

Patient Care and Education Balance

July 16, 2023

Dear Residents,

This month we will review the annual program goals that we set for the last academic year and will plan new ones for the current academic year. **One lingering issue that crops up on the annual ACGME survey** is the "patient care to education balance" and the closely related "protected time to participate in structured learning." The former is a more global measure of education across all contexts, whereas the latter focuses on classroom style instruction.

We have worked with the faculty to ensure that rounds and clinic finish on time for noon conference, and that you have time to attend morning report. Admission caps and attention to team census limits also help prevent patient care overload.

But none of this has moved the needle. Perhaps this is an exemplar of <u>Einstein's Parable of Quantum Insanity</u>. "Insanity is doing the same thing over and over and expecting different results."

As a program we have eliminated most work hour violations and have largely adhered to admission and team census limits. Perhaps the recalcitrant elements are patient complexity, work compression, rushed teaching rounds and communication inefficiency (frequent pages and incessant Epic chat). Perhaps it is the sheer distance one travels from patient room to patient room, the slowdown from the need for language translation, the high number of patients in some form of isolation necessitating donning and doffing of protective clothing, all of which together conspire to increase the time required for patient care.

The other element to consider is that the **value of experiential learning from direct patient care** is not immediately realized in the moment. Understood in this way, patient care *is* education. It follows that without sufficient experiential learning, formal classroom learning could not possibly close the education gap. What could be enhanced is more deliberate teaching during ward rounds or in the clinic. Perhaps we are all too rushed just getting the work done.

You may recall that in orientation week, I drew your attention to the idea that **high patient volumes can give the illusion of learning** ("fluency") but detract from the acquisition of in-depth knowledge. Attention to detail and a deliberate approach, while time-consuming at first, will eventually be sped up by repetition and holds the promise of delivering the method that will work efficiently for you for many years to come.

The concept of patient care to education balance is reminiscent of the fallacy of "work-life balance." If we love what we do, we don't have to wait for work to finish to get to the satisfying moments we call life. Work/life is more motion than balance. If education is an inherent property of patient care, then we can learn in the moment. As you move through your day, focus on the continuous education you are explicitly or implicitly receiving rather than waiting for that aliquot of time labeled as "education."

I don't mean to imply that protected/structured education time free of interruption from patient care needs is not valuable. It very much is. But let's **visualize our education as omnipresent** in everything we do.

If doing the same thing and expecting different results is insanity, then according to the 2004 Physics Nobel Prize winner, Frank Wilczek, "Naïveté is doing the same thing over and over, and always expecting the same result."

In other words, let's do the same thing and expect different results. For this we need to view our patient care as education in motion and structured learning opportunities as sacred time to reinforce what you are learning at the bedside and in the clinic.

I don't pretend to fully comprehend all the elements that give our program a low score in the patient care to education balance metric. Accordingly, I need your assistance in highlighting factors that interfere with your education on any rotation. **The end-of-rotation evaluation form** has a question that queries whether the rotation you just finished had reasonable work requirements. Do, give us as much detail as possible.

It's another hot week! Stay hydrated.



Photo by <u>ShengGeng Lin</u> on <u>Unsplash</u> Dino Kazi