



Individualized Learning Plans

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Southeast Hub: Developing Faculty Competencies in Assessment

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Disclosure: None of the speakers for this educational activity have a relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Disclosures

• No financial disclosures for both presenters.



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Objectives

- Describe ILPs within residency training, including their purpose, components, and benefits.
- Recall practical strategies for creating customized learning paths tailored to the unique needs and goals of each resident.
- Utilize coaching skills to facilitate ILP creation with residents.



CBME

	Educational Program					
Variable	<u>Structure/Process-</u> Based	Competency-Based				
Driving Force for Curriculum	Content – knowledge acquisition	Outcome – knowledge application				
Driving Force for Process	Teacher	Learner				
Path of Learning	Hierarchical (teacher → student)	Non-hierarchical (teacher $\leftarrow \rightarrow$ student)				
Responsibility For Content	Teacher	Student and teacher				
Carraccio C, Wolfsthal SD, England	ler R, Ferentz K, Martin C. Shifting paradigms:	: from Flexner to				

competencies. Acad Med. 2002;77(5):361-367.

The Andrological Model

Unique life experiences

Autonomy

Real-life situation

Intrinsically motivated

Problem Centered

Need to know WHY

Knowles, Malcolm. The Adult Learner: A Neglected Species. 4th Ed. Gulf Publishing CO. Houston, TX, 1990.





How do you use ILPs in your program?

Residency Requirements

FMYesAnnualPBLI-2, Prof-3IMYes_PBLI-2, Prof-4TYYes_PBLI-2, Prof-3OB/GYNYes_PBLI-2, Prof-4PediatricsYesAnnualPBLI-2, Prof-4	Residency Programs	ACGME – ILP requirement	Recurrence	Milestone
TYYesPBLI-2, Prof-3OB/GYNYesPBLI-2, Prof-4	FM	Yes	Annual	PBLI-2, Prof-3
OB/GYN Yes _ PBLI-2, Prof-4	IM	Yes	_	PBLI-2, Prof-4
	ΤY	Yes	_	PBLI-2, Prof-3
Pediatrics Ves Annual PBI I-2 Prof-4	OB/GYN	Yes	_	PBLI-2, Prof-4
	Pediatrics	Yes	Annual	PBLI-2, Prof-4





Master Adaptive Learner





Cutrer W, Miller B, Pusic M, et al.. Fostering the Development of Master Adaptive Learners: A Conceptual Model to Guide Skill Acquisition in Medical Education. Academic Medicine. 2017; 92 (1): 70-75.

Master Adaptive Learner

- Adaptive expertise requires
 - An openness to reflecting on practice
 - Meta-reasoning skills to recognize that routine expertise schema stored in long-term memory will not work
 - Critical thinking to challenge current assumptions and beliefs
 - The ability to reconstruct the problem space



Cutrer W, Miller B, Pusic M, et al.. Fostering the Development of Master Adaptive Learners: A Conceptual Model to Guide Skill Acquisition in Medical Education. Academic Medicine. 2017; 92 (1): 70-75.

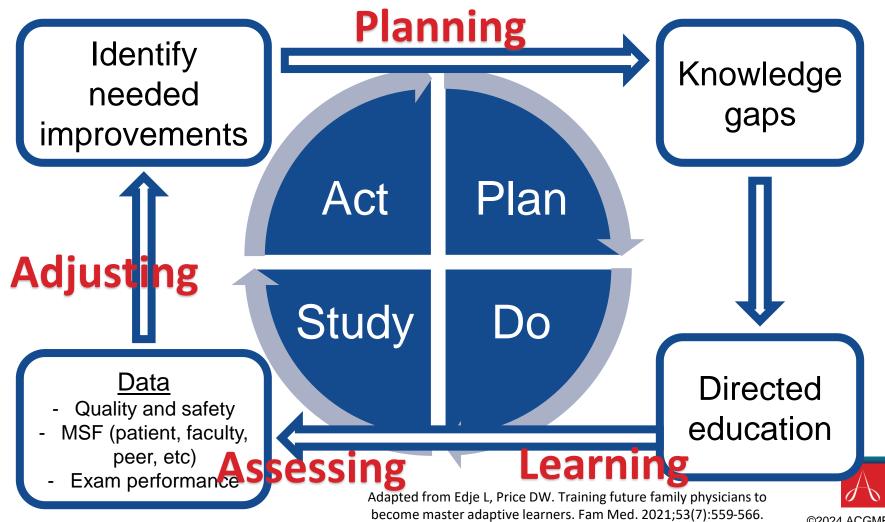
Learning Curves





From Pusic, et. al. Acad Med. 2014

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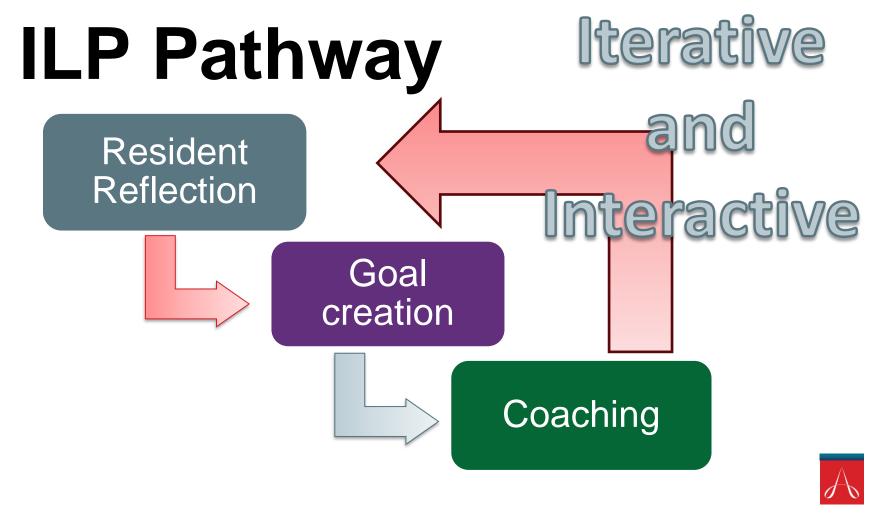


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Remediation Plan	 Responds to deficiency Only for some learners Limited to training requirements Focused only on gaps 				
Both	 Outlines ways to improve Uses concrete benchmarks of achievement 				
	Prevents a deficiency				
Learning Plan	 Helpful for all learners Recognizes personal learning styles Focused on end goals, skills for future practice 				

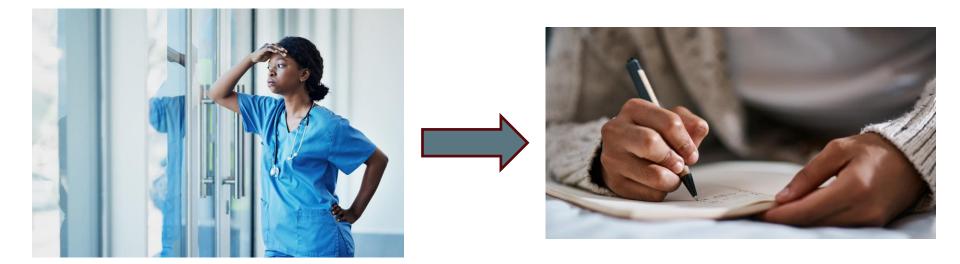
Reproduced from STFM's ILP Webinar: Reflections, Goals, & Objectives – Oh My! Best Practice for Creating Individualized Learning Plans





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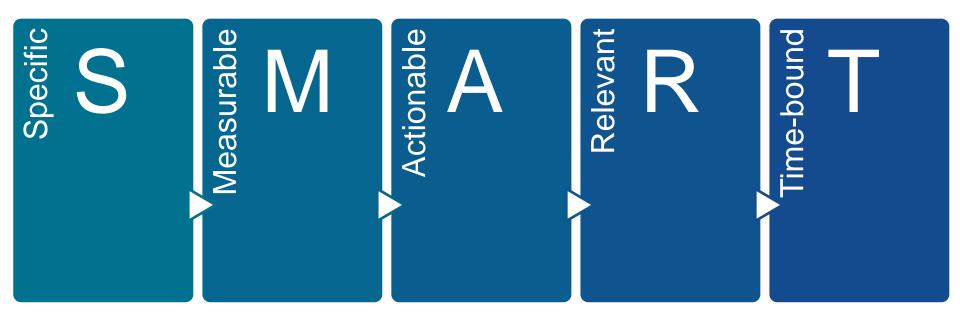
Resident Reflection \rightarrow Goal Creation





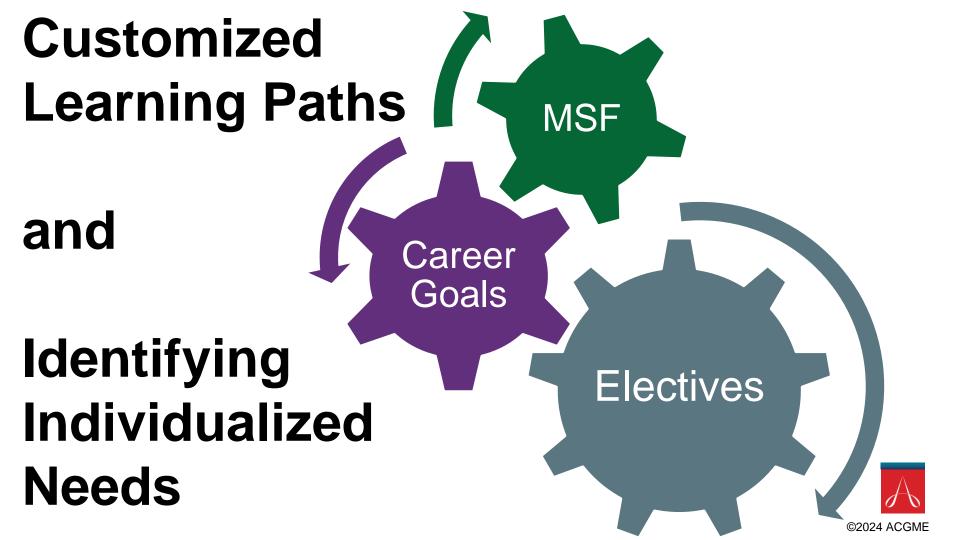
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Goal Creation and Content





	Core Outcomes Core Outcomes of Family Medicine Education Core Outcomes Of Family Medicine Education	PC 1: Care of the acutely ill patient (IM) (OB) (IP)	PC 2: Care of patients with chronic illnesses (clinic)	PC 3: Health promotion and wellness (clinic)	PC 4: Care of pts w/undiff concerns (clinic) (DO)		MK 1: Demonstrates medical knowledge of sufficient breadth (IM) (IP)	MK 2: Critical thinking & decision making (clinic) (IM) (OB) (DO)	SBP 1: Patient safety and Qi (DO)	SBP 2: System navigation for pt- centered care (clinic) (IM) (OB) (IP)	SBP 1: Physician role in health care systems	SBP 4: Advocacy	PBLI 1: Evidence- based and informed practice (OB)	PBLI 2: Reflective practice & personal growth (OB) (IP)	Prof 1: Prof behavior & ethical principles (OB) (IM) (DO)	Prof 2: Accountability & Conscientious ness (IM) (DB) (IP) (360)	Prof 3: Self- awareness & help-seeking behaviors (clinic) (DO)	ICS 1: Patient & family centered comm (IM) (DB) (IP) (360) (DO)	ICS 2: Interprof & team comm (IM) (OB) (DO)	ICS 3: Comm within healthcare systems (clinic) (JM) (IP) (360)
1	Practice as personal physicians, providing first-contact access, comprehensive, and continuity care, to include excellent doctor- patient relationships, escellent care of chronic disease, routine preventive care and effective practice management		Level 4	Level 4		Level 4	Level 4			Level 4			Level 4					Level 4		
2	Diagnose and manage acute illness and injury for people of all ages in the emergency room or hospital	Level 4			Level 4			Level 4										Level 4		
3	Provide comprehensive care of children, including diagnosis and mgt of the acutely II child and routine preventive care	Level 4	Level 4	Level 4	Level 4		Level 4	Level 4		Level 4			Level 4					Level 4		
4	Develop effective communication and constructive relationships with patients, clinical teams, and consultants		Level 4	Level 4	Level 4					Level 4								Level 4	Level 4	Level 4
5	Model professionalism and be trustworthy for patients, peers, and communities						Level 4					Level 4		Level 4	Level 4	Level 4	Level 4	Level 4	Level 4	Level 4
6	Practice as personal physicians, to include care of women, the elderly, and patients at the end of life, with excellent rate of continuity and appropriate referrals		Level 4	Level 4	Level 4	Level 4	Level 4	Level 4		Level 4	Level 4		Level 4					Level 4		
7	*Provide care for low-risk patients who are pregnant, to include mgmt of early pregnancy, medical problems during pregnancy, prematal care, postparture care and breastfeeding, with or without competence in labor and delivery	Level 4		Level 4		Level 4														
8	Diagnose and manage common mental health conditions in people of all ages		Level 4		Level 4		Level 4			Level 4			Level 4			Level 4		Level 4		
9	Perform the procedures most frequently needed by patients in continuity and hospital practices					Level 4														
10	Model lifelong learning and engage in self-reflection		Level 4					Level 4	Level 4				Level 4	Level 4			Level 4			
11	Practice as personal physicians, to include MSK health and sports medicine, appropriate medication use and coordination of care by helping patients navigate a complex health system		Level 4			Level 4	Level 4	Level 4		Level 4			Level 4			Level 4		Level 4		
12	Provide preventive care that improves wellness, modifies risk factors for illness and injury, and detects illness in early, treatable stages for people of all ages while supporting patients' values and preferences.			Level 4			Level 4				Level 4							Level 4		
13	Assess priorities of care for individual patients across the continuum of care—in-office visits, emergency, hospital, and other vettings, balanch; gthe preferences of patients, medical priorities, and the setting of care	Level 4	Level 4		Level 4			Level 4		Level 4			Level 4			Level 4		Level 4		
14	Evaluate, diagnose, and manage patients with undifferentiated symptoms, chronic medical conditions, and multiple comorbidities		Level 4		Level 4		Level 4	Level 4		Level 4			Level 4					Level 4		Level 4
15	Effectively lead, manage, and participate in teams that provide care and improve outcomes for the diverse populations and communities they serve								Level 4	Level 4	Level 4				Level 4	Level 4	Level 4		Level 4	Level 4



Four Step ILP

<u>Step 1-</u>

Define the Gap – Goals vs Current State

<u>Step 2 –</u>

Create ONE Learning Objectives

<u>Step 3 –</u>

Define Tools/Strategies/Resources

<u>Step 4 –</u>

Evaluate learning





Step 1: Define career goals Start with the end in mind...

What is your ideal career?

What skills do you need to have?



Identify Professional Goals •Long term 3-5 yrs •Short term 6-12 mos



Step 1: Define the Gap – Goals vs Current State





https://thepetshow.com/building-your-cats-self-confidence/



Case

Sandra's long-term goal is to provide comprehensive outpatient primary care in rural area. In preparation of her ILP, on self-evaluation she thinks, she has done well during her PGY-1 and in her first in-training exam. She is a bit nervous but looking forward to being a senior on her inpatient rotation later this academic year.



Case – Data review

- CCC global assessment Overall doing well, on target for year of training
- **ITE score** 50% ile nationally
- **Peer** Team player, positive attitude, good work ethic. Some concerns for lack of confidence and difficulty with organizational skills leading to long rounds
- **Nursing** great personality and very caring in nature. Can spend too much time talking to patients which affects efficiency. Patient left without being seen last week.
- **Clinic preceptor** great rapport with patients, great work ethic, positive attitude, slow in clinic. Did one direct observation in clinic- difficulty with agenda setting and a return patient took an hour. Stays late every week in clinic.
- **Patient** Would recommend to a friend; one detailed how much time this resident spent with pt and her family with a significant concern they felt heard. One wrote about provider being late on several occasions in the past.



Step1 A - Define the Gap Sandra's Goals

Long-term (Next 3-5 years)

- 1. Pass board certification exam
- 2. Provide excellent primary care to a rural community
- 3. Pay off student loan

Short-term (next 6-12 months)

- 1. Prepare to be a senior
- 2. Identify a subject for QI project
- 3. Improve my overall knowledge base



Step1 B – Self reflection

Skills	Recall then describe situations that demonstrate the ways in which you <u>excel</u> at these skills	Recall then describe situations that demonstrate where you have <u>opportunities for growth</u> in these skills.
Patient Care History Physical exam Clinical Reasoning Inpt Management Outpt Management Digital health (EHR, telehealth)	 I build rapport quickly with patients and families – a struggling family on the CHF service, I helped build trust and facilitated a challenging discharge plan I have been working on inpt team leadership skills - last month on inpt the interns felt supported and said I let then lead rounds and helped them be prepared 	 Efficiency in clinic – I don't know how to limit patients who are chatty and my visits are loo long
Medical Knowledge Physiology/Pathology Therapeutics/Treatment Diagnostic testing	 I create good complete differentials on admissions Overall, feel like a I know what I know and know what I don't know – and I have gotten that feedback from my clinic attending 	Cardiology knowledge base for sure! I know you have seen my ITE score! ©2024 ACGME

<u>STEP 2</u>

Create 2-3 Learning Objectives (make them SMART)

Specific
 Measurable
 Achievable
 Realistic
 Time-bound

Framework for writing SMART objectives:

O Who
O will do
O how much
O of what
O by when?



Bloom's Taxonomy of Cognitive Domain

CREATING USE INFORMATION TO

CREATE SOMETHING NEW

Design, Build, Construct,

Plan, Produce, Devise, Invent

CRITICALLY EXAMINE INFO & MAKE JUDGEMENTS

EVALUATING

Judge, Test, Critique,

Defend, Criticize Compare/Contrast, Organize

ANALYZING

TAKE INFO APART &

EXPLORE RELATIONSHIPS

Categorize, Examine,

APPLYING

USE INFORMATION IN A NEW (BUT SIMILAR) SITUATION

Use, Diagram, Make a Chart, Draw, Apply, Solve, Calculate

UNDERSTANDING

UNDERSTANDING & MAKING SENSE OUT OF INFORMATION

Interpret, Summarize, Explain, Infer, Paraphrase, Discuss

REMEMBERING

FIND OR REMEMBER INFORMATION List, Find, Name, Identify, Locate,

Describe, Memorize, Define

http://www.meandmylaptop.com/2/post/2012/07/simplifiedblooms-taxonomy-visual.html Accessed May 5, 2014



Increasing Levels of learning

Increasing difficulty to measure

Practice Time! (10 min)

Individual work first (5 min)

- Pretend you are the resident in the scenario
- Review the long and short terms goals
- Write 2-3 learning objectives (as the resident might)

Dyads (5 min)

- Are your learning objectives SMART
- How might you change them?
- Are they appropriate content?
- What might you coach the resident to add/change?



<u>Step 2</u> - ILP Worksheet - Example

Learning Objectives	Tools/Strategies/Resources	Evaluate

Step 3 – Strategies/Tools/Resources

Rosh Review EM Scholar Monthly Question









Step 4 – Evaluate Their Learning











Steps 2-4 - ILP Worksheet - Example

Learning Objectives	Tools/Strategies/Resources	Evaluate
1) By next clinic block, I will practice agenda setting, and complete 50% of my clinic visits in the allotted time for that visit.	 Review agenda setting literature Ask a trusted preceptor to directly observe my agenda setting 	 Track clinic cycle times Review evals with PD at semi-annual
2) Over the next 6 months, I will improve my cardiology knowledge base to score over the 50%ile on the medicine ITE next August.	 Complete all board review cardiology questions Adjust elective this year to cards Read one review article about cards each week 	 ITE score Review with PD at semi-annual
3) By October of this year, I will identify my QI topic and a potential intervention.	 IHI QI Learning Modules ABFM PI page for examples 	 Meet with QI faculty advisor prior to next advisor meeting Review with PD at next semi-annual

Coaching

- Empowers residents to match their learning to their goals and future practice needs
- Coaching supports autonomous motivation
- Growth- and forwardfocused rather than deficit focused
- Encourages ownership and grown, decreases dependence

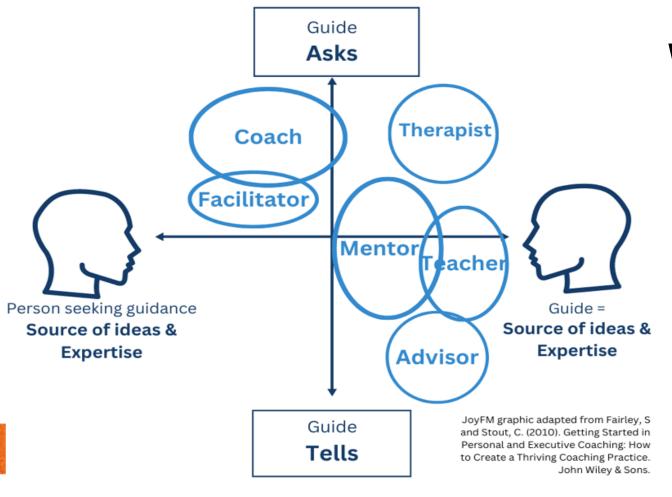
AVERAGE PLAYERS WANT TO BE LEFT ALONE.

Ridde

GOOD PLAYERS WANT TO BE COACHED.

GREAT PLAYERS WANT TO BE TOLD THE TRUTH.

NICK SABAN



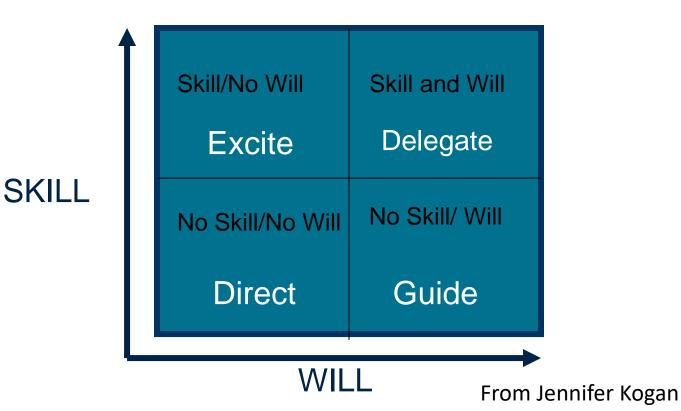
When?

- Technical skills
- Non-technical skills (interpersonal)
- Cognitive skills
- Well-being

•

Other professional development

Approach to Coaching (Depends on Type of Learner)



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Create an ILP – For YOU!

<u>Step 1-</u>

Define the Gap – Goals vs Current State Complete goals and reflection on ONE milestone

<u>Step 2 –</u>

Create ONE Learning Objectives (Who, will do, how much of what, by when...)

<u>Step 3 –</u>

Define Tools/Strategies/Resources

<u>Step 4 –</u>

How will you evaluate your learning and follow up?

Practice Time! (10 min)- as a pair

Process

- Practice coaching your partner
- How do you make this learner-centered?
- How do you suggest changes/additions/modifications?
- How does your coaching change depending on your learner?



Debrief

What was that exercise like?

Could this be useful for your faculty? How might you use this going forward?



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Closing Summary

Hopefully now you can:

- 1. Discuss the theory background for the ILP design
- 2. List the components of an individualized learning plan (ILP)
- 3. Create an ILP
- 4. Compare and contrast coaching approaches for different levels of learners
- 5. Create your own ILP

