Creating A Sustainable Team-based Learning Model for an Internal Medicine Residency Program

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Background

Team-based Learning (TBL) is a student-centered active learning method supported by evidence that has shown improved learner engagement and improved content retention. The challenge with creating any successful TBL curriculum is the need for background work to be done by the learners in order to enhance the value of the classroom learning. This potential obstacle is heightened within an Internal Medicine residency program when working with residents whose focus is often more on direct patient care.

The creation of a sustainable, modified TBL model at our institution focused on pairing an existing, but underutilized part of the curriculum, the Physician Education and Assessment Center (PEAC) Ambulatory Care online learning modules, with TBL in order to decrease the barriers to adequately engage in the pre-work.

Goals & Objectives

- To create a sustainable model for utilization of TBL in a community-based Internal Medicine residency program
- To utilize existing curricula to decrease the amount of outside work required of residents and enhance their ability to prepare for the sessions
- To enhance resident opportunities to speak up and articulate their understanding during educational sessions
- To create a noon conference series that matches better with certain learning styles

Methods

Our implementation of a TBL Noon Conference series started with two faculty development sessions including initially teaching the basic principles of TBL and then a follow-up with how it would be specifically implemented within our program. A small planning committee determined how we would utilize the PEAC learning modules to develop the content. The residents were educated through a series of announcements at conferences and by email. Sessions were held monthly and faculty who were part of the planning committee and more knowledgeable about the structure of TBL led out in all of the initial six sessions. The breadth of instructors then grew to include most of the core faculty.

Due to the unpredictable nature and complexities of resident scheduling, we elected to adopt a modified version of TBL that did not include set teams and did not include a formal peer evaluation.

Impact & Effectiveness

We achieved our first goal of successfully creating a sustainable model for utilization of TBL within our Internal Medicine residency program with routine monthly sessions.

A resident survey was sent out and completed by 13 of 27 residents midway through the academic year to assess the other objectives of this TBL project. The results of its impact are:

- We were able to utilize the PEAC modules as an existing curricula and a majority of residents completed the pre-work.
- A majority of residents felt comfortable speaking up in TBL conferences and some were more willing to articulate their ideas than at a regular conference.
- We succeeded in matching more residents learning styles during these sessions.

Challenges and next steps

- Determining whether the PEAC modules are the best curricula to be utilized for the TBL sessions.
- Considering the formation of set teams to allow for a more traditional model of TBL with opportunities for team accountability and peer evaluation.

References:

- Thomas and Bowen. Teaching and Learning in Medicine, 2011. 31-36. A Controlled Trial of Team-Based Learning in an Ambulatory Medicine Clerkship for Medical Students.