

Needs Assessment/Gap Analysis Examples

Oklahoma has a high rate of mental illnesses among other U.S. states, and a poor track record for treating them. A recent study found that Oklahoma was second only to West Virginia for the percentage of adult residents suffering with a severe mental illness at 5.24% compared to 5.5%, and 4% for the nation as a whole. And Oklahoma is second only to Utah in the rate of adults suffering from mental illness of any kind (22% compared to 22.35%). More than 70% of adult Oklahomans with mental illness receive no treatment, usually due to lack of access to help. Moreover, in recent years Oklahoma spends approximately \$53 per person on mental health treatment, compared to a national average of \$120. Many mentally ill persons end up in the prison system or homeless. Helping psychiatrists to advocate for mental health care and better understand effective biological and psychotherapy treatments is a goal of COPS educational programs.

Surgical grand rounds present the opportunity for practitioners of general surgery to obtain more in-depth information in specialties other than their own. This was demonstrated in a recent qualitative study regarding attitudes toward departmental grand rounds; this study also demonstrated that this type of conference promotes collegiality and career growth opportunities. (Bynum RC, Dills, Corey B. Surgery Grand Rounds: Perspectives of the 21st Century Attendee. *J Surg Res.* 2020; 256: 657-662).

According to Mental Health America's 2020 report, Oklahoma ranks 41st in mental illness and substance use disorders, which means Oklahomans have a higher prevalence of mental illness and lower access to care. Frequent mental distress increased 19% between 2014 and 2019 from 13.1% to 15.6% of adults. Suicide increased 32% between 2009 and 2018 from 15.5 to 20.5 deaths per 100,000 population, although suicide rates surprisingly did not increase during the pandemic, while death rates from drug overdose did increase in this time period, possibly due to treatment programs being less available during lockdown. Adults who avoided care due to cost decreased 18% between 2011 and 2019 from 19.8% to 16.2%. Expansion of Medicaid may make treatment more available for mentally ill Oklahoma adults. These needs suggest that there are gaps to be addressed by our Grand Rounds.

Morbidity and mortality conference has been shown to improve understanding and confidence among practicing physicians and trainees (Prince JM, Vallabhaneni R, et al. Increased Interactive Format for Morbidity and Mortality Conference Improves Educational Value and Enhances Confidence. *J Surg Ed.* 2007; 64: 266-272). By transitioning our conference to a continuing education activity, specific learning points will be identified to improve in-person discussion and MOC questions addressing identified gaps will reinforce the learning objectives of the conference.

There is great need to engage with the most relevant, up-to-date research, standards & guidelines. Due to the wide breadth of physiology and pathology of the patients spanning all ages served by anesthesiologists we have a wide scope of gaps to cover. Therefore our clinical care series must leverage our collective knowledge and insight to move forward. We must assess opportunities for new skills and

insights that we can instill in our practice and share with colleagues. Challenges of our specialty include working in a fast paced environment comprised of frequent changes in the individuals that make up the patient's care team. Communication issues and the need to evolve care plans as we encounter clinical changes in the patient necessitate use of interprofessional teamwork. Successful conflict resolution is vital for effective teamwork and is critical for safe patient care in the operating room. Being able to appreciate the differences in training backgrounds, individual knowledge and opinions, and task interdependency necessitates skilled conflict management styles when addressing various clinical and professional scenarios. (Vasilopoulos, T. et al. Understanding Conflict Management Styles in Anesthesiology Residents. *Anesthesia & Analgesia*: 2018: 127; 1028-1034). Burnout can hinder effective patient care and communication, so strategies to recognize and mitigate burnout are important and need to be addressed.