The award of CHF 50'000.-- is granted to the following project:

**Definition of Competencies for Attending Physicians in General Internal Medicine Departments in Swiss Hospitals: a multicenter qualitative study**

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**Abstract**

**Background:**
The increase in complex multimorbid patients poses challenges for patient care in hospitals. By fragmentation of General internal Medicine (GIM) into subspecialities, the risk of uncoordinated and contradictory treatment rises and leads to increased costs, length of hospital stay and higher readmission rates. Competent physicians are demanded to provide a specialized care of multimorbid, complex inpatients. In the US, hospitalists became specialists for the management of the inpatients, monitoring and prioritizing their complex care. The introduction of the hospitalist program resulted in reduced average length of stay and total hospital costs. The hospitalist core competencies do not only include clinical conditions and procedures, but also additional health care related tasks, such as communication, teaching, quality improvement, medical ethics, etc. In Switzerland, the competencies for attending physicians practicing in hospitals are not sufficiently defined, and additional non-medical tasks to successfully practice hospital medicine are not addressed. Due to this crucial shortcoming, the transition from resident to attending physician in hospitals is often burdensome and stressful. Regarding the different health care systems and medical training programs of the US and Switzerland, the implementation of competencies of the American Society of Hospital Medicine may not meet the needs in hospital medicine in Switzerland. Therefore, the broad objective of this project is to define the competencies of Swiss hospitalists and to identify the most important gaps in these competencies as a basis for the creation of a targeted training program.
Aims:
The specific aims of this project are
1. To define the essential competencies of an attending physician in hospitals in general internal medicine in Switzerland.
2. To identify the most important gaps in the defined competencies of junior attending physicians to successfully master the transition from resident to attending physician.
3. To create an innovative training program for future hospitalists based on the evaluated gaps in these core competencies.

We hypothesize that current objectives including medical knowledge and procedural skills as defined by the Swiss Society of General Internal Medicine (SGAIM) for a "Spitalinternist" do not adequately reflect the competencies needed for a hospitalist, and that there are essential gaps in mostly nonmedical areas, such as leadership function, communication and teaching skills.

Methods:
We will conduct a prospective multi-center qualitative study at twelve teaching hospitals in the German and French speaking parts of Switzerland, using focus group discussions and interviews. Focus group discussions (residents, attending physicians) and semi-structured in-depth individual interviews (medical directors and experts in medical education) will be conducted to define competencies of an attending physician in hospital and to identify the most important gaps. Focus group discussions and interviews will be audiotaped and transcribed. Results will be analyzed using thematic analysis in an iterative process, inductive and deductive approach. By defining characteristic competencies of an attending physician and the most emerging gaps in these competencies, an innovative training program as preparation for the tasks of a hospitalist can be created.

Relevance for General Internal Medicine:
Integrating multidisciplinary and interprofessional aspects arising in the care of the increasing number of complex multimorbid inpatients requires a broad spectrum of medical knowledge and skills. Attending physicians caring for medical inpatients need specific competencies to master medical and also non-medical tasks such as communication, leadership, management, teaching and quality improvement. With the proposed study, we will be able to create a detailed list of essential competencies for attendings working as generalists in Swiss hospitals. The definition of these competencies contribute to the further development of the specialty of GIM in hospitals and represents the first step for the development of a focused training program in hospital medicine. By promoting the competencies needed, a specific innovative training program based on the detected gaps of competencies have the potential to further improve quality, efficiency, and cost-effectiveness of inpatient care.

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