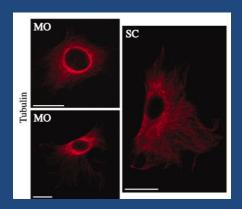
# How to Develop Faculty into Modern Educators

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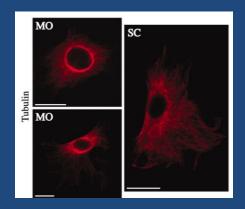


# My career development...



Mammalian cells

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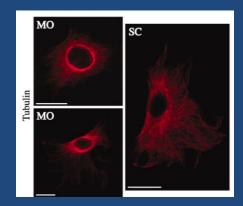


Mammalian cells



Small mammals

# My career development...



Mammalian cells



**Small mammals** 



Large mammals

### **Outline of Presentation**

- COCATS 4 and active learning
- Team-based learning
- Web-based learning
- OSTEs



### COCATS 4

- Based on ACGME core competencies
- Emphasis on curricular milestones and evaluation
- These are basis of Entrustable Professional Activities (EPAs) for cardiologists

#### Table 1. ACGME Core Competencies

- Patient Care that is compassionate, appropriate, and effective for treating health problems and promoting health
- Medical Knowledge about established and evolving biomedical, clinical, and cognate (e.g., epidemiological and social-behavioral) sciences and the application of this knowledge to patient care
- Practice-Based Learning and Improvement that involves investigation and evaluation of their own
  patient care, appraisal, and assimilation of scientific evidence, and improvements in patient care
- Interpersonal and Communication Skills that result in effective information exchange and teaming with patients, their families, and other health professionals
- Professionalism as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
- Systems-Based Practice as manifested by actions that demonstrate an awareness of and responsiveness
  to the larger context and system of health care and the ability to effectively call on system resources to
  provide care that is of optimal value

### COCATS 4

- Evaluation tools include a variety of modalities... Case management, judgment, interpretive and technical skills must be evaluated regularly.
- Evaluation tools ... include <u>direct observation by instructors</u>, in-training examinations, case logbooks, conference and case presentations, multisource evaluations, trainee portfolios, <u>simulation</u>, and self reflection.

### COCATS 4

The rapid evolution of cardiovascular medicine requires that all training programs have an experienced faculty, adequate facilities, and a <u>rich</u> <u>assortment of didactic offerings</u> for fellows. <u>Case-based conferences</u> are vital to train fellows and develop their skills in evidence-based decision-making. <u>Self-learning</u> is emphasized, and <u>Internet-based, online educational</u> <u>programs, many of which are interactive</u>, play an increasingly important role in learning during fellowship and beyond.



### NOT MORE LECTURES





### NOT MORE LECTURES



### **Active Learning**

- Is "active" rather than "passive"
- Requires learners to do meaningful learning activities and think about what they are doing
- Can increase participation, enthusiasm, self-directed learning
- Involves higher-order thinking
- Can enable faculty to determine what learners know in real-time

### Increased Emphasis on Educational Innovation

- In 2011 Harvard received a \$40,000,000 gift to be used for educational research and innovation (HILT)
- This could be used to construct next-generation classrooms and fund research on new teaching techniques (enhanced HMS curriculum revamp)



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### Active Learning in GME

- This can actually be a form of direct observation of fellows/residents
- Can evaluate multiple competencies

Medical Knowledge

Practice-based Learning and Improvement

**Interpersonal and Communication Skills** 

## Why not just rely on case conferences?

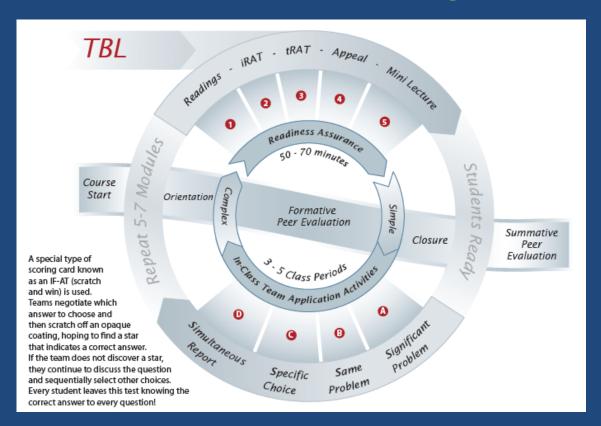
- Tendency to revert to lecture-based format
- Can have awkward silence due to intimidation factor of individual opinion Bueller F et al. 1986
- Certain individuals tend to dominate/monopolize discussion

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One solution is to use structured discussion format such as team-based learning (TBL)

### Team-based Learning



### Team-based Learning at the University of Virginia

- TBL became a mandatory part of med school curriculum (session q2weeks)
- Oversight group created to help facilitate and design TBL sessions
- Any faculty can come to this group with a proposal and receive support Guidance on design, trained moderators, etc.
- First GME project is ongoing (Dept of Anesthesia)

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#### FIND ONE ON CAMPUS

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- Very likely that being used in some form in medical school
- Find person and ask for help

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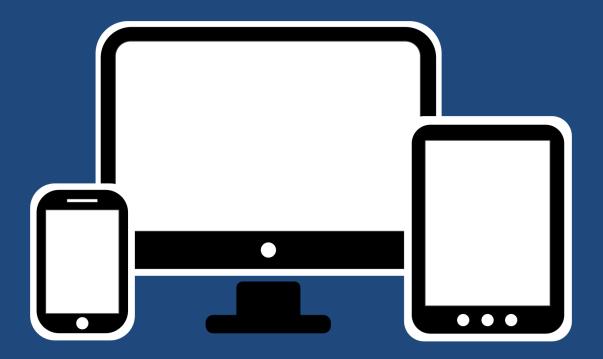
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#### **CREATE ONE!**

- Team-based Learning
   Collaborative has national
   conference where workshops
   held on running TBL (~\$500)
- Can send one dedicated member of faculty and have them teach/help others back home

# Web-based Learning



### We are all familiar with boring web-based learning...



1: Confidentiality - Everyone's Concern

Key Learning Points

- . Confidentiality is a cornerstone upon which our relationship with our patients is built.
- Information about patients should be available only to those who have a need to know based on their authorized role-related duties.
- Privacy and security rules require us to safeguard patient information.

Protected Health Information



Protected Health Information (PHI) is healthcare-related information that is protected by federal legislation and must be kept confidential. It includes:

- · any medical information that can be identified as belonging to a particular person
- any combination of medical and personal information such as name, medical record number, address, telephone number, birth date, or dates of admission, treatment and discharge

PHI must be protected in any form (e.g. oral, written/printed, electronic) and in all locations:

- · oral communications (e.g., patient care reports, rounds)
- written or printed information (e.g., patient medical records, prescriptions, faxes, radiology reports, schedules, notes, appointment notices)
- w electronic data (ePHI) (e.g., in computers, laptops, personal digital assistants [PDAs], mobile devices and computer systems)

#### HIPAA

HIPAA stands for the Health Insurance Portability and Accountability Act. This federal legislation enacted standards and regulations that hospitals, doctors, and other healthcare providers must follow to ensure the privacy and security of healthcare information.

### Web-based Learning

- Need to offer something unique not otherwise easily available
- Discuss two free software platforms and their use in cardiovascular education

Open Labyrinth

Moodle



### Open Labyrinth



- Free, open-source software platform for developing medical education cases
- Can incorporate text, pictures, video using online design interface
- Allows branched-narrative interactive cases
- More advanced features enable tracking of time taken, path chosen, learner feedback, etc.

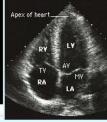
# **Open Labyrinth**



#### Echocardiogram

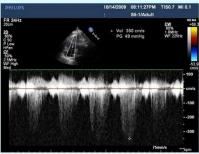
The echo tech comes by and performs the echocardiogram. One of the representative apical four-chamber views is shown below, along with an orientation guide:





The official report states that there is evidence of some RV dysfunction.

The RV systolic pressure is estimated to be  $\sim$ 50 mmHg (normal <25):



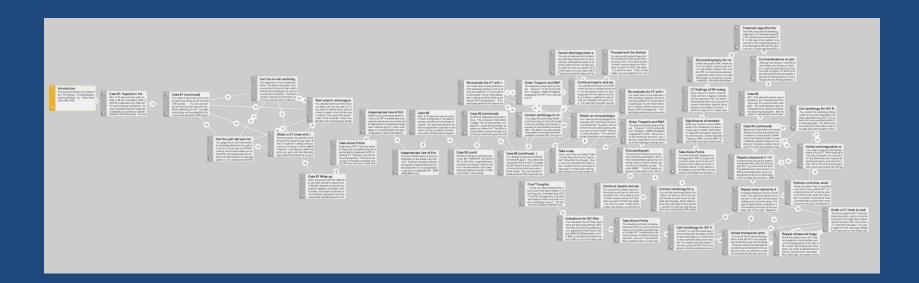
The patient's vitals are stable and he wants to know when he can leave the hospital, as he feels run down and fatigued from all the testing. "You've made me feel wo You next decide to:

Contact cardiology for possible lytic therapy.

Continue heparin and start warfarin in preparation for discharge.

### Open Labyrinth





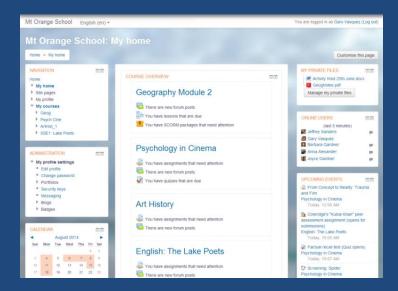
### Open Labyrinth in Use

- Open Labyrinth modules were used at BWH to educate oncology PAs about PE/DVT management and when to call a consult
- Opportunities for interprofessional education in cardiology topics (easy upkeep)
- Need to have interested/motivated faculty (incentivize?)...or fellows

### Moodle



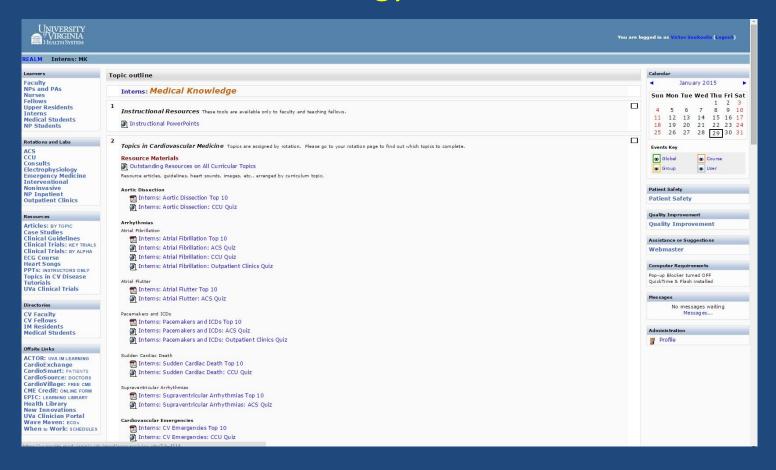
- Free, open-source software platform for developing online courses
- Basic interface allowing article storage, quizzes/assignments, discussion forums



### Web-based Cardiology Education at UVA

- The UVA Realm is a comprehensive repository of cardiology resources
- Goal is to ensure core cardiology knowledge base for all housestaff/students
- Key articles, guidelines, and *Top 10 lists with associated quizzes*

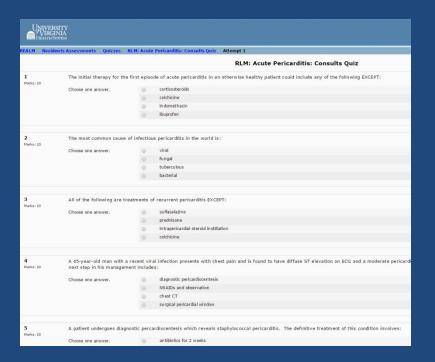
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### Acute Pericarditis Top 10 List

- Acute pericarditis generally presents with retrosternal, sharp, and pleuritc chest
  pain that radiates to one of the scapulae; it is classically aggravated by
  recumbent positioning, it is alleviated when leaning forward.
- The presence of a pericardial friction rub is 100% specific for acute pericarditis. This rub can have 3 components- atrial systole, ventricular systole, and rapid diastolic filling.
- The most common cause of acute pericarditis is idiopathic; other causes include viral, bacterial, tuberculous, uremia, aortic dissection, traumatic, hypothyroidism, post-myocardial infarction (Dressler's syndrome), post-pericardiotomy, malionant, autoimmune, druos, etc.
- The ECG of acute pericarditis shows diffuse concave ST elevation and PR depression in most leads (except aVL and V1- ST depression and PR elevation).
- 5. There are four stages of ECG changes associated with acute pericarditis:
  - 1st = ST elevation with PR depression
  - 2<sup>nd</sup>= resolution of #1 with T-wave flattening 3<sup>rd</sup>= diffuse T-wave inversions
  - 4th= resolution of changes
- Patients with acute pericarditis can have positive cardiac biomarkers (troponin and CK-MB), usually indicative of myopericarditis.
- The diagnosis of acute pericarditis is made if: a pericardial rub is found in auscultation or the patient has diffuse ST elevation and classic chest pain with or without a pericardial effusion by echocardiogram.



### Moodle in Use

- Can help ensure key competencies/knowledge are met
- Faculty/fellow pairs update content periodically (resource-intensive)
- Site can become unwieldy as expands

# Faculty development off the beaten path...



### OSTE (Objective Structured Teaching Exercise)

- Modified "OSCE" focused on evaluating teaching skills of residents and faculty
- Simulated learner encounter on giving feedback or interacting with learner in difficult situation
- "Faculty" do self-assessment and also get feedback from others

## OSTE (Objective Structured Teaching Exercise)

• Example scenarios in literature:

Feedback to a learner in difficulty

Bedside teaching

**Outpatient** precepting

Teaching how to deal with a seductive patient

### OSTE (Objective Structured Teaching Exercise)

- Has been used in Internal Medicine at NYU and UCSF; being implemented at UVA for anatomy lab teaching
- Could be used to directly evaluate fellows' communication and teaching skills (the early bird gets...)
- Resource-intensive and unclear if faculty teaching evaluations improve

### Summary

- GME (incl COCATS 4) moving towards more active learning and evaluation
- Team-based and web-based learning are underused methods
- Always try to offer something unique and not easily available

