

Submission for the 2016 Ted Freedman Award for Innovation in Education

Project Name:

Competency-based Faculty Development Program for Clinical Educators

The Innovation

The *Development Program for Clinical Educators* (DPCE) is a competency-based model designed to provide faculty members with the knowledge and skills that they need to instruct, guide and mentor in a medical context. The model includes the following competencies: (1)basic teaching skills; (2)learning on the clinical setting; (3)assessing and debriefing performance; (4)managing healthcare educational technology; (5)bioethics and citizenship; and (6)managing quality and patient safety.

The value of your Innovation as an agent of change

The sessions are designed for medical doctors just starting a teaching career path. More importantly, the program provides faculty with a teaching community of colleagues with whom they can learn. The ultimate goal of all efforts in medicine, and in our School, is to have an impact in the quality of life and patient care.

As part of the continuous improvement objectives of the program, we assess the effect it has on participants perception of their educational progress on each competence. It is also a requisite that they evidentiate an innovation or research initiative to achieve the certification.

The evidence to substantiate the Innovation

The assessment of the DPCE program is performed with: (1) self-applied instrument of participants perception of their educational progress on each competence and (2)a scholarly product submitted for peer review (article publication or congress presentation).

A quantitative approach is applied to analyze the result of the survey of faculty experiences. The applied instrument was an adaptation of the questionnaire of Herskovik (2012) with a Cronbach's alpha of 0.8172 on our proposed version. A total of 134 clinician educators who completed the program answered the instrument. Descriptive statistics were computed for each of the six competencies. Two questions were added regarding the general impact and overall satisfaction with teaching and education. Participants reported performing major changes on basic teaching skills (74% of participants); assessing and debriefing performance (61%) and managing quality and patient safety (61%). Regular changes were made on learning on the clinical setting (55%) and educating on bioethics and citizenship (55%). The least influence on faculty practices was on managing healthcare educational technology (46%). A total of 70% of the faculty members declared impacts on their educational practices and 73% felt more satisfied with their teaching role after the program.

Regarding the scholarly product submitted for peer review, 38 research initiatives were reviewed and accepted for an oral presentation in the International Congress of Innovation in Education in december 2015. The previous year, in decemeber 2014, 30 projects were presented in the *Academic Innovation in Health* track of the same congress.

The outcomes to substantiate the Innovation

Among the basic teaching skills, participants declared they are developing critical thinking on students. They are also applying assessment strategies and quality tools to improve student performance and patient satisfaction.

Regarding the limited changes performed on medical education technology, the application of software, apps and simulators is only being presented in the sessions. Participants require not

only to understand the available technology, but also to perform an active role through their training in order for them to be ready to replicate the same dynamic with their students. Results indicated that teaching bioethics and professionalism has become a convention for faculty members, and the program only helped them to continue that practice.

The feedback received from faculty members as part of this study revealed strengths and opportunities for content and pedagogical approaches of the DPCE program. Besides implementation of innovative pedagogical practices, the program has improved satisfaction on the teaching experience. A renewed version of the DPCE should include more interaction using medical education technology. For the participants that are already certified, the School of Medicine is offering research seminars on medical education for the continuous improvement of the clinical teaching practice, learning experience, interdisciplinary networking, and patient centeredness.

References:

- Herskovik P, Miranda T, Cortés E, Delusshi A, Gómez PA, Jiusán A, et al. (2012). Creer haber cambiado los docentes un año después de un curso de docencia clínica. *Educ Med*, 15(1), 179-185.
- International Congress of Innovation in Education (2015). *Revista del Congreso Internacional de Innovación Educativa*, 2(1), <http://ciie.itesm.mx/es/memorias/>

Supporting information

- Research papers presented at the Internacional Congress of Innovation in Education 2014

<https://drive.google.com/file/d/0B8aizDIMWw3UdjJocFhji1pV2c/view?usp=sharing>

- Research papers presented at the Internacional Congress of Innovation in Education 2015

<https://drive.google.com/file/d/0B8aizDIMWw3UVC1KdzVLCfZWYm8/view?usp=sharing>