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Supporting Programs to Implement HCT Curricular Activities

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Abstract

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Expected Actual

7 calls

7 calls

Technical Assistance Calls (webinar)

5.0 4.5

8 2.5 2.0

1.5 1.0 0.5 0.0

Graph 1. Program Self-Asse



- Program directors are required to document competencies for trainees as programs implement Health Care Transition (HCT) curricula.
 Program directors will need a mechanism to evaluate their residents.

Methods

Methods 12 med-peds program directors/fransition champions agreed to participate in monthly, hour-long technical assistance calis (webinan) from August 2018-Feruary 2019. During each month of participation, each program was assigned to complete a PDSA cycle with the overall goal of progressing their baseline state of establishing HCT curriculum. In effortto display any effects of establishing the curriculum, each program completed a self-assessment each month.

Data

Table 1 displays the number of TA Calls, attendance at TA calls, number of PDSA's submitted, and number of reminders needed.

Table 2 displays the six goals and goal descriptions in which each program assessed their ability to achieve said goals

Graph 1 displays program self-assessment scores according to reaching each of the 6 goals outlined in achieving competency in HCT curriculum.

 rarticipants
 12 per call
 Average 4-7 per call
 (1 program dropped out in OCT due to
 schedule conflict(s)
 Total PDSA's
 Total PDSA's
 Total PDSA's
 Submitted
 7 per month
 Reminders
 1 reminder
 Avg 5 per month
 Reminders
 Techeduled
 TA call)
 Table 1. Monthly Administration 4. Goal Descripti Program Self-Assessment: Curriculum 1 2 3 4

-Average of Goa

1. Program directors have schedules that can often coincide with one another and are difficult to Increased need to manage responsiveness as protected time was limited, if any, to implement 2. 3.

Lessons Learned

- protected time was imited, if any to implement planned actions. Future learning collaboratives should account for longer for lead time this collaborative had a lead time of about 6 months Need to create QI culture in MPPDA, which will cut down on lead time since programs will be able anticipate time commitment
- Residents are able to demonstrate knowledge and skills of the issues aroun the transition from pediatric to adult care for YSHCN. Residents understand the development and psycho transitioning to adulthood for YSHCN. Residents understand how YSHCN and their families are impacted by insurance policies and social services as they age from childhood to adulthood.
 - Residents understand and address the educational and vocational needs of YSHCN.
 - Residents are able to apply knowledge of health care systems to their practice environment and beyond to improve patient care for YSHCN.
 - Residents are able to apply knowledge of health care systems to their practice environment and beyond to improve transition policies for YSHCN.

Table 2. HCT Curriculum Goals ment of Goals over 7 months

5

6

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