

Continuity of Care and Identity Formation: A Critical Review of Interventions in Post-Graduate Training

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“Continuity is key in the development of family physicians whose practices are truly patient-centered and comprehensive”, Kerr 2011

Context & Rationale

- The CFPC identified “Continuity of education and patient care” as a key component of the Triple C curriculum (2011)
- Continuity of care (CoC) is central to the practice of Family Medicine
- Mechanisms and impact on the formation of a caring physician identity is unknown

Objective

- Examine literature for interventions and methods of assessment
- Evaluate evidence of how continuity of care training impacts formation of the family physician identity

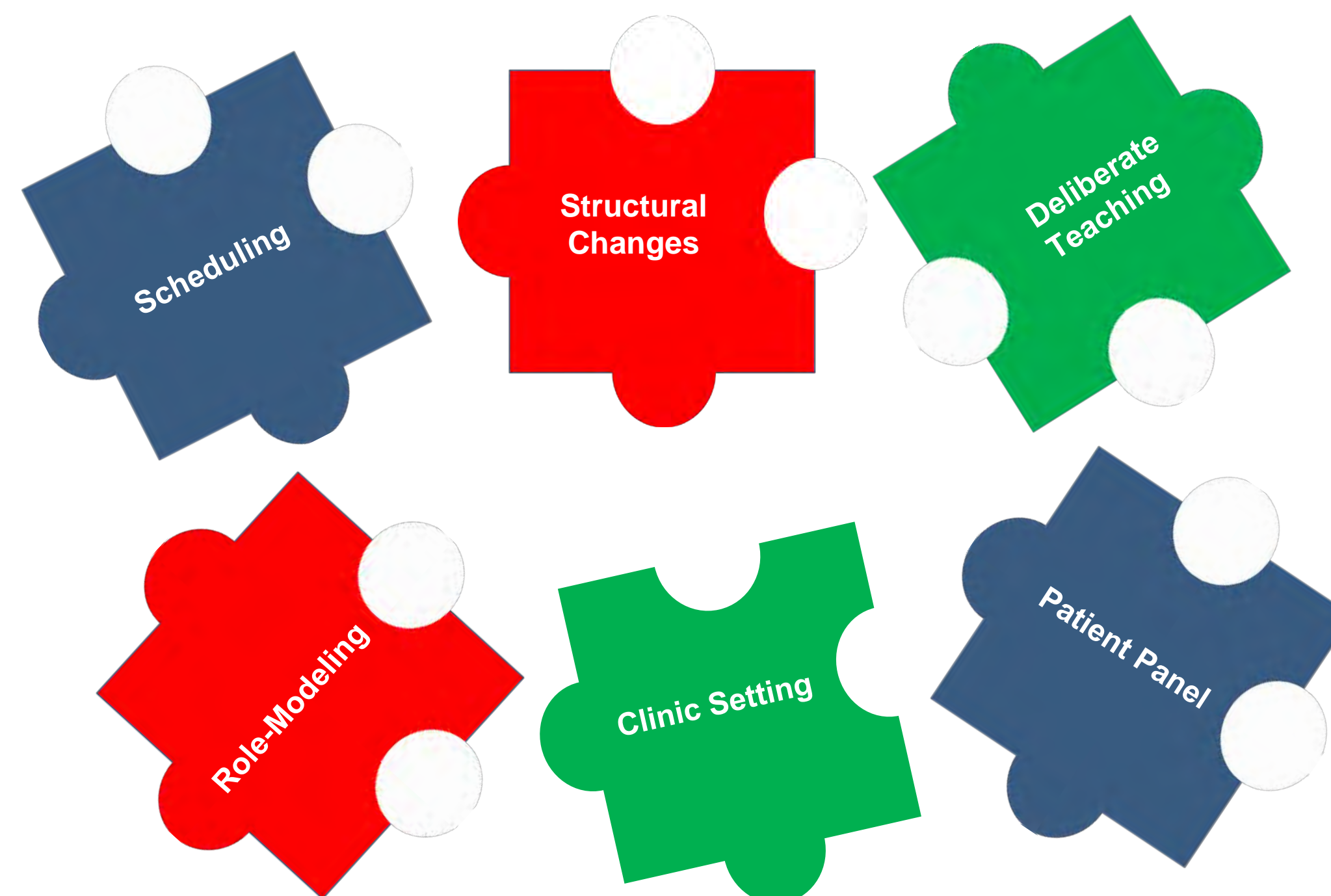
Method

- Literature search via MEDLINE, EMBASE, CINAHL (English, 1975-present) that described or evaluated CoC in postgraduate training
- Analyzed for themes across interventions, for the proposed pedagogic mechanisms or rationales, and evidence of effectiveness

Results

- 22 papers analyzed
- 15 describe organizational changes to program structure
- 7 describe evaluation using physician, trainee, or patient satisfaction
- Interventions: structural changes (e.g. block vs. longitudinal), scheduling (fixed-day vs. variable-day half day back), clinic setting (university-based teaching unit vs. community practice)
- Themes: patient panel (demographics), deliberate teaching, preceptor role-modeling
- Pedagogic mechanisms not clearly articulated
- Gap in the literature exploring the influence of CoC learning on physician identity

CoC Interventions and Themes

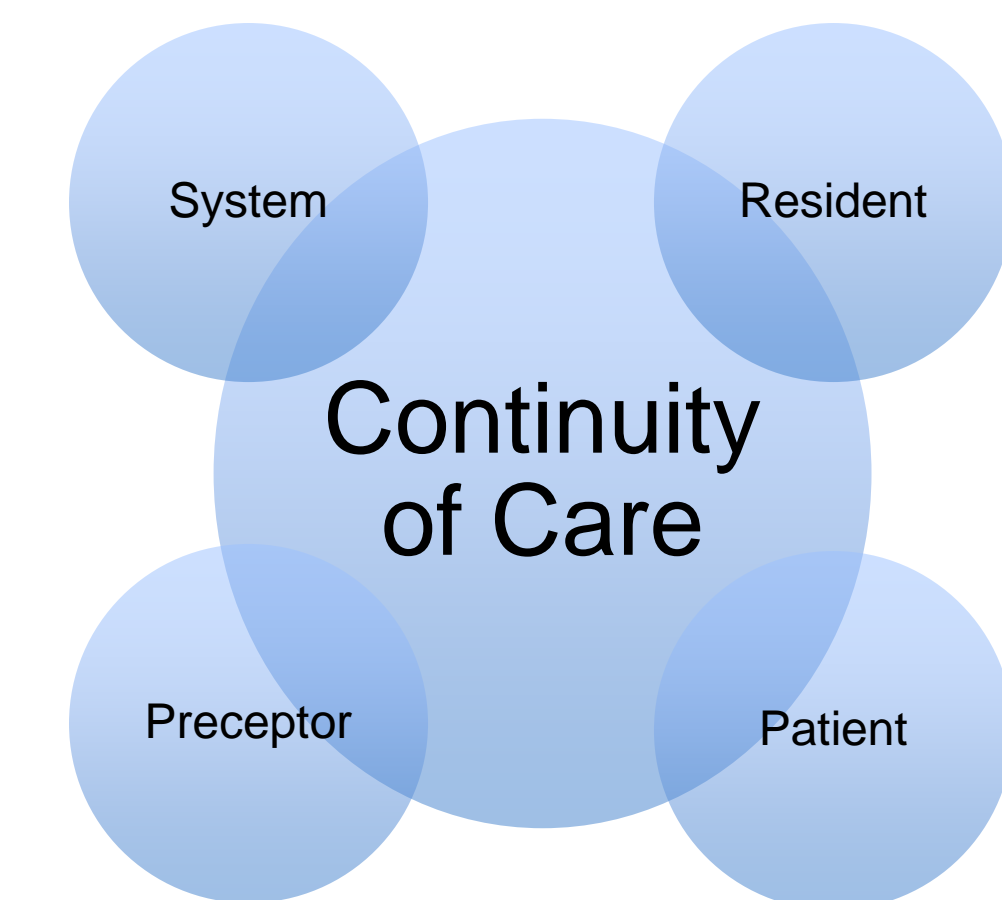


Conclusion

- Multiple interventions described with lack of rigorous evaluation or consensus on best approaches
- SRP (system, resident, preceptor) factors need to be mobilized to facilitate learning CoC
- Opportunity to explore programmatic approach to integrate CoC into emerging physician identity

Next Steps

- Develop evaluation tools to assess CoC learning
- Consider the patient’s role in CoC learning
- Apply programmatic approach to inculcate CoC into physician identity
- Adopt identity construction frameworks to evaluate the program



“We must look closely at whether our evaluation methods are focusing on those aspects of care which emphasize continuity”, Hennen 1981

Abbreviated References

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4. Schultz K. Strategies to enhance teaching about continuity of care. *Can Fam Physician* 2009; 55: 666-668.