

Medical Education Scholars in Pediatrics

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UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

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**School of Medicine
and Public Health**
UNIVERSITY OF WISCONSIN-MADISON

Combining advocacy and ambulatory pediatrics: Adventures in curriculum development

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Medical Education Scholars in Pediatrics
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Conflict of Interest

The planner and speaker of this CE activity has no relevant financial relationships with ineligible companies to disclose.

The speaker does not intend to discuss any unlabeled or unapproved use of drugs or devices.



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Please take a moment at the end of the session to complete your evaluation.

Thank you!



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Objectives

- Identify the 6 steps of Kern's curriculum development for medical education
 - Summarize the components of the UW pediatric resident advocacy and ambulatory blocks
 - Describe how a QI framework can be used for medical education evaluation and feedback
-

Agenda

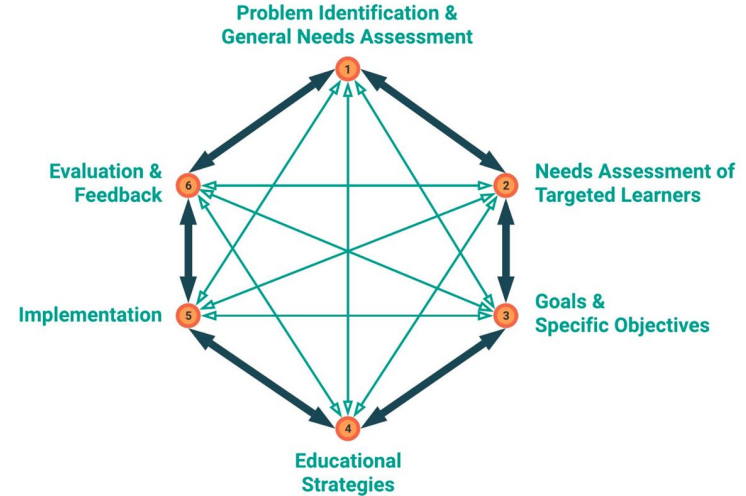
- What we did
- What we didn't do
- What we learned

**What we did (and
didn't do)**

KERN'S 6 STEPS

CURRICULUM DEVELOPMENT for
Health Professions Education can be divided into **6 STEPS**.

1. Problem identification
2. Specific needs assessment
3. Goals and objectives
4. Educational strategies
5. Implementation
6. Evaluation and feedback

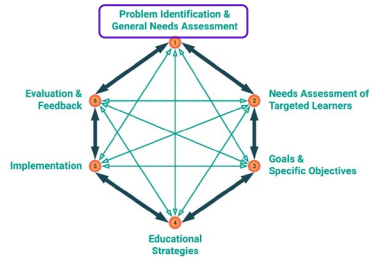


By convention, **KERN'S 6 STEPS** are presented in a specific order, however curricular development involves fluidly transitioning among all steps.

Problem identification

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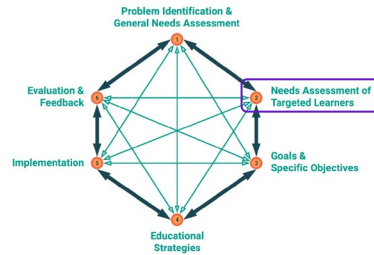
Problem identification

- CPAX
 - Advocacy “projects”
 - Less infrastructure for advocacy 2nd and 3rd year
 - ACGME changes
- Ambulatory
 - ACGME changes for clinic
 - Increasing mental health/decreasing sick visit balance
 - Loss of intern year PAC with pandemic
- Evaluation
 - Difficult to obtain objective feedback
 - Ensure meeting resident goals

Needs assessment

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Needs assessment

- Previous advocacy ed research: strong beliefs about importance, less knowledge/practical tools
- Dr. Bethel's needs assessment
 - Resident comfort
 - Barriers
 - Thoughts on existing rotations and merger

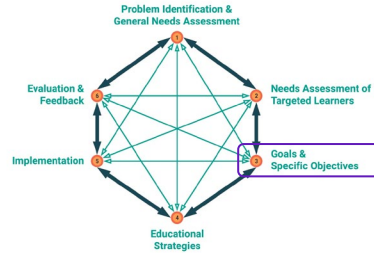


Image created by Dr. J Bethel

Goals & objectives

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Goals

- More TIME, KNOWLEDGE, and MOTIVATION
- Create longitudinal opportunities throughout residency to have time to focus on advocacy, and earlier exposure to ambulatory topics
- More community partnership and engagement

Goals

My Advocacy Project



Increase resident participation in advocacy during each year of training by 50% in the next academic year



Increase resident confidence in ability to participate in advocacy by 1 point in the next academic year

Measuring goals

- Objectives?
- EPAs?
- Milestones?

Advocacy

Objectives

- Describe and explain **social determinants of health and racial inequities** in medicine
- Identify how physician advocacy influences the health of individuals
- Integrate advocacy into one's **identity** as a physician
- Employ **tools and community resources** to carry out advocacy
- Communicate the importance of **working with** community organizations, legislators, and others with a stake in child health
- Identify systems-based and population **issues** in child health and conduct **initial research** around a topic in preparation for driving change

EPAs

- Address specific patient and family needs by **identifying appropriate resources** and accessing/coordinating them to ensure optimal patient care
- Use **population health strategies** to promote health and address racism, discrimination, and other contributors to inequities among pediatric populations
- Support, co-design, and/or lead **initiatives in collaboration with other stakeholders** to improve healthcare access, quality, delivery, and outcomes for patients and populations

Ambulatory

Objectives

- Demonstrate proper billing and coding for **well and sick outpatient** visits with appropriately linked diagnoses
- **Reflect** meaningfully on one's own clinical, professional, and learning activities

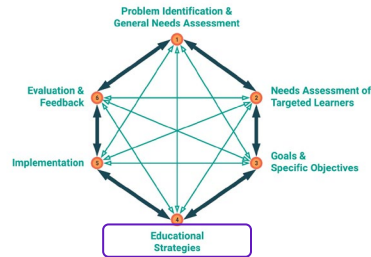
EPAs

- Manage patients with **acute common diagnoses** in an ambulatory setting
- Provide **recommended screening and anticipatory guidance** for well visits
- Assess and manage patients with common **behavioral/mental health** problems

Educational strategies

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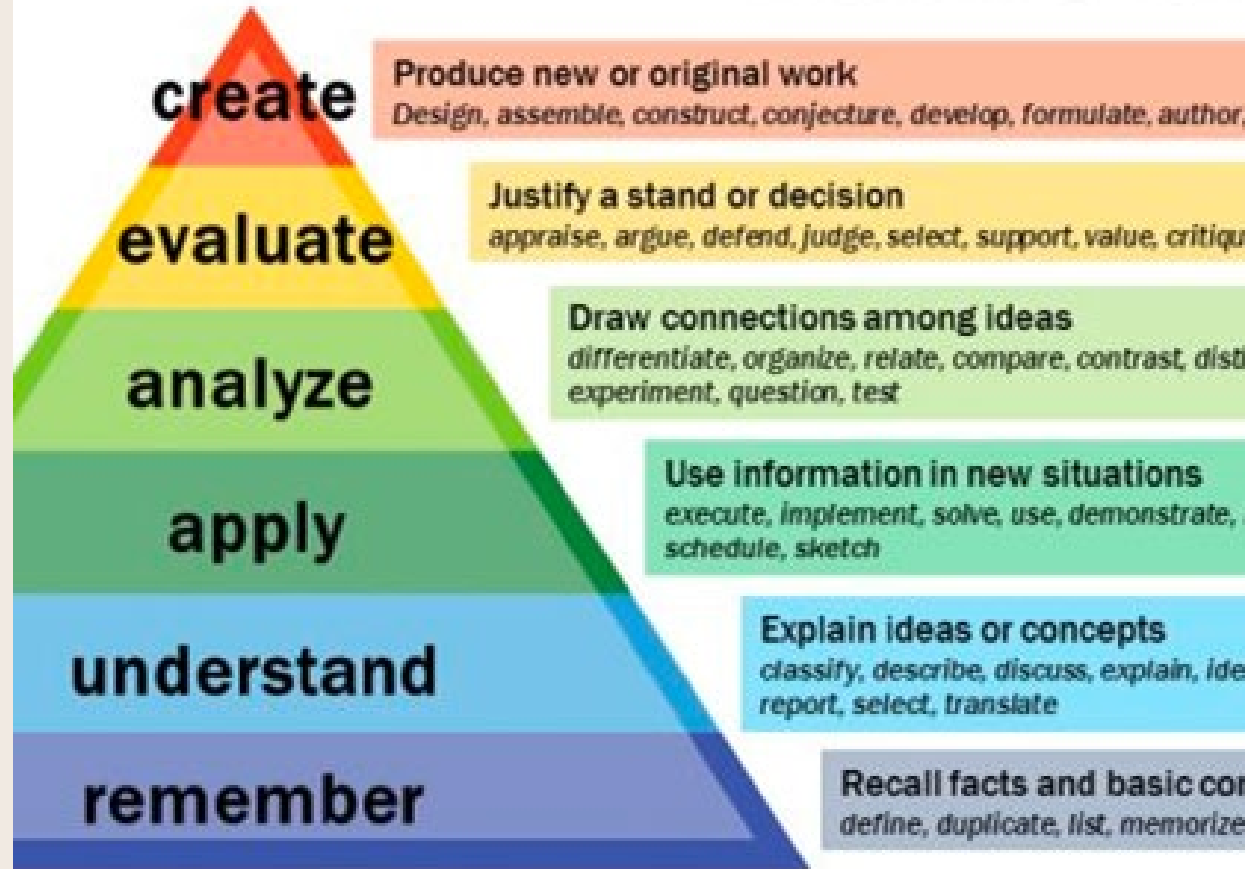


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Bloom's Tax

Educational strategies

- Kept Bloom's Taxonomy in mind for editing content
- Advocacy Project: Create, Apply
- Reflections: Analyze
- Discussion: Understand, Apply, Evaluate



Educational Strategies

- Weekly themes
- Mix of self-directed tasks, readings, and reflections
 - New addition: child abuse prevention
 - Future additions: nutrition, mental health, schools
- Direct teaching by community partners

WEEK 1: ACES/Health Inequity

READ: <http://racetoequity.net> and the report produced about Madison's inequities in 2013. [Race to Equity Report](#)

WATCH: Nadine Burk Harris [TED Talk](#)

LISTEN: Why Race Matters in Wisconsin [podcast](#) (choose any 2 episodes)

WEEK 2: Child Abuse and Prevention

READ: Prevention of Child Abuse: Period of Purple crying - [PURPLE Crying Info](#)

Sentinel injuries article - <https://publications.aap.org/pediatrics/article/131/4/701/31924/Sentinel-Injuries-in-Infants-Evaluated-for-Child>

DO: WI Child Welfare [Mandated Reporter training](#) module

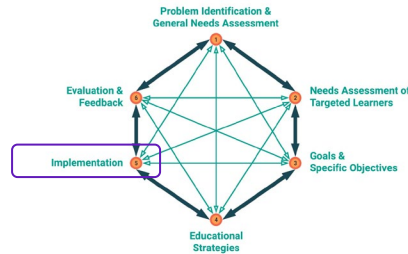
Written ¼-½ page reflection #1: intended to be critical thinking related to a self-directed learning topic, community meeting, or clinical scenario this block, or connection to previous experience.

FIND: Vetted resources on [tantrums](#) to share with families

Implementation

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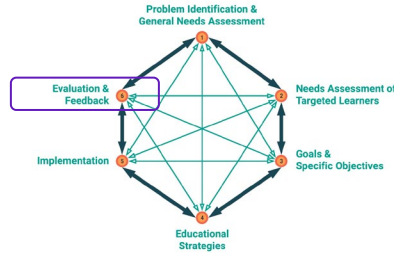
Implementation

- Rolled out July 2023
- Shifts in activities
 - Community meetings
 - Ambulatory experiences
- Wrap-up meeting
- 2nd year check-in

Evaluation and feedback

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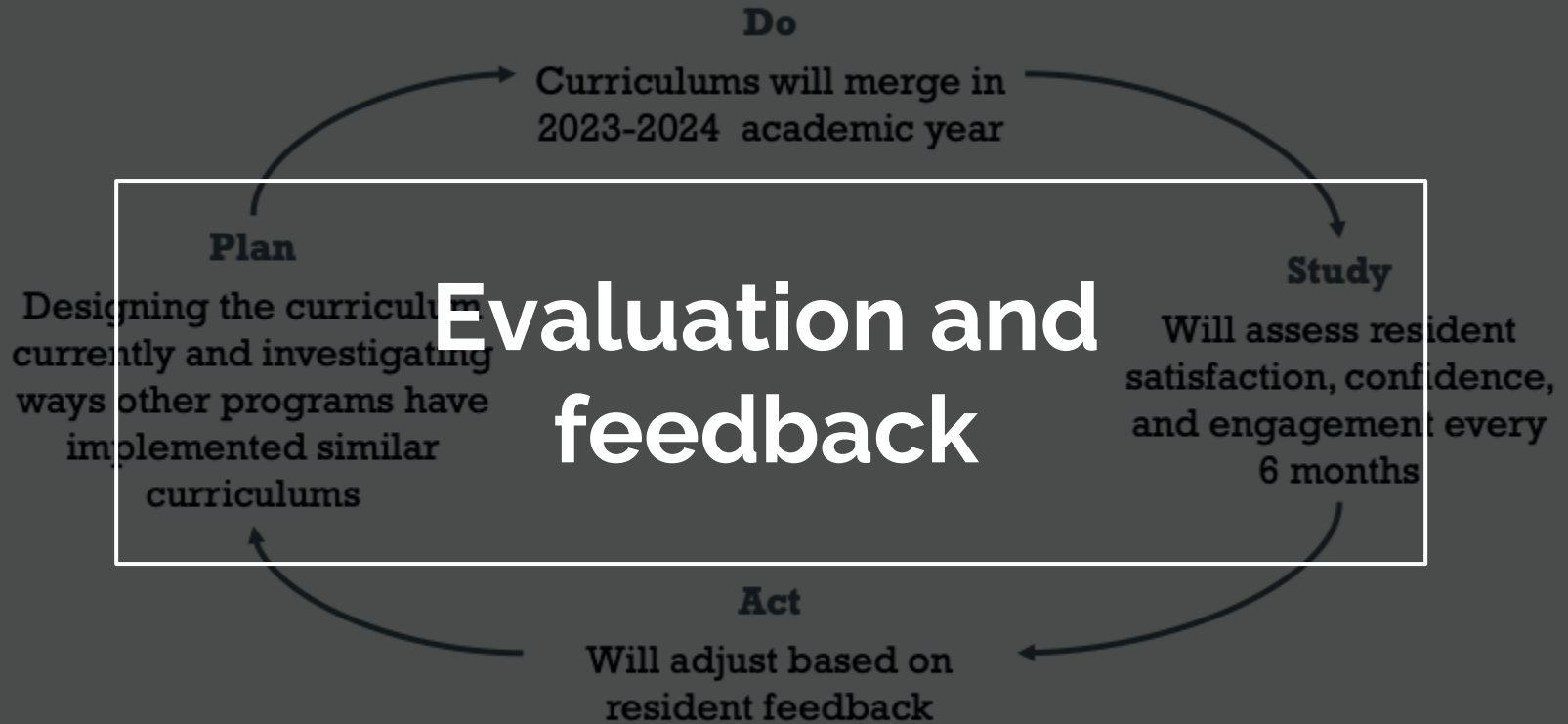


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Evaluation and feedback

- EPA form for clinic preceptors
- MedHub eval combining EPAs and milestones

Evaluation and feedback



What we learned

Next Steps

- Overlap mode
- Resident evaluations
- Dr. Bethel's PDSA cycles
- Longitudinal advocacy
- Dissemination...eventually

Resources

<https://www.acgme.org/specialties/pediatrics/program-requirements-and-faqs-and-applications/>

<https://www.acgme.org/globalassets/pdfs/milestones/pediatricsmilestones.pdf>

<https://www.abp.org/content/entrustable-professional-activities-general-pediatrics>

<https://cft.vanderbilt.edu/guides-sub-pages/blooms-taxonomy/>

Erin Klein, Brooke Pfister; Pediatric Resident Engagement in Advocacy Does Not Match Attitudes. *Pediatrics* March 2021; 147 (3_MeetingAbstract): 113–114.

Garg M, Tseng Z, Baird GL, Egan P, McGarry K. Attitudes Toward Advocacy Do Not Match Actions: A Cross-sectional Survey of Residents and Fellows. *R I Med J* (2013). 2019 Apr 1;102(3):34-37. PMID: 30943670.

(<https://pubmed.ncbi.nlm.nih.gov/30943670/>)

Thomas, P. A., Kern, D. E., Hughes, M. T., Tackett, S. A., & Chen, B. Y. (Eds.). (2022). *Curriculum development for medical education: a six-step approach*. JHU press.

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