]				
Category 2 – Contribut	ions to Healthcare Delivery System				
On-Demand Virtual COVID19 Screening	Employee Health Screenings [2,3]				
On-Demand Telehealth Visits	Consultation Assistance for Specialty Services [2,3]				
On-Demand Urgent Care Visits	Laboratory Assistants [2,3]				
Evidence-Based Medicine Curators/Consultants	Phlebotomy Assistants [2,3]				
Patient Navigator Discharge Follow-Up	Personal Protective Equipment (PPE) Resource Team [2,3]				
COVID-19 Outpatient Follow-Up	Supply Chain Support [2,3]				
Complex Patient Check-Ins					
Outpatient Clinic Rescheduling					
Health Product Engineering					
Blood Bank/Drives					
Medical Scribes					
Medical Translation					
Category 3 – Contributions to Workforce					
	Errand Teams [2,3]				
	Childcare Services [2,3]				
	Safe Food Distributors [2,3]				
Category 4 – Contributions to Medical School					
Medical School Curricular and Logistics Planning					
Information Technology Consultants					

Categories and Task Areas (n=34) for Students to Contribute During the COVID-19 Pandemic.

1=Remote capability
2=Aligned with system needs
3=Educational value
\* Left column – meets all 3

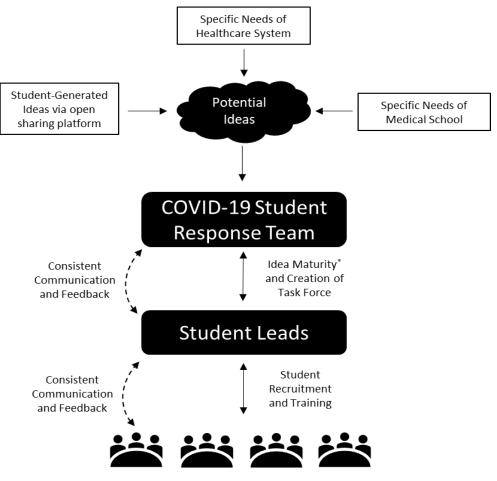
#### **Key Points:**

- 1. Volunteer vs system aligned
- 2. Elective (vs. service learning)



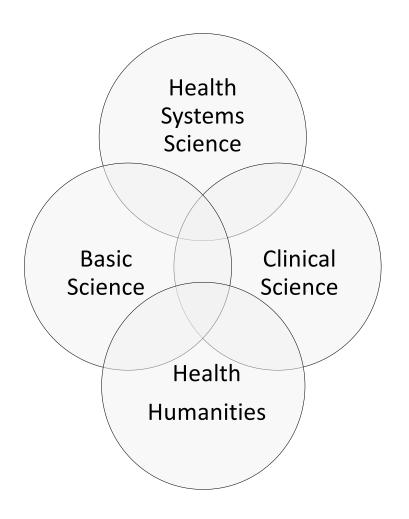


Co-Production Process with Students, Education and System Leadership



Medical Student Task Forces for Each Project





The COVID-19 pandemic is tragic, and it also further establishes the burning platform for a co-produced four-pillar model of US medical education.

"Systems Citizens"





# AMA Innovations in Medical Education Webinar Series Student-driven opportunities to contribute during the COVID-19 outbreak

Kimberly D. Lomis, MD

Vice President, Undergraduate Medical Education Innovations American Medical Association

Catie Havemann, BA

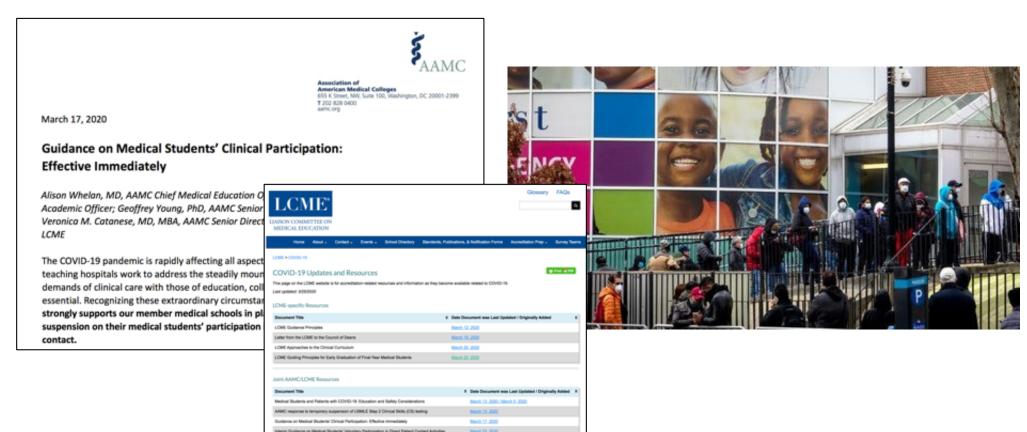
Medical student (2021) Vanderbilt University School of Medicine

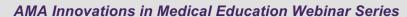
@KimLomisMD
@CatieHavemann

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## **Educational system response to disruption**









## How many students to change a system?

- At Vanderbilt:
  - 2 co-directors
  - 25+ student leaders
  - 250+ volunteers
- Nationally:
  - 700+ on GroupMe
  - 600+ on Slack
  - Twitter, Google Drive & more

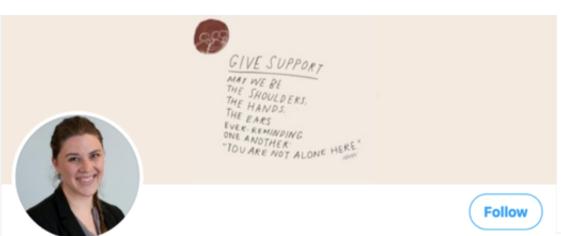


Thao Le, G2 Vanderbilt MSTP





## Why innovate in the middle of a global crisis?







Catie Havemann





♣ Pinned Tweet



#UCSFMaskDrive UPDATE: Here is a thread dedicated to all the amazing things that happen when a community comes together in crisis.

Day 1: 235 masks collected Day 2: 5,700 masks collected Day 3 (today): 8,600 masks collected

TOTAL: 14,535 donations from 1 street corner, in 3days





### Using the role of learner as a lens

#### March 9-14 - Students still in hospitals - Hourly email updates & changes - Students with mixed feelings March 15-18 - First email to deans 3/14 - VUMC Hotline proposed - Initial volunteer list collected - Project list expands rapidly - Guidelines from LCME for March 19-24 babysitting - Poison Center Hotline active - Babysitting & more active Telehealth with 100+ volunteers - 7 volunteer-staffed projects March 24-30 - 8 developing projects - Centralized sign-up & tracking - PR team and website - Exploring academic credit Formalized organizational structure - Project list continuing to expand - Sought project subdirectors - VUMC & General Counsel





### **Turning mission into workflow**

#### March 9-14 - Students still in hospitals - Hourly email updates & changes - Students with mixed feelings March 15-18 - First email to deans 3/14 - VUMC Hotline proposed - Initial volunteer list collected - Project list expands rapidly - Guidelines from LCME for March 19-24 babysitting - Poison Center Hotline active - Babysitting & more active Telehealth with 100+ volunteers 7 volunteer-staffed projects



Brady, Donald Wayne <donald.w.brady@vumc.org>

Thu 3/26/2020 8:18 PM

Havemann, Catherine M; Fleming, Amy E (University); Le, Thao D; Hansen, William G+1 other ⊗

#### Catie

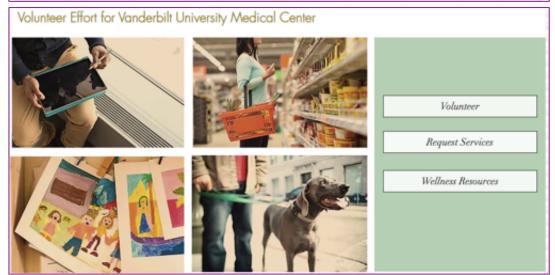
You can't exceed your limit - you bought the unlimited plan!!!!

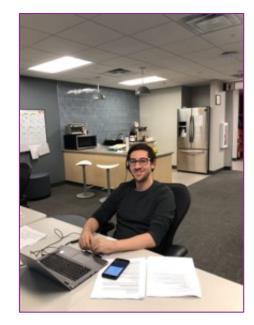




#### Where are we now?

Record ID	Vusm Covid19 Volunteer Signup	Babysitting & Other Assistance to VUMC Healthcare Providers	TN Dept of Health	Center	Food Delivery with Second Harvest	Exposure Survey Processing	Telehealth Set Up	Multilingual Educational Video Creation	VUMC COVID	PPE Shortage
1	<b>②</b>									
2	<b>Ø</b>									
<u>3</u>	<b>Ø</b>	<b>②</b>	<b>②</b>	<b>Ø</b>					<b>②</b>	<b>Ø</b>





Aaron Azose, M4
Poison Center Hotline

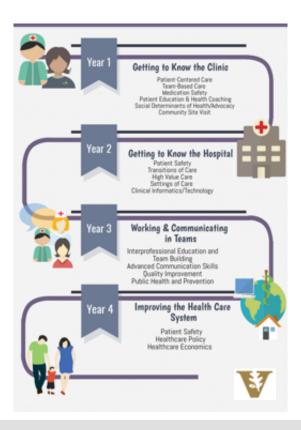


If a department row is shaded in this color, there may be nurses already contacting patients to confirm telehealth set-up. Please fill out a form to confirm if this is the case after a few patients (so we can eventually remove them), and skip that list and feel free to pick up a different site instead:). Thank you!	to a new spot. Feel free to	Helpful Links:	Click here for Google Drive (Instructional Video and Powerpoint, Finding Patient List, and Patient Perspective):	If you would like a straightforw script with directions for the c check out the "Summary of Instructions" Tab at the bottom this spreadsheet.	
If you encounter any problems, have any suggestions or tips, or notice any significant mistakes in patient volume estimation, please fill out this form:	Estimated Daily Patients	Appointment date (call 1-2 days before) atients 3/31/2020 April 1		April 2	April 3
11:01AM+	Student 1	MariaSanta Mangione			
HIGHEST PRIORITY CLINICS:					
Internal Medicine / Primary Care					
PRIMARY CARE GREEN HILLS	~20-30				
8AM-11AM	Student 1	Veerain Gupta	Jessa Fogel	Ayesha Muhammad	Matt Lan
11:01AM+	Student 2	MariaSanta Mangione			
Internal Medicine Pod A OHO	~30				
8-9:59am	Student 1	Chandler Montgomer	Chandler Montgome		Chandler Montgom
10:00-11:59 pm	Student 2	Kevin Neuzil	Kevin Neuzil	Kelly Vittetoe	Caroline Maguire
12+ pm	Student 3	Katie McKay	Katie McKay		
Internal Medicine Pod B OHO (nurses calling	~10-20				
Before 12pm	Student 1	Sarah Pourali	Sarah Pourali		Merla Hubler
12pm and after	Student 2	Ally Metro	Ally Metro	Beatrice Konrad	Merla Hubler
Internal Medicine Pod C OHO	~10-20				
Before 12pm	Student 1	Bekka DePew	Kelly von Beck	Matthew Villaume	Kelly von Beck
12pm and after	Student 2	none scheduled	Chiamaka Sonubi	Chiamaka Sonubi	Chiamaka Sonubi

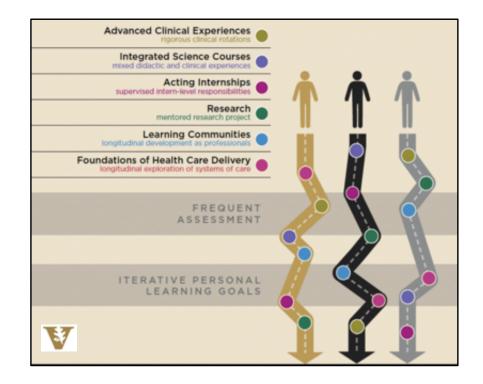




# Training in health systems science



# Alternative pathways to developing competency







## Learning from value-added roles

- National healthcare systems
- Local & regional healthcare systems
- Health equity
- Social determinants of health
- Health literacy education
- Public outreach

- Advocacy
- Teamwork
- Communication



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- Technological skills
- · Evidence-based medicine
- Literature analysis



#### ♣ Pinned Tweet



#### Kitae Chang @tyechang · 18h

First multi-institutional #Telemedicine Student Collaborative meeting in the books! So impressed by all of these self-driven student leaders who are spear-heading timely initiatives during #COVID19 #InThisTogether #medstudenttwitter #medtwitter

BTW - we all met on @Twitter!



Anoushka Dua and 6 others







# Objectives



General medical student response



Prenatal care support project



Converging medical students' involvement with educational competencies



#### Michigan Medical School Student Response to COVID-19

3/17- AAMC Suspends Clinical Rotations

3/18 - Creation of M-Response Corps

Database of 300 U-M Medical Students looking to be involved in COVID-19 initiatives

3/19 – Current Student Led Initiatives

Clinical Care Support

**Community Outreach** 



# Student Led Initiatives- Community Outreach

Initiative	# Students	Outcome
PPE Collection Center	8-12/day	25,000 masks, 2000+ N95 masks, 1300 face shields, 140,000+ gloves, 500 lab coats
PPE Calling for Donations	13	234 businesses contacted 18 confirmed donations
COVID Drive-Up Testing	5-10	400-500 tests daily
Geriatric Social Calls	40	1 call center: 250 calls social connection + supply needs

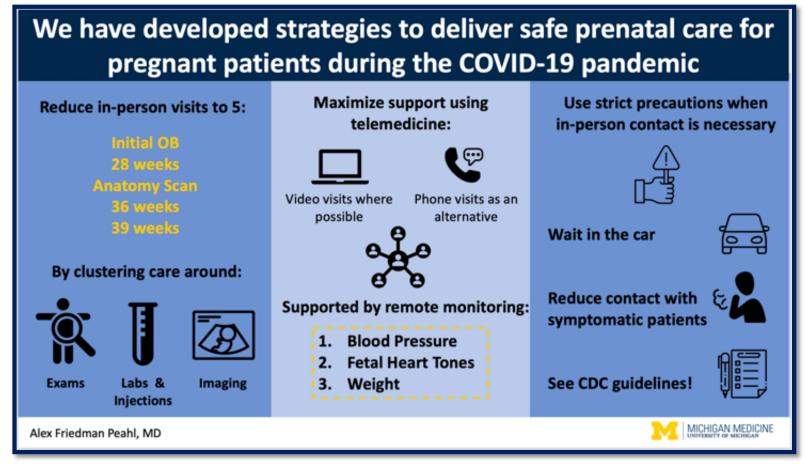


# Student Led Initiatives - Clinical Care Support

Initiative	# Students	Outcome
PPE Training for UM Employees	45	24/7 training of 3000+ hospital employees
COVID-19 Kit Assembly	10	600 Kits
Wolverine Street Medicine	45	100 sanitizers made, 25 canisters of sanitary wipes, supplied 2 shelters stock of N95s/gloves/gowns
Student-Run Free Clinic	30	70 Patients "seen"
Prenatal Care Support Project	46	1500 patients contacted 19 student leadership positions

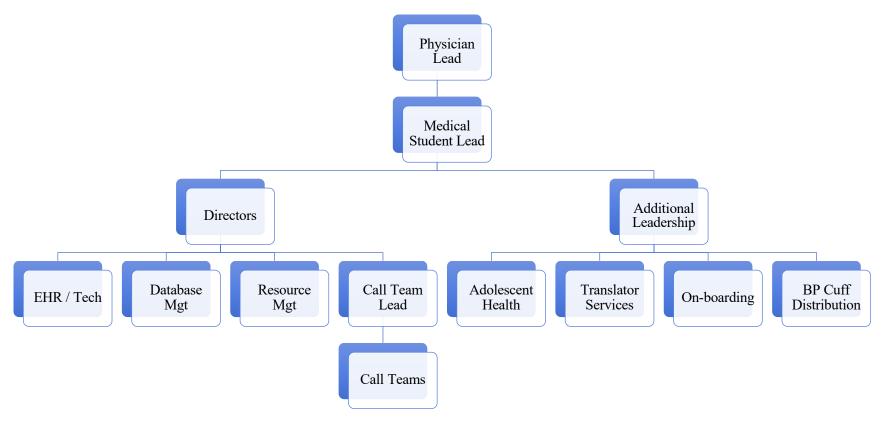


### New 4-1-4 Prenatal Care Model





## Leadership Design





## Prenatal Care Support Project Planning

Day	Outcome	Support Persons
1-3	Developed patient resources (script, prenatal care guidelines, remote monitoring support, COVID prenatal information)	Maternity care departments Patient education specialists Social work Medical students
3	Increased team size from 10 -> 50	Medical Students
4	Developed student support resources (workflow, EHR directions, FAQ)	EHR on-boarders Faculty lead Maternity care department Medical students
5	Began calling patients	Faculty lead Medical students



# Student Tasks

1

Provide reassurance during COVID 19

2

Provide information about virtual prenatal care

3

Provide support during a stressful time and new care transition



### Issues Referred to Providers

Social work consults

Nuanced COVID-prenatal questions

Patients already sent to the ED or OB triage

Patients resistant to new prenatal care changes

Non-urgent medical problems

Changes to birth plan

**Urgent Medical Concerns** 

**COVID Exposure/Symptoms Questions** 



Physician Lead



**Obstetric Provider** 



**OB TRIAGE** 



**COVID Hotline** 



## Accomplishments as of 3/27

- 1539 Total calls in 3.5 days
  - 575 Patients reached
    - **264** Expressed interested in group support
  - Patients forwarded to physician lead
  - Patients identified for financial assistance



## Troubleshooting

<b>Translator</b> services	Students onboarded who spoke Bengali, Mandarin, Arabic & Spanish
Topic of homebirth	Larger than expected volume -> encouraged patients to talk to their providers at their next visit and documented in chart
Language	Patient privacy : not "prenatal care"
used	Gender non-conforming language: "pregnant patients" not "women"



## **Quotes from Students**

I got involved in this project because I thought it would be helpful to update pregnant patients about logistical changes to their care during the COVID-19 pandemic. I had no idea how receptive these patients would be to this seemingly small act-their expressions of gratitude made me realize how impactful human interaction can be, no matter how small of an act. I believe this lesson translates not only during this time of enforced social distancing, but also in the current age of a healthcare field dominated by technological communications. I hope to carry this value of human connection forward with me in my practice as an OB/GYN.

Third Year Medical Student



### **Quotes from Students**

One of the most rewarding parts of working with pregnant patients is confronting uncertainty — they are truly amazing and brave. This is not the pregnancy they could have ever imagined, but I think we have a responsibility to maintain the humanity that underlies our care. I'm so proud that we did not just send a form letter about one of the most consequential experiences of their lives, but that we are taking the time to be with them even when we don't have good answers. These calls can be incredibly hard, and it can feel terrible to have to say that we can't accommodate someone's very human and reasonable needs, but it is the right thing to say it individually, to listen, and to support as much as we can.

Third Year Medical Student

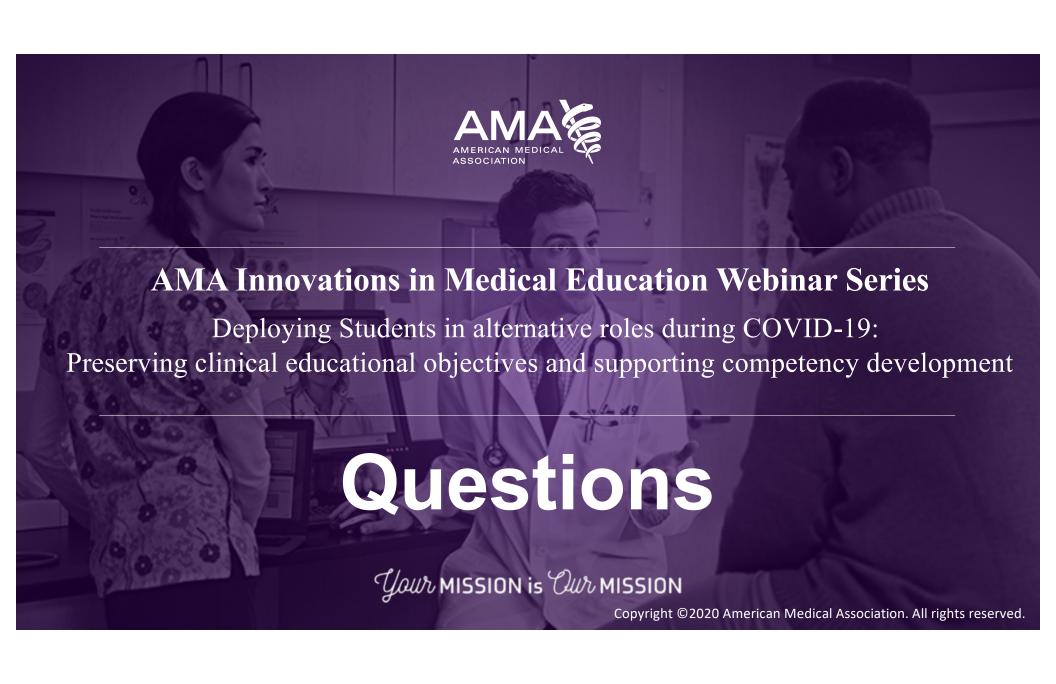


### Takeaways From Student Response to COVID-19



- Department buy-in and dedicated faculty leads
- Several leadership opportunities for students
- Opportunity for students to feel utilized and fulfilled by patient interactions
- Opportunity for medical students to have patient contact while learning and staying safe





## **Future Events**

Continue the discussion	Future webinars
Please join us to ask questions of our panelists at: <a href="https://ama-assn.org/communities/accelerating-change-in-medical-education">https://ama-assn.org/communities/accelerating-change-in-medical-education</a>	<u>June 2020</u>
<ul> <li>What alternative student activities help develop competency in health systems science?</li> <li>What alternative student activities help develop competency in discipline-specific clinical skills?</li> </ul>	Celebrating Diversity: Mission-aligned admissions and residency selection processes









#### M-Response Corps

@MResponse\_Corps Follows you

@umichmedicine medical student response corps during the COVID-#GetMePPE #FlattenTheCurve #GoBlueMed

Umich Student Council Ali Hammoud Nadine Ibrahim Nicole Dayton Michael Broderick

AMA Innovations in Medical Education Webinar



#### Project Leadership Susan Carlson Allison Powell Chloe Ramirez Biermann Yoni Siden

Seth Klapman

Nadine Makki





Translator Services Nabeel Salka Monica Choo Taania Girgla Tiffany Hu Anjan Saha Devin Shen



Katarina Alajbegovic **Bryana Bayly** Kate Brown Kelsey Carman Chelsea Chase **Brian Cleary** Ayana DeGaia **Duyhoang Dinh Braden Engstrom** Carmen Fernandez

Taania Girgla

Stephen Goldberg



BP Team Armani Hawes Anna Munaco



Patient Callers Keerthi Gondy Julia Hammoud Armani Hawes Tiffany Hu Taylor Jamerson Sangri Kim Vivian Ling Stevan Lukich Anna Munaco Erica Odukoya Luke Pumiglia



Onboarding Leader Monica Choo



Anjan Saha Claire Shea **Devin Shen Taylor Standiford** Nishma Valikodath Nithya Vijayakumar Gavisha Waidyaratne Taylor Wood Aisling Zhao



Literature Review Team **Duyhoang Dinh** Keerthi Gondy Erica Odukova

Allison Powell

Gavisha Waidyaratne



Adolescent Prenatal Care Kelsey Carman Chelsea Chase



Call Team Leads Hanna Berlin Nicki Byl Monica Choo Lauren Gaston-Hawkins Annie Minns Aliya Moreira Nabeel Salka Yoni Siden



Database Mgt Team Allison Powell Chloe Ramirez Biermann Chrissy Franco Miles McGovney Erica Odukoya

#### **Clerkship Objectives & Learning Outcomes** The overall goals for the second year OBGYN Clerkship are listed below. Our purpose is to outline the "core" of OBGYN knowledge, skills and professional attitudes that are fundamental for all medical students. We have also mapped those specific objectives to the institutional objectives. Clerkship Objectives **VIRTUAL** Knowledge IN-PERSON/VIRTUAL Skills **Professionalism** VIRTUAL/In-person Learning Outcomes Instructions VIRTUAL/In-person Gynecology (Outpatient Clinic) IN-PERSON/VIRTUAL **Gynecologic Surgery** VIRTUAL/In-person **Obstetrics**



Domain	Competency
Communication  Students will demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.	C-ch. Communicate effectively with patients, families, and the public across a broad range of socioeconomic and cultural backgrounds  C-ch. Communicate effectively with colleagues, other health professionals and health-related agencies, including the transitions of care  C-mr. Maintain complete, timely and accurate medical record to contribute to effective patient care  C-dc. Demonstrate sensitivity, honesty, and compassion in difficult conversations including those about death, end of life, adverse events, bad news, disclosure of errors, and other sensitive topics  C-ic. Demonstrate insight and understanding about their own and others' perspectives to facilitate interpersonal interactions to effectively manage interpersonal conflict



Domain	Competency
Professionalism  Students will	PR-ra. Demonstrate <u>responsibility</u> and <u>accountability</u> to patients, society, and the profession
Students will demonstrate and maintain the professional attributes of	PR-cd. Demonstrate compassion, integrity, respect, sensitivity, and responsiveness to diverse populations
compassion, altruism, respect, integrity, and commitment to	PR-pv. Demonstrate awareness of the <u>patient vulnerability</u> and the inherent power differentials in organizational and interpersonal relationships and respect the boundaries that define therapeutic relationships
addressing the needs of a diverse and changing	PR-ci. Navigate ethical dilemmas in medical care, including <u>conflict</u> of <u>interest</u> and competing priorities, in ways that maintain the primacy of patient interests
society. Students and graduates will seek excellence in professional endeavors.	PR-sr. Participate as an important part of the healthcare team and share responsibility for patient care

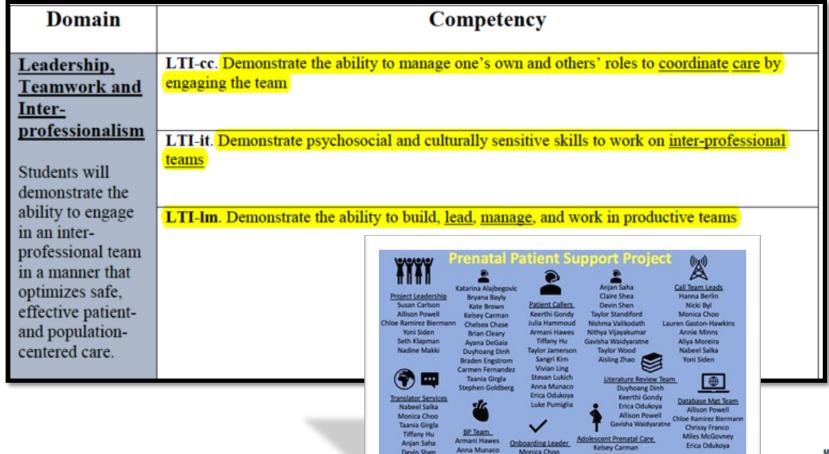


Domain	Competency
Patient Care Students will	PC-hp. Gather, organize, interpret patient information about patients and their conditions through <a href="https://doi.org/10.2016/j.jcal/">history taking, physical examination, and other methods of information gathering</a>
provide patient- centered care that is compassionate, culturally competent, appropriate, and	PC-cr. Use <u>clinical reasoning</u> , formulate appropriate differential diagnoses, make informed decision about diagnostic and therapeutic interventions based on patient information and preferences, data from the history, physical, laboratory findings, imaging, other diagnostic tests, and current scientific evidence
effective for the treatment of health problems and the promotion	PC-ed. Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making to promote health
of health.	PC-px. Develop and carry out <u>management plans</u> in collaboration with patients, families, and healthcare team
	PC-dx. Perform comprehensive medical and <u>diagnostic</u> <u>skills</u> considered essential for patient care



Domain	Competency
Leadership,	LTI-cc. Demonstrate the ability to manage one's own and others' roles to coordinate care by
Teamwork and	engaging the team
Inter-	
professionalism	LTI-it. Demonstrate psychosocial and culturally sensitive skills to work on inter-professional
	teams
Students will	Canis
demonstrate the	
ability to engage	LTI-lm. Demonstrate the ability to build, lead, manage, and work in productive teams
in an inter-	
professional team	
in a manner that	
optimizes safe,	
effective patient-	
and population-	
centered care.	





UNIVERSITY OF MICHIGAN

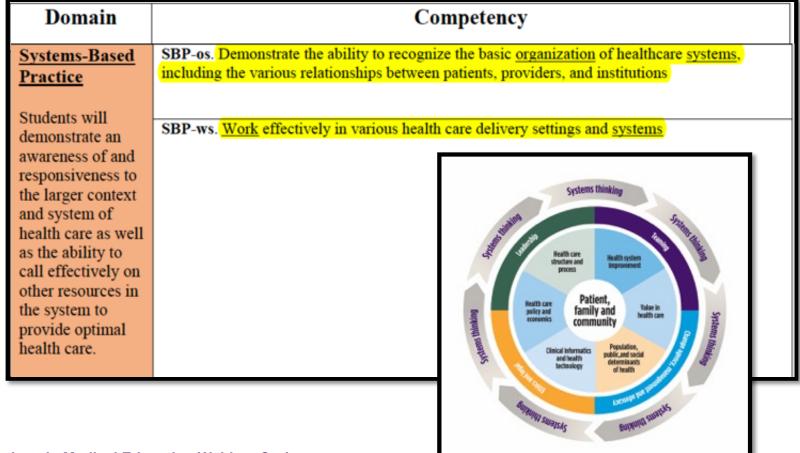
AMA Innovations in Medical Education Webinar Series

Domain	Competency
Practice Based Learning and Improvement  Students will demonstrate the ability to investigate and evaluate one's performance including the ability to appraise and assimilate	PBLI-st. Engage in self-directed learning, reflective practice, guided self-assessment, and demonstrate receptivity to feedback  PBLI-ca. Locate, critically appraise, apply evidence, and weigh the uncertainty to guide decision making to achieve optimal patient outcomes  PBLI-et. Demonstrate the ability to utilize current and emerging technology
scientific evidence and to continuously improve in areas including patient care based on constant self- evaluation and lifelong learning.	PBLI-dp. Demonstrate how data illustrating current performance at the individual, team, and systems levels is used to achieve the highest quality of care



Domain	Competency
Systems-Based Practice	SBP-os. Demonstrate the ability to recognize the basic <u>organization</u> of healthcare <u>systems</u> , including the various relationships between patients, providers, and institutions
Students will demonstrate an awareness of and responsiveness to the larger context and system of health care as well as the ability to call effectively on other resources in the system to provide optimal health care.	SBP-ws. Work effectively in various health care delivery settings and systems







## AMA Health Systems Science Learning Series

Preparing future physicians and health care professionals to successfully work within health systems.

MEDICAL EDUCATION AND TRAINING

Establishing Essential Leadership Behaviors

AMA Health Systems Science



HEALTH CARE REFORM

What Are the Components of Value-Based Care?

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MEDICAL EDUCATION AND TRAINING

What Makes Team-Based Care Effective?

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HEALTH DISPARITIES

Social Determinants of Health

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HEALTH CARE DELIVERY MODELS

Systems Thinking

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Patient Safety
Patient Safety

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HEALTH CARE QUALITY

**Quality Improvement** 

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HEALTH CARE DELIVERY MODELS

**Health Care Delivery Systems** 

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Renew



#### Why innovation is needed to better manage chronic disease

DEC 23, 2019







#### Staff News Writer

American Medical Association

Chronic disease is an epidemic. The vast majority of annual health care spending goes toward treating conditions like heart disease, cancer, diabetes and obesity. Yet, despite trillions of dollars spent on management, chronic diseases still cause up to 75% of all deaths in the U.S.

#### Resolution ready in 2020

Give your patients the advice they need to achieve their health goals for the new year. Explore the AMA's resources on creating sustainable habits in 2020.

In an episode of the "AMA Moving Medicine" podcast, Richard Milani, MD, chief clinical transformation officer at Ochsner Health System, in southeast Louisiana, addresses the challenges of treating chronic disease in the outpatient setting and makes a case for leveraging behavior change as part of the solution.

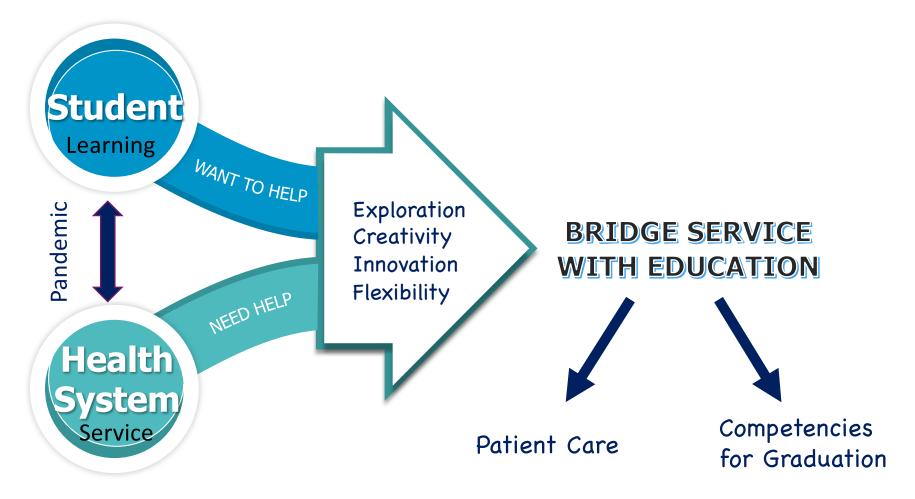
Below is a lightly edited full transcript of the presentation. You can tune in on Apple Podcasts, Google Play or Spotify.

Dr. Milani: Let's start off with the outpatient side. No better place to start than what's really encompassing the biggest problem that we face from

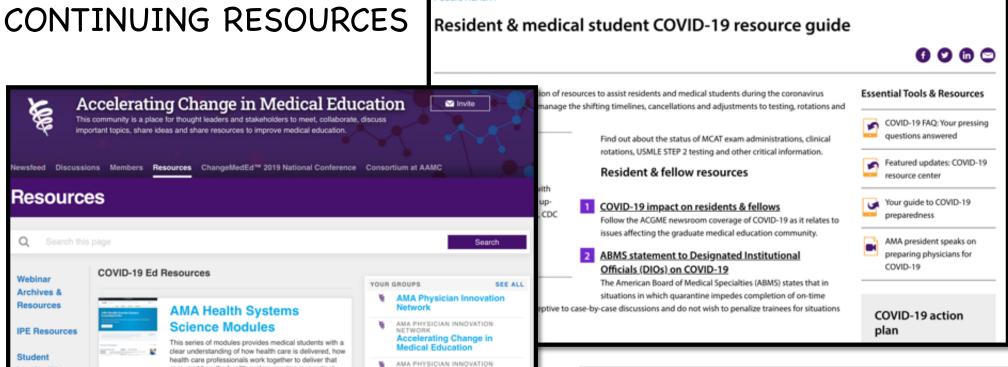
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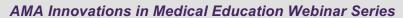
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care, and how the health system can improve patient

Clinical Teaching and Learning Experiences without

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