Curriculum Mapping of Geriatric Medicine Core Competencies in the Preclinical Problem-Based Learning Curriculum at the John A Burns School of Medicine, University of Hawaii

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ABSTRACT

The creation of a geriatric curriculum map was felt to be a good strategy to conduct a comprehensive inventory and analysis of our curriculum to ensure adequate inclusion of geriatric core competencies. The curriculum map focused on the pre-clinical PBL cases used during first two years of medical training.

OBJECTIVES

1. To analyze the UH JABSOM PBL curriculum across all pre-clinical courses for the presence and degree of emphasis of the 26 Geriatric Core Competencies.
2. To identify areas of improvement using a curriculum map.

METHODS

The Problem Based Learning (PBL) approach is the primary mode of instruction in the preclinical years. Data Collection - PBL paper cases and final exams were obtained from the Course Directors of Blocks MD1, MD2, MD3, MD4, MD6, and MD7. A total of 75 PBL cases were reviewed (MD1-7). - Course Exams were reviewed to determine if and how much geriatric content was evaluated. - Each PBL case was evaluated to determine which AAMC Geriatric Core Competencies were covered as explicit Learning Objectives or Competencies. The Problem Based Learning (PBL) approach is the primary mode of instruction in the preclinical years.

RESULTS

Many of the Geriatric Core Competencies were covered through the two-year pre-clinical PBL curriculum. Areas heavily emphasized were:
- Medication Management, Cognitive and Behavioral Disorders, and Palliative Care.
Gaps in the curriculum included:
- Geriatric physiology
- Hospital Care for Elders

DISCUSSION

- The project successfully demonstrated the feasibility and usefulness of curriculum maps for curriculum evaluation and development.
- The visual representation of the curricula components made it easier to see which areas could be improved.

LIMITATIONS:

- The current geriatric curriculum map was a pilot and did not include all aspects of the pre-clinical training.
- In the future, other components of the curriculum should be included, such as lectures and standardized patient experiences.
- Ideally, the actual teachers should participate in the curriculum map construction. However, they will be included in discussions about curriculum revisions.

REFERENCES