

Good Morning, ASAP!

For this working plenary,

please move to the front tables

to **form two groups of four persons** at each table.

Group with three persons you don't know well who
are not from your institution/site.

Thank you,

Clinical Education Task Force

Keeping Clinical Education on the Cutting Edge: A Working Session to Advance the Field

ASAHP Clinical Education Task Force Workshop
Fall 2018 Annual Meeting

Clinical Education Task Force

Committee for Today's Working Session

- Bob McLaughlin Baylor College of Medicine, Houston, TX
- Julie O'Sullivan Maillet Rutgers Biomedical & Health Sciences,
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Clinical Education Task Force

Contributing authors: *“Clinical Education in Transition: Recommendations and Strategies from the CETF of the ASAHP”* (Manuscript in preparation, 2018)

- Robert McLaughlin
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- Marcie Weinstein
- Scott Westervelt
- Julie O’Sullivan- Maillet

By the end of today's working session, participants should be able to:

1. List strategies to advance Clinical Education (CE) in health professions
2. Produce a SMART plan tailored to one CE initiative at your site
3. List—by name or title—at least three prospective partners to effect your plan
4. Contribute at least one elaboration to the plans of three peers in your small working group today

What to expect from today's workshop

1. A summary of recommended strategies to advance CE at your institution
2. A guide to develop institutional partnerships
3. Collaboration on individual action plans
4. Accountability to one another in your groups
5. A SMART plan tailored to your needs
6. Continued engagement the next 6 months with opportunities to:
 - Provide evidence of shared accountability among today's workgroup
 - Share challenges to effecting your plan as they develop
 - Share outcomes related to your goal

Frank premises

1. CE resources are finite, even as the need for CE grows.
2. The number of traditional acute care clinical placements will diminish.
3. Efficiency of CE must improve.
4. Educators need to implement a fully competency-based model of CE.
5. Accreditors need to endorse greater innovation in CE standards.
6. Community institutions must confer:
 - to align community workforce needs with numbers of program graduates, and
 - to establish the amount, types, quality, and availability of CE required to sustain programs and workforce.
7. We need conversations among academic and healthcare institutions :
 - To synchronize regional health care education (understand synchronies/ disparities in educational and clinical models, share instruction, reduce duplications, synchronize parallel experiences),
 - To increase efficiencies and reduce burden on clinical sites.

Recommendations from the CETF: Brief Summary

1. Establish strategic partnerships between academic programs and healthcare organizations
2. Build Inter-Professional Practice (IPP) into pre-clinical curriculum and CE assessments
3. Incorporate healthcare technology in allied health education
4. Articulate IPP principles and benefits to leaders in healthcare systems, higher education, accreditation commissions, professional organizations, and government
5. Conduct and disseminate CE research and scholarly activity

Today's Workshop: 3 Working Sessions

1. First Work Session (15 min)
 - Form groups of exactly four persons who do not know one another well
 - Brief large group processing
2. Second Work Session (15 min)
 - Individual work on CE Outcome Template
 - Brief large group processing
3. Third Work Session (40 min)
 - Small group collaboration on four SMART plans
 - Wrap up and plans for the future

1st Work Session

Develop Partnerships, Identify Challenges: Form Small Groups

- Very quickly, move among neighboring tables to form groups of exactly four.
- Join with three persons you don't know well.
- There may be two groups per table.
- Take your belongings for remainder of workshop!
- You have only 4 minutes to get settled.

1st Work Session

Develop Partnerships, Identify Challenges: Small Group Interaction (10 min)

1. Introduce self (limit each person to one minute)
 - Name
 - Institution
 - Role(s) in CE
2. Then, briefly: Around the group, each member states **one CE challenge, risk, or fear** you'd like to address at your site
3. If time allows, each member states a second challenge

1st Work Session

Develop Partnerships, Identify Challenges: Discussion

How might your challenges align to CETF recommendations?

1. Establish strategic partnerships between academic programs and healthcare organizations
2. Build Inter-Professional Practice (IPP) into pre-clinical curriculum and CE assessments
3. Incorporate healthcare technology in allied health education
4. Articulate IPP principles and benefits to leaders in healthcare systems, higher education, accreditation commissions, professional organizations, and government
5. Conduct and disseminate CE research and scholarly activity

2nd Work Session

Brainstorm Alone (15 min)

Work alone, using provided template (next slide):

- What is a measurable outcome you desire for your challenge?
- What are your resources?
 - Brainstorm three potential strategies/approaches/methods
 - Consider three steps needed to achieve each approach/method
 - Identify key partners (self and three to five more?) to accomplish these steps
 - Assign a timeframe for each step

CE Brainstorm Template

NAME:

INSTITUTION:

CE Challenge: <i>Clinical supervisors say our students aren't well enough prepared for their rotations</i>					
Measurable outcome: <i>Supervisors' ratings of student readiness will improve</i>					
Strategies	Option A: <i>Set up simulated IPE experiences for students to practice handoffs in busy interdisciplinary settings</i>		Option B: <i>Teach students to use the right electronic medical records platforms in pre-clinical workshops</i>		Option C: <i>Engage our clinical partners in didactic teaching to prepare students better for the competencies each site expects</i>
	Step 1:	Key Partners 1. Self 2. 3. 4. 5.	Step 1:	Key Partners 1. Self 2. 3. 4. 5.	Step 1:
Steps and Key Partners	Timeframe:		Timeframe:		Timeframe:
	Step 2:	Key Partners 1. Self 2. 3. 4. 5.	Step 2:	Key Partners 1. Self 2. 3. 4. 5.	Step 2:
	Timeframe:		Timeframe:		Timeframe:
	Step 3:	Key Partners 1. Self 2. 3. 4. 5.	Step 3:	Key Partners 1. Self 2. 3. 4. 5.	Step 3:
	Timeframe:		Timeframe:		Timeframe:

Option C: *Engage our clinical partners in didactic teaching to prepare our students better for the competencies each site expects*

Step 1: *Identify learning objectives aligned to existing curriculum*
Timeframe: *Nov. 12 Faculty Meeting*

Key Partners
 1. Self
 2. *Program Director*
 3. *Didactic Coordinator*
 4. *Course Director 1*
 5. *Course Director 2*

Step 2: *Solicit interest from specific clinical partners at _____ primary teaching hospital*
Timeframe: *Invite to meet before Jan. 31*

Key Partners
 1. Self
 2. *Program Director*
 3. *Didactic Coordinator*
 4. *Clinic Ed Director*
 5. *Interested site staff / preceptor(s)*

Step 3: *Meet to design teaching methods and to schedule guest lecture(s)*
Timeframe: *Prior to April Curriculum Committee meeting*

Key Partners
 1. Self
 2. *Course Director 1*
 3. *Course Director 2*
 4. *Site "Director of Quality Assurance"*
 5. *Site EMR Trainer*
 6. *Preceptor(s)*

2nd Work Session Discussion

S. M. A. R. T. Goals

- Specific
- Measurable
- Achievable
- Relevant
- Time-bound

*Upon completion of your discussion, we ask each of you to enter your **S.M.A.R.T. Goal** onto the online **Data instrument**:*

<https://tinyurl.com/asahpcetf1>

3rd Work Session

Activate Partnerships within Small Groups (30 min)

- As a group, help each other develop a SMART model:
 - Specific
 - Measurable
 - Achievable
 - Realistic
 - Time-bound
- Each participant selects, or group helps select, one strategy for the activity
 - Each will present the objective, one set of steps, and timeline
 - Each other member provides one elaboration/addition toward SMART plan
- Group establishes accountability plan among selves, exchange contacts

3rd Work Session: Discussion

Following your discussion, we ask each participant to go to

<https://tinyurl.com/asahpcetf1>

and, using the ***S.M.A.R.T. Goal Data Instrument*** as your guide:

- 1. Provide informed consent** [IRB *ID NO*: B 18/09-128 approved 9.21.2018, Long Island University, Scott Westervelt, Investigator]
- 2. Complete the text boxes** to tell us your S.M.A.R.T. plan
- 3. Enter your email address** so we may contact you for follow-up

CETF follow-up after the conference

- CETF will send out brief surveys on or about:
 - Friday 10.19.19 (1 week)
 - Friday 11.16.19 (5 weeks)
 - Friday 4.12.20 (6 months)
- Each survey will ask six questions:

What steps have you taken on your SMART plan?	
What changes have you made to your plan?	
Who are your chief partners in the plan: by institution, title, and role?	
What steps remain?	
What are your outcomes to date?	
What evidence do you have of shared accountability between you and other members of today's small group?	

We hope today's workshop has prepared you to:

1. Know and implement useful strategies to advance CE in health professions
2. Produce a SMART plan tailored to an important CE initiative at your site
3. Identify prospective partners to effect your plans to advance CE
4. Work effectively with, and in accountability with, the ASAHP peers in your small working group today

Be on the lookout for our follow-up emails. Help ASAHP collect data on our collective efforts to advance health professions education and clinical care. ASAHP is on the cutting edge of CE as we prepare a strong healthcare workforce for the future.

Thank You!