

15 Current Emergency Medicine Resident Knowledge of Community Resources and the Impact of Structured Community Resource Visits

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Background: Ensuring safe discharge plans for patients is a critical and complex part of emergency medicine (EM). Emergency physicians are required to align the needs of underserved patients with an array of community resources. Despite their crucial role, the capabilities of these resources may be poorly understood by emergency physicians and residents.

Objectives: To evaluate our EM residents’ current knowledge of community resources and evaluate their knowledge after structured community resource visits.

Methods: We conducted a 12-item pre-visit survey using a five-point Likert scale (1 = strongly disagree, 3 = neutral, 5 = strongly agree) on the residents’ current knowledge of community resources in general, knowledge about specific community resources, and interest in learning more. Next, we conducted visits to several community health partners: a safety net clinic; a drug rehabilitation center; a mental health center; and the area’s largest homeless shelter. During transportation to each site, emergency department social workers spoke with residents regarding the role each center plays in safely discharging our patients. This information was supplemented with a tour and a question-and-answer session with staff at each location. A similar 13-item post-survey was administered at the end of the visits.

Results: Twenty of 24 residents participated in the community resources visits: 20/20 completed the pre-visit survey, and 19/20 completed the post-visit survey. Residents significantly improved their understanding of community resources after the visit ($p < 0.0001$) and significantly improved their understanding of how long it takes for patients to access community resources ($p < 0.0001$). All residents either agreed or strongly agreed that they learned important information from the community resource visits that will help them take better care of patients. Eighteen of 19 agreed or strongly agreed that they enjoyed the opportunity to visit the safety net clinics. (One was neutral).

Conclusion: Providing residents with structured visits to community resources provides them an enjoyable experience, greatly increases their knowledge and understanding of these very important resources, and allows them to deliver better patient care.

Table. Non-parametric Wilcoxon test.

Question/Variable	Total	[PRE-Test] Median (Mean +/- Std. Dev)	[POST-Test] Median (Mean +/- Std. Dev)	P-value (2 sided)
I have a good understanding of the community resources available	39	2.00 (2.05 +/- 0.51)	4.00 (4.00 +/- 0.47)	<0.0001*
I have a good understanding of how long it will take to access community resources	39	2.00 (1.80 +/- 0.41)	4.00 (4.00 +/- 0.00)	<0.0001*
I have a good understanding of the mental health services provided by RSI	39	2.00 (2.10 +/- 0.45)	4.00 (4.16 +/- 0.60)	<0.0001*
I feel that RSI is a valuable resource for our emergency department patients	39	4.00 (3.85 +/- 0.81)	4.00 (4.11 +/- 0.88)	0.299
I have a good understanding of health services offered by Swope Health Services	39	2.00 (2.25 +/- 0.55)	4.00 (4.37 +/- 0.50)	<0.0001*
I know the time it takes for a patient to get a follow-up appointment at Swope Health Services	39	2.00 (1.80 +/- 0.52)	4.00 (4.16 +/- 0.60)	<0.0001*
I know how Swope Health charges patients for their healthcare	39	2.00 (1.90 +/- 0.72)	4.00 (4.32 +/- 0.58)	<0.0001*
I know how to refer a patient to the City Union Mission and know their rules	39	2.00 (1.75 +/- 0.55)	4.00 (3.68 +/- 0.82)	<0.0001*
I have a good understanding of the services provided by Wyandot Mental Health	39	2.00 (2.05 +/- 0.60)	4.00 (4.00 +/- 0.47)	<0.0001*
I know the time it takes to see a provider at Wyandot Mental Health	39	2.00 (1.80 +/- 0.41)	4.00 (3.89 +/- 0.57)	<0.0001*
It is important for ER Physicians to have a good understanding of community resources	38	5.00 (4.53 +/- 0.77)	5.00 (4.74 +/- 0.45)	0.449
Interested/Enjoyed learning about safety net clinics and community resources	38	5.00 (4.79 +/- 0.42)	4.00 (4.37 +/- 0.60)	0.02*

16 Viewing Trends in Emergency Medicine Residency Program Websites

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Background: Emergency medicine residency programs use program-specific websites with multiple goals including highlighting curriculum, providing information for applicants, and supplying relevant contact information. Little is known, however, regarding how often these websites are accessed and for what purposes, particularly around residency interview season.

Objectives: To describe trends in program website visits that can be used to create a schedule for website updates in order to relay up-to-date information to potential applicants.

Methods: Statistics regarding website access information from one ACGME-accredited postgraduate year 1-4 large, urban EM residency program website was compiled retrospectively using SquareSpace analytics over the period July 1, 2016 – June 31, 2018. We specifically analyzed the annual top five most-visited dates, along with daily trends during the residency interview season (October – February). Additionally, we described the most frequently viewed sections, methods of visit (tablet, desktop, mobile device), and source of viewership.

Results: Over the 24-month study period, there was an average of 56.2 visits/day including 267.4 pageviews/day: 67% of all visits were via desktop, 30% via mobile device, and 3% via tablet. Google search accounted for 49% of visits, direct url entry for 42%, and Bing search for 3%. The vast majority of visits (94%) originated from the United States with less than 1% from each of Canada, India, Korea, the United Kingdom, and Russia. The most popular content by pageview were “people”(72,542), “home page” (41,442), “clinical curriculum” (37,346), and “medical students” (15,314). The five most-visited dates are all related to various medical student submission processes. During interview season, peaks occurred on the dates immediately preceding an interview date.