

# CPCC Fellowship

## Self-Assessment Survey

### Results Summary 2022-2023

#### 1. How many years have you been in practice?

- A POST: 20
- B POST: 24
- C POST: 11
- D POST: 3
- E POST: 6
- F POST: 4
- G POST: 12

#### 2. How many hours per week are dedicated to patient care?

- A POST: 16
- B POST: <3
- C POST: 8
- D POST: 32
- E POST: 8
- F POST: 40
- G POST: 8

#### 3. What are you hoping to accomplish during your year in the fellowship (POST: what did you accomplish)?

A PRE: Learning more about community impact within primary care, and applying this learning to a meaningful project to benefit the community.

A POST: Soooo much! I have used the content of this fellowship to further develop curricula I create and deliver at my own residency program, emphasizing community integration.

B PRE: Network, learn more about primary care resources, adult education

B POST: I learned more about Cincinnati resources for unique or underserved populations. I created/implemented a QI project. I increased/enhanced my network.

C PRE: Learn about ways to improve healthcare access and quality of care to those most in need.

C POST: Improved the number of completions of diabetic eye exams in our office. presented on it at our School of Health Sciences meeting

D PRE: Enhance my knowledge in primary care topics including mental health and addiction medicine. Expand my quality improvement work on hypertension control across all clinics within the health department.

D POST: Learned more about social determinants of health, Cincinnati's history with race and racism, management of depression and substance use disorders. I also learned ways to prevent burnout.

E PRE: I hope to gain knowledge that I can apply in practice and emphasize in the classroom

E POST: IHI training modules, insights from community providers on various topics concerning SDOH, Substance abuse, Racism, Adult education, and LGBTQ. I also created and implemented a QI project

F PRE: a better understanding of the systems involved in primary care, how to better advocate for patients to navigate those systems, and interprofessional development with colleagues beyond my direct team

F POST: I implemented a transition of care clinic for our family medicine center. I have learned about SUD and have changed my practice patterns on the inpatient service to better treat AUD.

G PRE: I'm hoping to gain leadership skills I can bring back to my residency program. I would love to help shape the culture of our new program to a more positive one, where residence and faculty look forward to going each day.

G POST: I didn't know I was going to be a program director of a residency program at the time, but this fellowship was the best training I could have received to prepare me. I now feel comfortable enough to lead QI education and help residents with projects. All of the important education concerning DEI, mental health, SUDs, I can disseminate to all faculty and residents. I will be recycling a lot of the material for faculty development. My PowerPoint lectures are now so much better and have made me a better teacher. This program also let me start a much larger QI project that I want to be a staple of our residency program for years to come: EPIC efficiency training to prevent burn out.

**4. What concerns do you have embarking on the fellowship journey (POST: What was your biggest barrier in completing your individual fellowship)?**

A PRE: Perhaps limited time, but I've been very judicious with my scheduling this year to accommodate the demands of the fellowship. I really want to get as much from it as possible.

A POST: Time. It's my most limited resource, but I was intentional on prioritizing this fellowship so I could get the most from it.

B PRE: Too much to add to my already full plate?

B POST: Time

C PRE: Not coming up with good ideas or contributions to the fellowship.

C POST: Time

D PRE: I do not have any concerns.

D POST: Staff turnover

E PRE: Time commitment

E POST: Time

F PRE: none! I am excited to learn from the curriculum and others!

F POST: Loss of internal clinic support to implement the project as was originally intended was challenging.

G PRE: I'm concerned the changes I would like to make will be met with resistance and annoyance.

G POST: There was a 1.5 month hiatus I had to take from the fellowship due to unexpectedly becoming a program director. Luckily, I was ahead of schedule on my fellowship assignments at the time.

**5. Is there anything else you would like to share with the program director?**

A PRE: I am grateful for the opportunity and appreciate your efforts to make this a successful curriculum and experience.

A POST: Thank you so much! I am grateful for the experience, education, and people.

B PRE: No

B POST: It's already been shared.

C PRE: Not at this time

C POST: Thank you for all your insights and resources. I have learned a lot during my year with the fellowship.

D PRE: No

D POST: No

E PRE:

E POST: Thank you for allowing me the opportunity to hear from other community providers on unique topics.

F PRE:

F POST: I learned so much through the curriculum and dedicated time together in our afternoon and evening sessions. I feel better prepared to address the needs of my patients. This program was perfect for me at this stage of my career as it provided an educational and mission 'boost' to refocus on these efforts now that I have settled in to being an attending.

G PRE: The culture at our program hasn't been great. I know part of this is due to being understaffed as we need to hire new faculty.

G POST: That she is awesome!

## Quality Improvement

1. How important is quality improvement in your ongoing development as a primary care provider?

	Pre	Post
A	5	4
B	2	3
C	4	4
D	5	5
E	2	3
F	4	4
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

2. How often is time a barrier to executing quality improvement activities?

	Pre	Post
A	5	5
B	4	5
C	5	4
D	4	4
E	5	5
F	5	4
G	3	3

1= Almost Never
2= Once in awhile
3= Sometimes
4= Often
5= Almost always

3. How confident are you identifying quality problems in your office?

	Pre	Post
A	4	4
B	2	3
C	4	4
D	4	5
E	3	3
F	2	4
G	5	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

4. What quality improvement tools have you used in your practice? [check all that apply]

	Audit		Process Maps		Healthcare Matrix		Fishbone Diagrams		Systems analysis		Rapid cycle change methodology	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
A	Y	Y	Y	Y	N	N	Y	Y	Y	Y	N	N
B	Y	Y	N	N	N	N	N	N	N	N	N	N
C	Y	Y	N	N	N	N	N	N	N	Y	N	N
D	N	N	Y	Y	N	N	Y	Y	Y	Y	Y	Y
E	N	N	N	N	N	N	N	N	N	N	N	N
F	N	Y	Y	Y	N	N	N	N	N	N	N	Y
G	N	Y	N	Y	N	N	N	Y	N	N	N	N

**Quality Improvement, Continued**

5. How confident are you with each of the following steps involved in implementing a QI project?

	Data Collection		Designing an intervention		Evaluating Outcomes	
	Pre	Post	Pre	Post	Pre	Post
A	4	5	4	5	4	5
B	2	3	2	3	2	3
C	4	4	3	4	4	4
D	4	4	4	4	4	4
E	2	2	2	2	1	2
F	2	4	2	4	2	3
G	2	5	2	5	2	5

<b>1= Not at all</b>
<b>2= Slightly</b>
<b>3= Moderately</b>
<b>4= Quite</b>
<b>5= Extremely</b>

6. How confident are you working in interprofessional teams to provide patient care?

	Pre	Post
A	3	5
B	5	5
C	4	4
D	5	5
E	3	3
F	3	4
G	5	5

<b>1= Not at all</b>
<b>2= Slightly</b>
<b>3= Moderately</b>
<b>4= Quite</b>
<b>5= Extremely</b>

## Social Determinants of Health

1. How confident do you feel creating a plan for the health-related social needs of your patients?

	Pre	Post
A	3	4
B	3	3
C	3	4
D	1	2
E	3	2
F	1	3
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

2. How knowledgeable are you about community resources for patient referrals?

	Pre	Post
A	2	4
B	3	3
C	3	3
D	2	2
E	2	2
F	2	3
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

3. How knowledgeable are you about the needs of your office's surrounding community such as social determinants of health (SDH), health inequities and community resources?

	Pre	Post
A	2	4
B	3	3
C	2	3
D	3	2
E	3	2
F	2	3
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

**Social Determinants of Health, Continued**

4. How knowledgeable are you about public policy (at local, state or national level) regarding the practice of primary care?

	Pre	Post
A	3	4
B	2	2
C	2	3
D	2	2
E	2	2
F	1	2
G	2	3

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

5. How confident are you being an advocate for policy change?

	Pre	Post
A	3	4
B	3	2
C	3	4
D	2	3
E	2	2
F	1	3
G	3	3

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

## Substance Use Disorder

1. How comfortable are you having opioid dependent patients come to your practice?

	Pre	Post
A	4	4
B	4	3
C	3	3
D	2	3
E	2	3
F	2	2
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

2. Are you currently licensed to provide Medication Assisted Treatment (MAT) for opioid dependence (such as with buprenorphine and/or Suboxone)?

	Pre	Post
A	N	N
B	N	N
C	N	N
D	N	Y
E	N	N
F	N	Y
G	N	N

3. How confident are you diagnosing substance use disorders?

	Pre	Post
A	4	5
B	2	2
C	2	3
D	4	4
E	4	4
F	2	4
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

4. How knowledgeable are you about local treatment services and community resources for patient with substance use disorders?

	Pre	Post
A	3	5
B	3	3
C	2	3
D	2	3
E	2	2
F	2	3
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

## Substance Use Disorders

5. How likely is it that increased public access to naloxone will increase risky opioid use?

	Pre	Post
A	2	1
B	2	1
C	2	1
D	1	1
E	1	1
F	1	1
G	1	1

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely



## Mental Health

1. How knowledgeable are you about the Collaborative Care Model for the care of patients with mental illness?

	Pre	Post
A	3	5
B	4	4
C	2	3
D	2	3
E	3	3
F	2	4
G	1	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

2. How confident are you in your ability to assess suicide risk of your patients?

	Pre	Post
A	5	5
B	3	3
C	4	4
D	4	4
E	3	3
F	3	4
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

3. How often do you refer patients to use mental health apps?

	Pre	Post
A	3	4
B	3	3
C	3	4
D	1	1
E	1	1
F	3	4
G	1	4

1= Almost never
2= Once in awhile
3= Sometimes
4= Often
5= Almost always

4. How familiar are you with different models which integrate behavioral health services into the primary care setting?

	Pre	Post
A	3	5
B	3	3
C	2	3
D	2	3
E	2	2
F	2	3
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

**Mental Health, Continued**

5. How knowledgeable are you about screening tools for psychiatric illness?

	Pre	Post
A	4	5
B	2	2
C	3	4
D	3	3
E	4	4
F	3	4
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

6. How confident are you in your ability to form a treatment plan for individuals with mild-moderate psychiatric illness?

	Pre	Post
A	5	5
B	2	2
C	3	3
D	3	3
E	4	5
F	2	4
G	5	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

## Medical Educator

1. What is your current level of mastery as a medical educator?

	Pre	Post
A	4	5
B	3	4
C	2	4
D	3	3
E	2	2
F	3	3
G	4	5

<b>1= Novice</b>
<b>2= Advanced beginner</b>
<b>3= Competent</b>
<b>4= Proficient</b>
<b>5= Expert</b>

2. How confident are you teaching adult learners in the clinical setting?

	Pre	Post
A	4	5
B	3	4
C	3	4
D	3	3
E	3	3
F	3	3
G	4	5

<b>1= Not at all</b>
<b>2= Slightly</b>
<b>3= Moderately</b>
<b>4= Quite</b>
<b>5= Extremely</b>

3. How confident are you teaching adult learners (such as residents, students, or peers) in the classroom setting?

	Pre	Post
A	4	5
B	3	4
C	3	4
D	3	3
E	4	3
F	2	3
G	4	5

<b>1= Not at all</b>
<b>2= Slightly</b>
<b>3= Moderately</b>
<b>4= Quite</b>
<b>5= Extremely</b>

4. How many presentations have you given to learners (students, residents, or peers) in the past one year?

	Pre	Post
A	22	30
B	20	>20
C	40-45	50
D	5	3
E	25	50
F	6	>10
G	14	13

**Medical Educator, Continued**

5. How confident are you creating an individualized learning plan?

	Pre	Post
A	4	5
B	3	3
C	3	4
D	2	2
E	2	2
F	2	4
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

6. How knowledgeable are you in creating a welcoming and safe learning climate?

	Pre	Post
A	4	5
B	3	4
C	4	5
D	5	5
E	2	4
F	4	4
G	4	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

## Wellness & Burnout

1. How important is provider wellness or well-being to your continued development as a primary care provider?

	Pre	Post
A	5	5
B	3	3
C	5	5
D	5	5
E	4	4
F	5	4
G	5	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

2. How often do you assess your wellbeing in the following ways:

	Signs/Symptoms of Burnout		Work Satisfaction/ Engagement		Level of stress	
	Pre	Post	Pre	Post	Pre	Post
A	4	5	4	5	4	5
B	3	3	3	4	3	4
C	4	4	4	4	4	4
D	4	4	4	4	5	4
E	4	4	4	3	4	4
F	4	5	4	5	4	5
G	1	5	1	5	1	5

1= Almost never
2= Once in awhile
3= Sometimes
4= Often
5= Almost always

3. How satisfied are you with your current work-home boundaries?

	Pre	Post
A	3	2
B	2	2
C	2	4
D	3	4
E	2	1
F	3	4
G	2	4

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

4. How knowledgeable are you about resources to improve your personal wellness?

	Pre	Post
A	3	4
B	3	3
C	3	4
D	2	4
E	3	2
F	3	4
G	3	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

**Wellness & Burnout, Continued**

5. How knowledgeable are you about resources to improve the wellness of your organization (such as your clinical practice site)?

	Pre	Post
A	4	3
B	3	3
C	3	4
D	2	2
E	2	2
F	2	3
G	2	5

1= Not at all
2= Slightly
3= Moderately
4= Quite
5= Extremely

6. Do you currently have a personal wellness goal?

	Pre	Post
A	N	Y
B	Y	Y
C	Y	Y
D	Y	Y
E	Y	N
F	N	N
G	Y	Y