



H&P 360: Advancing the traditional history and physical to address chronic diseases and social determinants

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Disclosures

- Anzur – no conflicts of interest
- Kirley – no conflicts of interest
- Williams – no conflicts of interest

Objectives

- Reflect on the need to improve the traditional history and physical (H&P) to optimize person-centered care in the 21st century
- Describe the innovations in the H&P 360
- Summarize the preliminary results of a randomized controlled study of the H&P 360 in a standardized patient scenario
- Determine opportunities to incorporate the H&P 360 into daily patient care and medical education

A photograph of three medical professionals, two women and one man, all wearing white lab coats and stethoscopes. They are gathered around a tablet computer, looking at the screen with focused expressions. The woman in the center is pointing at the screen. The background is blurred, suggesting a clinical setting. The entire image has a purple tint.

Imagine you're precepting this resident...

Let's discuss


- How is this presentation incomplete?
- What 2 or 3 key pieces of information would you elicit next?
- How would you coach this resident to get the information most likely to help this patient?




Introducing: The H&P 360

We need a new H&P

The structure of the H&P was developed generations ago



Health in the 21st century is critically influenced by interaction of biomedical and nonbiomedical factors



Key pieces of information to consider when preventing and managing chronic disease are not collected in the traditional H&P

Objectives of the H&P 360 project

To utilize a **diverse group** to examine and **improve upon the traditional H&P** processes for **more holistic , collaborative, and effective patient care**

To iteratively develop and trial a more **equitable H&P instrument** that gathers a wider scope of **patient-centered and quality-focused** information

To model a collaborative process of developing **innovative solution** to current challenges within medical education

The traditional H&P

- Chief Complaint
- History Present Illness
- Past Medical History
- Family History
- Social History (tobacco, Etoh, drugs)
- Allergies / Medications
- Review of Systems
- Physical Examination

The idea

By including **a few questions** in each of a small set of systematically chosen **domains** in the standard, routine history...

physicians' care of patients will improve.

The domains

1. Mental health conditions
2. Behavioral health (beyond alcohol, tobacco, and drugs)
3. Biomedical conditions
4. Social Support
5. Environmental / Physical Resources
6. Function
7. Perception of health
8. Goals and values

Example domain with sample questions

Relationships (This domain encompasses: primary relationships, social support, caregiver availability, abuse/violence, community relationships). In this section, we want you to assess what kind of a support system is available for your patient. Who helps them when they need help? Who encourages them to adhere to a healthy lifestyle? Are they experiencing any violence or abuse in their relationships?

Sample questions

- Who do you turn to when life gets stressful?
- Are you afraid you might be hurt in your apartment building or house?
- Who do you rely on when you are unable to do something yourself?
- What community resources or programs do you use to improve or maintain your health?

The trick in using domains...

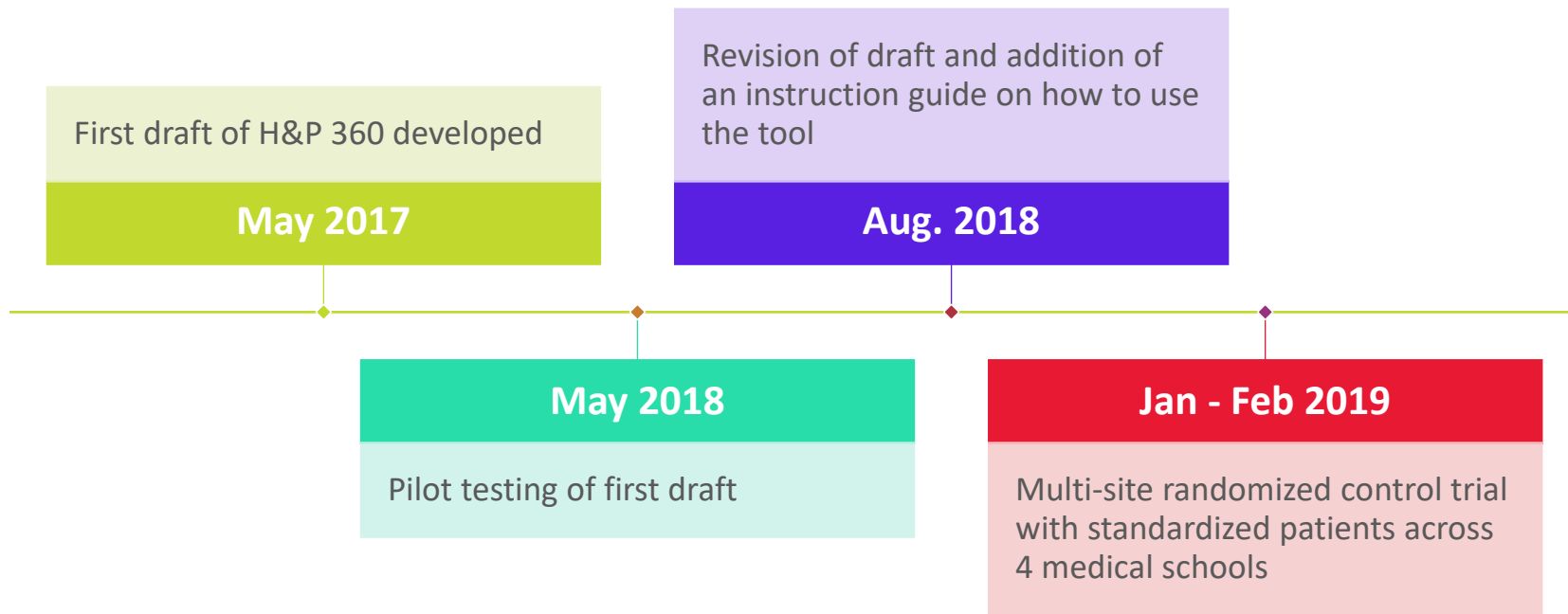
Ask: In this domain, what TWO or THREE pieces of information are most relevant to this patient?

Key information differs based on patients'

- Risk factors (pre-test probability)
- Differential diagnosis
- Developing / implementing a plan

Clinical thinking, not just checklists

Timeline



H&P 360 Study Implementation



4 medical schools participated in the study



159 students in 3rd or 4th year of medical school enrolled



Medical students were randomly assigned to traditional H&P or the H&P 360 and were randomized to one of two cases.



All participants completed an Objective Structured Clinical Exam (OSCE) chronic disease (Type 2 Diabetes/Hypertension) case.



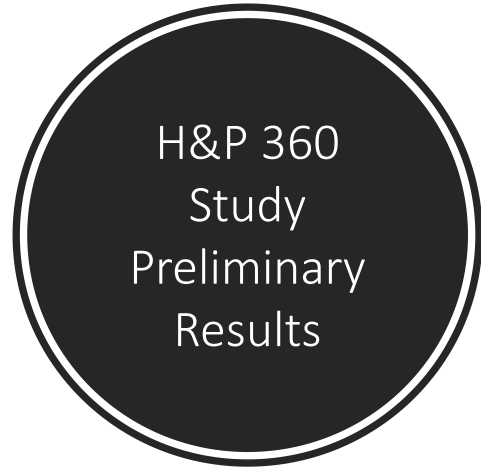
The standardized patient (SP) doubled as a trained observer and completed a grading rubric after each encounter.

Standardized Patient Reflections: What's it like to be on the patient end of both types of H&P?

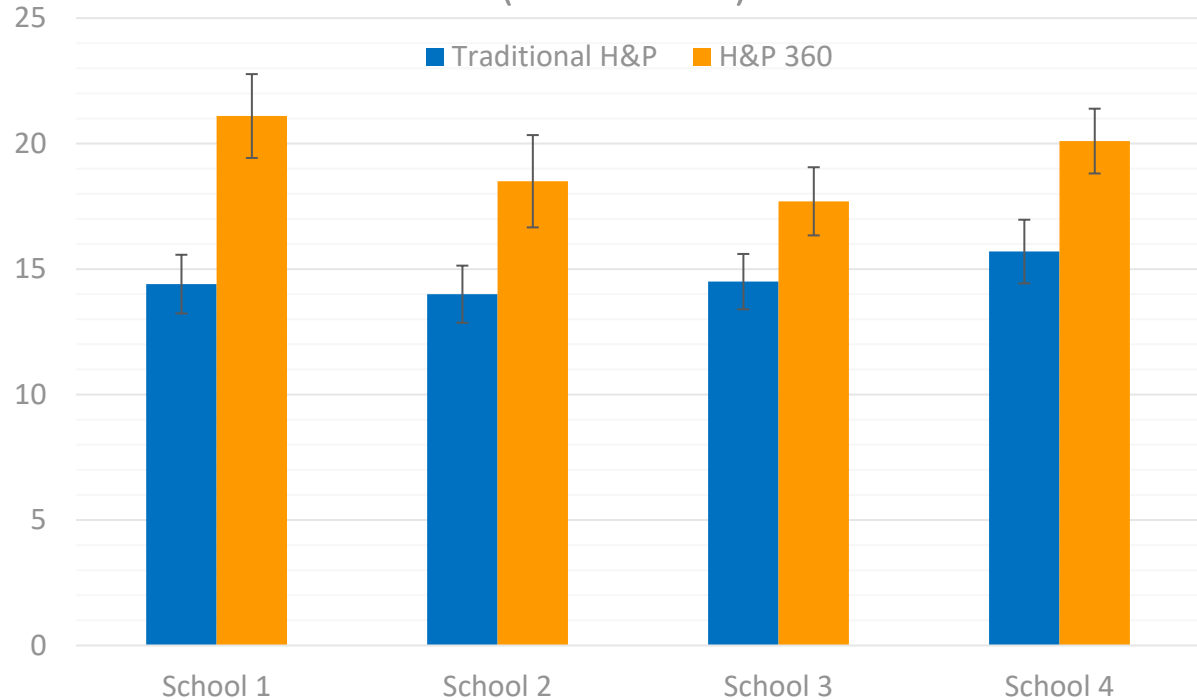




H&P 360 Study Results

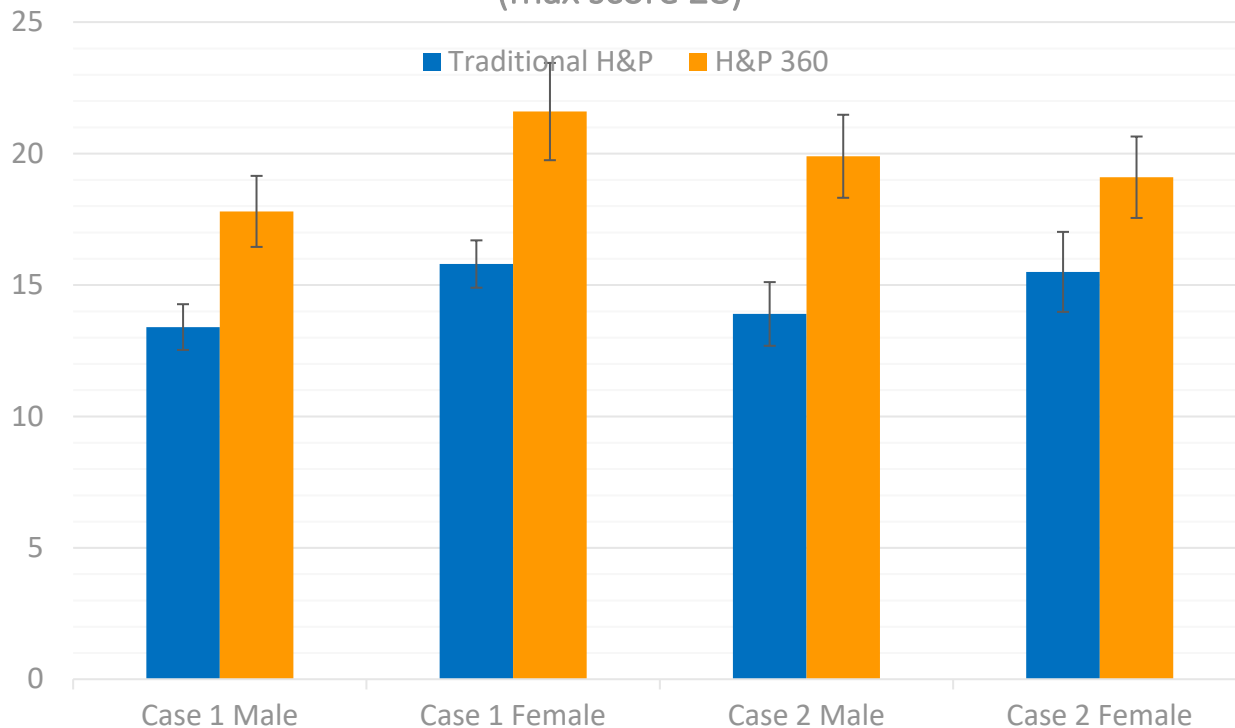


Total average score by school and group (max score 28)



H&P 360
Study
Preliminary
Results


Total average score by SP and group
(max score 28)



A photograph of three medical professionals, two men and one woman, walking away from the camera down a bright, modern hospital corridor. They are all wearing white lab coats. The woman on the left is looking back over her shoulder. The corridor has large windows and a clean, minimalist design.


Putting it all into practice

HPI



H&P 360
Template


- **Biomedical problems/concerns:**
- **Patient perception of health** (This domain encompasses: patient understanding/insight of illness/health, patient self-assessed level of control, patient-identified strengths and barriers)
- **Patient priorities & goals:**
- **Psychosocial problems/concerns** (This domain encompasses: mood, thought patterns, diagnosed or undiagnosed psychiatric disorders, as well as pertinent social issues)
- **Past Medical History: Health Maintenance** (preventative care)



H&P 360 Template

Social history

- **Behavioral** (This domain encompasses: health behaviors, medication management/adherence, nutritional behaviors, physical activity habits, personality disorders, substance use):
- **Relationships** (This domain encompasses: primary relationships, social support, caregiver availability, abuse/violence, community relationships):
- **Resources** (This domain encompasses: food security, housing stability, financial resources, transportation):
- **Functional status** (This domain encompasses: affect, social and occupational functioning, satisfaction with life, activities of daily living):



H&P 360 Template

Assessment/Plan

Problem assessment (problems can include issues that are primarily biomedical or issues that are psychosocial)

- Trajectory of condition (this includes relevant history, current condition status, condition outlook)
- Shared assessment of level of control
- Shared goal
- Psychosocial influences (including patient strengths and barriers)

Plan

- Team actions –clinical teams and external teams
- Patient/family (eg, self-management)
- Therapy/monitoring
- Disposition/follow-up

Small group discussion

- What are the implications for your daily patient care and teaching?
- What are the best opportunities for change at your institution?”

Future steps

- Ongoing dissemination activities
- Continued improvements to address:
 - Integration into the clinical setting
 - Associated instructional and assessment tools
 - Interprofessional team use
- **Current Funding Opportunity!!!**
 - H&P 360 Implementation Grant Program
 - Three \$30,000 awards to medical educators
 - Applications due September 30, 2019
 - Contact Rupinder.Hayer@ama-assn.org for application info

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Questions?

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