

<p style="text-align: center;">ATTENDINGS – END-OF-YEAR SURVEY</p> <p>Clinical Skills</p> <p>Please indicate how often you were able to TEACH residents about the following clinical skills, and how often the TEAM PERFORMED these skills, when appropriate, in hospitalized older adult patients. If a particular clinical skill was NOT relevant to any of your patients on service, indicate “NO PATIENT.”</p>	How often were you able to TEACH residents about the listed clinical skill while on service?				How often did the TEAM PERFORM the listed clinical skill, when appropriate, in hospitalized older adult patients?					
	Not At all	Once	More than once	No Patient	Never	Rarely	Sometimes	Usually	Always	No Patient
Conduct functional status assessments in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Conduct cognitive assessments in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Assess risk and prevent delirium in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Reduce polypharmacy and use of high risk/low benefit drugs in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Screen for depression in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Determine appropriateness for urinary (Foley) catheter use, discontinuing when inappropriate in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Mobilize hospitalized older adult patients early to prevent deconditioning.	1	2	3	9	1	2	3	4	5	9
Routinely perform a complete skin exam in hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Document advance directives and DNR orders with hospitalized older adult patients.	1	2	3	9	1	2	3	4	5	9
Discuss hospice care with hospitalized older adult patients and their families.	1	2	3	9	1	2	3	4	5	9
Routinely assess pain at bedside in persons with DEMENTIA.	1	2	3	9	1	2	3	4	5	9
Manage pain using the WHO 3-step ladder and opiate conversion table, and manage side effects of opiates.	1	2	3	9	1	2	3	4	5	9
Identify risk factors of hospital falls, including conventional and unconventional types of restraints.	1	2	3	9	1	2	3	4	5	9
Develop safe and appropriate discharge plans for older adult patients, beginning shortly after admission and involving communication with other members of the multi-disciplinary team (e.g., SW and case manager), family members, and primary care physicians.	1	2	3	9	1	2	3	4	5	9