Evaluating Librarian Involvement in AAMC Core EPAs Association of Academic Health Science Libraries Task Force on Competency-Based Medical Education

Task Force Timeline

May 2016

AAHSL Task Force on Competency-based Medical Education

Summer 2016

Survey development and preliminary interviews

Fall 2016

Distribute survey and design data analysis

November 2016

Preliminary data analysis and present findings to AAHSL and AAMC

Spring 2017

Map existing competencies from related programs

Fall 2017

Present findings to AAHSL and AAMC

Spring 2018

Publish findings and recommend best practices

Task Force on Competency-Based Medical Education Charge

- Identify libraries participating in Core EPA activities in the medical education curriculum, through design, development, teaching, evaluation, and/or similar engagement
- Develop methodology to characterize the nature and depth of the participation.
- Map and cross-reference existing ACGME, AAMC, LCME, and other competencies as identified by the TF. Identify gaps in EBM competencies.
- Compose a white paper or similar work for publication on the state of the art of librarians' roles and involvement in all phases of competency-based medical education. Include recommendations for additional work that is needed (e.g., developing standard definitions of EBM concepts, translating EBM concepts into teachable components, evaluation of the effectiveness of the EBM curriculum.)

Current State of Affairs

- Previous studies indicated primary barriers to implementing EBM in curriculum were lack of time in curriculum, students' perception of importance of EBM as compared to basic science or clinical skills, and difficulty integrating EBM into clinical care⁴.
- In 2015, Association of College and Research Libraries (ACRL) revised Information Literacy (IL) framework³ to encourage dialogue between librarians and faculty on cohesive curriculum for information literacy specific to a research/practice domain.
- As reported by Angus et al.¹, 30% of IM program directors surveyed thought that EPA 7 was one of the top three the largest knowledge gaps in new interns. 76% of those same PDs said new interns should or must possess this competency.
- Some in the medical community argue that the EPA 7 does not go far enough to be an observable event⁹.
- Given the complete description EPA 7 and its relationship to ACRL IL framework concept of "Research as Inquiry," information professionals argue that the statement "to advance patient care" implies the application of information, that is the systematic integration and synthesis of knowledge into practice to improve patient care, which is an observable and measureable series of events.

Methodology

- Based survey on Blanco et al⁴ on Evidence Based Medicine
- Used qualitative research to inform survey questions
- Questions written with framework of Cooperation, Coordination, and Collaboration⁸
- Survey sent via AAHSL listservs to member libraries
- 84 responses recorded via Qualtrics





Q6. Which Core EPAs are being planned and/or implemented in the undergraduate medical curriculum at your medical school?

n=51



For EPA 7

Q8. Librarians are involved in teaching this skill: n=81 Q9. Librarians are involved in assessing this skill: n=81



- Develop a well-formed, focused, pertinent clinical question
- Demonstrate basic awareness and early skills in appraisal of both the sources and content of medical information using accepted criteria
- Identify and demonstrate the use of information technology to access accurate and reliable online medical information
- Demonstrate basic awareness and early skills in assessing applicability/generalizability of evidence and published studies to specific
- patients
 Demonstrate curiosity, objectivity, and the use of scientific reasoning in acquisition of knowledge and application to patient care
- Apply the primary findings of one's information search to an individual patient(s)
- Communicate one's findings to the health care team (including the patient/family)
- Close the loop through reflection on the process and the outcome for the patient

The Task Force grew out of the work of Heather Collins and Rachel Vukas at the University of Kansas, Rikke Ogawa at UCLA. and Kelly Thormodson at the University of North Dakota.

Preliminary Results

Q 25. How has your library's involvement in the curriculum changed since the Core EPAs were implemented? (Representative responses)

"There was library involvement in the curriculum prior to the Core EPAs; however, the EPAs have definitely provided a focus for our efforts and a better set of shared language and goals."

"Since the implementation of Core EPAs, librarian involvement in the medical school curricula has increased. Instruction is better coordinated and scheduled for greater impact. Having a shared assessment rubric has deepened collaboration."

"There is increased recognition that information literacy skills are mandated at a higher level."

Implications for Practice

In further vetting or development of EPAs by stakeholder communities, information professionals should collaborate with other medical education faculty in order to develop effective curricula and assessment, especially of EPAs 7 and 13.

The application of the ACRL Information Literacy Framework in addition to existing standards in undergraduate and graduate medical education can serve as an outline for curricular milestones repetitively practiced over clinical and preclinical curriculum.

References

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