Community Learning

Drs. George Kim and Gary Tithecott

The MD Program Curriculum Renewal will create a curriculum that will help medical students understand the spectrum of illness and health experiences of the patients of Southwestern Ontario. Medical students will be challenged to understand how disease exists and how illness is experienced by patients across our region.

The Future of Medical Education in Canada document encouraged Medical Schools to graduate more future physicians who understand the community’s need for health care and to support a more “generalism-focused” content in the curriculum.

The work of White et al. and Green et al. highlighted how more patients are seen in community hospitals, and family physician offices, then academic health sciences centres.
The renewed curriculum will also ensure more longitudinal and integrated clinical experiences in community settings.

It will build upon the School’s socially accountable vision delivering medical student education each academic year in the regional academies to support learning aligned with future career.

“The Schulich School of Medicine & Dentistry commits to improving health in Southwestern Ontario through clinical service, advocacy, research, and educational activities that are responsive to the needs of the people and communities we serve.”¹

Experiential learning

Experiential learning, is a key goal at Western University

“Experiential learning (EL) is an approach that educators use to intentionally connect learners with practical experiences that include authentic and focused reflection”²

¹https://www.schulich.uwo.ca/medicine/undergraduate/about_us/accreditation/social_accountability/index.html
As such, we are moving the new MD Program Curriculum learning model to allow early and monitored clinical experiential learning, starting in first year, aligned with career competency.

We want students to have effective experiential learning to bring medicine to life. We see, for students who are planning for a career outside tertiary care that this new model will offer the opportunity to immerse in experiential learning in patient care, across time, with community educators and partners in the region. Evidence shows this moves new knowledge to be better understood through patient stories and care experiences.

Student exposure in the region is not new. We support bursts of immersion (one to three weeks) at the end of first year which takes the form of Discovery Week, where students are immersed in rural regional generalist and Interprofessional care across our region and in third year Clerkship rotations in Family Medicine, Psychiatry, Paediatrics, Obstetrics/Gynecology.

Students communicate the powerful impact this learning model has had in career choice – including students from larger communities choosing to plan for practice in a rural or regional health care model. The regional one to one student/educator ratio and the ability to partake in care, under supervision, rather than observing has been a strong experience of many.

We see this as a model that not only delivers on our mandate, but deepening student competency.

Our vision of where we will support a more socially accountable experiential learning options in the School’s distributed education region is:

- **First year Longitudinal Family Medicine Clinical Experience:** Starting in October, students will learn in local and regional family physician’s offices for a half day every month. We have recruited many of these sites in our regional faculty clinics and offices. The plan is to have all students ultimately assigned to and having learning experiences in one of the regional academies
- **First year Discovery Week:** This will continue as a key early learning experience: https://www.schulich.uwo.ca/distributededucation/undergraduate/schulich_programs/discovery_week_2019.html
- **First and second year Weekly Clinical Independent Learning:** Students will have for three to four weeks each month, in first year each Tuesday and in second year each Wednesday to use for self-directed assessed clinical learning. This allows each student choice for patient care immersion in Family Medicine or specialty care in any school learning site. We see this, for many students, as taking place in our regional academies and community partner sites.
- **Third year Clerkship:** Our present model of a single third year clinical immersion in care will be undergoing innovation to adapt to a competency-based medical education model and adopt new learning models including longitudinal clinical placements in regional sites.
- **Fourth year clinical electives:** Our data documents student satisfaction with clinical learning as they transition to residency in the regional communities for Schulich Medicine and other Canadian medical students in all specialties. This will continue to be a key offering across and into our capstone course elective term post residency interviews.
- **First and second year summer elective clinical and scholarly experiences in our academies:** These diverse popular student experiences will continue to be a priority for our School: https://www.schulich.uwo.ca/distributededucation/undergraduate/ontario_medical_student_electives/discoveryhealthcare.html
We vision the new MD Program providing experiences starting in first year and moving across into fourth year that support competency through socially responsible longitudinal experiential learning in patient care. The new Canadian health care of tomorrow requires competence in care closer to home. We as a school want to offer our students a meaningful start in their career by learning where they will deliver - close to home.