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Multimodal Needs Assessments for Curricular Refinement – Learner, Expert, EMR

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Multimodal Needs Assessments for Curricular Refinement: Learner, Expert, EMR

Health

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BACKGROUND

- Internal Medicine Residents rotate through two medical ICUs: VCU MRICU and VA MICU
- The fellows and faculty rotate on a schedule separate from the residents; teams dynamically change in the rotation
- Residents have identified standardized curriculum coverage as a key area of need for their ICU learning

OBJECTIVES

- Explore the educational formats and resource preferences of house staff
- Identify ICU topics thought to be important by experts in the field
- Identify clinically relevant ICU topics
- Build an interactive, standardized cognitive aid that serves both as an instructional resource for house staff and a prompt for those teaching

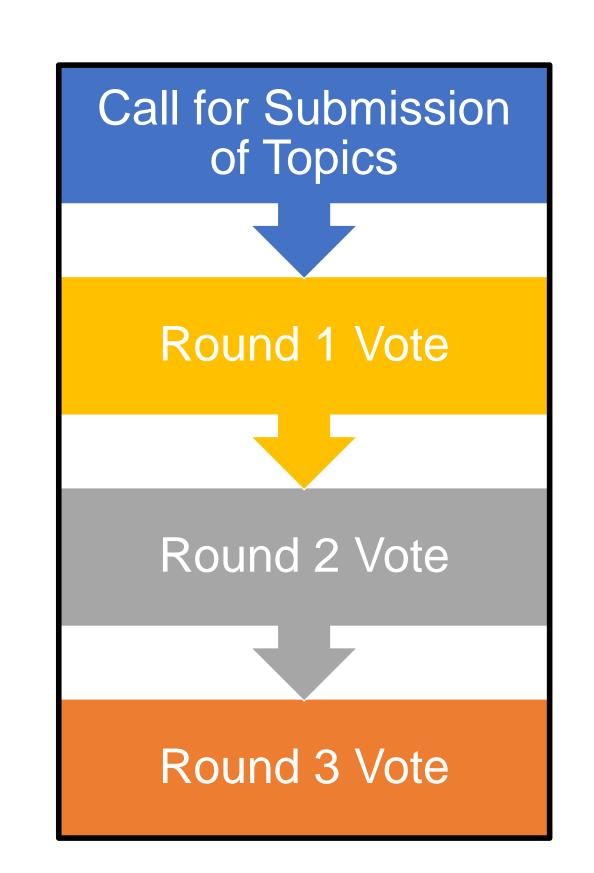
METHODS

- Performed a learner-centered needs assessment exploring educational format preferences of house staff
 - Representative resident sample from different career tracks: generalist, hospitalist, and subspecialist
- Gathered expert opinion to prioritize important ICU learning needs
 - VA MICU and VCU MRICU faculty, fellows, and advanced practice providers
 - Three-round modified Delphi sort^{1,2}
 - 12 topics chosen
- Determined which problems were most frequently encountered in the ICU
 - Collected and quantified 1 year of de-identified EMR data about reasons for MRICU consults
 - Coded by a single reviewer and listed in order of frequency
- Created a standardized document as a cognitive aid and resource for ICU curriculum coverage
 - Combine Expert Delphi and EMR query into one, easy to use resource

Learner-Centered Needs Assessment:



Modified Delphi Sort:



EMR Query:



EMR Query

DATA SUMMARY

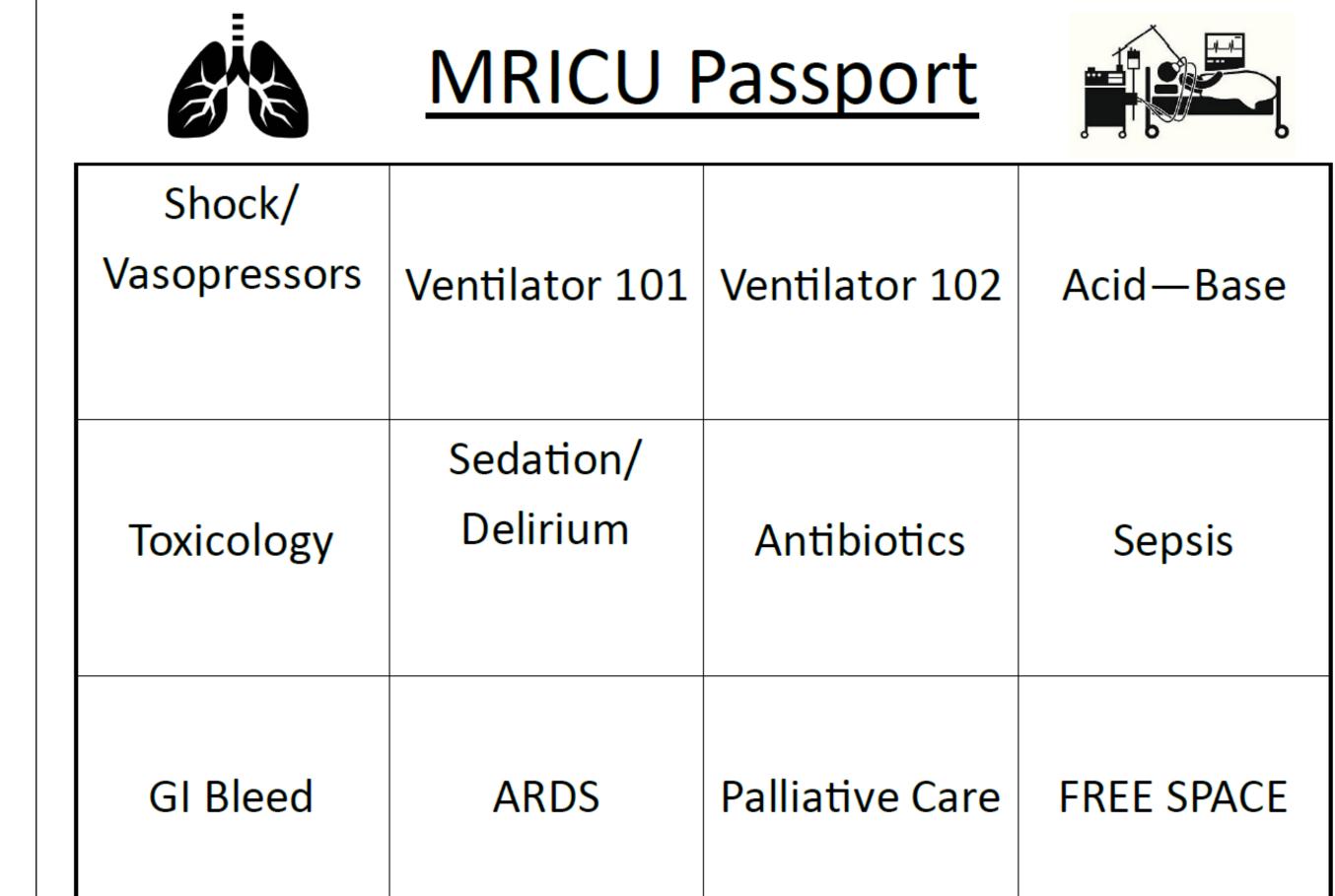
Resident Assessment

| | Sort | (in order of frequency) |
|-------------------------------|--|---|
| Short talks preferred | Ventilator Basics | Respiratory Failure (hypoxic & hypercapnic) |
| Handouts for outside learning | Ventilator Advanced | Sepsis |
| Shared framework | Sepsis | Shock |
| Multimedia learning | Shock/Vasopressors | Obstructive Lung Disease |
| | ICU Toxicology | Alcohol Withdrawal |
| | Sedation/Delirium | Electrolyte Disorders |
| | Gastrointestinal Hemorrhage | Gastrointestinal Hemorrhage |
| | Antibiotics in the ICU | Cirrhosis |
| | ARDS | Acute Liver Failure |
| | Acid Base | Diabetic Ketoacidosis |
| | Palliative Care | Acute Kidney Injury |
| | Free Space for Rotation specific cases | Altered Mental Status |

Expert Modified Delphi

Final Cognitive Aid:

(embedded hyperlinks to resources omitted)



CONCLUSIONS

- We successfully created a teaching curriculum to address a need identified by our residents
- There was a discordance between expert and EMR-identified topics
 - Some topics are taught elsewhere in the learner's residency
 - Many ICU problems develop after admission/initial consult
- A two-week trial of the MRICU passport with non-EMR driven topics was performed
- Resident Feedback:
 - Generally well received
 - Passport would take time to be fully adopted in ICU routine
 - Liked linking the topics to an online education resource
 - Expectations met with short lecture, high yield fact sheets, and links to further information
- Faculty Feedback:
 - Passport served as a reminder of which topics had been covered and which were left to cover

FUTURE DIRECTIONS

- Discordance of topics will be reassessed for opportunities to include EMR-driven, high-yield clinically encountered topics
- Periodically review EMR for changes in practice and relevance
- In-services for faculty and residents will be required to establish standard use as well as buy-in
- Will evaluate the feasibility of launching an EMR query at the VA medical center
- Goal is for this to be adopted as the standard curriculum for teaching across all ICU learning environments

REFERENCES

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2. Chia-Chien Hsu, & Brian A. Sandford. (2007). The Delphi Technique: Making Sense of Consensus. Practical Assessment, Research & Evaluation, 12(10), 1-8.