Residents as Teachers: An Experience from Northeast Ohio

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Abstract

Faculty development for residents and nonfaculty instructors is an important component of medical school accreditation requirements. In medical schools with distributed clinical partners and independent graduate medical education programmes, mandating faculty development for residents at clinical partner locations is often difficult. In this article, we share the experience of Northeast Ohio Medical University (NEOMED) with introducing a mandatory faculty-development program for residents who practice in our 24 clinical partner locations.

Keywords: Residents as Teachers; Faculty Development; LCME

Introduction

Approximately 25% of resident's clinical time is spent on teaching junior residents and medical students (Ng, V et al 2013, Al Achkar, M et al 2017). The Liaison Committee on Medical Education (LCME) accreditation standards require that residents and other nonfaculty instructors in a medical education program who supervise or teach medical students receive faculty development on topics such as teaching and assessment. These standards further require medical schools to centrally monitor their participation in faculty-development opportunities.

According to the LCME, between 2010 and 2016, "preparation of Resident and Non-Faculty Instructors" was one of the common noncompliance issues in the medical school accreditation results. In this article, we share NEOMED's experience with implementing a centrally monitored faculty-development program for residents and nonfaculty instructors.

NEOMED is a community-based medical school located in Rootstown, Ohio. NEOMED has clinical partnerships with 24 sites, of which, eight has residency programs. These sites are distributed across Northeast Ohio and beyond, including the Toledo and Columbus areas. NEOMED’s third- and fourth-year medical students complete their clinical rotations at these distributed sites. Graduate medical education at these clinical sites is not affiliated with the...
medical school. As such, NEOMED does not influence the training of residents at the clinical sites. The interactive module, as described below, is an attempt to centrally monitor residents’ participation in faculty development programs.

**Intervention**

To meet LCME requirements, NEOMED implemented a new program for residents at the clinical sites in collaboration with the medical education offices at the partner institutions. As part of the new initiative, NEOMED offers faculty appointment to all residents entering into residency programs at the clinical partner institutions. In the context of this faculty-appointment process, all new residents are now required to complete a mandatory faculty-development module. This online interactive module was designed with the busy clinician in mind. It covers topics such as learner orientation, teaching at the bedside, the one-minute preceptor teaching model, giving feedback, and assessment strategies. In addition, residents are introduced to rotation specific teaching objectives. The online module includes self-assessment questions, a summative assessment, and a satisfaction survey.

Residents have 30 days to complete the module. Completion of the module is a requirement for obtaining a NEOMED faculty appointment.

**Results**

Before introducing the online module, NEOMED had only 97 residents who had clinical instructor status with NEOMED. Furthermore, faculty development was offered to residents as an ad hoc activity at the clinical sites, and there was no central monitoring system. NEOMED had distributed printed brochures on different faculty-development topics to clinical sites and offered half-day, on-site conferences for residents. However, this process had only limited success in tracking residents' engagement across clinical sites.

Since introducing the new program 550 residents are appointed to NEOMED faculty. Table 1 provides the summary of residents who have received faculty appointments since the introduction of the online module.

| Cohort                | Number of Eligible Applicants | Number of Individuals who Completed the module and received faculty appointment |
|-----------------------|-------------------------------|---------------------------------------------------------------------------------|
| First Round 2016 6/16/16 | 432                           | 339                                                                             |
| 2\textsuperscript{nd} Round 2016 12/15/16 | 191                           | 157                                                                             |

**Table 1: Summary of Residents Faculty Development**

Overall, feedback for the process and the online module has been highly positive. We have also noticed an increased
demand for additional faculty-development training at clinical partner sites.

**Take Home Messages**

- Linking faculty development to the faculty-appointment process increases the engagement of resident faculty at the clinical locations.
- Online faculty development offers a simpler means to reach clinical faculty at different locations.
- Online faculty development also provides an opportunity to track completion and comprehension.
- Busy clinicians prefer online faculty-development materials that are to the point and easily accessed across multiple platforms.

**Notes On Contributors**

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**Appendices**
Declarations

The author has declared that there are no conflicts of interest.

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