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Optimizing Learning Experiences: The Integration of Individualized Learning Agreements for Emergency Medicine Residents

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Optimizing Learning

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Abstract

Introduction: A common tool used to facilitate self-regulated learning in medical education is the individual learning plan (ILP), a learner-driven and iterative instrument designed to tailor training opportunities to individual learner needs. Although commonly utilized in medical education, few specialties, historically Pediatrics and more recently Family Medicine, require incorporation of ILPs in resident programming. There is no requirement for Emergency Medicine residencies to utilize ILP's. In July 2023, the UNMC Emergency Medicine residency program started a pilot project aimed at incorporating an ILP, entitled Individualized Learning Agreements (ILA), for all 36 residents. Design: At the beginning of the 2023 academic year, a Microsoft Form was emailed to all 36 residents exploring questions about worries and goals for next 2 months, detailed study plan for the year, and level of accountability preference from the program. Initial submissions were reviewed, and suggestions were sent back to each resident. Check-ins occurred via Microsoft Form every two months, although residents could opt-in to more frequent check-ins. Questions on each check-in included progress on study plan, achievement of goals, opportunity to list new worries and goals, and confirmation of accountability need. Each check-in also allowed for specific questions related to current trends in the residency. Impact: The initial form was completed by 35/36 (97.2%) residents. Data from the most recent (6-month) check-in showed that while ILA's were mostly followed 'Some of the time' (69.7%), 93.9% still felt they were learning and 87.9% felt the ILA was beneficial to their education. Conclusion and Future Direction: Preliminary data would suggest that the ILA is a useful educational tool for Emergency Medicine Residents. Further analysis is needed to assess objective metrics and to explore barriers to more expansive implementation. Future direction will include the incorporation of a coaching model and discussion on resident career and academic interests.

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