



Reflections on the First Accreditation at The University of Tokyo Faculty of Medicine

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March 27, 2015

Feb 20, 2015

National Symposium on Accreditation at Tokyo Medical and Dental University

Center for Education Research
in Medicine and Dentistry
CERMed

平成26年度文部科学省大学改革推進事業（基礎・臨床を両輪とした医学教育改革によるグローバルな医師養成）公開シンポジウム

「国際基準に対応した医学教育認証制度の確立」 ー医学教育認証評価制度発足に向けてー

開催日時：平成27年2月20日（金）13：00～17：30
会場：東京医科歯科大学鈴木草夫記念講堂（M&Dタワー2階）

PROGRAM

- 13:00** 開会の辞 奈良信雄 教授（東京医科歯科大学）
13:05 文部科学省 専門成 教授（文部科学省医 育課）
13:15 全国医学部 長会 議長 長（日本医科大学 属病院）
13:30 The present and prospect of the accreditation in medical education
by WFME and AMEWPR
Michael Field 教授（AMEWPR 会長）
座長 長 政裕 特任教授（千葉大学）
14:30 医学教育質保証に向けての経緯と計画 奈良信雄 教授（東京医科歯科大学）
15:00 （休憩）
15:10 トライアル認証評価総括
東京医科歯科大学 長 政裕 教授（東京医科歯科大学）
千葉大学 長 政裕 教授（千葉大学）
福岡大学 長 政裕 教授（東京慈恵会医科大学）
16:20 分野別認証評価の準備 鈴木利哉 教授（新潟大学）
16:50 質疑応答
17:20 閉会の辞 北村 聖 教授（東京大学）



参加費無料

ご参加申し込み：メールかFAXにて、1.ご氏名、2.フリガナ、3.ご所属・役職、4.連絡先、5.メールアドレスをご記入の上、下記までお申し込みをお願いします。

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Accreditation involves...

- Continuous quality improvement (CQI)
- Providing evidence of outcomes
- Using data to provide evidence
- Having a robust IR to provide data
- Using data for CQI
- Engaging the community in the process

IR = Institutional Research unit

WFME* accreditation standards

1. Mission and Outcomes
2. Educational Program
3. Assessment of Students
4. Students
5. Academic Staff/Faculty
6. Educational Resources
7. Program Evaluation
8. Governance and Administration
9. Continuous Renewal

*WFME = World Federation for Medical Education

Std 1: Mission and Outcomes

1. Define what is distinctive about your university
 - Clinical, research, education mission
 - What sets your graduates apart now/future?
2. Regardless, accreditation requires
“an appropriate foundation for future careers in any branch of medicine”
3. Clarify and elaborate on your outcomes

Standard 2: Educational Program

1. Move from fact-based teaching (faculty delivering content) to outcomes-based education (students learning competencies)
2. Articulate core concepts, principles
 - Use mixed teams of BS and Clinical faculty
 - Each concept defensible as a building block
3. Increase vertical and horizontal integration
4. Make faculty-student face-to-face time count!

Standard 2: Educational Program

5. Provide students with direct patient care

- Enable students to fully engage with training
- Need to apply knowledge how they will use it
- Communication skills in non-hospital settings
- Address faculty time with peer training, team approaches, core faculty
- Cultivate affiliated clinical training sites

Standard 3: Assessment of Students

Key message: ***Assessment drives learning***

1. Cannot change curriculum without change in assessment
 - Increase active, formative methods
 - More proactive in own learning
 - More accurate self-assessment
 - Build self-directed learning skill
 - Faculty can identify gaps earlier/correct

Standard 3: FDs on Assessment

Key message: ***Create faculty teams***

2. Create teams, department- or topic-based

- Become resources for each other
- Come with a problem to solve
 - More engaged with new methods
 - More effective development, implementation
- Share workload, flexible time schedule
- Share best practices, new collaborations

FDs = Faculty Development sessions

Standard 3: Implementation

Key message: ***Pilot in phases***

3. Discover what works best before committing major resources

- Many moving parts, causes of failure
- Need multiple iterations to refine
- Carefully evaluate what worked, why

Standard 4: Students

Key message: ***Move beyond scores***

1. Identify students with “entire package” of intelligence, emotional intelligence, humanism
2. Encourage student voices
 - Formalize membership on committees
 - Key to success during change
3. Increase international exposure

Standard 5: Academic Staff/Faculty

Key message: ***Maximize your talent pool***

1. Low ratio of women, students and faculty
 - No progress without clear programs
2. Provide clear evaluation, promotion system
3. Need to value faculty's contributions
4. Incentives to assume leadership positions

Standard 6: Educational Resources

Key message: ***Need tools to achieve outcomes***

1. Curriculum tracking and management
 - Vertical and horizontal integration
 - Each faculty can integrate in context
2. Content management and delivery
 - Maximize face-to-face time
3. Enable detailed feedback to refine from a unit to entire curriculum

Standard 6: Educational Resources

Key message: ***Need a resource budget***

4. Cost-sharing across multiple user groups

- Simulation
- Library
- Hardware (rolling replacement)
- Personnel

5. Research before you buy

6. Buy only what you need

Standard 6: Educational Resources

Key message: ***Design flexible learning spaces***

7. Keep rooms and furniture flexible

- Lecture-style rooms have limited use
- Wifi
- Electricity

Standard 7: Program Evaluation

Key message: ***Use longitudinal data***

1. Need an Institutional Research function
2. Online collection is a must
3. Layers of data from all stakeholders
 - Student performance
 - Course and clerkship outcomes
 - Postgraduate performance
 - Admission policy changes

If you order a test on a patient, it should affect your management.

Likewise, the evaluation you conduct on your course or program should affect how your course or program is conducted.

In other words:

Make your evaluations count!

Learning Analytics

(as a subset of Academic Analytics)

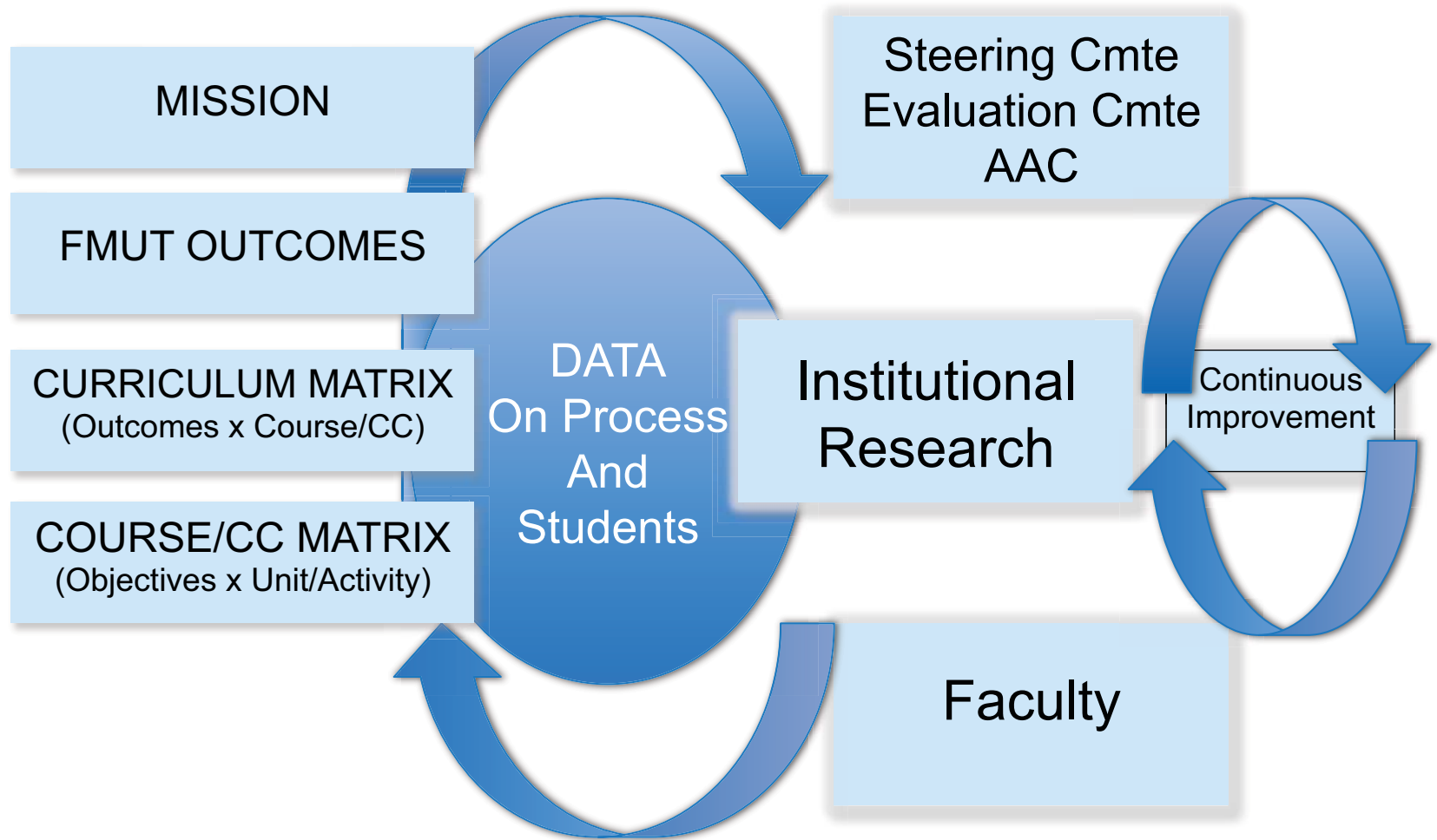
“...is the measurement, collection, analysis, and reporting of data about learners and their contexts, for purpose of understanding and optimizing learning and the environments in which it occurs.”*

International Conference on Learning Analytics and Knowledge, 2011
Importance cited in 2012 Higher Education Horizon Report

How to make analytics count

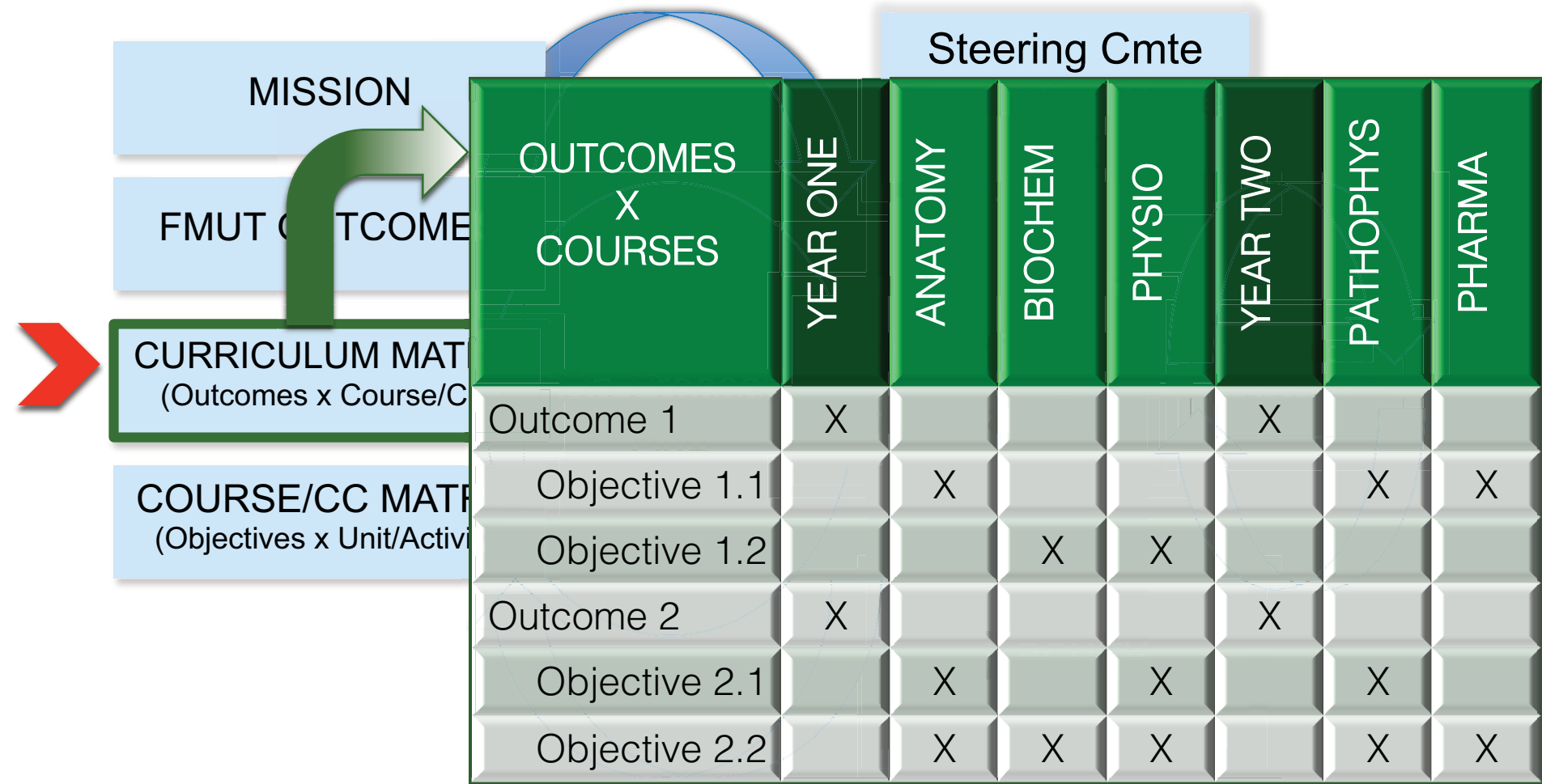
- Know what you want as outcomes
- Decide what is key evidence
- Involve key stakeholders throughout
- Pilot your questions and methods
- Ensure that feedback loops are active
- Keep it simple!

General structure for evaluation

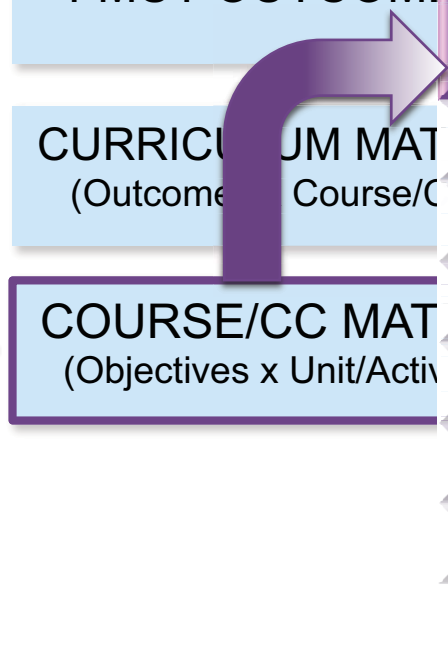


CC = Clinical Clerkships
Cmte = Committee
AAC = Academic Affairs Committee

Curriculum Matrix



Course/Clinical Clerkship Matrix



MISSION	OBJECTIVES X UNIT/ACTIVITY	LECTURES	LECTURE 1	LECTURE 2	LABS	LAB 1	CLIN CASE	CLIN CASE 1
CURRICULUM MATRIX (Outcome x Course/CC)	Objective 1.1	X			X		X	
	Objective 1.1.1		X			X		X
	Objective 1.2.1			X				
COURSE/CC MATRIX (Objectives x Unit/Activity)	Objective 2.1	X			X		X	
	Objective 2.1.1		X					X
	Objective 2.1.2		X	X		X		X

Use of matrices in process of Tufts' 3-year evaluation cycle

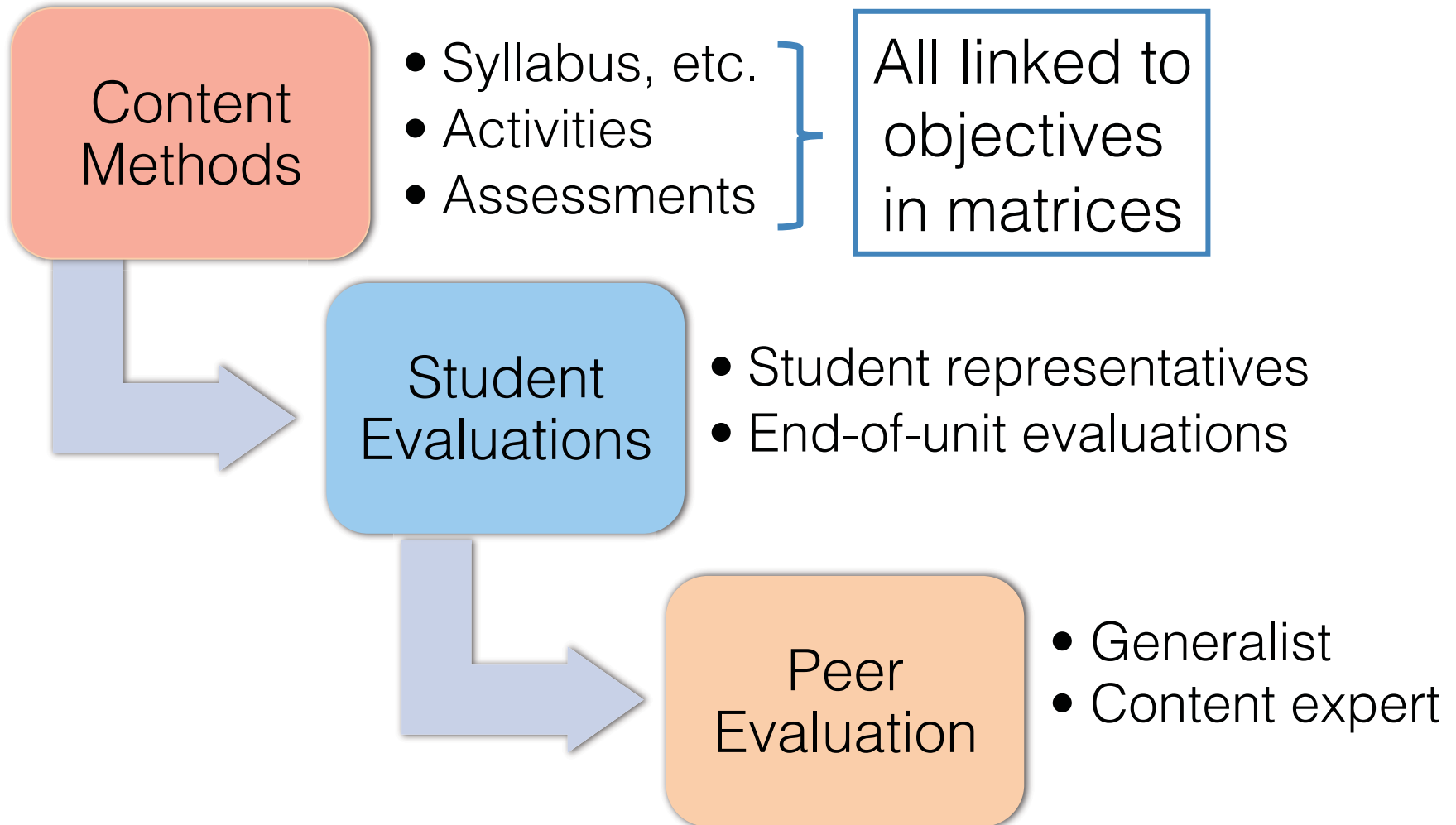
- 30-person Curriculum Committee
- 1/3rd of entire required curriculum is reviewed each year
- Use context of both matrices, determine whether objectives are being met
- Results to faculty, depts and students

Example of clinical curriculum

	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul
Year One	Interviewing and Physical Exam					Each component receives in-depth peer evaluation every 3 years						
Year Two	Competency-based Apprenticeship in											
Year Three	Core Clerkships									Sub-I's start		
Year Four	Sub-internships and electives											



Elements examined during the three-year cycle review

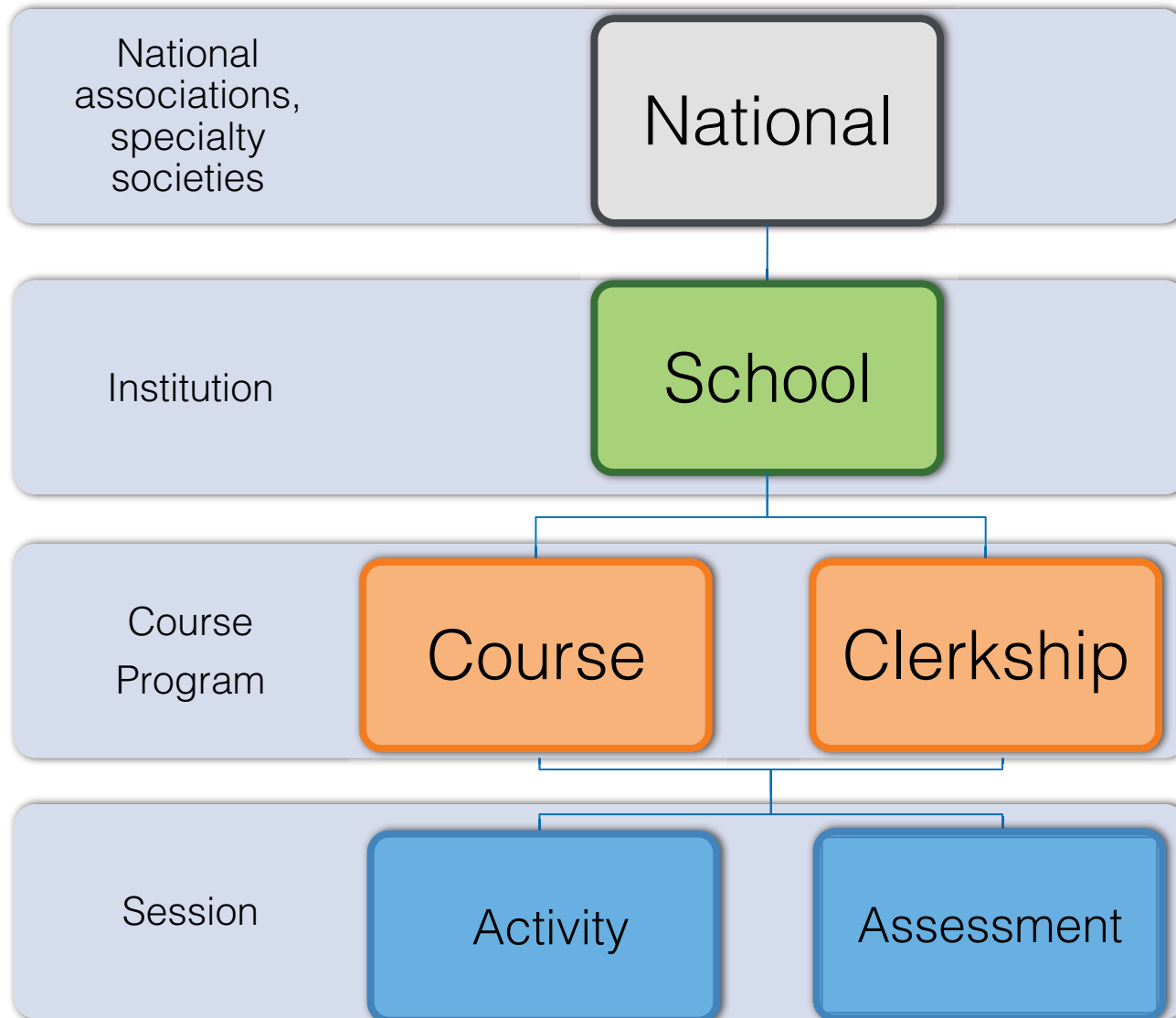


Fruits of Tufts' 3-year cycle

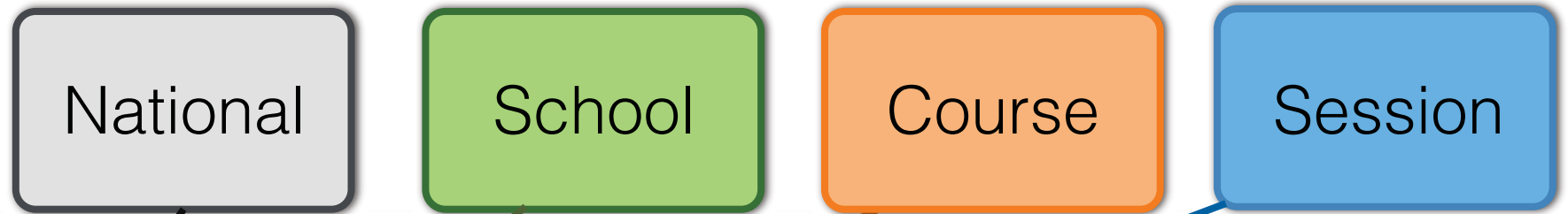
- Peer discussion of best practices
- Feedback to students on what changed
- Complements annual evaluation process
- Longitudinal data to steer programs
- Systematic data ready for accreditation
- Enables continuous quality improvement

Curriculum Mapping of competencies across multiple levels

Competency cascade



Competency Visualization Tree



CMS Home

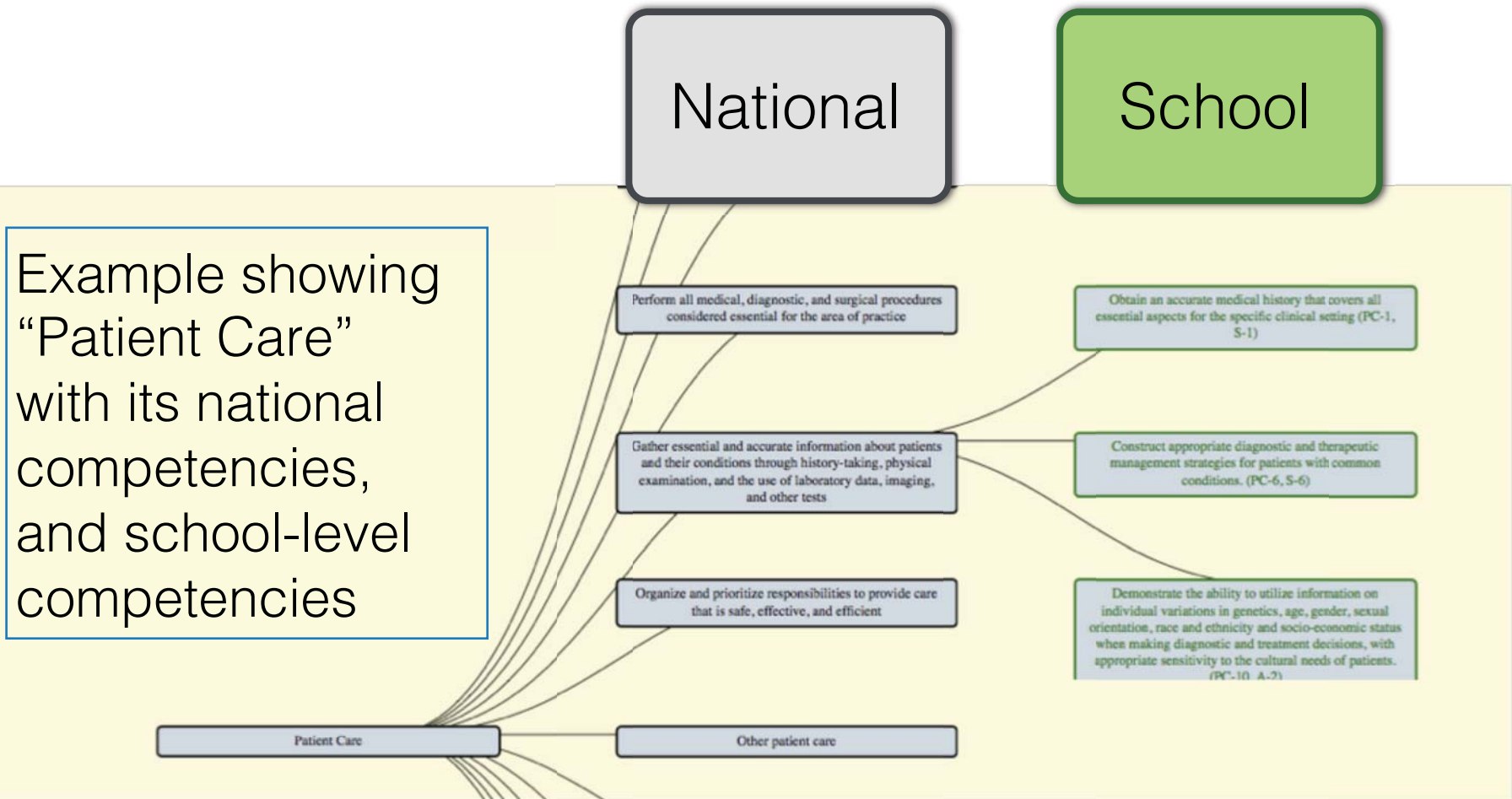
INTERACTIVE COMPETENCY VISUALIZATION TREE

Index: ☒ National Competency ☐ School Competency ☐ Course Competency ☐ Content/Session Objectives

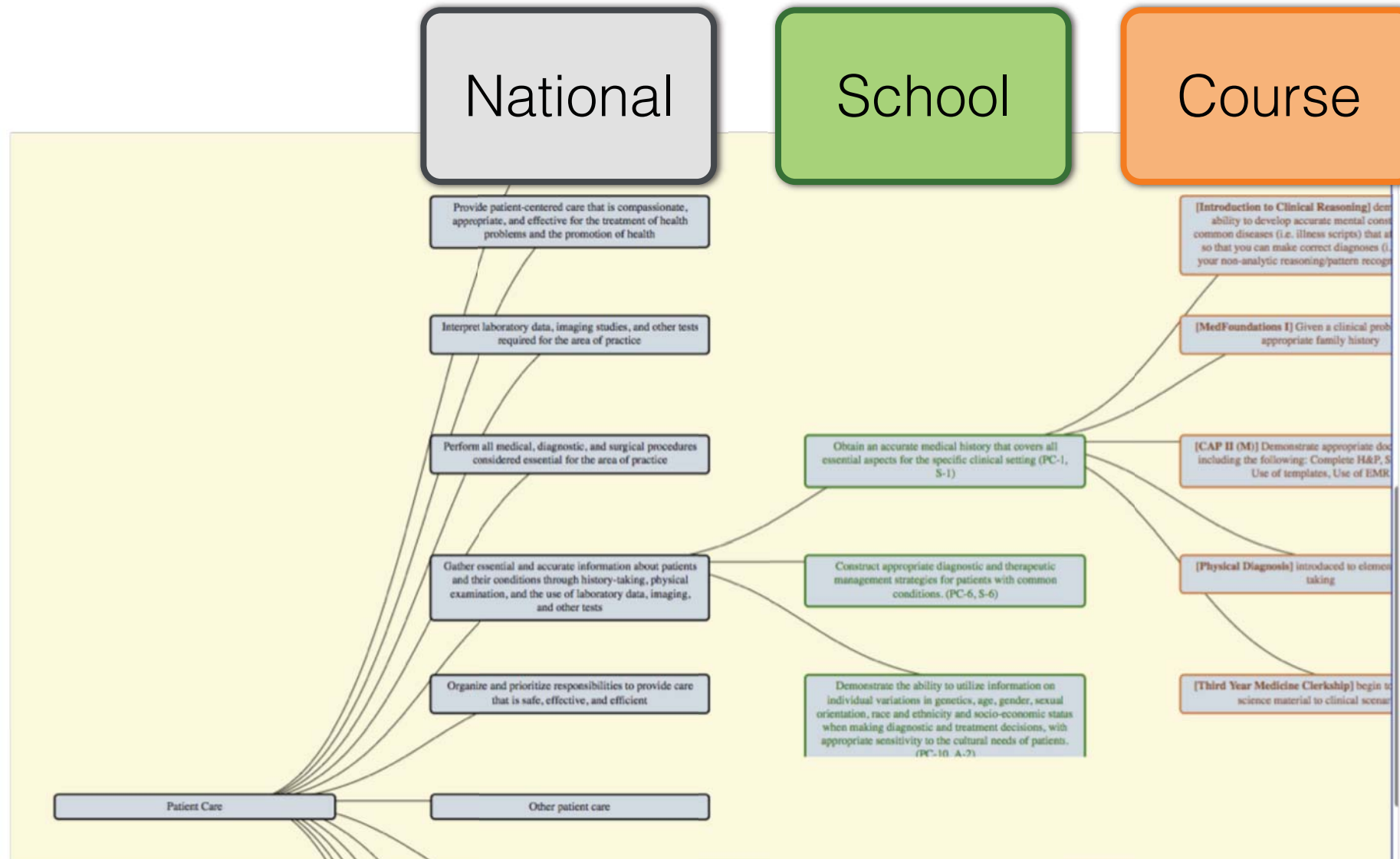
Select National Competency Domain: (select a domain) ▼

- (select a domain)
- Patient Care
- Knowledge for Practice
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Interprofessional Collaboration
- Personal and Professional Development
- NationalNationalNationalNational health care and respond by utilizing appro

“Patient Care” shown in Visualization Tree



“Patient Care” through course level



“Patient Care” in table form

The diagram illustrates the relationship between three levels of patient care: National, School, and Course. Arrows point from the National and Course boxes to the School box, indicating that the School level is derived from or encompasses the other two. A red circle highlights the 'PATIENT CARE (PC)' header in the table.

PATIENT CARE (PC)		
The medical school must ensure that student will, to the satisfaction of the faculty, be able to:		
Obtain an accurate medical history that covers all essential aspects for the specific clinical setting (PC-1, S-1)		1. Gather essential and accurate information about pa... 2. Other patient care...
Recognize the impact of the structure and function of health care systems on access, cost, and quality, and consider this in developing diagnostic and treatment plans (PC-12, A-17)	✓	1. Develop and carry out patient management plans... 2. Incorporate feedback into daily practice...
Perform both a complete and problem-focused examination. (PC-2, S-2)		
Perform routine technical procedures as periodically defined by the Medical School. (PC-3, S-3)		1. Perform all medical, diagnostic, and surgical proc...
Interpret the results of commonly used diagnostic procedures and tests. (PC-4, S-4)		1. Interpret laboratory data, imaging studies, and ot...
Reason deductively in solving clinical problems. (PC-5, S-5)	✓	1. Develop and carry out patient management plans...
Construct appropriate diagnostic and therapeutic management strategies for patients with common conditions. (PC-6, S-6)	✓	1. Gather essential and accurate information about pa... 2. Develop and carry out patient management plans...
Recognize patients with immediately life-threatening conditions and know...	✓	1. Organize and prioritize responsibilities to provid...

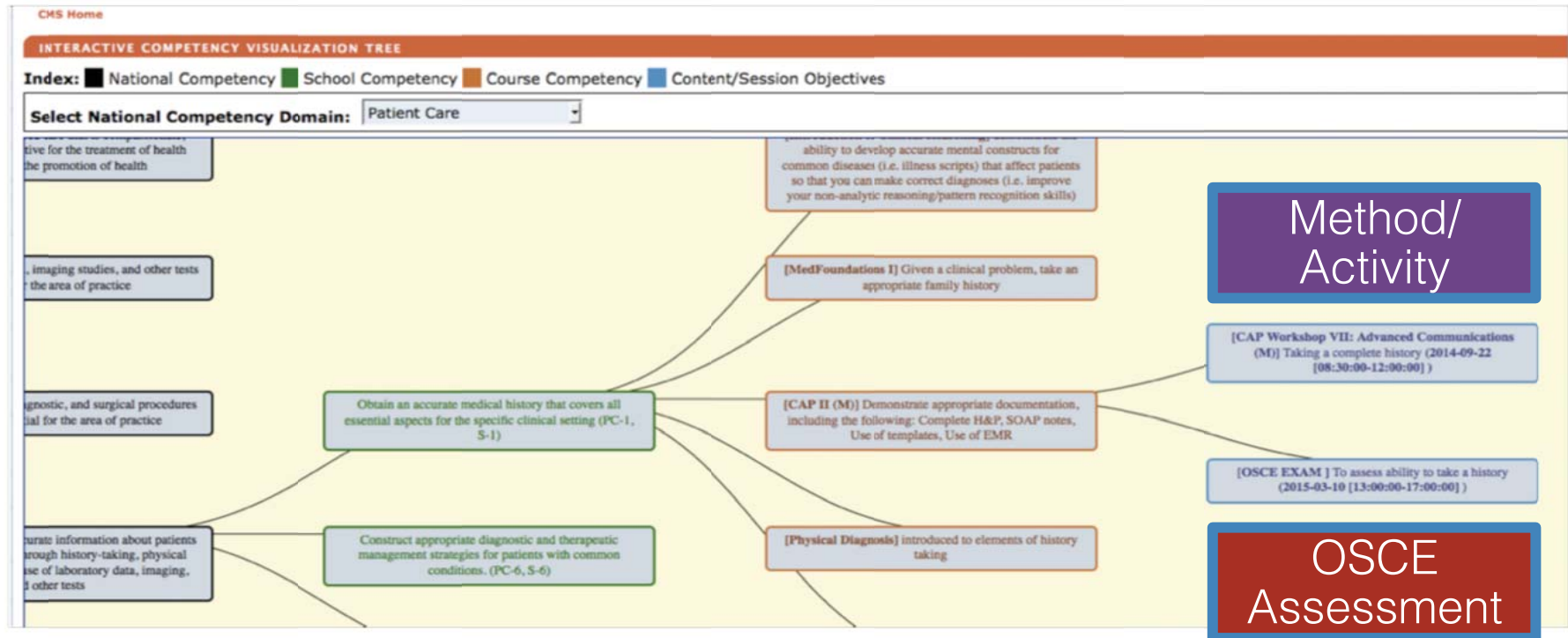
“Patient Care” thru session level, with activity and OSCE assessment

National

School

Course

Session



OSCE assessment entry in academic calendar

Academic - Accreditation
Weekly Lecture Objectives

[Subscribe To This Schedule](#)

Print:

[This Week](#) · [Multiple Weeks](#)

2015

[Prev](#) [Next](#)

Jan						
S	M	Tu	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Feb						
S	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

Mar						
S	M	Tu	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21

Previous Week

	Monday 9 Mar 2015	Tuesday 10 Mar 2015	Wednesday 11 Mar 2015	Thursday 12 Mar 2015	Friday 13 Mar 2015
8 am	REPRODUCTIVE Final Exam Examination @ 8:15	INTRODUCTION TO CLINICAL REASONING Final Exam Examination @ 8:15	CAP II (M) OSCE EXAM Examination @ 8:00		
9 am				OPTIONAL BOARD REVIEW Immunology Board Review Review Session @ 9:00	
10 am					
11 am					
12 pm		See Posted Assignments		JA Aud-130	
1 pm		CAP II (M) OSCE EXAM Examination @ 1:00		OPTIONAL BOARD REVIEW Genetics Board Review Review Session @ 1:00	
2 pm		SPECIAL PROGRAMS Special Programs @ 1:00			

OSCE
Assessment

OSCE management page automatically generated from calendar

CMS Home | Course - Competency-based Appr... | Manage Schedule

MODIFY SCHEDULE

Event Title	OSCE EXAM
Event Type	Examination
Assessment Method Purpose	Summative
Event Date	2015-03-10
Start Time	13:00:00
End Time	17:00:00
Content	Add Content No content associated.
Objectives:	Add Objective Re-order List Index: Category Supporting Information Competency

Session Objective	Linked Course Competencies:	Actions
To assess ability to take a history	New I: Demonstrate appropriate documentation, including t	-- select --

[Add Objective](#)

Objectives (Linked Content): No Content Competencies linked to Current Schedule

UMLS Concepts and Keywords [Add UMLS Concepts and Keywords](#)
No UMLS concepts associated.

User-Defined Keywords [Add Keyword](#)
No Keywords associated.

Users No user associated.

[Save Changes](#) [Cancel](#)

Summative or Formative Assessment

Link to content

Link to session objectives and course competencies

Link OSCE/assessment to Course Competencies

Dashboard All Courses Search Competencies Schedule

CMS Home | Course - Competency-based Appr... | Ma

MODIFY SCHEDULE

Event Title	OSCE EXA
Event Type	Examinati
Assessment Method Purpose	Formative
Event Date	2015-03-1
Start Time	13:00:00
End Time	17:00:00
Content	Add Content No content
Objectives:	Add Objective Session C To assess
Objectives (Linked Content):	No Content
UMLS Concepts and Keywords	Add UMLS C No UMLS C
User-Defined Keywords	

Link Schedule Objective 'To assess ability to take a history' to:

Available Course Competencies (Not Linked):

(No Categories Present)

- Demonstrate an ability to perform three of the following skills: EKGs, suture removal, injections, peak flow testing, assisting in sterile procedures, orthostatic testing.
- Demonstrate their ability to counsel patients regarding nutrition, smoking cessation, and alcohol abuse.
- Demonstrate how they formulate a clinical question and gather appropriate evidence to answer the question
- Demonstrate ability to reflect on patient care and clinical experiences through 1 formal written assignment and informal conversations with peers and mentors.
- Demonstrate organized oral presentations for complete and focused histories and physical exams
- Demonstrate an ability to perform both the focused History and Physical Exam and the complete History and Physical Exam

Linked Course Competencies:

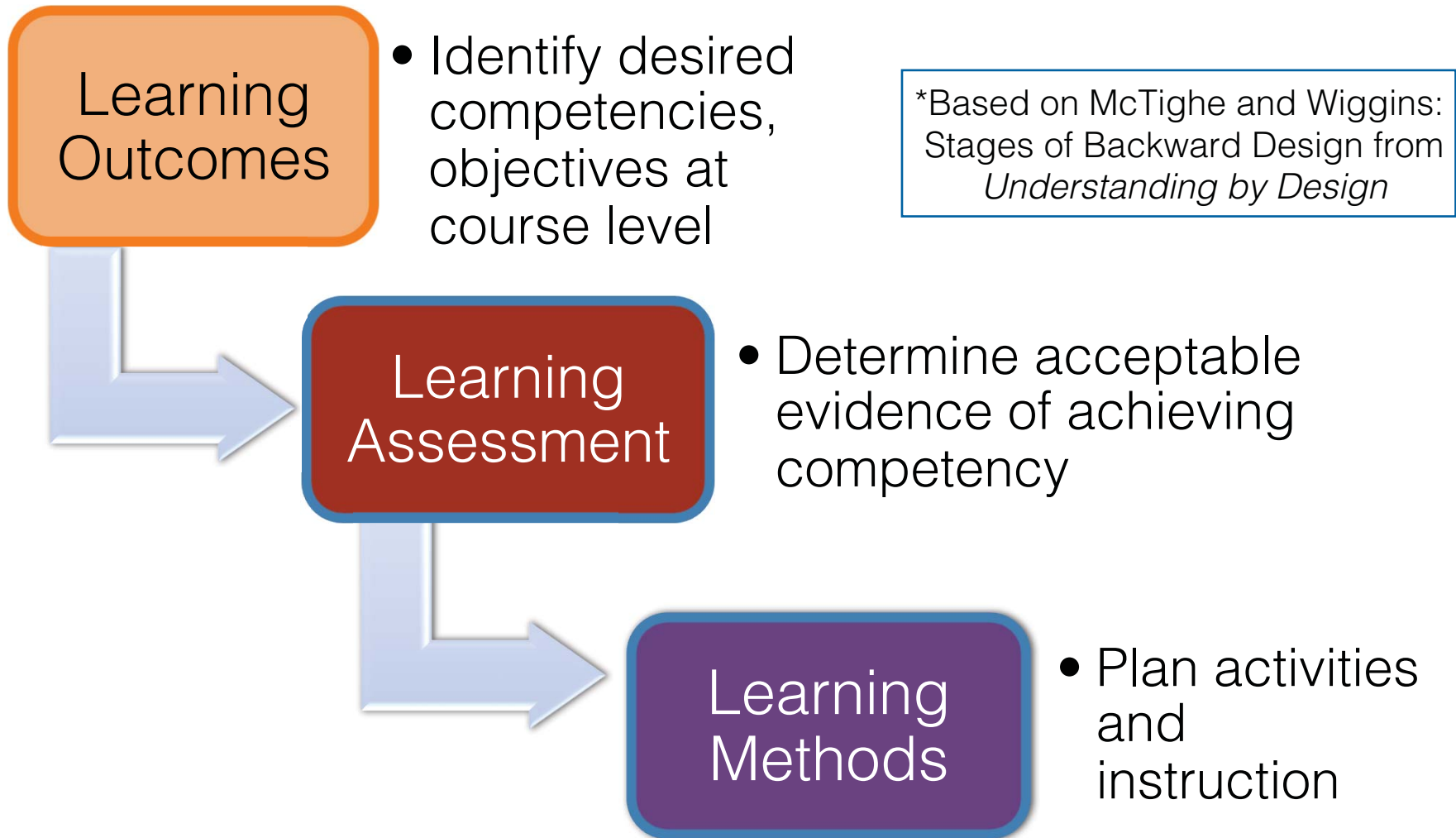
(No Categories Present)

- Demonstrate appropriate documentation, including the following: Complete H&P, S

[Save](#) [Close](#)

Select which course competencies to link to OSCE

Design OSCE/each assessment from desired learning outcomes*



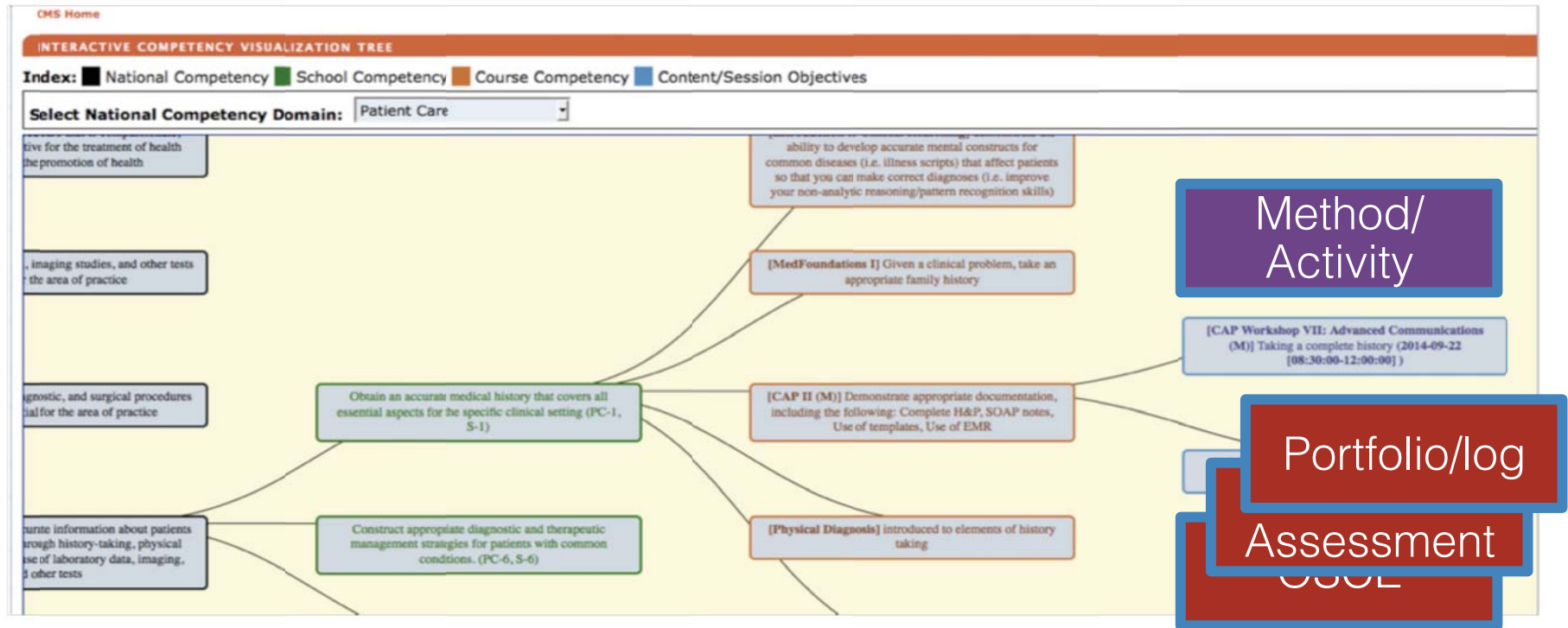
Map assessment and activity back to Course competency

National

School

Course

Session

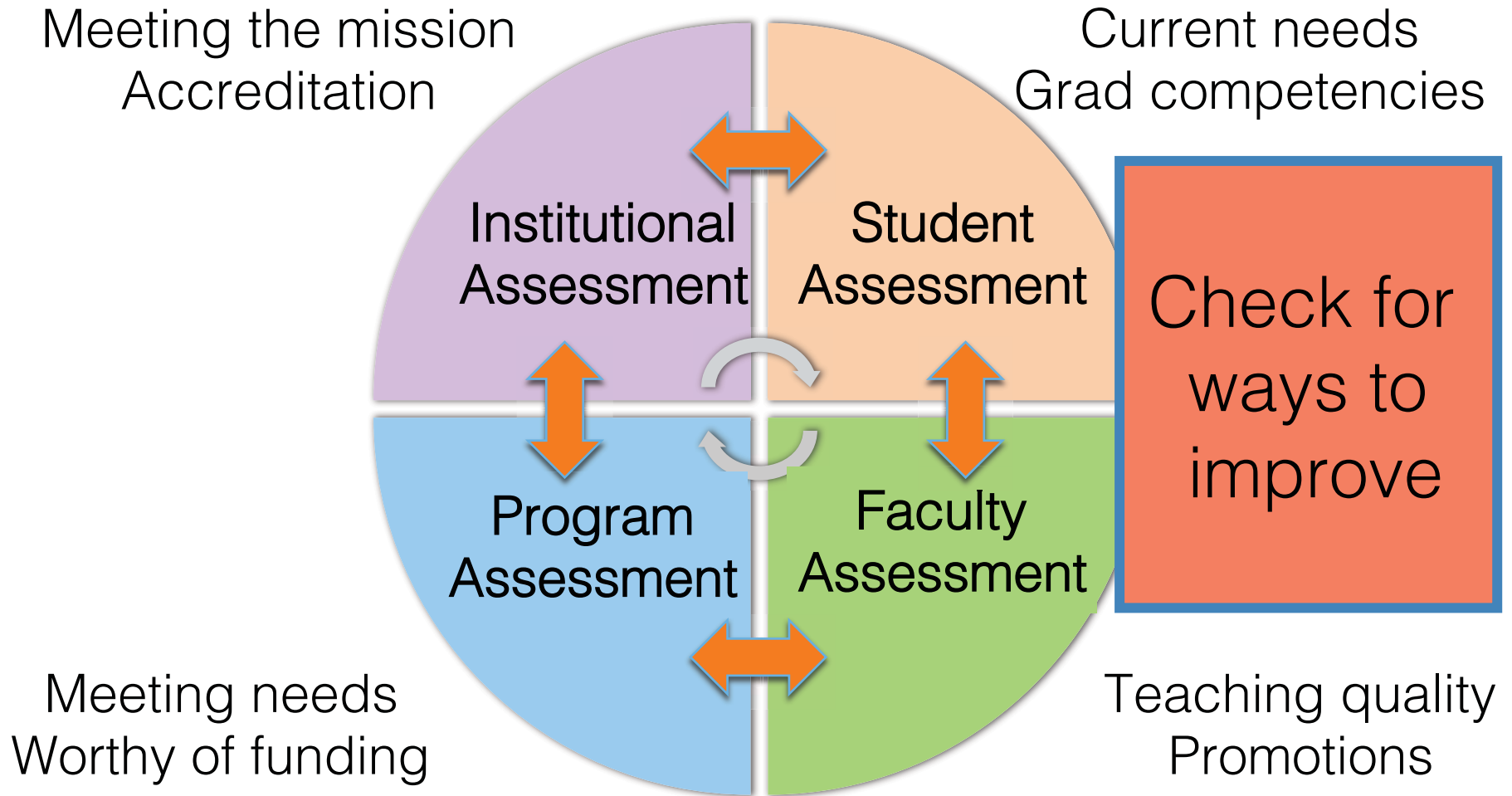


Method/
Activity

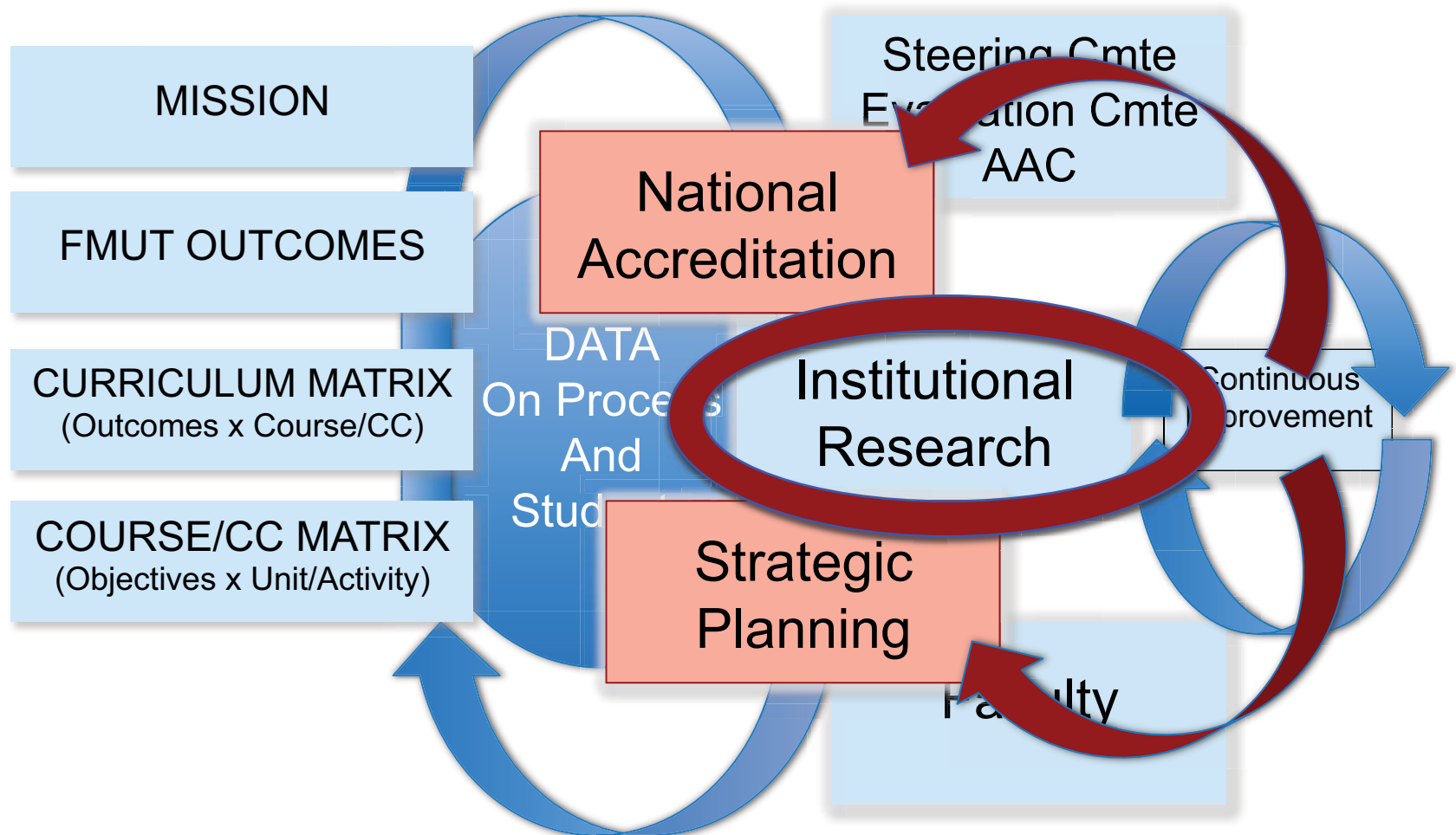
Portfolio/log

Assessment

Feedback from assessments



Link data to accreditation and strategic planning



Standard 8: Governance, Administration

1. Critical to manage entire curriculum
2. Cannot be coordinated through depts
3. Need someone responsible for education who thinks about it full time, not part time
4. Vice dean for education or equivalent
5. Need clear connection with IR, Evaluation Committee, Steering Committee, and AAC

Standard 9: Continuous Renewal

Key message: ***Continuous improvement***

1. Expose faculty to other methods, universities
2. Serve on accreditation teams
3. Attend conferences to share best practices
 - Share with peers across institutions
 - Add to education portfolio
 - Benefit to faculty, institution, students and ultimately to our patients, society