

ABSTRACT: 2013 ELAM Institutional Action Project Poster Symposium

Project Title:

Why Education Must Change: What We Need to Know about the Changing Clinical Context

Name and Institution:

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Collaborators/Mentors:

James O. Woolliscroft, MD, Dean and Lyle C. Roll Professor of Medicine & David A. Spahlinger, MD, Sr. Associate Dean for Clinical Affairs, Executive Director of the Faculty Group Practice, Associate Professor

Background, Challenge or Opportunity:

Despite technological advances health systems worldwide continue to struggle to meet the health care needs of society (Frenk, Lancet 2010:376). In the United States the ability to deliver health care has been constantly challenged by rising medical costs and the increasing aging population (www.kff.org). In order to address this challenge the underlying paradigm of the health professional education in general, and medical education in particular, must change in response to these external pressures. The medical community is obligated by their social contract to deliver care that is patient-centered, even within an evolving economically and structurally changing health care environment. Unfortunately too few medical education faculty are aware of the complex external environment as well as the key drivers for educational change (Cooke, 2010).

Purpose/Objectives:

This project was undertaken to improve faculty's understanding of the external pressures on education.

- Create & disseminate an educational info-graphic at the institution's major educational & clinical committees
- Further develop the tool to disseminate at a national level through peer-review
- Study the impact that the info-graphic has on faculty attitudes toward educational change

Methods/Approach:

We used an info-graphic to communicate complex information in an accessible way that will be shared and disseminated to others. This project utilized interviews with key stakeholder as a means of identifying the external forces involved in the changing clinical environment. The interviews allowed the authors to develop a mental framework & knowledge map. Key informants, including the mentors above, as well as other educational, clinical and financial leaders were asked to discuss the degree of change needed and the key information deficit found when interacting with the "rank & file" faculty. A narrative literature review was conducted and provides the evidence for the information provided.

Outcomes/Preliminary Results: *Areas to consider:*

- Current Cost of Healthcare
- The Burden of Chronic Disease
- Need to address quality improvement & patient safety education
- Increasing diversity and advancing age of the patient population
- Inter-professional team needed to provide care
- The system, providers' scope of practice & care will change across all health professions
- Accountable care organization are just one step on the way to reform
- The patient will be the loci of control
- Improvements in Health will ultimately be seen when attention is given to the social determinates of health and disease
- Academic Medicine must play a key role

Key informants interviews resulted in agreement that the ability to digest complex concepts in to visual representations is appealing. There are verbal agreements for the presentation of the information at various committees' within the health system. The time and care spent to ensure a high quality graphic design will enable future national dissemination.

WHY EDUCATION MUST CHANGE

What Educators Need to Know About the Changing Clinical Context



NARRATIVE REVIEW

OBJECTIVES:

Improve faculty's understanding of the external pressures on education:

- Create an educational info-graphic
- Disseminate thru peer-review
- Study the impact of the infographic

METHODS/APPROACH:

- Interviews with key stakeholder
- Develop a mental framework & knowledge map
- A narrative literature review

OUTCOMES/ PRELIMINARY RESULTS:

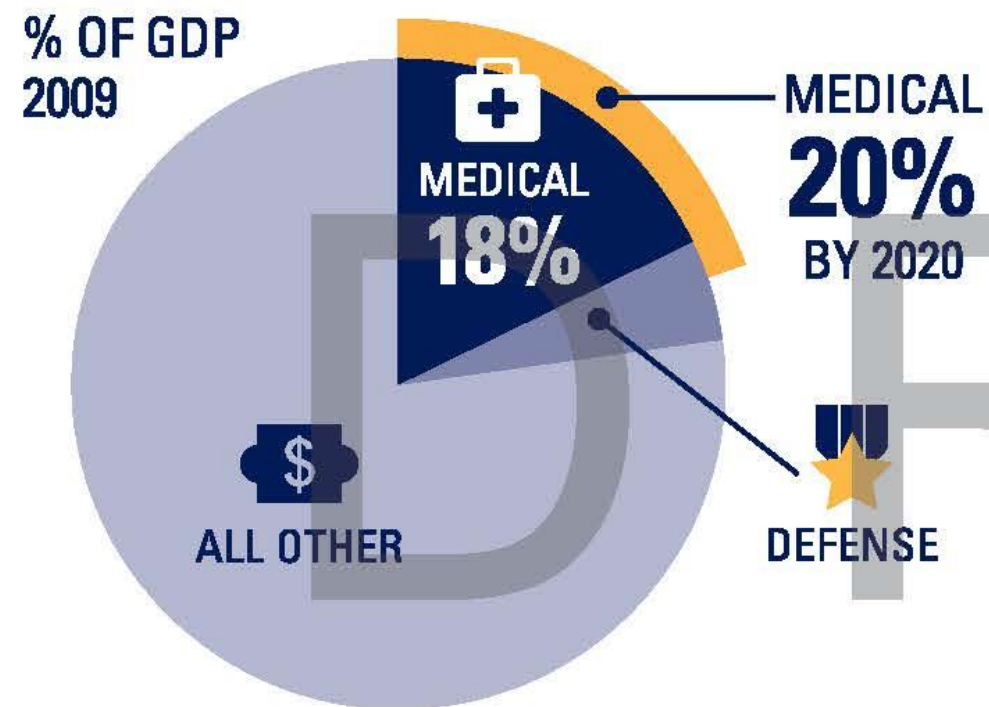
- Info-graphs/Pictographs aid in Understanding Complex Concepts
- Presentation to Nat'l Stakeholders:
 - George E. Thibault, MD President of the Josiah Macy Jr. Foundation
 - Eric Holmboe, MD, Chief Medical Officer/Sr. V. President of the American Board of Internal Medicine
 - Ora H. Pescovitz, MD, Executive Vice President of Medical Affairs, University of Michigan Health System

- Presentation to Local Stakeholders Planned:
 - Curriculum Policy Committee UMMS
 - Graduate Medical Education Committee
 - Component and Assistant Component Directors Committee
 - F/U with ELAM interviewees

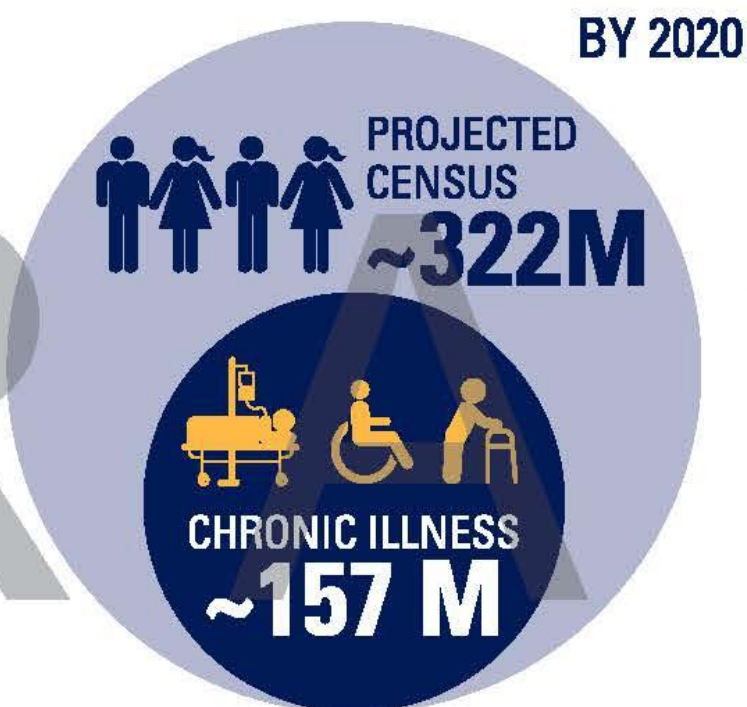
- Submission Plans:
 - JAMA/NEJM/Acad. Med

- Consider a Research Question:
 - What is the impact of the graphic on curriculum and educational change?
 - Focus Groups?
 - Survey Pre-Post?
 - Do we need to answer this empirically?

HEALTHCARE'S ECONOMIC BURDEN^{1,2}



CHRONIC DISEASE'S BURDEN³



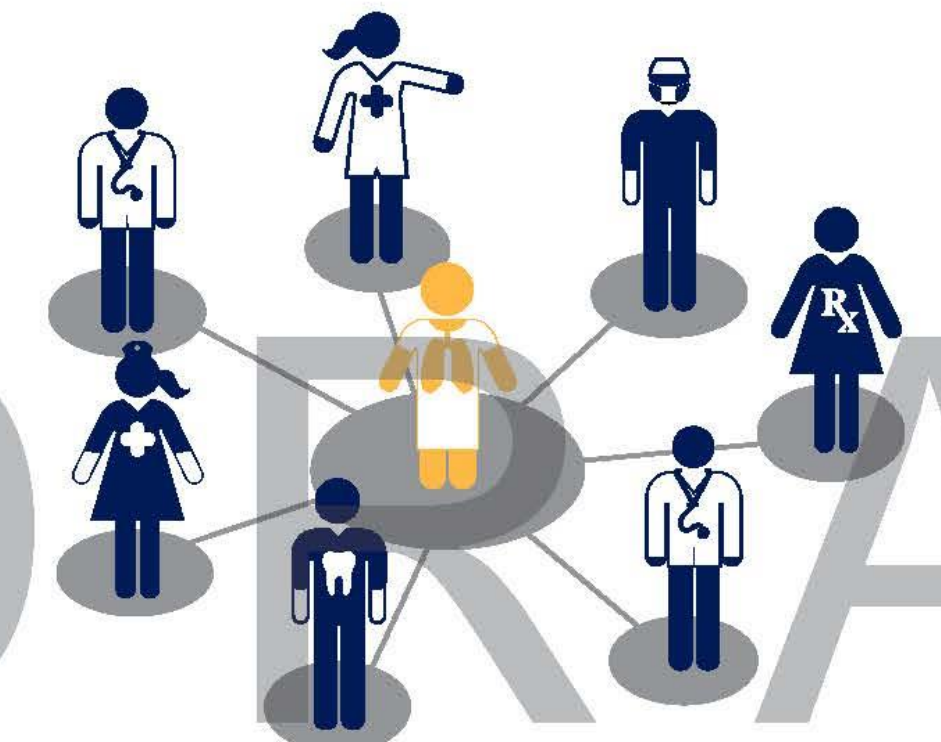
LIMITED RESPONSE ADDRESSING QUALITY IMPROVEMENTS AND PATIENT SAFETY^{4,5}



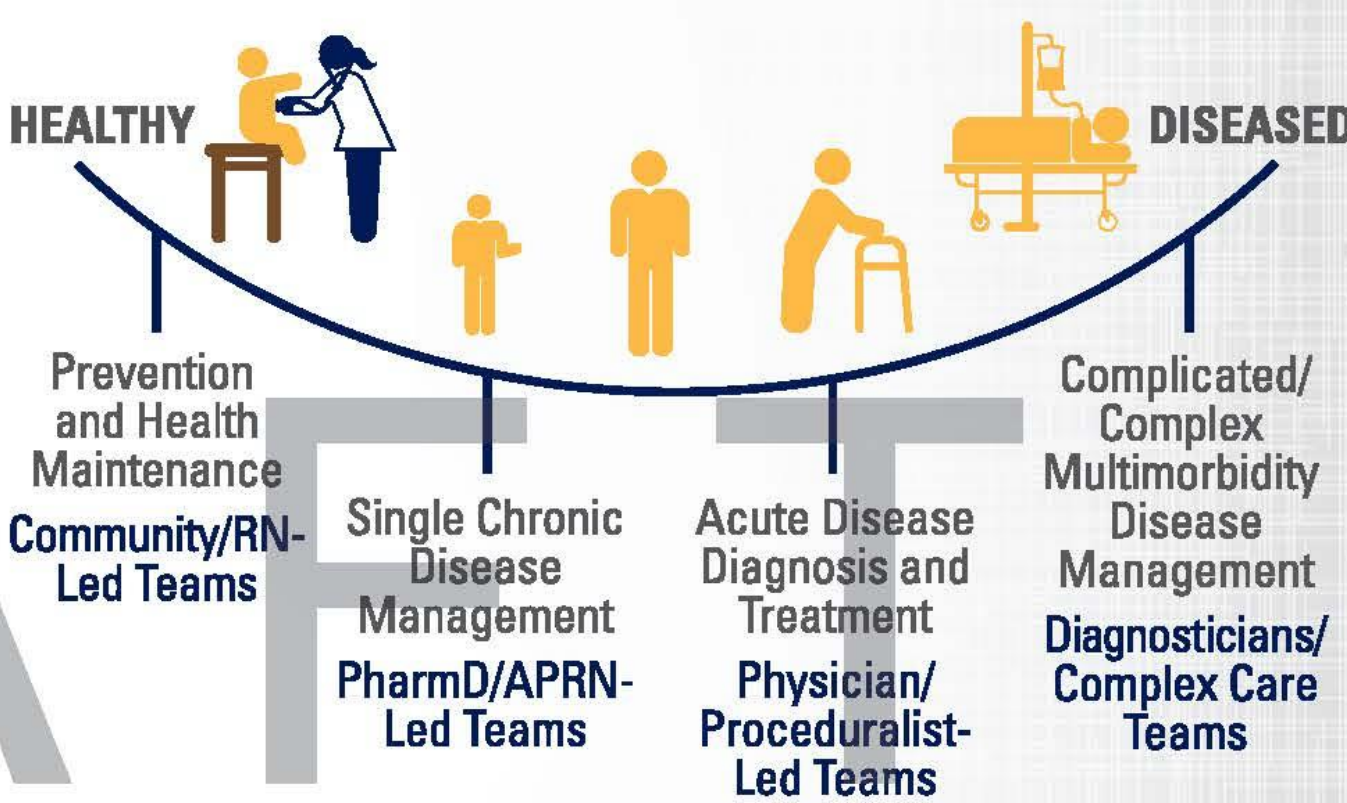
INCREASING DIVERSITY^{6,7} OF POPULATION



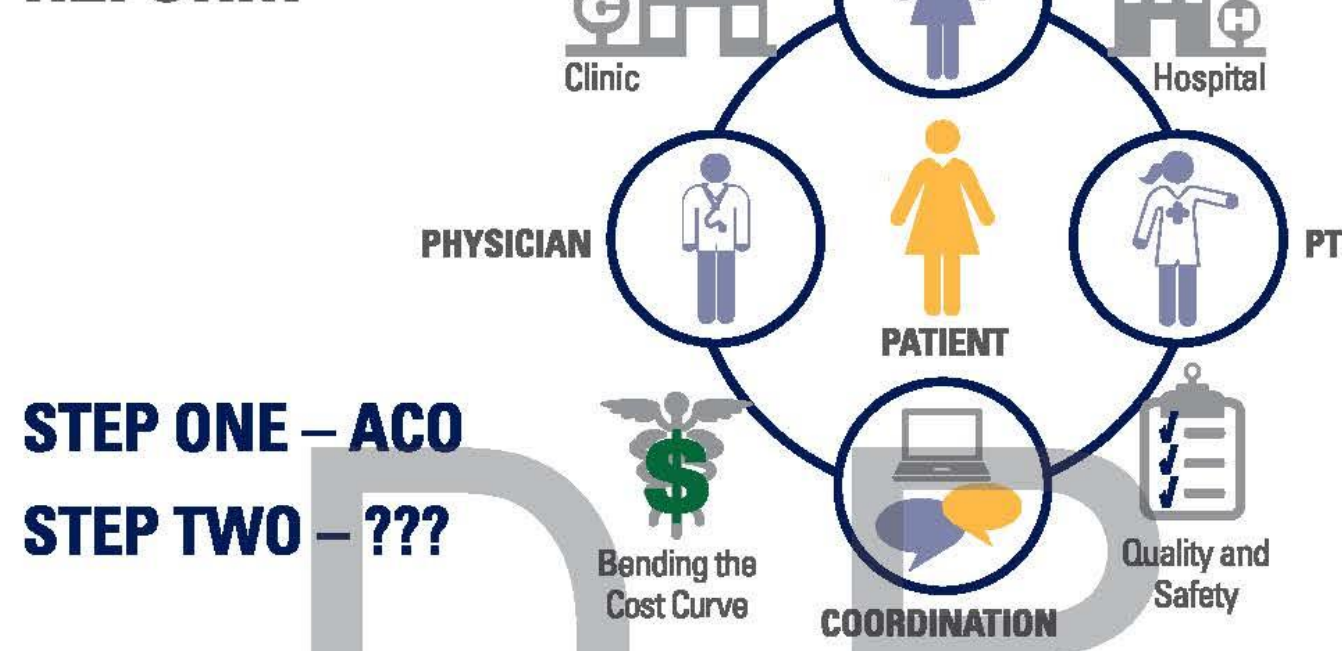
INTERPROFESSIONAL CARE IN ORIENTATION TO THE PATIENT⁸



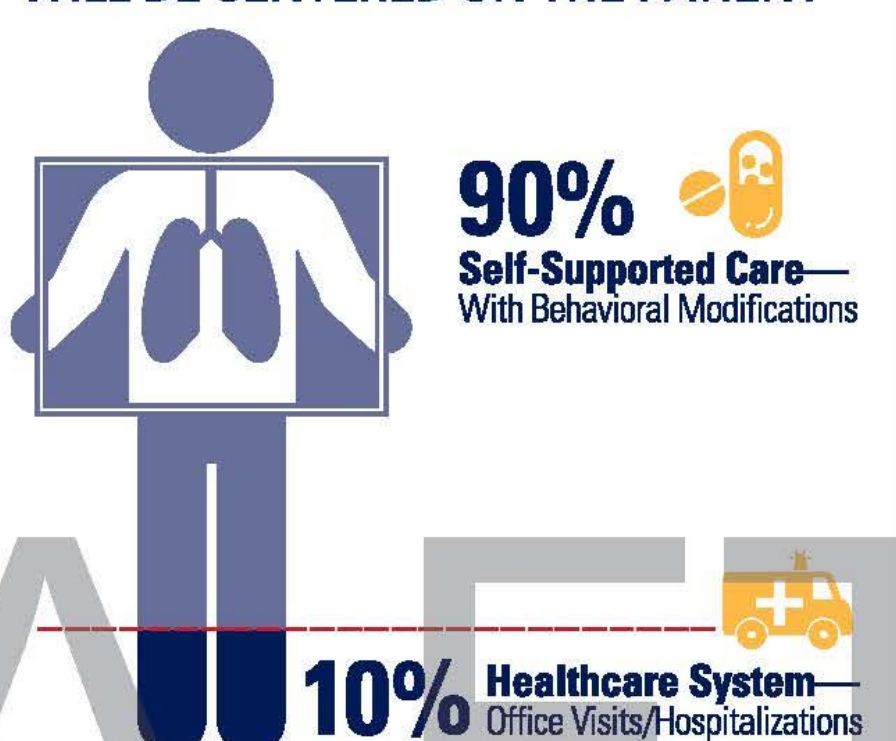
CHANGE ACROSS ALL PROFESSIONS^{9,10,18} CARE PROVIDED AND THE TEAMS THAT DO SO MUST ADAPT



ACCOUNTABLE CARE ORGANIZATIONS REFORM^{11,12,13}



LOCI OF CONTROL WILL BE CENTERED ON THE PATIENT^{14,15}



ACADEMIC MEDICINE

KEY IN THE TRANSFORMATION¹⁷



teaches, conducts research, or cares for patients as a full-time faculty member at a U.S. medical school

SOCIAL DETERMINANTS THE KEY TO BETTER HEALTH¹⁶



Information presented by:
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University of Michigan
Medical School

DREXEL UNIVERSITY
Executive Leadership in
Academic Medicine
College of Medicine



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