

# Clerkship Review Pediatrics

June 10<sup>th</sup> 2014

# Clerkship Objectives and Themes

- Objectives have been updated and are tightly linked to both ACGME competencies and UASOM objectives.
- Congruent across all three campuses; essentially equivalent educational experiences occur at each.
- Faculty, residents and students made aware of objectives at orientation and by electronic distribution.
- Objectives linked to Bloom's taxonomy.
- Themes incorporated via lectures, rounds and CLIPP cases.

# Clerkship Content and Methods of Instruction

- All content covered by a mixture of lectures, teaching rounds, basic science student presentations, and CLIPP cases. Clerkships follow COMSEP recommendations at all three campuses.
- Specific instruction in assessing credibility of information sources and feedback on quality of literature research in patient write-ups and presentations is provided at Tuscaloosa.
- Communication skills are taught via patient rounds, morning report, presentations, interactions during clinical activities and observation of faculty. A patient interview video is produced by the students and critiqued by faculty at Tuscaloosa.
- Students take care for patients from under-served and multi-cultural populations and interaction with families and patient advocacy is stressed.
- Students receive additional instruction in HIPAA requirements, adolescent “mature minor” rights and ethics.

## Clerkship Content and Methods of Instruction (cont.).

- Students log a wide variety of cases and conditions; all three campuses follow COMSEP recommendations as to requirements.
- Each campus requires the students to complete 20 CLIPP cases.
- Between 2009-2012, 19 students logged > 80h. However, replacement of night call with overnight shift periods should prevent this. Call and clinic schedules are in compliance with work hour rules set by ACGME.

# Methods of Assessment

- All students receive mid-block formative and final evaluations by faculty and/or clerkship directors.
- Clerkship directors discuss performance with the student and will formulate a plan if corrective action is needed.
- Performance on the rotation is weighted at 70% on the faculty evaluation and 30% on performance on the NBME shelf exam.
- Criteria for “Honors” are the same at each campus; greater than 50% of evaluators agreeing that student deserves Honors and Honors performance (50<sup>th</sup> percentile or higher) on the shelf exam.

## Methods of Assessment (cont.)

### % of Students Receiving Honors in Pediatrics

Year	B	H	T	Total
2012	24.1	14.3	21.2	21.7
2013	34.9	28.6	34.5	33.7

# Student Outcomes

- Grades are similar across all three campuses:

Clinical:

Year	B	H	T	Total
2011	92.7	91.8	91.2	92.2
2012	92.4	90.4	91.4	91.9
2013	89.2	88.6	90.2	89.3

NBME:

Year	B	H	T	Total
2011	76.3	74.3	74.2	75.5
2012	77.4	77.4	74.6	76.9
2013	77	78.8	77.3	77.3

National Means: 2011: 76.2; 2012: 77.6

# Student Outcomes

- Students Matching in Pediatrics (2008-2012):
  - Birmingham: 6.7%
  - Huntsville: 2.4%
  - Tuscaloosa: 9.4%

# Student Evaluations

Clerkship Organization:	Satisfactory/Excellent
Content:	Satisfactory/Excellent
Grading/Examinations:	Needs Improvement/Satisfactory
Overall Impact:	Excellent
Faculty Encountered:	Excellent
Residents Encountered:	Excellent
Overall Assessment:	Excellent

# Strengths

- Updated objectives that are linked to both ACGME and UASOM objectives and are common across all three campuses are major strengths.
- Instruction in literature searching and credibility of literature sources is a particular strength at Tuscaloosa. Students receive feedback on their literature research as part of their patient write-ups and presentation evaluations at this branch campus.
- Faculty at each institution achieve high marks from the students, who rate them consistently in the “Excellent” category.
- Overall assessment of each clerkship by the students is excellent in terms of teaching, number of cases seen and faculty encountered. The clerkship directors at each campus are singled out for their responsiveness to student concerns and their clear commitment to the clerkship.
- The clerkship directors work well together and are exploring additional ways to increase interaction between the three clerkships/campuses to improve clerkship integration and student exposure to pediatric medicine.

## Areas in Need of Improvement/Monitoring:

- Organization of the clerkships is in general considered to be excellent. At Birmingham, there were some student complaints concerning the availability of the clerkship administrator, and the accuracy of some of the information provided in the clerkship manual. Actions to correct these deficiencies have been taken since the completion of the self-study.
- Students did not value the ER rotations in pediatrics, most likely because of their status as observers as opposed to an active role in the ER. This has been addressed at Huntsville by removing the ER block, while at Birmingham it has been suggested that students be assigned to a specified ER resident so that they can be more involved. Students at each campus however are involved in working up new patients in the ER and following them through to admittance. Certain students also commented that their exposure to some areas of pediatrics, e.g., adolescent medicine, were somewhat limited.
- Violations in duty hours were reported at both Huntsville and Birmingham over the period covered by the self-study. However, there have been no violations over the most recent academic year and changes to the night call requirements (to a night float with set work hours) for students should prevent this in the future.

- There is some confusion on the part of the students as to what constitutes an “Honors” grade in the clerkship, and there were some comments that in some cases students received inconsistent feedback or feedback that did not match the final grade. Over the period of the self study, the Pediatrics clerkship was weighted at 80% clerkship performance/20% NBME shelf exam; however, this has now changed to a 70%/30% weighting, which is in line with the other clerkships at UASOM. It is suggested that the clerkship directors make the grading policy clear to both students and faculty and instruct faculty that mid-block and final evaluations of student performance should be consistent with final posted grades. However, faculty need to be aware of the potential for grade inflation.
- Students at all three campuses also commented that they would like more faculty level observation of the H & P exam.
- It has been previously recommended that didactic lectures be more uniform across all three campuses, as students have commented that there could be better consistency in lecturers, material covered and order/emphasis of the lectures. This should be facilitated by use of the course management software (Knowledge Map/ MedMap), which provides students access to lectures at each campus – this could be used to expand and integrate the didactic offerings across all campuses.
- In general students would like greater independent study time and have commented that the use of time-consuming CLIPP cases could be restricted to covering cases not directly observed. Clerkship directors could consider the use of these cases in the clerkship.

# Overall Assessment

Overall, Pediatrics rotations at UASOM are strong clerkships with excellent faculty held in high regard by the students. Students are exposed to a wide variety of pediatric conditions and generally feel well equipped to deal with pediatric patients on completion of the rotation. The clerkship directors are in particular singled out for their commitment and dedication. Deficiencies identified as a consequence of the self-study are either in the process of correction or have been corrected already. The clerkship directors are exploring opportunities to further integrate the clerkship experience across all three sites.