

Formative Evaluation in a Competency-Based Required Geriatric Clerkship: Use of Written Exercises and Narratives



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ABSTRACT

Purpose: This poster describes implementation of a competency-based 4th year geriatric clerkship at FSUCOM. Proficiency in ten AAMC Geriatric Competencies-derived domains, including End of Life, Hazards of Hospitalization, and Patient Function/Self-care must be demonstrated on this clerkship, evidenced by direct observation, and the desired behavior confirmed by faculty. Submission of written reflective exercises are reviewed by the education director. Web-based software is used to manage the curriculum and to ensure comparability across six regional campus clerkship sites. The goal of this curriculum revision is to transition from a very successful, but teacher-focused curriculum to learner-focused competency-based curriculum by placing emphasis on what students ‘do’ rather than what is ‘taught’. This curriculum revision was designed to foster student reflection, provide developmental feedback and provide assessment of complex behaviors.

Methods: Students follow patients of community generalists and geriatricians across transitions in care settings. They use the web to access the competency requirements and references, submit written exercises, take tests and quizzes, and receive feedback. Regional site faculty are responsible for guiding and supervising the student during clinical experiences. The education director provides oversight of all students, reviews submissions, provides written feedback via the web, monitors student progress and determines students’ grades. Examples of written submissions for these three competencies and the accompanying feedback are provided. Educational strategies and rationale for the competencies chosen, design of written exercises, and formative evaluation and feedback are presented.

Findings and Conclusions: The written exercises in this clerkship effectively identified gaps in students’ geriatric knowledge base and revealed both positive and problematic attitudes about caring for older adults. They successfully discriminated between those students who are skilled in reflective work far exceeding expectations and those who needed extra attention from faculty. Written narrative and reflective exercises facilitate ‘teachable moments’ and opportunities to reinforce positive attitudes. Successful implementation of this project requires faculty development and additional resources.

COMPETENCIES

- Lifelong Learning*
- Geriatric Therapeutics *
- Cognitive Impairment *
- Mood Disorder
- Function/Self-Care *
- Atypical Presentation
- Falls
- Hazards of Hospitalization *
- Transitions in Care *
- End of Life/Advanced Disease*

* Indicates competency with a required written exercise

PATIENT FUNCTION AND SELF- CARE REFLECTION CHECKLIST

1. Adequate patient summary provided: a. Demographics (HIPAA-compliant) b. HPI and Course of Illness
2. Patient’s own goals described?
3. ADL Function (Report) Detailed and complete; Informant identified?
4. Functional Assessment procedures (Observation of mobility/gait; Any evidence of neuro or musculoskeletal exam; Get-Up and Go; POMA)
5. Summary of deficits and/or estimate of rehabilitation potential
6. Summary of existing management plan
7. Assessment of efficacy of existing management plan re: Patient goals; Patient safety
8. Recommendations and justification for any proposed changes, alterations or enhancements of the care plan
9. Includes <i>reflections</i> re: Efficiency of the healthcare system in addressing this particular person’s needs
10. Includes reflections about the preservation of patient autonomy in the face of functional impairment



“GRADE CENTER”

- Students listed by name and grouped by campus
- Education Director accesses quizzes and provides feedback
- Faculty Confirm Observation of students’ performance
- Written Exercises uploaded by students and accessed by faculty
- Feedback to students and between Clerkship & Education directors
- Student progress tracked

METHODS & EVIDENCE

Outcomes of Technology

- All stakeholders can monitor student academic progress
- Comparable Curriculum documented across regional campuses
- Grading and feedback simplified
- Students aware that clerkship and education Directors “are watching”

HAZARDS OF HOSPITALIZATION RISK ASSESSMENT CHECKLIST

Recognizes Extrinsic Risks
Standard /Teaching Points
1. Adequate patient summary provided
2. Identifies /specifies Intrinsic Risk Functional, cognitive impairments; co-morbidities, pain, depression, continence
3. Identifies /specifies Extrinsic risks Foley, chemical or physical restraints, pressure relief, tethers, clutter, noise, isolation, NPO, etc.
4. Identifies skin/ integrity (risk or presence of wounds)
5. Describes nutritional status
6. Describes special senses (impairment and assistive devices)
7. Describes sleep (? Insomnia)
8. Identifies polypharmacy
9. Requests, suggests or reports results of appropriate assessments
10. Assessment of cognitive function requests, suggests or reports
11. any skin assessment requests, suggests or reports
12. functional assessment requests, suggests or reports
13. mobility assessment
14. special senses assessment (vision& hearing) requests, suggests or reports
15. Identifies location of assistive devices
16. Student Recommendations
17. Makes Recommendation (s) to reduce risk
18. Evidence-based recommendation
19. Evidence of patient advocacy
20. Recommendations <i>not likely</i> to cause patient harm
Overall evaluation /summary:

ADVANCED ILLNESS/ PALLIATIVE CARE REFLECTION CHECKLIST

Standard /Teaching Points
Level 1 (knowledge)
1. Adequate patient summary provided
2. Patient goals described
3. Family goals described
4. Includes reflective critique of the healthcare delivery system re: this particular patient
5. Summary of existing management plan
6. Assessment of efficacy of existing management plan
Level 2
7. Recommendations and justification for proposed changes, alterations or enhancements of the care plan
8. Includes <i>reflections</i> about: Unique aspects of this patient as a person Unique aspects of this end of life situation
9. Includes reflections about the ethical issues in this particular patient situation, <i>if any</i>
Level 3
10. Includes <i>reflections</i> on their (personal) role in the future with patients with advanced illness
Overall evaluation /summary:



“COURSE MATERIALS”

- Specific Educational Competency Statement
- Listing of 5-6 Enabling Objective per competency
- One-Click Access to Readings, References and Resources
- Open-book Multiple Access Quiz
- Description of Required Evidence of Proficiency
- Example of a Submitted Written Exercise

OUTCOMES



Opportunities

- Learner-Centeredness
- Increased learner initiative
- Monitor learner progress
- Extremely Effective Formative Evaluation
- Faculty Development
- Monitor Comparability

Challenges

- New roles for faculty
- “Senioritis” Epidemics
- Very Time Consuming
- Less than anticipated efficacy for Summative Evaluation
- Faculty Development
- Establishing Competency Standards

