A Medical Education Pearl

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Office of Medical Education
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Changes in Medical Education

1910 Flexner Report
Train physicians to practice in a scientific manner and engage medical faculty in research
Teacher-centered
Scientific way of thinking

2010 Carnegie Foundation Report Recommendations
- Standardize learning outcomes and assess competencies over time
- Strengthen formal & experiential knowledge with clinical exposure earlier in medical school
- Support learner’s performance and responsibility for quality of care
- Promote collaborative work with other healthcare professionals
- Cultivate professionalism

No standardization of medical schools

Teacher-centered
Scientific way of thinking

Learner-centered
Social sciences & humanities
Traditional UME

Curriculum based on instructor expertise or national organization recommendations

Educational Objectives

Assessment

Competency-based UME

Health care needs & system

Competency Outcomes

Curriculum based on competencies

Assessment

Frank, JR. Medical Teacher 2010. 32(8) 638-645.
## Traditional vs Competency-based Medical Education

<table>
<thead>
<tr>
<th>Variable</th>
<th>Educational Program</th>
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<tbody>
<tr>
<td></td>
<td>Structure/Process</td>
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<tr>
<td>Driving force: Curriculum</td>
<td>Content</td>
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<tr>
<td>Goal of educ. encounter</td>
<td>Knowledge acquisition</td>
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<tr>
<td>Assessment</td>
<td>Proxy</td>
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<td>Evaluation</td>
<td>Norm-referenced</td>
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<tr>
<td>Timing of assessment</td>
<td>Emphasis on summative</td>
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</tbody>
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Adapted from: Carracchio et al. *Acad Med*, 2002
CBME Models

Lerner COM (Case Western)

- Research
- Medical Knowledge in Basic & Clinical Sciences
- Communication
- Professionalism
- Personal Development
- Clinical Skills
- Clinical Reasoning
- Healthcare Systems
- Reflective Practice

Indiana University SoM

- Effective Communication
- Basic Clinical Skills
- Using Science to Guide Diagnostic, Management, Therapeutics, & Prevention
- Lifelong Learning
- Self-assessment, Self-care, and Personal Growth
- Social & Community Contexts of Health care
- Moral Reasoning & Ethical Judgment
- Problem Solving
- Professionalism & Role Recognition
Each of the 9 competences are described along with student learning outcomes, knowledge base, assessment toolbox, levels of achievement, and resources.
Hero vs. Team Delivery of Care

Success of individual comes first with heroes becoming competitive and lacking trust and communication.

Success of patient wellness comes first with healthcare team being collaborative, and expressing trust and communication.
Relational Learning

The idea of learning *within* relationships, then of learning *about* relationships.

Communication skills
Handling conflict
Teamwork
Teaching others (e.g., patients, students, and colleagues)

Compare, contrast, integrate parts, analyze components, relate ideas, apply abstract concepts

Learning outcomes directly correlated with professional practice and personal experience to promote deeper learning.
Implementing Relational Learning

1) Learning outcomes directly correlated to professional practice and personal experience to foster deeper learning
   Students engage in active construction of knowledge through Blackboard by reflecting upon ideas and reporting in real time what they are learning (generating stories, visuals, concept maps, wikis)

2) Informal professional activities integrated with program knowledge to motivate learner engagement
   Student self reflection on their competencies (patient perspective session, simulated team response to a patient crisis, digital portfolio)

3) Sequential cycles of conceptualization, experience, and reflection
Sources


