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Thinking Like A Scientist ... And An Engineer: Training future leaders and innovators in health care systems and delivery

Diana Ong
University of Massachusetts Medical School

Eric W. Dickson
University of Massachusetts Medical School

Lori R. Pelletier
University of Massachusetts Medical School

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Capstone: Thinking Like A Scientist … And An Engineer
Training future leaders and innovators in health care systems and delivery
Diana Ong UMMS 4, Eric Dickson MD MHCM FACEP, Lori Pelletier PhD MBA

**BACKGROUND**

- Health care is increasingly becoming more complex with the advancement of accountable organizations, expansion of hospital systems, and major insurance and government reforms.
- To address the need for physician leaders with management skills, the number of MD/MBA programs has risen dramatically since the 1990s, with 65 joint programs in the US, out of 141 accredited medical schools as of 2013. (Goyal, 2013)
- More recently, residency programs and medical schools have also started to develop leadership pathways for its students.

**METHODS**

**PLAN: “A3” PDSA Cycle**

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<tr>
<th>Problem Statement</th>
<th>Root Cause Analysis</th>
<th>Counter Measures</th>
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<tr>
<td>The elective started strong with an average of 6-8 attendees, but were poorly attended in the last year with an average of 2-3 students per session.</td>
<td>Lack of clear “value add”</td>
<td>Identify and provide opportunities for a tangible, practical activity at the end of program – ie. structured mentorship, poster, presentation, journal articles</td>
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<td>Root cause analysis: We conducted individual interviews of faculty sponsors, lecturers, and student leaders involved in the QI elective, regarding reasons for poor attendance, and ideas for improvement.</td>
<td>Lack of awareness of QI among students</td>
<td>Reframe QI and health systems under broader themes, such as leadership, critical thinking, etc. Consider exposing students earlier in training.</td>
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<td>Countermeasures: Feedback from the root cause analysis led to the generation of countermeasures, or solutions for improvement.</td>
<td>Competition with other electives</td>
<td>Identify ways to differentiate from other electives. Identify topics of interest among students. Use of technology to make participation easier, ie. skype, google hangout.</td>
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<td>DO: A Student Survey was launched in January 2015 to all 4 class years to evaluate the feasibility and interest level of the countermeasures and gauge overall interest in leadership content.</td>
<td>Didactic lectures may not be the right format for teaching</td>
<td>Incorporate greater case based content Consider more practical field work or mentorship opportunities that expose students to career options.</td>
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<td>STUDY: Results of the survey were collected and analyzed.</td>
<td>Leadership transitions makes it difficult to sustain an elective for the long term</td>
<td>Identify faculty as well as students champions to maintain continuity</td>
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**UMMS Student Survey on Health Care Leadership**

- 168 students responded to at least one question on the survey.
- An estimated 20% of the UMMS student population (n=125) completed the survey.
- Our survey identified overwhelming interest in the topic of leadership, with 20% of respondents reporting “very likely”, and 54% “somewhat likely” to take an elective or join a student group on the topic.
- UMMS students aspired to be leaders of hospitals, clinics, and medical departments as well as starting their own private practices.
- Students are most interested in receiving career guidance for leadership and mentorship opportunities.
- A staggering 89% of respondents were either “somewhat interested” or very interested in a 1 day training certificate on health systems and process improvement. Of the 89%, 51% reported they were “very interested”.

**Next Steps**

- Combining the results from the root cause analysis, counter measures, and evidence from the student survey, we have the data we need to design and implement an informed and attractive educational option for students.
- A similar leadership survey can be released to other health professional schools (ie. nursing, pharmacy) to identify interprofessional areas of focus.
- Integrating Lean management in UME is one way to teach students about health care systems, and process improvement.

**References and Acknowledgements**


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