

Behavioral Medicine

Duration: Longitudinal during all 3 residency years.

Goal: Develop skills in patient communication and care across a spectrum of psychosocial issues. Practice motivational interviewing and assess and treat mood disorders along with other psychiatric illnesses effectively.

Objectives:

- a) Patient Care
 - a. Integrate issues of behavioral health into the overall healthcare of the patient, as measured by core faculty reviews, videotaping and review, CSR, and OSCE exams.
 - b. Gain skills in patient counseling, as measured by reviews from Behavioral Science faculty.
 - c. Improve skills in the diagnosis and management of psychiatric conditions, as measured by reviews from Behavioral Science preceptors, videotaping and review, and the In-service Examination.
 - d. Improve skills in motivational interviewing and eliciting changes in patient behavior, as measured by reviews from Behavioral Science precepting.
 - e. Practice respectful behaviors toward patients with behavioral health issues, as measured by faculty reviews and videotaping.

- b) Medical Knowledge
 - a. Demonstrate analytic thinking as it applies to behavioral medicine, as measured by faculty reviews, CSR, OSCE, and In-service Examinations.
 - b. Explain in lay language the etiology, assessment, treatment, and life-style modifications for targeted issues, as assessed by faculty reviews and videotaping.
 - c. Expand knowledge base of issues in cross-culturalism, patient-doctor communication, LGTB, domestic violence, elder abuse, and child abuse, as measured by faculty reviews, CSR, OSCE, and In-service Examinations.

- c) Practice-Based Learning and Improvement
 - a. Analyze own need for improvement in knowledge of behavioral science and use recommended readings and clinical opportunities to remediate knowledge. This will be measured by reviews from Behavioral Science preceptors.
 - b. Analyze areas for improvement in patient-doctor communication, as measured by OSCE and videotaping.

- d) Interpersonal and Communication Skills
 - a. Establish therapeutic relationships with continuity patients in counseling clinics, as measured by Behavioral Science preceptors.
 - b. Demonstrate effective communication skills with patients in FHC, as measured by videotaping and 360-degree reviews.
 - c. Use motivational interviewing skills which include
 - i. eliciting patient's vision of health
 - ii. facilitating self-management plans and self-care decisions
 - iii. using health information to guide participant's self-care decisions measured by faculty reviews and videotaping.

- e) Professionalism
 - a. Exhibit respectful, attentive care, as measured by 360-degree reviews and OSCE.
 - b. Exhibit sensitivity to issues of culture and medical care, as measured by 360-degree reviews and OSCE.

Behavioral Medicine (continued)

- f) Systems-Based Practice
 - a. Identify community-based resources which complement patient care, as measured by CSR and 360-degree reviews.
 - b. Advocate for patients within this health care system, as measured by 360-degree reviews and CSR.

Residents should gain exposure to the following conditions:

- ADHD
- Adjustment Disorders
- Anxiety Disorders
- Bipolar Disorder
- Brief Therapy Interventions
 - CBT in Health Care
 - Positive Psychology
 - Solution Focused Brief Therapy
- Communication & Interpersonal Skills
 - Nonverbal/paraverbal/proxemics
 - Working with Difficult Patients
- Community Referrals/Resources
- Dementias & Delirium
- Depression
- Eating Disorders
- Family Systems
- Family Violence
- Grief & Loss
- Health Behaviors
 - Diabetes Compliance
 - Exercise and Fitness
 - Smoking Cessation
 - Weight Mgt - Adults
- Insomnia & Sleep Disorders
- LGBT - Sexual Diversity
- Motivational Interviewing
- Multicultural/Diversity
- Pain and Somatization Disorders
 - Chronic Pain
- Personality Disorders
- Psychotic Disorders
- Sexual Disorders
- Stress Reduction
 - Meditation & Relaxation
- Substance Abuse/Addiction
- Suicide Risk & Prevention

Evaluation of Achievement of Objectives: Described above but include longitudinal assessments employing most the program's evaluation resources.

Faculty rotation duties: A combination of preceptors carry out the objective of the Behavioral Medicine curriculum and evaluate the residents.

Behavioral Medicine (continued)

Curriculum Duties: Behavioral medicine is taught in a longitudinal format over the 3 years of residency using the following principal experiences:

- A seminar on effective patient-physician communication during Intern Orientation, and evaluation of baseline communication skills on the intern OSCE.
- The Newborn Nursery/Psychiatry rotation during the R-1 year, described above.
- Quarterly seminars to focus on physician-patient communication. These will be half-day sessions led by at least 2 faculty members and involving approximately 15 residents per session. All residents will attend at least 2 of the seminars annually, regardless of rotation duties, vacation, and electives. The sessions will feature some lecture but will be more focused on the practical application of effective communication techniques, including motivational interviewing, reflection and empathy, and maintaining good communication skills in a busy medical practice.
- Video review of continuity patient encounters will continue at FHC. However, this will be used more as an evaluative tool for the impact of the communication seminars than a teaching session. Residents who fail to pass the threshold for competency in these sessions will do remediative work and repeat testing. Video review sessions will be scheduled in the spring.
- A motivational interviewing referral clinic every other month at FHC. This clinic will be led by Family Medicine faculty and R-3 residents.
- Mental health clinics 3 times per month at Family Health Center. These referral clinics will be staffed with residents and will be led by senior residents from the Department of Psychiatry as well as a volunteer faculty psychologist.
- Noon conference sessions monthly focused on behavioral medicine subjects as described above. These sessions will be provided primarily by faculty from Family Medicine and Psychiatry.

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- The Newborn Nursery/Psychiatry rotation during the R-1 year, described above.
- Quarterly seminars to focus on physician-patient communication. These will be half-day sessions led by at least 2 faculty members and involving approximately 15 residents per session. All residents will attend at least 2 of the seminars annually, regardless of rotation duties, vacation, and electives. The sessions will feature some lecture but will be more focused on the practical application of effective communication techniques, including motivational interviewing, reflection and empathy, and maintaining good communication skills in a busy medical practice. **I could do 2 of these on reflection, emotions, and empathy. One would be more basic, the other follow-up. Both would be based on patient encounters.**
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- A motivational interviewing referral clinic every other month at FHC. This clinic will be led by Family Medicine faculty and R-3 residents.
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- Wellness series – 8 sessions. **I could do 1 session on avoiding, recognizing burn-out; maybe another 2 sessions on positive coping strategies.**

clinics