



University of California  
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# TRIPLE $\Sigma$ AIM

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## A SHARED MISSION TO IMPROVE MEDICAL EDUCATION

It's no secret that medical practitioners are now under more pressure than ever to maintain high standards of professionalism in the rapidly changing and challenging environment of improving healthcare delivery. Instilling resiliency and self-care in medical students to reduce burnout and to avoid malign influences of the environment on professional character is now a necessity.

“Our students will be practicing in a far different environment than when I graduated from medical school—we have to be more deliberate in how we help our students meet these new challenges,” says Rand Swenson, MD, PhD, chair and professor of medical education. “Luckily, we have six extraordinary partners in this effort, each of whom are studying these problems and attempting to develop solutions that are not only institutionally relevant, but relevant across all schools—which is a huge advantage.”

Swenson is referring to the National Transformation Network (NTN), a consortium of seven well-respected medical schools—Geisel School of Medicine, Medical College of Wisconsin,

UC San Francisco School of Medicine, University of Texas at Austin Dell School of Medicine, Mayo Clinic School of Medicine, University of Wisconsin School of Medicine and Public Health, and Vanderbilt University School of Medicine—with a shared mission of improving medical education, especially in terms of professional character formation, competence, and caring—the network’s triple aim.

Committed to “leading the way in transformational healthcare education,” the Robert D. and Patricia E. Kern Institute for the Transformation of Medical Education has partnered with NTN to fulfill its mission. Funding from the Kern family and the Kern Family Foundation supports the institute, which is based in the Medical College of Wisconsin.

Geisel is a founding member of NTN, and one can argue that the medical school's culture has always had, and still has, deep roots in cultivating the triple aim in medical education and healthcare delivery science. However, Swenson points out this is not just about Geisel, "This is about examining how we can improve upon those elements while also enhancing resiliency and self-care in a manner that could be shared across medical schools."

Competency, caring, and self-care can be taught, but what about character and resiliency? Don't people who choose medical school already have a high level of both? These questions are part of continuing national conversations within the medical education community about the best way to train tomorrow's doctors.

"I think resiliency can be developed—there is ongoing discussion about the natural level of resiliency people bring to medical school and the degree to which we can change it at this point in a student's professional development," Swenson notes. "But I'm convinced there is a degree of resiliency and of professional character development that can take place in the context of the medical school experience. There are studies that have demonstrated that medical education can adversely impact some aspects of professional character—so our challenge will be to enhance these characteristics instead."

Unsurprisingly, this attitude is tied to a more holistic approach to the admissions process—instead of focusing on easy to measure grades and test scores, a candidate's unique experiences are considered alongside traditional attributes of academic success. The goal is to create a student body diverse not only in race, ethnicity, and gender, but in experience, socioeconomic status, and qualities that are embodied in the triple aim.

Glenda Shoop, PhD, an assistant professor of medical education, and Lynn Foster-Johnson, PhD, an assistant professor of community and family medicine, are interested in character and what an assessment of it looks like across the continuum of medical education—from matriculation to practice. But before you assess it, Shoop says, you have to define it. Working with NTN partners, each with different organizational values, educational philosophies, and learners, allows the partnership to examine complex constructs such as character and helps define it as it applies to the practice of medicine.

Shoop and Foster-Johnson's proposal for a multi-institutional project, revolves around a series of challenging questions: What does character mean within the profession of medicine? What are the key attributes of character that, no matter the circumstances, are essential to give compassionate, competent, and safe patient care? "These partnerships open possibilities that we wouldn't otherwise have," Shoop notes.

Geisel faculty are also working with NTN groups focused on varied but interconnected aspects of medical education based on the tenets of the triple aim.

"But a core project for this partnership is a coaching program for our medical students focused on professional development throughout the long transition into the

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medical field," Swenson says. The program, which launches in fall 2019, will foster professional character development across the entire undergraduate medical education, up to and including the transition to residency. The program director will also work with Geisel's NTN partners to advance the network's initiatives.

In addition to locally developed initiatives, MedEdNext—the umbrella under which individual NTN initiatives are proposed and implemented, has established a mechanism for identifying and supporting collaborative initiatives at the founding schools. These initiatives will be expanded beyond the original seven partner schools as part of this five-year project funded by the Kern Foundation.

Ultimately, the role of this consortium of NTN schools is to identify and promulgate best practices through networks supported by the American Association of Medical Colleges (AAMC) and other professional organizations. Part of each project's success is determined by whether individual school initiatives will be able to translate their work to the wider medical education community. To that end, this fall the consortium is sponsoring a series of symposia with AAMC in an effort to interest and engage other medical schools. The ultimate expectation is for the network to expand beyond the original seven schools.

"It is a privilege to be working with the NTN as partners in this consortium because it opens many interesting possibilities," Shoop says, "and being able to look at funding opportunities as part of a multi-institutional collaborative is exciting—it allows us to really take a look at important issues from different perspectives."

"This is a very diverse group of schools, and the thing that is really interesting is how similar our challenges are despite our many differences," Swenson says. "Some schools have found ways to approach these challenges differently than we have, and the opportunity to benefit from their experiences is invaluable."

When the grant ends, the hope is that the network will be self-sustaining. "If it proves to be as valuable as I think it will be in improving the practice of medical education," he adds. "I am confident that the consortium and its initiatives will become a permanent feature of the landscape of medical education at Geisel."

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