

SCHOLARSHIP CENTRE Medical Education Scholarship Forum Proceedings

How can we engage learners in a geographically dispersed residency program? Evaluating small online learning groups (SOLG) as one possible solution

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Purpose: To evaluate an alternative approach to the traditional, large group academic half day (AHD) teaching sessions in a geographically dispersed residency program. Family medicine residents expressed dissatisfaction with the current format as they felt the sessions were not interactive, did not encourage critical thinking and there was no incentive to participate. An ad hoc committee was established to further explore the residents' learning needs and examine possible solutions. The decision was made to trial asynchronous, online learning groups. Methods: Family medicine residents were invited to participate in early 2015. A total of fourteen first and second year residents were recruited and divided into two online groups. An eight week curriculum was delivered over a ten week period which paralleled the content of traditional academic half day to maintain continuity and inclusiveness of the curriculum. The weekly discussions were based on content from McMaster University's Practice Based Learning Program Modules. The residents alternated as lead for the week in an effort to practice facilitation while collating and synthesizing the learning. A faculty member with online learning experience moderated each group, mentoring both resident leads and prospective faculty moderators. The program was evaluated using pre and post program surveys of the residents, weekly formative assessments, weekly narrative reflections, and focus groups of residents and faculty following completion of the program. Results: Focus groups are in progress, complete results will be available in the fall. Preliminary data reveals the residents enjoyed learning through cases, appreciated the resources and flexibility of the time commitment. Residents reported that the SOLG format was a more engaging, effective and interactive way of learning, especially for those at peripheral sites. Additionally, residents would prefer more faculty involvement, which was also reported in reference to the traditional AHD, opposed to peer teaching. The resident's pre- and postmodule knowledge and confidence in managing cases and skills increased significantly. **Conclusions:** The small online learning group model is an asynchronous learning environment that appears to be suitable for family medicine resident learners in a geographically dispersed residency program with varying commitments and schedules. Further studies should be considered to explore this option.