Basic Educational Goals & Objectives for a Competency-Based Core Curriculum

The following are the overall educational goals and objectives of University of Oklahoma School of Community Medicine Nephrology Fellowship organized by the ACGME Core Competencies (6 core competencies). This document outlines a competency-based approach to goals and objectives as they relate to the nephrology core curriculum. The approach is specific to patients with underlying kidney disease and other renal related disorders.

1. Patient Care:

   - Principal Educational Goals
   - Develop interviewing skills;
   - Develop physical examination skills;
   - Generate and prioritize differential diagnosis; and
   - Develop rational, evidence-based management strategies.

By the end of 1st Year of Fellowship, one must be able to:

   - Elicit the patient’s history, past history, and the context in which the illness or symptoms occur;
   - Develop verbal and nonverbal communication skills in order to facilitate communication, elicit the emotional content of the interview, and provide comfort;
   - Ensure patient’s understanding of nephrology and other terms used;
   - Perform an appropriate, technically correct physical examination;
   - Synthesize pertinent renal data into a differential diagnosis;
   - Recognize psychosocial issues that may effect patient compliance and outcomes;
   - Accept personal responsibility to follow-up on patient care plans and test results;
   - Formulate a diagnostic and therapeutic plan without supervision;
   - Apply appropriate preventative care for the patient with kidney disease seen in an outpatient setting.
   - Overcome barriers to communication, including those derived from cultural differences or physical and mental impairment;
   - Generate an appropriate differential diagnosis in all patients; and
   - Develop an evidence-based therapeutic and diagnostic management plan independently for most patients;
   - Coordinate patient care among all members of the health care team;
   - Establish and identify oneself as a responsible and responsive team leader;
   - Counsel and educate patients and families about kidney disease;
   - Develop skills for end of life and palliative care discussions and planning for the ill patient with CKD and ESRD;
   - Optimize discharge planning and follow-up in the nephrology clinic or dialysis unit;
   - Perform procedures (urine microscopy, temporary catheters, renal biopsy) required by the ABIM.
In addition, by the end of the 2nd Year of Fellowship, one should be able to:

- Use the interview to identify cognitive impairment, anxiety, denial and defensiveness and be able to manage each during the interview; and
- Independently perform the procedures (urine microscopy, temporary catheters, renal biopsy) required by the ABIM;
- Efficiently evaluate and manage patients in the inpatient and outpatient setting at the level of a nephrology sub-specialist;
- Function competently as a nephrology consultant;
- Coordinate patient care among all members of the healthcare team and demonstrate leadership skills to promote multidisciplinary management;
- Demonstrate effective ability to lead end of life and palliative care discussions and planning for the ill patient with CKD and ESRD.

2. Medical Knowledge:

- Principal Educational Goals
  - Expand clinically applicable knowledge base of basic and clinical nephrology sciences;
  - Develop and apply an analytical approach to renal diseases and nephrology;
  - Learn to access and evaluate nephrology literature relevant to patient care.

By the end of 1st Year of Fellowship, one must be able to:

- Demonstrate knowledge of commonly encountered nephrology problems;
- Perform a thorough literature search for pertinent renal issues;
- Describe basic pathophysiology for common nephrology and hypertension-related conditions;
- Follow-up on questions regarding optimal, evidence-based patient care;
- Develop skills for effective case presentation and discussion of optimizing medical care for all types of renal diseases.

In addition, by the end of the 2nd Year of Fellowship, one should be able to:

- Demonstrate improvement in performance on objective knowledge assessment (NephSAP);
- Demonstrate knowledge and understanding of commonly encountered inpatient and ambulatory nephrology problems;
- Demonstrate knowledge of nephrology literature analysis;
- Demonstrate informatics skills to promote evidence-based medicine and quality care application;
- Solidify knowledge base by educating others (medical students, residents, PAs, co-fellows, faculty);
- Demonstrate a level of knowledge appropriate for level of training compared with one’s peers;
- Demonstrate in-depth pathophysiology for common and uncommon nephrology conditions;
• Apply critical reading skills to current nephrology literature;
• Read and review key journal publications on a regular basis;

3. Interpersonal & Communication Skills:

Principal Educational Goals

• Communicate effectively with patients with kidney disease and their families;
• Communicate effectively with physician colleagues at all levels;
• Communicate effectively with all non-physician members of the health care team to assure comprehensive and timely care of patients with all forms of kidney disease;
• Maintain comprehensive, legible records; and
• Learn to communicate effectively through concise, logical and clinically useful discharge summaries.

By the end of the 1st Year of Fellowship, one must be able to:

• Ensure patients’ understanding of nephrology and other terms used;
• Write appropriate nephrology admission and progress notes;
• Communicate effectively with patients, families, nurses, and other staff
• Present nephrology cases accurately and succinctly on rounds;
• Document all clinical responses to patient care needs legibly in the chart;
• Develop skills to address frustration with our current healthcare system, or programmatic issues in a productive and constructive manner.
• Deliver bad news to patients with kidney disease (and their families) with empathy;
• Create clinically useful discharge summaries for nephrologists and other health care providers;
• Work effectively as a leader of the nephrology health care team;
• Demonstrate effective listening skills and reliable responsiveness to the needs of students, residents and co-fellows as well as the opinions and requests of multidisciplinary team members;
• Provide education and counseling to patients, families and colleagues;
• Communicate effectively with other consultants and primary care doctors to coordinate effective care and follow-up for the patient with kidney disease.

In addition, by the 2nd Year of Fellowship, one should be able to:

• Deliver polished and professional formal presentations on all nephrologic issues and renal diseases;
• Perform effective nephrology consultations;
• Work effectively as a leader of the nephrology health care team;
• Demonstrate skill in handling all difficult patient care situations;
• Communicate near misses or mismanagement issues with the healthcare providers involved in an educational manner.
4. Professionalism:

Principal Educational Goals

- Display the elements of professionalism: altruism, accountability, excellence, duty, honor and integrity, and respect for others;
- Display the principles of confidentiality, integrity and conformed consent; and
- Recognize the signs of diminished professionalism, including abuse of power, arrogance, greed, misrepresentation, impairment, lack of conscientiousness and conflict of interest.

By the end of the 1st Year of Fellowship, one must be able to:

- Demonstrate respect, compassion, integrity, and responsiveness towards patients, families, colleagues and all members of the nephrology health care team;
- Demonstrate a personal sense of altruism by consistently acting in one’s patients’ best interest;
- Demonstrate accountability by being punctual, completing patient care tasks, attending conferences, completing administrative tasks; and
- Demonstrate understanding of the basic principles of patient autonomy.

In addition, by the 2nd Year of Fellowship one should be able to:

- Recognize and address physician impairment and
- Conduct clinical nephrology research with honesty, integrity and protection of patients’ rights.

5. Practice-Based Learning and Improvement

Principal Educational Goals

- Identify and acknowledge gaps in personal knowledge and skills in the care of one’s patients;
- Analyze nephrology practice experiences and
- Develop and implement strategies for filling gaps in knowledge and skills.

By the end of the 1st Year of Fellowship, one must be able to:

- Acknowledge limitations and errors and when to ask for assistance;
- Perform directed study based on faculty feedback.
- Seek and accept feedback from peers and faculty;
- Participate in quality improvement activities and root cause analysis.

In addition, by the end of the 2nd Year of Fellowship, one should be able to:

- Perform directed study based on results of faculty feedback;
- Analyze one’s own practice by reviewing charts through audits;
- Teach students, residents and peers effectively about various renal issues;
- Use patient care errors to teach students, residents, and peers;
- Use information technology to enhance care of complex patients with kidney disease.
- Analyze and improve one’s own practice by reviewing charts through audits.

6. Systems-Based Practice

Principal Educational Goals

- Understand and utilize the multidisciplinary resources necessary to care optimally for hospitalized patients with kidney disease;
- Learn to collaborate with other members of the health care team to assure comprehensive care of the patient with kidney disease;
- Use evidence-based, cost conscious strategies in the care of patients with all forms of kidney disease; and
- Learn to analyze complex systems of care to result in improved patient outcomes.

By the end of the 1st Year of Fellowship, one must be able to:

- Collaborate with discharge planners to arrange safe and appropriate discharges for patients with kidney disease;
- Involve social workers in care of patients with kidney disease;
- Recognize the systematic complexities that affect patient outcomes;
- Function as the nephrology team leader within a multidisciplinary team;
- Serve as a patient advocate in the outpatient and inpatient setting;
- Develop a working knowledge of various care systems and the most appropriate disposition for patients with kidney disease.

By the end of the 2nd Year of Fellowship, one should be able to:

- Direct other subspecialty, surgical, nutritional, podiatric and social service consultations for patients with kidney disease;
- Use systemic approaches to reduce errors and effectively transition kidney disease patients between care settings;
- Strive to optimize patient follow-up by effective discharge planning to the nephrology clinic or dialysis unit;
- Promote medication reconciliation.
- Practice effective allocation of health care resources to avoid compromising quality of care;
- Recognize system deficiencies/complexities and strive for system improvement for patients with kidney disease.