UW Medicine
SCHOOL OF MEDICINE

Foundations 2022 Workgroup Minutes

Date	May 12, 2021
Time	4:00 – 5:30PM
Co-Chairs	*Edith Wang, Meghan Kiefer*
Attendees	*Brenda Martinez, Cassie Cusick, Alison Doherty, Calvin Le, Coral Bays-Muchmore, Tyler Bland, Zach Gallaher, Ceradwen Tokheim, John Willford, Ruth Lewinski, Isabela Covelli, Haya Jamali, Kellie Engle, Gina Campelia, Bryan Kestenbaum, Matt Cunningham, Laura Goodell, Holly Martinson, Sarah Wood, Kristen Hayward, Michael Campion, Max Kullberg, Jaime Fitch, Carolyn Bell, Mara Rendi*
Regrets	*Leo Wang, Kiran Gill, Alyssa Stephenson-Famy, Peter Fuerst, Bruce Silverstein, Allison Lambert, Karen McDonough*

Agenda

	ITEM	TIME
1	Member introduction for those unable to attend last week	5 min
2	Review draft mission statement	10 min
3	Student comments on Foundations design successes & their ideal day in medical school	10 min
4	Ceradwen Tokheim, Instructional Designer: A Framework for Interactive vs Independent Learning Resources	20 min
5	Small group assignment: Objectives & Formats for in-class and out-of-class learning resources	20 min
6	Review & Discussion	20 min
7	Next Steps	10 min

Future meeting:

- Thursday 5/27 from 4-5:30PM PST

1. Member introduction for those unable to attend last week (*timestamp 0:00 – 4:38*)

See the Foundations 2022 workgroup roster for membership information. This group represents every site, block and thread.

2. Review draft mission statement (*timestamp 4:38 – 18:20*)

The first workgroup meeting (held 4/29/2021) was dedicated to crafting a Foundations mission statement. The mission statement addresses the goals of the Foundations Phase and provides the workgroup with a shared understanding moving forward. Three important themes emerged from the workgroup's discussion:

- **Knowledge** (basic sciences, clinical practices, medicine in society)
- **Skills** (communication, teamwork, lifelong learning)
- **Professional identity** (integrity, respect, teamwork)

Integrating these themes, Dr. Wang and Dr. Kiefer drafted the following mission statement: "Through engagement with our learning community, students who complete the Foundations phase will acquire the scientific knowledge, develop the foundational clinical skills, and form the professional identity necessary for the next phase of medical training and succeed as physicians."

Workgroup feedback on the statement included:

- Add a preamble: "*Students who complete the Foundations phase will develop (or acquire),* through engagement with our learning community…"
- The workgroup discussed the last part of the statement: "and succeed as physicians." Is this outside the realm of Foundations Phase? A student who only completes Foundations would not be a successful physician. The curriculum is designed for students to move from one phase to the next as they develop as physicians. What is the first step in this process? The workgroup should be on the same page and have a clear picture of what students should accomplish by the end of Foundations Phase, so we aren't focusing on topics that are better suited for the clinical phases (for example, diagnosis and management).
    - Are there topics unique to the Foundations Phase?
        - Foundations covers different career paths, differences between physician roles at an academic center versus a rural center, and healthcare structure issues.
        - The Patient Care Phase is focused on workflow management, diagnosis, treatment, and how to interact with patients. Students don't use as much pathophysiology (i.e. how does an illness come to be? How does this antibiotic work? How does the antibiotic work with this illness?)

3. Student comments on Foundations design successes & their ideal day in medical school (*timestamp 18:32 – 34:35*)

Students shared their thoughts on what an ideal day would look like:

- The current structure works well (half-day in class and half-day of self-directed learning). The workgroup should consider timing (trying to get to class at noon can be difficult).
- Two-hour caps on lecture and small group work well. It's difficult to keep students engaged after two hours.
- Introducing new material in small groups can be challenging. Ideally the two hours of lecture would provide a broad overview of the topics and small group would focus on details and application (CPR used this model well). This model could help boost attendance in small groups, which should be a priority.

- Students struggle with switching to a new format every block. Consistency across the blocks would help (standardize where information is located, provide clear expectations of students, etc.). Many students use third party resources because they are consistent in their presentation of material.
- Blocks should address all learning styles. Ideally, blocks would have a video introduction, syllabi for reference, and sample test questions. These resources would be balanced with classroom material and discussions.
- Students should make a full faith effort to learn material before going to class. This would allow valuable faculty contact time to center around active learning in small groups and discussions.
- The best materials for students include syllabi and supplemental materials (for example, UWorld board-style questions).
- To motivate student engagement in small groups, attendance should either be mandatory, or the School should implement a sign-up system, to ensure small groups are a good use of time and students show up and are prepared.
- Students leading/co-leading small groups is an effective way to learn how to convey information and is helpful for being successful on the wards. This format could be introduced in the second half of year one.

Students provided thoughts on the value of live lecture:

- The Idaho cohort liked going to live lecture, especially after COVID-19. Many students enjoyed the community-building aspect, getting feedback and having a routine.
- Making in-class learning more interactive would go a long way in boosting attendance.
- In Orientation and Immersion, the School should emphasize that faculty who teach in-person are the same folks students will see on rotation. It's very helpful seeing a familiar face on the wards. Additionally, attending guest lectures from specialists is a great way to learn about a specialty.

4. Ceradwen Tokheim, Instructional Designer: A Framework for Interactive vs Independent Learning Resources (*timestamp 34:35 – 51:45*)

Ceradwen, Academic Learning Technologies Instructional Designer, gave a presentation on instructional design and how people learn.

Learning is constructivism – learners take experiences they have, process them to identify patterns and what is and is not important, and remold it into a larger picture of patterns. Teachers are there to help that process – create experiences for the learner and help them identify what is necessary and what is unnecessary and help them construct that final picture.

What we know about learning:

- Learning is social.
- People begin to learn by trying peripheral activities, then take on more complex activities as they grow in confidence.
- Even if the aim of the learning is not behavioral, having an associated behavioral outcome can make it easier to communicate and assess.
- People learn most profoundly when faced with a dilemma or need to understand something relevant to them.
- We should encourage active learning. People need to learn by doing wherever possible, rather than simply hearing or reading about a topic.
- Allowing people to have some control over their own learning will motivate learners.
- Build connections between what is being learned and the experiences of learners.
- Encourage collaboration and conversation between learners (peer-to-peer learning).

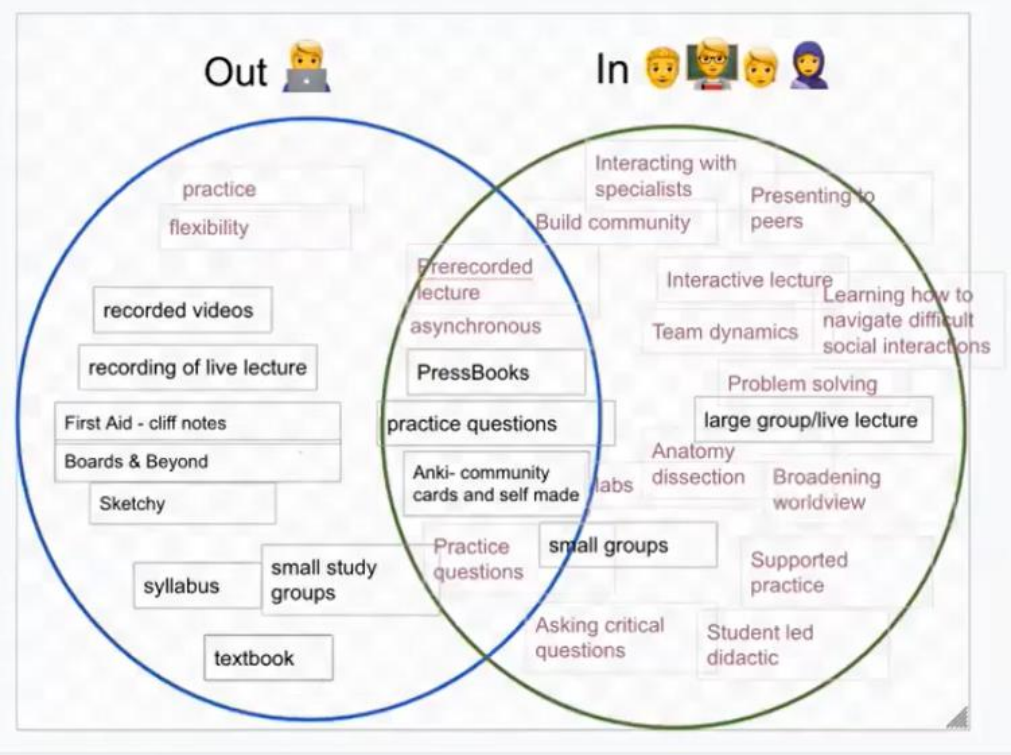
- Make sure that the point of learning is clearly communicated and that there is shared understanding of what it means to get there.

The workgroup engaged in an active learning exercise reviewing maps. The workgroup discussed the importance of having a shared understanding of what a map is, how to read it, what information can be found in a key, the importance of scale, etc. The School should view our course materials similarly to maps – how can we establish constructs between blocks so students can pick up any block's syllabi and know where to find certain information?

5. Small group assignment: Objectives & Formats for in-class and out-of-class learning resources (small groups) (*timestamp 51:45 – 1:08:17*)

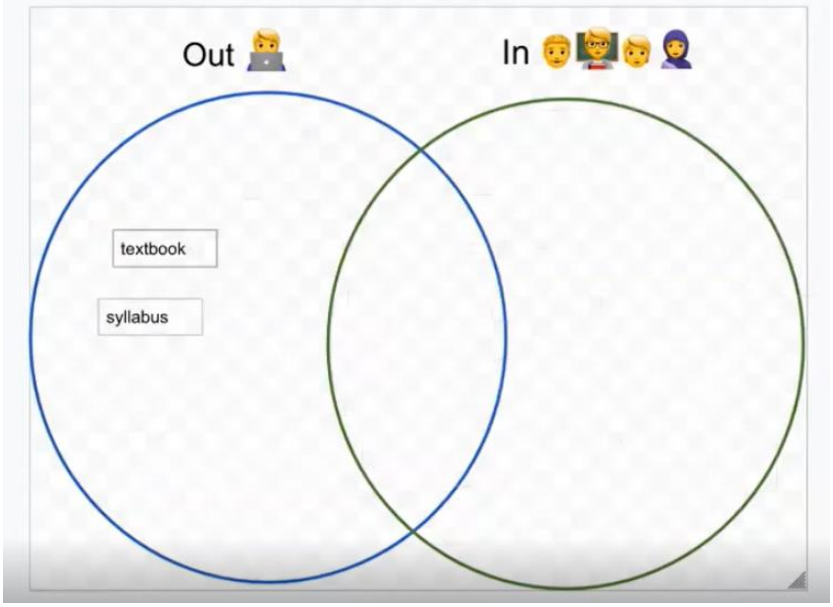
The workgroup broke into small groups to brainstorm what activities and resources should be used in-class versus out-of-class.

Group A:



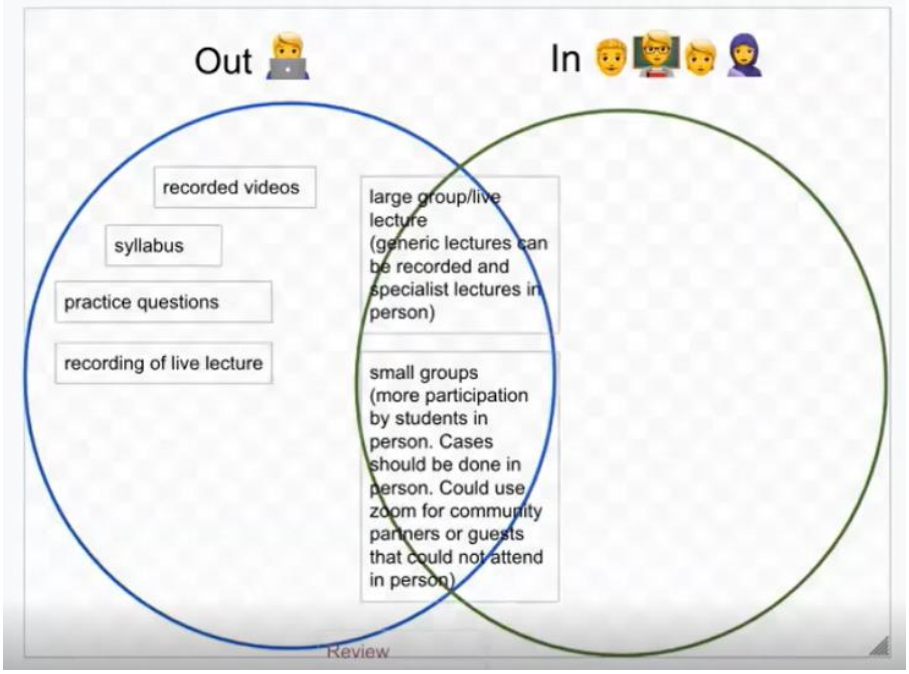
Group A discussed third party tools that students often use and their place in the Venn diagram. They also discussed the value of in-class learning and what activities are highest yield in-class (team dynamics, community-building, navigating difficult interactions, etc.). This group discussed that there are benefits to being in the classroom that do not revolve around direct transfer of content knowledge.

Group B:



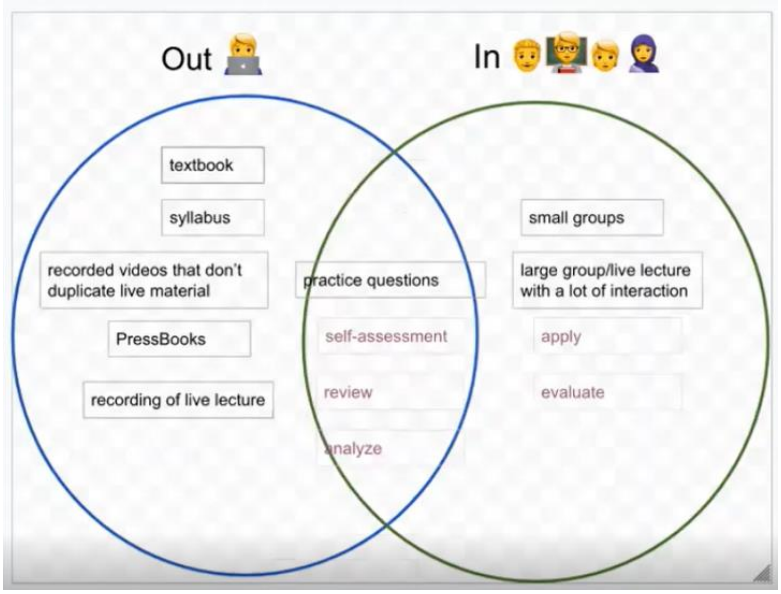
Group B discussed how students can grapple with new information in a meaningful way. They used an example from I&D - what faculty think is new information is often different than what students think. This links back to the mapping exercise and the importance of building common understanding of materials and content. The group also discussed the benefits of sharing information ahead of time with students on what they can expect in-class, instead of just asking students to come with questions. Additionally, the group discussed the importance of communication between instructors and students. Instructors should focus on providing guidance to students on how they can achieve expertise and/or sharing their own experience with learning and gaining mastery.

Group C:



Group C discussed the importance of starting medical school with a clear expectation of what it means to come prepared to class and the importance of helping students learn how to structure their days.

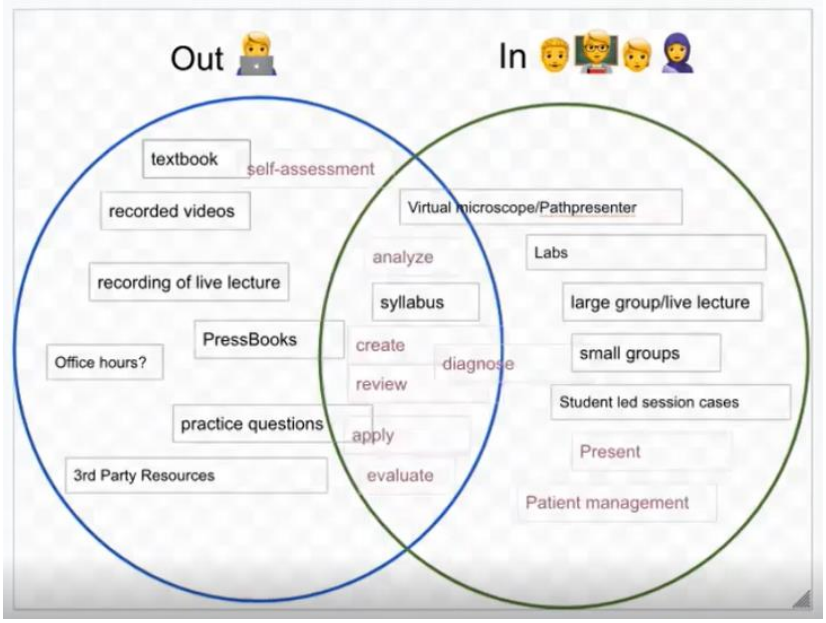
Group D:



Group D discussed the importance of recognizing that not every block, thread or subject is the same and there may not be a one-size-fits-all for how every subject should be taught. The group also discussed that it's difficult for faculty to design a successful interactive session and it's difficult for students to prepare for a successful interactive session. It would be beneficial for every block and thread leader to consider the purpose and value of each learning tool and make sure that it's not duplicated (for example, a pre-recorded lecture and a live lecture covering the same thing or a syllabus that has the same points as a live lecture).

The group also discussed the importance of in-class sessions being valuable to all students (students who have a good grasp on material, those who don't, and students who fall in the middle of this spectrum).

Group E:



Group E discussed that the two categories serve different purposes. Out-of-class items are geared toward background science knowledge (utilizing textbook, videos, third party resources, practice questions, etc.).

While in-class items are more focused on building physician skills (diagnosis, management, case presentations, hands-on labs, interactive radiology and pathology sessions).

6. Review & Discussion (*timestamp 1:08:17 – 1:11:48*)

Reach out to Dr. Wang or Dr. Kiefer with any additional ideas or feedback you may have. They will compile everyone's thoughts from the previous exercise to come up with a summary to reflect the workgroup's thoughts.

7. Next steps (*timestamp 1:11:48 – 1:14:50*)

The next meeting is Thursday, May 27th at 3PM AK/4PM PST/5PM MT. We will focus on Guiding Principle #5: Threads need a larger and more coordinated/systematic presence in blocks. We will move forward under the assumption that students will need to demonstrate mastery. If this changes, students would still like to be able to track their thread performance.

Questions to consider prior to the meeting: what are your ideas for how to accomplish Guiding Principle #5?