

## GOALS AND OBJECTIVES

### Introduction

We developed a 4<sup>th</sup> year teaching elective integrating senior medical students with learning community faculty mentor groups to help co-facilitate mentors' small group teaching for both Physical Diagnosis PD1 and PD2. The program was implemented in 2012 and has been modified over time to better meet the needs of the faculty, advanced students, and junior students. Fifty students have participated since its initial offering as an elective.

### Background

The University of Massachusetts Medical School (UMMS) has a fully integrated learning community consisting of 20 faculty mentors. These mentors follow a group of 6-7 students from matriculation to graduation. Their responsibilities include advising, teaching, and mentoring. Some of the teaching responsibilities include Physical Diagnosis clinical skills courses in years 1 and 2 (PD1 and PD2). When the new learning communities were developed and mentors became responsible for teaching PD content, we looked to re-integrate 4<sup>th</sup> year students into the clinical skills courses as co-facilitators. At UMMS the PD1 and PD2 courses run from November through March allowing 4<sup>th</sup> year students' flexibility to enroll in this elective at one month intervals. PD1 is taught weekly by a mentor with their own group of 1<sup>st</sup> year mentees in a simulation center. PD2 is also taught by a mentor with their own group of 2<sup>nd</sup> year mentees in the hospital setting with admitted patients.

### Program Description

- The Physical Diagnosis Teaching elective is a 4 week elective available to all 4<sup>th</sup> year students
- Students are required to co-teach two PD1 sessions and one PD2 session each week of the elective
- Attempts are made to pair the 4<sup>th</sup> year student with their own mentor to co-teach the sessions
- Students are required to attend weekly student development sessions on various topics including small group facilitation, giving feedback, and reviewing medical education literature.
- Students also have training on the physical exam with a standardized patient to assess their own physical exam skills.
- Each student is required to lead one of the PD1 sessions with the faculty observing and providing feedback
- Each student is required to hold office hours open to all junior students at least 1 hour per week.
- A final project is required focusing on developing educational resources that could be used by faculty and course directors. The project is an opportunity for students to use their teaching skills to instruct junior students on a topic related to PD.

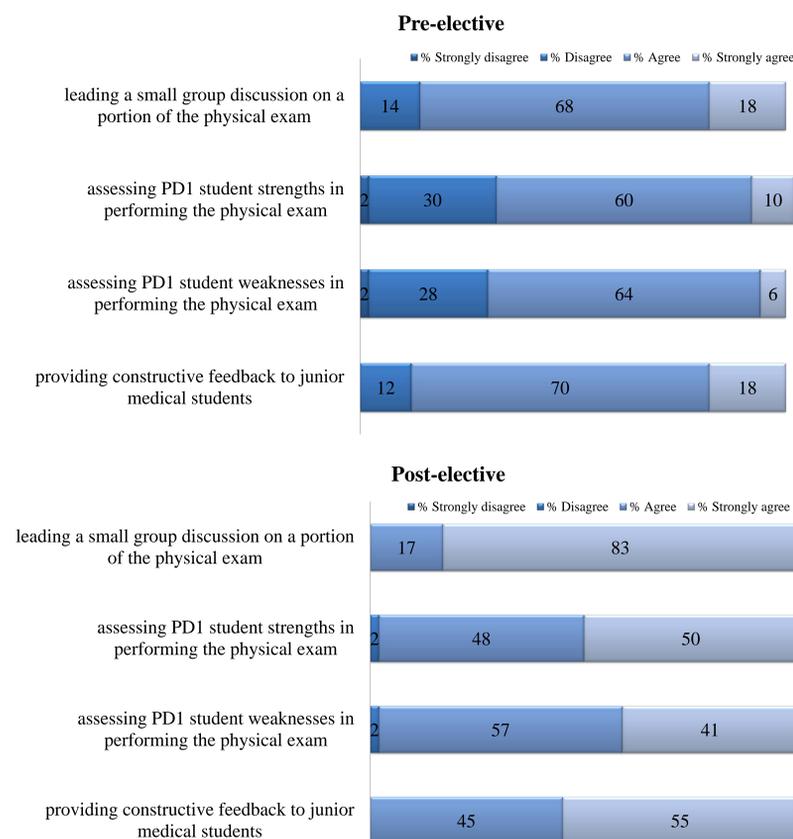
## ACKNOWLEDGEMENTS

The University of Massachusetts Medical School Office of Undergraduate Medical Education administrative staff and resources.

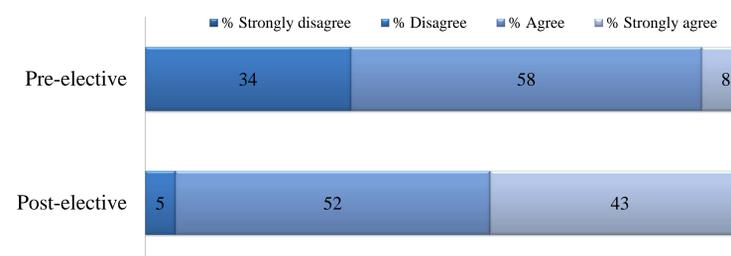
## RESULTS

### Student Educators

- Improved overall teaching skills including small group facilitation and giving feedback
- Improved their own physical exam skills
- Helps prepare them for other teaching roles that may arise in the undergraduate curriculum
- Acclimates them to their teaching roles in residency



### I feel prepared for the responsibilities of teaching medical students in residency



*"Building relationships with mentors and first year students was a strength of the program"*

*"This really helped me to learn the physical exam better than I had learned it in year 1"*

*"It was great having an opportunity to teach while being supervised by faculty"*

### Faculty Mentors

- More individual time with junior students for direct observation and PD instruction
- Fewer PD sessions to lead because of 4<sup>th</sup> years requirement to lead one session each month
- Vertical integration with advanced students helps junior students in many other areas of their development as a medical student. The advanced students discuss medical training in future years, curriculum content, and social aspects of the medical school.
- Fewer PD2 write-ups to review due to assistance by 4<sup>th</sup> year students
- Curriculum materials developed by advanced students have been used by faculty and course directors

*"They provided useful tools/methods, related well to students, doubled the teaching attention"*

*"Provided an extra pair of hands, great interest and interaction with the students, I can't believe I did it last year by myself"*

*"The students loved getting to know a 4<sup>th</sup> year student and getting a 4<sup>th</sup> year perspective on things. I enjoyed getting to know the 4<sup>th</sup> year and was able to involve her in additional mentee activities later in the year"*

*"Nice that she was female as she worked with the female students and this minimized any awkwardness about exposure, especially for the cardiac and pulmonary parts of the exam"*

### Junior Students

- Increased individual feedback from mentor and advanced students
- More opportunities to ask questions of mentor and advanced students
- Additional occasions to practice skills under guidance due to instructors ability to work with a smaller group
- Chance to visit advanced students during office hours to further develop their skills outside of PD course hours

## SUMMARY

All those involved in the elective benefit from the program. Advanced students feel more prepared for residency, junior students report obtaining valuable feedback from the advanced students, and mentors have more time to spend with all students in their group. This program has been adapted over the years in order to develop the advanced students' skills, which assists the mentors in their work. New teaching skills such as bedside teaching, assessing oral presentations, and reviewing write-ups have been added to the advanced students' teaching repertoire. Faculty involvement in the PD1 and PD2 courses as well as in the teaching elective has been extensive. Several weekly faculty development sessions have been focused on the teaching in these clinical skills courses as well as opportunities to give feedback on this teaching elective. This feedback has been vital to the success of this elective.