Start With the End in Mind: Designing a Master Blueprint for Your Clerkship

Abstract:

Clerkship directors are at the forefront of influencing curricular change at the undergraduate medical education level. Their unique position as the pivotal link between medical schools and their departments coupled with their connection to the family medicine residency programs gives them an exceptional vantage point to evaluate curricular innovation. As champions for family medicine, clerkship directors are ideally suited to design and execute optimal primary care learning experiences. The challenge lies in aligning the actual clerkship experience and all of its components with the aims, standards, and activities set forth by multiple entities: the Liaison Committee on Medical Education (LCME)’s standards and elements, the AAMC’s Entrustable Professional Activities and General Physician Competencies, STFM’s National Clerkship Curriculum, and institution-specific curricular maps to name a few. Historically, medical schools have often operated in silos, designing curricula to fit their patient population and educational experience. However, the LCME now mandates that educational objectives must be grounded in outcomes. These outcomes are increasingly measured by achievement of common standards, like the EPA’s. Satisfying these overlapping layers of target outcomes can prove bewildering, especially in the confines of limited clerkship resources and time. This session will help clerkship directors to critically and systematically evaluate their curriculum by providing them with a tool to map their clerkship objectives and educational components to the EPA’s, the NCC, and the General Physician Competencies.

Objectives:

1. Increase participant’s knowledge of the specific aims and standards set forth by multiple entities like the AAMC, the LCME, and STFM’s NCC.
2. Critically assess their own clerkship objectives and activities as they relate to the overarching standards using the tool provided.
3. Identify barriers and facilitators to aligning the clerkship objectives and activities with target aims at their own institution.

Relevance:

Undergraduate medical educational curricula are undergoing rapid changes and innovation. In their role, clerkship directors are vital to informing and implementing these transformational changes. Overarching aims set forth by multiple organizational entities, like the LCME and the AAMC, are driving this process. Clerkship directors are tasked with fitting clerkship objectives and corresponding learning activities within this larger framework. Delivering a quality clerkship experience that meets these expectations given constraints of limited clerkship time and faculty resources can be daunting. Providing clerkship directors with a tool to evaluate their current clerkship experience in the context of these overlapping aims will support them in understanding and achieving those aims. Purposeful alignment of each element of the clerkship with the overarching aims will result in a workable master blueprint guiding all clerkship activities and evaluation.

Content:

This lecture-discussion will outline how two family medicine clerkship directors, one from a very established school, the other from a brand new medical school, and an NCC fellow and editorial board member developed a tool to align clerkship objectives and educational activities with national curriculum standards and target aims. The tool is meant to help clerkship directors to design an effective and streamlined clerkship curriculum at their institution that meets national targets. By understanding the overarching aims from national organizations like the LCME, AAMC, and the STFM NCC, clerkship directors will be encouraged to work backwards to their institution-specific clerkship objectives. They can then evaluate the educational elements in their clerkship to determine if and how they support the curricular framework. Barriers and facilitators to using the tool and implementing changes to redesign the clerkship blueprint will be discussed. Participants will also have the opportunity to discuss their own successes and challenges with meeting national standards and targets within their clerkships.

Outline: 45 minutes total:

Introduction/Background (5 minutes)

* Outline of presentation, impetus for topic selection
* Description of each presenters institutional and clerkship demographics

Participants sharing of current challenges with curricular change and alignment to national standards (5 minutes)

Literature review on subject of national standards and target aims for undergraduate medical education and sharing of resources and specific standards (EPA’s, General Physician Competencies, NCC (10 minutes)

Description and sharing of the Clerkship Master Blueprint Tool (10 minutes)

Participant’s feedback on utility of adapting the tool at his or her own institution, questions, and discussion (10 minutes)

Innovation:

The current climate of curricular innovation and change in undergraduate medical education calls for clerkship directors to assess their clerkship curriculum in light of new national standards and aims. To aid in this often complex task, we have developed a creative tool to simplify the process of aligning clerkship objectives and educational elements with the overarching goals set forth. Participants will leave with a concrete strategy to design a master blueprint for their clerkship adaptable to their own institutions.