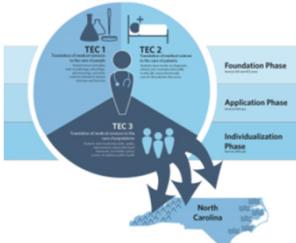




Translational Education at Carolina (TEC)



Consortium Projects

1. Align and enhance leadership curriculum across all educational programs in the School of Medicine (UME, GME, and PhD programs), and disseminate our leadership curriculum to the national audience

2. Develop clinically authentic experiences for increased interprofessional education for our medical students as well as the students from the Schools of Pharmacy, Nursing, Dentistry, Public Health, and Social Work, and the Department of Allied Health at our University

3. Ensure Medical Students add value in the clinical environment through expansion of their participation in meaningful clinical documentation and quality improvement initiatives that align with health care system needs



Interprofessional Education

- Provost support
- Student executive committee
- Launching interprofessional home visits
- Asynchronous interprofessional education modules
- Interprofessional faculty development
- 4 year curriculum that builds from identify to teamwork



RIPHI: Philanthropically supported special rural emphasis to IPE to inspire a needed workforce in NC and to bring learners into rural communities

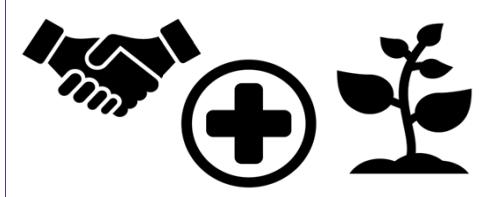
Grant Team Members

Julie Story Byerley, MD, MPH
Executive Vice Dean, Professor of Pediatrics
Beat Steiner, MD, MPH
Senior Associate Dean for Medical Student Education, Professor of Family Medicine
Timothy Daaleman, DO, MPH
Leadership Col Director, Professor of Family Medicine
Sarah Sutherland, MD
Assistant Dean for Clinical Education, Assistant Professor of Medicine
Mindy Storie, MBA, Liaison to Kenan Flagler Business School, Leadership Consultant
Kurt Gilliland, PhD
Associate Dean for Curriculum, Associate Professor of Cell Biology
Kenya McNeal-Trice, MD
Interim Associate Dean for Inclusive Excellence, Professor of Pediatrics

Advancing the TEC Curriculum: Leadership, IPE, and Adding Value

Julie Story Byerley, MD, MPH, Beat Steiner, MD, MPH

University of North Carolina School of Medicine



Leadership demands a healthy Learning Environment

While advancing our leadership curriculum and in line with the national conversation, we see an urgent need to improve the learning environment and enhance belonging. As our faculty, staff and students embrace leadership as a core competency, institutionally we are naming our values and launching a campaign to improve the learning environment.



- UNC SOM and UNC HCS value respect and professionalism
- We aspire to create a culture of belonging and supports wellness, making us the best place to work and learn
- A lack of civility has unfortunately been tolerated in medicine
- Burnout rates have rise
- Burnout can lead to lapses in professionalism
- Professionalism lapses, bias, and incivility can compromise patient care
- These lapses can also compromise the treatment of learners and the accomplishments of research

We strive for a respectful climate based on positive relationships that supports outstanding patient care, meaningful scientific contributions, and a learning environment where all can thrive.

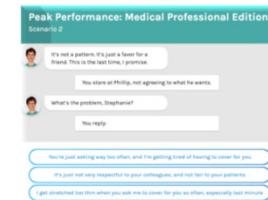
We make a commitment to positive respectful relationships.

- Commitment** – we are dedicated to the cause
- Positive** – we are optimistically progressing toward improvement
- Respectful** – we demonstrate and expect civility, kindness, and inclusion
- Relationships** – we engage with others, showing compassion to them

Advances to the Leadership Curriculum

Implemented “Talented Ap” –

- Gamified micro-course on leadership
- 8 true to life virtual scenarios
- 2 personal activities
- Individualized feedback
- Response tracking
- Asynchronous learning



Need/Gap Addressed – Students Adding Value

Given the push for efficiency in the clinical environment students must add value as they are present for meaningful education. With the expectation of entrustability regarding documentation at the start of internship, medical students must learn to document their clinical encounters while concurrently decreasing the work burden of their faculty. UNC has optimized the CMS policy change for the benefit of students, faculty, and patients.

With the policy change we undertook a faculty development initiative to ensure proper implementation of the policy.



Medical Student Participation and Documentation in the EHR and the Use of Medical Student Notes by Physicians and Advanced Practice Providers

Student and faculty feedback has been outstanding. Students are thrilled to have more significant contributions to the work of the practice and team, and faculty are pleased to have the support. We have not learned of instances of abuse regarding inappropriate utilization of students as scribes. Our partner health systems have similarly modified their policies.

Resources to Share

- Leadership competencies and curricular pieces
- Working to share peak performance and our app
- Rural interprofessional education models
- Health care system policy for student documentation to support billing
- Concepts behind CPR2 initiative

Institutional Contact

Julie Story Byerley, MD, MPH
Executive Vice Dean, UNC School of Medicine
Julie_byerley@med.unc.edu 919-428-4013.

