

Residents as Teachers Update Joint Clerkship Meeting 02/20/13



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LIAISON COMMITTEE ON MEDICAL EDUCATION

ED-24 (minimum expectations)

- Receive a copy of course/clerkship rotation objectives and clear guidance from course/clerkship director about roles in teaching and assessing medical students.
- Institution and/or relevant departments provide resources to enhance teaching and assessment skills.
 - Also states there should be "central monitoring" of the level of residents' participation in activities to enhance their teaching and assessment skills.
- There should be formal evaluation of teaching and assessment skills with opportunities for remediation if performance is inadequate.

Residents as Teachers Survey

- Conducted PD and GMT surveys in 2011/2012

<u>Program</u>	<u>N</u>	<u>PGY Year (UVA only)</u>	<u>N</u>
Carilion	34	1	52
Fairfax	10	2	45
UVA	208	3	38
Total	252	4	25
		5	18
		6	19
		7	9
		8+	2
		--	1
		<u>Total</u>	<u>208</u>




Time Spent Teaching

Residents/Fellows

0 hours/week	6%
1-3 hours/week	54%
4-6 hours/week	27%
7-9 hours/week	5%
10-13 hours/week	4%
>14 hours/week	4%

	VI	I	N	NI	Not at all
"In thinking back to when you entered graduate training, how interested were you in teaching as a GMT?"	52%	33%	8%	6%	1%
"How interested are you in incorporating some aspect of teaching into your career after completing your graduate training?"	54%	32%	7%	6%	1%
	More	Unchanged	Less		
"How has your level of interest in teaching changed during your training?"	29%	55%	16%		

"How are your residents'/fellows' teaching skills currently evaluated?"



<u>PD Responses</u>	<u>Frequency</u>
Self evaluation	18
Faculty evaluation	34
Learner/student evaluation	24
OSTE	0
No evaluation	7
My graduate trainees do not teach	0

“Does your program offer/facilitate any teaching skills remediation to GMTs who might require teaching skill development?”

	Yes	No	Not sure	Don't teach
PD (%)	8(17%)	31(66%)	7(15%)	1(2%)
Res/Fellow (%)	4(1%)	66(26%)	181(72%)	1(1%)

What is the biggest barrier?



Program Development

- Primary “residents as teachers” programming at UVA is department based:
 - Enhances relevance
 - Creates stronger “buy in” by residents and faculty
 - Increases likelihood of meaningful conversations, as well as integration and application of program material

Department Programming

- Departments with existing curricula:
 - Medicine
 - Family Medicine
 - Pediatrics
 - OB/GYN
- Departments with curricula currently under development:
 - Surgery
 - Psychiatry
 - Emergency Medicine
 - Neurology

Have not yet spoken with Anesthesia/Perioperative

Programming at Affiliate Sites

- Roanoke/Carilion – no contract with UVA as of March 2013 so N/A
- Western State Psych – UVA Psych residents (covered at UVA)
- Bon Secours – no residents
- Salem VA – Surgery, Psych and Med have existing curricula
- Fairfax – Peds only (still awaiting a response)

Institutional Programming

- Additional programming and resources are or will be available at the institution level:
 - GME Core Lecture Series (2 sessions per year)
 - Faculty Development Series (optional certificate program in Medical Education)
 - Residents as Teachers Website (under development)

Evaluation

- Formal evaluation through Oasis (proposed: 3 residents, 3 attendings)
- Additional evaluation forums that are currently available and utilized:
 - Student Listening Post (Student Advocacy Group)
 - Mulholland Report
 - SMEC

Outstanding Issues

- Identify system for central monitoring
- Identify and implement method for distributing goals and objectives
 - Can goals and objectives be streamlined for residents?
- Define the roles of residents in teaching and medical student assessment
 - Institution (policy?) vs department specific
- Define and implement a process for remediation
- Other institutional policies, e.g. EPIC?