

ABSTRACT: 2017 ELAM Institutional Action Project Symposium

Project Title: Early Meaningful Clinical Experiences for Medical Students in the ACE Curriculum

Name and Institution: Pam Shaw MD FAAP, University of Kansas Medical Center

Collaborators: Robert D. Simari MD

Background, Challenge or Opportunity: The UME Curriculum at the University of Kansas School of Medicine is undergoing a major transformation. One of the main goals of the Active, Competency-based and Excellence-driven (ACE) curriculum is to enhance early clinical experiences for Phase I (years 1 and 2) medical students through a longitudinal Health Care Immersion (HCI). The centerpiece of this IAP is to operationalize HCI in the new curriculum.

Current Status and Challenges: At present, M1 students are assigned a clinical “preceptor” with whom they are required to spend at least one half-day per Phase 1 module (once every 4-8 weeks). Students, in addition to a mostly observational role in the clinical practice, are to complete certain module-specific clinical skills learning objectives practice.

Opportunities for HCI in the ACE curriculum will include continuing to require preceptor visits with an assigned clinician once a block for the first and second year. The skills of the preceptors will be enhanced by opportunities for faculty development and the creation of a database for matching preceptors and students. The HCI will benefit the student by increasing competence in Systems Based Practice.

Purpose/Objectives:

1. Establish an oversight committee to develop the objectives and evaluation components of the HCI experience.
2. Identify and discuss barriers to HCI in KUSOM UME, including challenges from the student perspective.
3. Establish placements for HCI for students including identifying their roles and responsibilities.
4. Provide an opportunity for HCI to increase student competence in Systems Based Practice.

Methods/Approach: An oversight committee was formed to meet the project objectives. Members of the committee represent students, leaders in education and clinical care in our integrated health system, and representatives from our regional campuses. As a working committee, it will define the processes to address the project objectives. Post-implementation the committee will evaluate the progress towards the objectives and make recommendations for changes.

Outcomes and Evaluation Strategy: Clerkship directors and residency program directors rate our students poorly on the Systems Based competency. With early and meaningful exposure to the health care system, we hope to increase competency in this area. Outcomes of this project will be evaluated utilizing surveys of: 1) student satisfaction of the experience, 2) M3 students’ ratings of their preparation for clerkships, 3) clerkship director ratings of students’ preparation for clerkships, 4) graduates ratings of their preparation for residency, and 5) residency program director ratings of graduates’ performance in their first year of residency.

Early Meaningful Clinical Experiences in the ACE Curriculum

Pam Shaw MD
Department of Pediatrics

Project Summary/Abstract

The UME Curriculum at the University of Kansas School of Medicine is undergoing a major transformation. One of the main goals of the **Active, Competency-based and Excellence-driven (ACE)** curriculum is to enhance early clinical experiences for Phase I (years 1 and 2) medical students through a longitudinal Health Care Immersion (HCI). The centerpiece of this IAP is to operationalize HCI in the new curriculum. Current Status and challenges: At present, M1 students are assigned a clinical “preceptor” with whom they are required to spend at least one half-day per Phase 1 module (once every 4-8 weeks). Students, in addition to a mostly observational role in the clinical practice, are to complete certain module-specific clinical skills learning objectives practice. Opportunities for HCI in the ACE curriculum will include continuing to require preceptor visits with an assigned clinician once a block for the first and second year. The skills of the preceptors will be enhanced by opportunities for faculty development and the creation of a database for matching preceptors and students. The HCI will benefit the student by increasing competence in Systems Based Practice.

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Relative Weaknesses for KU SOM Graduates

Item	Rank	Score
19) Considering the costs of diagnosis & management	20	3.08
20) Accessing and managing various health care resources including other health professionals, community agencies, etc.	19	3.25
2) Technical skill in performing procedures	18	3.50
17) Commitment to quality assurance & improvement	17	3.65
4) Knowledge & selection of treatment options	16	3.77

Relative Strengths for KU SOM Graduates

Item	Rank	Score
11) Professional demeanor	1	4.67
9) Communicating effectively with peers, staff and other health professionals	2.5	4.48
10) Communicating effectively with patients & families	2.5	4.48
18) Work as a team member	4.5	4.40
13) Sensitivity to patient's age, gender, culture, and disabilities	4.5	4.40

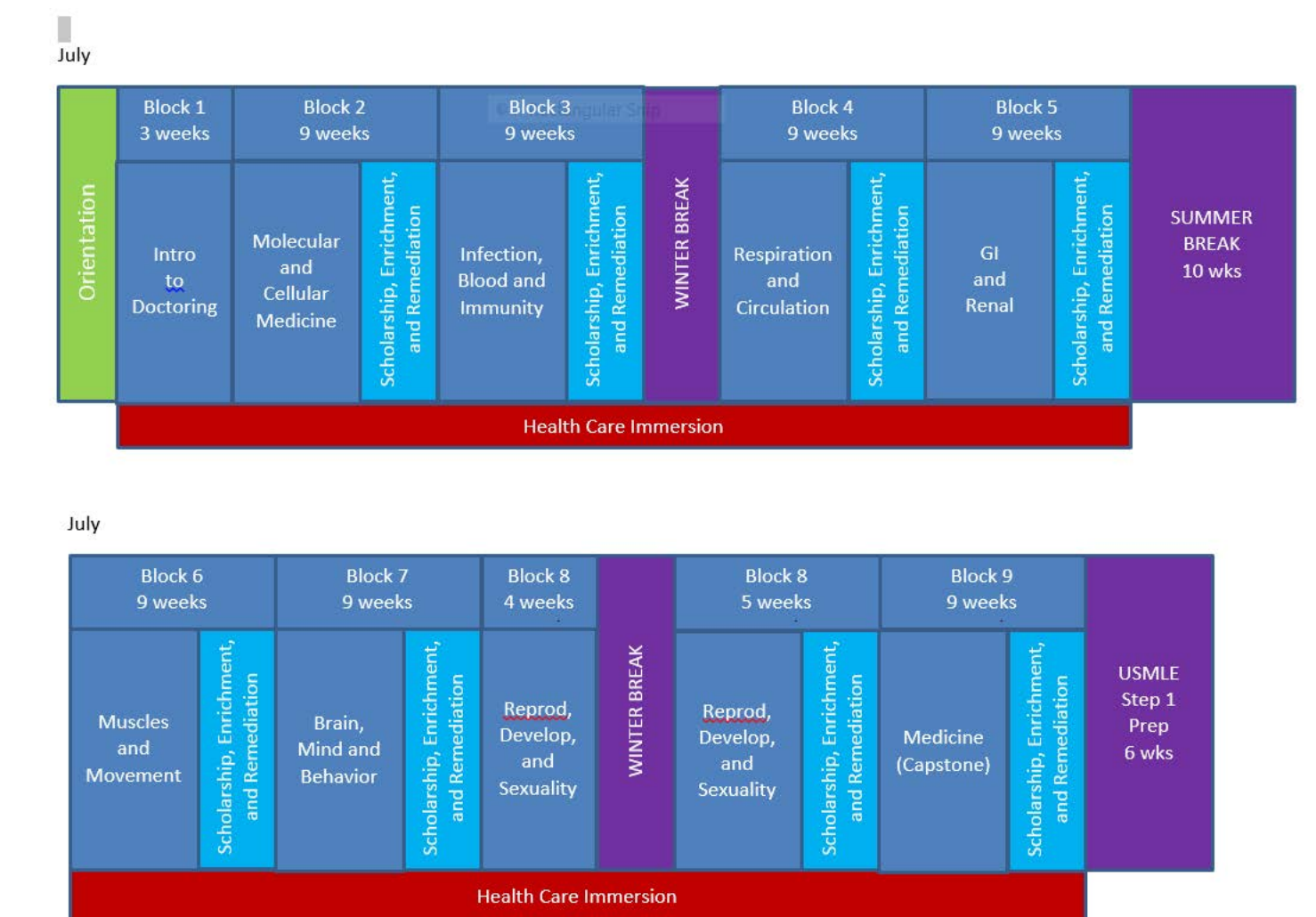
Literature Review

Early/longitudinal clinical experiences (like HCI) appear to be an emerging phenomena in medical curricula, with medical schools piloting or implementing such programs to varying degrees. In fact there are a number of AMA demonstration projects that are ongoing in this arena, including North Carolina and Penn State who were interviewed as part of the planning process.

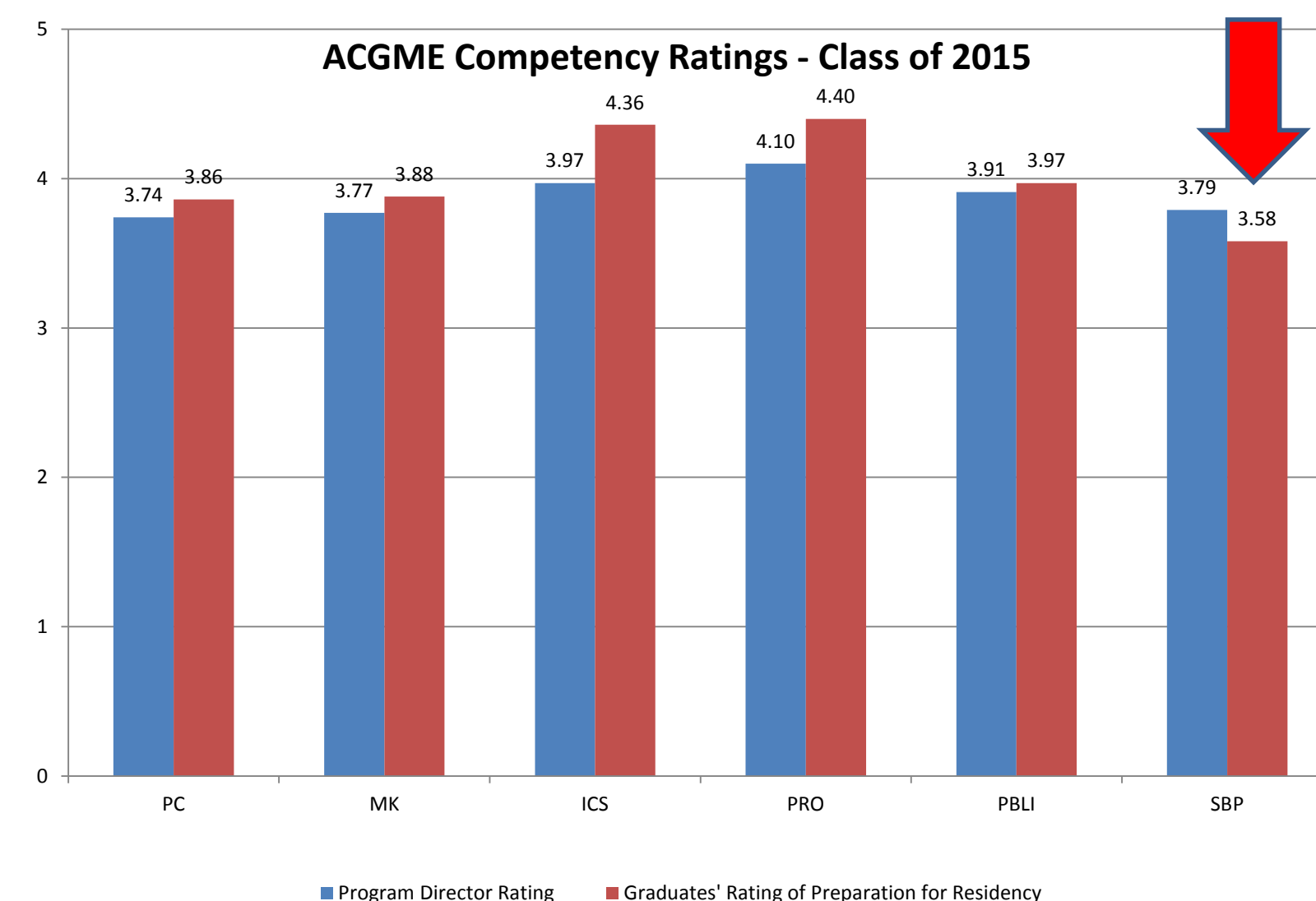
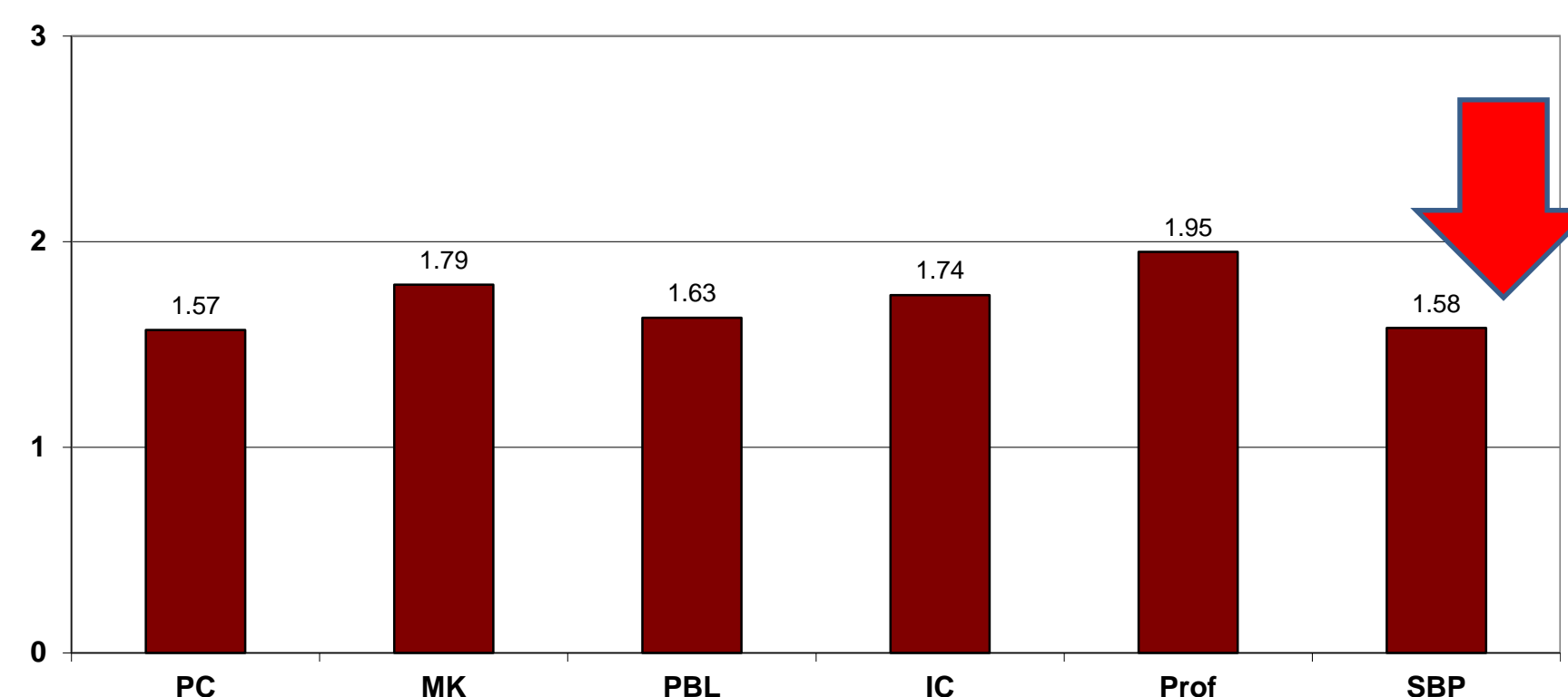
The evidence that these programs meet their desired objectives is “soft”. Although there is a growing body of literature suggesting that students involved in HCI programs have superior clinical and communication skills, there is mostly anecdotal evidence that HCI programs increase performance in standardized tests such as the USMLE. In the absence of comparative studies and analyses to identify which features or HCI's are most beneficial in early clinical experiences, many programs have been built on institution-specific objectives.

Oversight Committee

- Pam Shaw MD, Assistant Dean for Clinical Sciences
- Scott Moser MD, Associate Dean for Curriculum, Wichita
- Scott Owings, Associate Dean, Salina
- Micheal Kennedy MD, Associate Dean for Rural Medicine
- Isaac Opole MD, Clerkship Director, IM
- Jana Zaudke MD, Honors and Enrichment Director, KC
- James Kallail, PhD, Honors and Enrichment Director, Wichita
- Juan Salgado, MD student rep



Clerkship Director Ratings of Student Level of Preparation Across All Clerkships



Legend:
 PC=Patient Care, MK=Medical knowledge, PBL=Problem Based Learning, IC=Interpersonal Communication, Prof=Professionalism, SBP=Systems Based Practice

Presented at the 2017 ELAM Leaders Forum

Outcomes and Evaluation Strategy:

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References:

1. Gonzalo, JD, Graff, D, Johannes, B, Blatt, B, Wolpaw, D. Adding Value to the Health Care System: Identifying Value Added Systems Roles for Medical Students; *American Journal of Medical Quality*:DOI:1177/1062860616645401.
2. Gonzalo, Jed D.; Lucey, Catherine; Wolpaw, Terry; Chang, Anna. Value-Added Clinical Systems Learning Roles for Medical Students That Transform Education and Health: A Guide for Building Partnerships Between Medical Schools and Health Systems; *Academic Medicine*: DOI:10.1097/ACM.0000000000001346
3. Skochelak, S, Hawkins, R, Lawson, L, Starr, S, Borkan, J, Gonzalo, JD. Health Systems Science, AMA Education Consortium, 2017.

