



BACKGROUND

- 96% of pediatric residents in our program feel it is at least moderately important to receive clinician educator training
- Only 34% of these residents feel that the program places adequate emphasis on this type of training
- Most Residents as Teachers programs lack longitudinal curricula and instruction on medical education theory
- We created a novel MedEd Core Curriculum as part of a Medical Education Pathway to bridge these gaps

METHODS

- A curriculum rooted in constructivism and consisting of monthly evening sessions was developed using Kern's Six-Step Approach

Learning Objectives

By the end of this session, residents will be able to:

- Describe the basic principles of [session topic]
- Apply new knowledge of [session topic] to educational scenario

Educational Strategies

- Reflection
- Interactive lectures
- Small group discussion
- Real-time application of educational models

Evaluation Model

- Retrospective pre/post survey using a five-point Likert scale
- Open ended reflection on the session's impact on future practice

- Data was analyzed using descriptive statistics and Wilcoxon-signed rank tests

RESULTS

Survey Data

- 5 sessions have occurred to date, out of 10 total for the academic year
- Each session had an average of 17 participants
- 79% overall survey response rate
- 96% of residents found sessions to be at least moderately helpful, with 77% finding them either extremely or very helpful
- As compared to self-perceived ability prior to each session, after each session residents noted a significant improvement in their ability to:
 - *Describe* each educational model (1.92 vs 3.98, $p < 0.001$)
 - *Apply* each educational model (1.87 vs 3.41, $p < 0.001$)

Reflection Themes

- Residents most commonly described an improved framework for medical education concepts and theories
- Residents highlighted the importance of tailoring educational strategies towards specific and measurable learning objectives
- Residents valued the time dedicated to practical application within each session

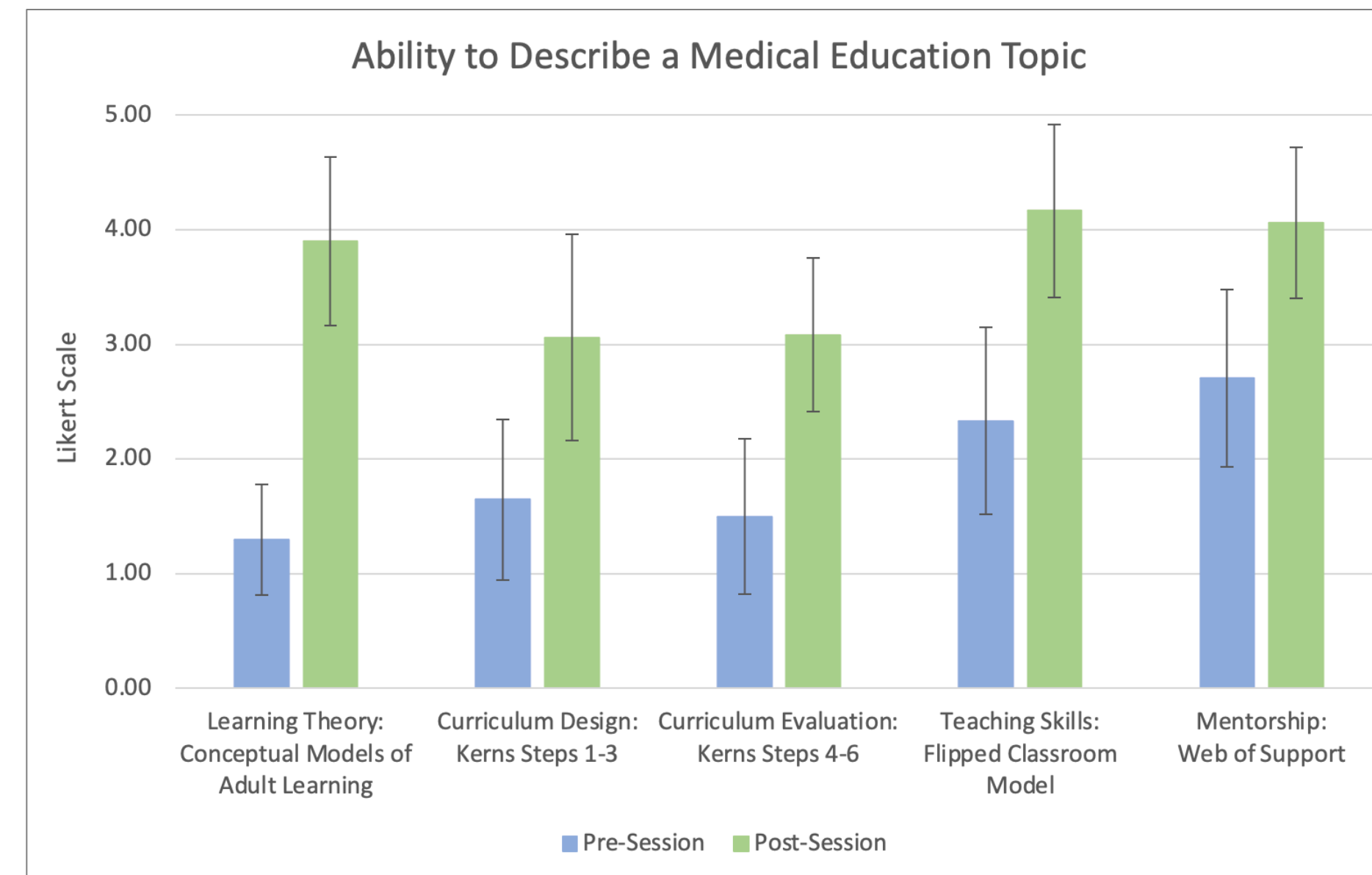


Figure 1. Residents' self-perceived ability to describe principles of a medical education topic before and after each MedEd Core Curriculum session

Likert Scale: 1=Not at all well; 2=Somewhat well; 3=Moderately well; 4= Very well; 5=Extremely well

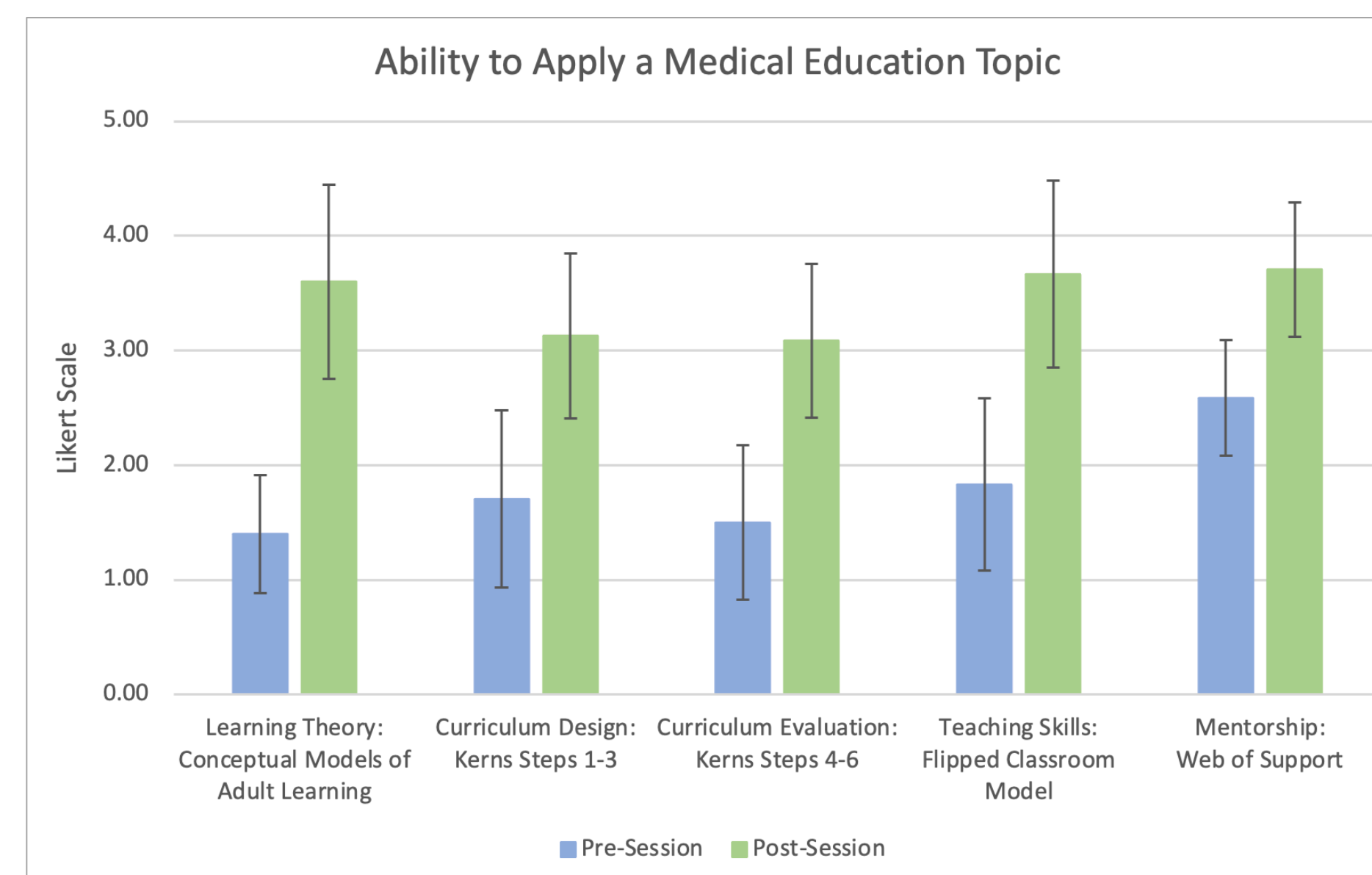


Figure 2. Residents' self-perceived ability to apply principles of a medical education topic before and after each MedEd Core Curriculum session

Likert Scale: 1=Not at all well; 2=Somewhat well; 3=Moderately well; 4= Very well; 5=Extremely well

CONCLUSIONS

- We developed and implemented a novel curriculum series for pediatric residents that focuses on medical education theory
- Residents had the opportunity to build on their existing knowledge and skills through interactive discussion and real-time application of educational models
- Their self-perceived ability to describe and apply core educational models improved after each session
- Limitations:
 - Residents self select to participate in the curriculum, and are therefore assumed to be more inherently interested medical education
 - Evaluation of the curriculum's impact on clinician educator training is based on self-perception, and does not yet incorporate direct observation

IMPLICATIONS

- Initial evaluation of our MedEd Core Curriculum demonstrates that it is an effective educational tool and could be a meaningful component of a Medical Education Pathway
- Further evaluation of the Medical Education Pathway as a whole is warranted

DISCLOSURES

- We have no conflicts of interest to disclose