Loma Linda University School of Medicine Competencies Year 4

Patient Care - Students must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health in the context of whole person care.

- PC 1-g Obtain focused pertinent history in urgent and emergent settings
- PC 1-h Identify and use alternate sources of information to obtain history when needed
- PC 1-i Gather complete and focused histories in an organized fashion, appropriate to the clinical situation and specific population
- Pc 2-h Conduct relevant, complete and focused physical examinations
- PC 3-e Synthesize and present relevant clinical information with a prioritized differential diagnosis and plan appropriate to the setting and audience efficiently and accurately
- PC 4-f Document encounters including reporting of information and development of a prioritized assessment and plan efficiently and accurately
- PC 5-d Demonstrate the ability to perform the skills outlined in the School's Red Book
- PC 5-e Explain components of informed consent (sub-I)
- PC 6-c With appropriate supervision, manage patients with acute and chronic illness or in preventive, continuing, rehabilitative, or end of life settings in inpatient and ambulatory environments
- PC 6-i Manage multiple complex patients simultaneously at the level of an intern
- PC 6-j Recognize life threatening emergencies and know appropriate initial interventions
- PC 6-k Conduct discharge planning and individualized disease management and/or prevention plans, including behavioral change
- PC 6-I Communicate sign-out effectively
- PC 6-m Collaborate with health care professionals, including those from other disciplines, to provide patient-focused care
- PC 6-n Describe how the principles of complementary medicine apply to patient care
- PC 6-o Recognize medical errors in the care of patients and develop tactics to correct, communicate and prevent them
- PC 6-h Explore the application of clinical and translational research during journal club sessions
- PC 7-f Integrate psychosocial care and patients' spiritual beliefs and resources into ongoing treatment and discharge plans
- PC 7-g Collaborate with staff, family, pastoral care and other members of the healthcare team to address patients' spiritual care

Medical Knowledge - Students must demonstrate the ability to effectively source and validate medical information, possess an adequate foundation of basic science knowledge, and apply this knowledge and information to the care of patients using clinical reasoning and problem solving skills with a whole person care approach.

Each student must meet all of the medical knowledge competencies before being promoted to their Senior year.

- MK 1-e Comprehend the established and evolving biomedical, clinical, epidemiological social and behavioral sciences (graduate)
- MK 2-b Explain the important non-biological determinants of poor health and the economic, psychological, social, and cultural factors that contribute to the development and/or persistence of medical illness
- MK 2-c Evaluate the health, demographic and socioeconomic characteristics of a medically underserved population
- MK 2-d Engage in effective interventions for health promotion and disease prevention
- MK 3-b Apply theories and principles that govern ethical decision-making and human values in patient care
- MK 3-c Comprehend the major ethical dilemmas in medicine
- MK 3-d Apply theories and principles that govern ethical decision-making and the major ethical dilemmas in medicine to the ethical complications encountered on each of the required clerkships
- MK 4-b Retrieve biomedical and clinical science information from electronic databases and other resources
- MK 4-c Critically appraise biomedical and clinical science information
- MK 5-f Use medical knowledge and clinical reasoning skills to evaluate, diagnose and manage high fidelity, simulated patients encountered during the intensive care and emergency medicine clerkships
- MK 5-g Use medical knowledge and clinical reasoning skills to effectively evaluate and manage hospitalized patients during a subinternship rotation
- MK 5-h Apply medical knowledge and clinical reasoning to effectively evaluate and manage patients subjected to the effects of bioterrorism

Professionalism - Students must demonstrate professional behaviors, attitudes and beliefs that allow patients, colleagues, members of the healthcare team and society to approach each physician encounter with an expectation of trustworthiness.

- PROF 1-g Be responsive to patient needs that supersede self-interest while recognizing the need for personal wholeness
- PROF 1-h Honestly acknowledge errors including in clinical situations (e.g. M&M)
- PROF 1-i Adhere to basic bio-ethical principles and human values in caring for patients and in relating to patient's families and others involved in patient care
- PROF 2-f Provide whole person support to patients and their families (physical, educational, social, psychological and spiritual)
- PROF 2-g Treat patients with dignity, civility and respect regardless of their race, culture, gender, ethnicity, age, socioeconomic status, disability, or sexual orientation
- PROF 2-h Manage conflict and respect patients' autonomy when their values differ from one's own

PROF 2-i Advocate for individual patient needs

PROF 3-e Recognize unprofessional behaviors and misconduct in colleagues and seek advice to carry out an ethically appropriate response

PROF 3-f Intentionally seek opportunities to be helpful to the clinical team, including maintaining prompt and appropriate accessibility

PROF 3-g Demonstrate awareness of the responsibility to promote health at the societal level.

PROF 3-h Exhibit honesty in interactions, documentations, research, and scholarly activity. (graduation)

PROF 3-i Advocate for just distribution of health resources

Systems-based Practice -Students must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources, including interprofessional teams, in the system to provide optimal health care.

SBP 1-g Demonstrate awareness of responsibility to promote health at the patient and societal level

SBP 1-e Incorporate knowledge about systems to develop a care plan for patients to promote health and treat illness

SBP 1-f Describe how system structures, policies, and costs affect healthcare delivery

SBP 2-f Engage in systems-level approaches to assess and improve quality of patient care including patient satisfaction, cost-effectiveness and clinical outcomes

SB 3-c Contribute effectively and respectively with all members of the interprofessional team

Practice-based Learning& Improvement-Students must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning.

PBL 1-c Apply the principles and methods of EBM to acquire, appraise, and assimilate new basic biomedical science and clinical information in direct patient care settings.

PBL 1-d Use and value advances in information technology to access evidence at the point of care and to optimize patient care.

PBL 1-e Integrate this new information into the practice of medicine while considering the values, preferences and expectations of the patients for whom they are responsible.

PBL 2-d Actively seek formative and summative assessment from supervisors and other members of the health care team.

PBL 2-e Willingly acknowledges personal limitations in one's own knowledge skills, and judgment.

PBL 2-f Welcomes and uses feedback and practice improvement data to reflect and set specific learning goals for self-improvement in the clinical setting.

PBL 2-g Participates in the education of patients, families, peers and other health professionals.

PBL 3-b Engage in the process of continuous quality improvement during clinical rotations.

PBL 3-c Apply the principles of quality improvement to assess and improve clinical performance and patient safety

Interpersonal & Communication Skills - Students must be able to demonstrate culturally sensitive interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates.

ICS 1-d Establish collaborative and constructive relationships with patients and families

ICS 2-c Demonstrate a patient-centered interview that elicits the patient's agenda and story without bias, identifying and responding to emotional cues, summarizing and checking for accuracy of content and interpretation, and resolving barriers to effective listening ICS 3-d Communicate effectively with patients and families of diverse backgrounds and cultures, including engaging in collaborative diagnostic and treatment planning and exploring potential obstacles to the execution of plans

ICS 5-e Present and document patient information in an organized, accurate and logical fashion, using a problem-based approach and distilling relevant information into an assessment and plan in a variety of settings

ICS 5-c Contribute effectively and respectfully with all members of the interprofessional team in a variety of settings, including interpersonal conflicts, hand-offs and transitions of care

Whole Person Care - Through the study and application of whole person care, students will develop a knowledge of wholeness that can be applied to their personal and professional lives and the care of patients.

WP 1-b Use the LLU model of whole person care and the LLU spiritual history in patient care

WP 2-c Demonstrate personal wholeness

