Scholarly Roundtable Discussion

Picking up the Pieces: How to Rebuild When Curriculum Fails

Many medical educators have had the experience of developing a curricular innovation that has been challenging to implement or sustain. This scholarly roundtable discussion will provide a formal opportunity to reflect on these experiences, be proactive in anticipating and finding challenges as they occur, and identify best practices in order to move forward with adjustments or new plans.

Agenda:

- 1. Introduction: Attendees meet and share relevant projects (5 minutes)
- 2. Background on FAU's IPE Experience and Homeless Clinic (5 minutes)
- 3. Group Brainstorm:
 - a. Why curricular experiences struggle (7 minutes)
 - b. How can we monitor and identify challenges in order to address them? (7 minutes)
 - c. What strategies can we use to move forward in making changes, rebuilding or abandoning a failing curricular experience (7 minutes)
- 4. Lessons from the literature (5 minutes)
- 5. Questions and Next Steps (9 minutes)

Our Experience:

The Charles E. Schmidt College of Medicine at Florida Atlantic University offers medical students unique and innovative clinical experiences as part of our Longitudinal Integrated Clerkship during third year. Some of these experiences are coordinated through the Community and Preventive Medicine Clerkship – the longitudinal primary care preceptorship. Examples include visiting an unopposed family medicine residency program in a rural, isolated and culturally diverse part of Palm Beach County, and an interprofessional educational (IPE) experience teaching the TeamSTEPPS system through clinical experiences with homeless patients in a community health center. In 2017, feedback suggested that the IPE experience had changed and was no longer relevant for learning the TeamSTEPPS competencies, requiring changes to the existing experience. In our case our partner clinic lost funding, experienced staff turnover, and lost the passion and opportunity to monitor interprofessional collaboration. This scholarly roundtable discussion will address common reasons why curricular activities develop quality issues, how to monitor for and identify struggles, as well as best practices for altering, abandoning or rebuilding these experiences. Participants are encouraged to bring examples of curricular activities that have struggled to contribute to the discussion.

Medical educators routinely develop innovative experiences to supplement clinical learning, involving community partners or other disciplines. These experiences are often focused on exposure to a particular population, community setting or patient experience. These experiences are often meaningful to students, and can provide perspective on their identity and future career plans. Developing clear learning objectives, and a plan for the experience are crucial in setting

up the experience to succeed. In some cases however, priorities or the experience may change, resulting in a learning experience that does not meet the originally designed objectives. Medical educators who utilize these types of experiences should consider why quality issues may arise, how to identify challenges and consider best practices for making changes. This scholarly roundtable discussion will provide a forum for discussing our experiences, identifying relevant literature and developing best practices to make innovative curricular experiences as successful as possible, when quality issues arise.

Objectives and Strategies

- 1. Identify common barriers to the successful implementation or continuation of innovative curricular activities.
- 2. Develop strategies to monitor and identify quality issues occurring that impact the educational experience in innovative curricular activities.
- 3. Plan for moving forward to account for challenges in curricular activities, through altering, rebuilding, or abandoning struggling educational experiences.
- 4. Focus on the value of innovative curricular experiences in terms of supplementing clinical learning and developing professional and humanistic identities among medical students.

References

- 1. R. G. Dennick, K. Exley (1997) Tomorrow's doctors today: Innovations in medical training and learning-responding to the challenge of tomorrow's doctors. Biochem. Educ. 25, 6–11. https://onlinelibrary.wiley.com/doi/pdf/10.1016/S0307-4412%2896%2900149-5
- 2. Sefton A, J, New Approaches to Medical Education: An International Perspective. Med Princ Pract 2004;13:239-248 https://www.karger.com/Article/Abstract/79521

Thank you!

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