Initial experiences with integrated learning sessions (ILS) – a new curricular feature

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**Background:** One of the goals of curriculum renewal was to move away from a ‘silo’ approach to undergraduate medical education by promoting integration and offering opportunities for students to integrate their learning from the start of the program. The integrated learning sessions (ILS) were designed specifically to help students integrate concepts from across the curriculum though a combination of elements. Students were provided with a series of questions that required them to consider elements across content areas, to write responses to the questions, read the responses of their peers, discuss the responses in face-to-face sessions, and have a final discussion as a whole class. The combined synchronous and asynchronous format gave students the opportunity to work on their written and oral communication skills, their reasoning and critical thinking skills, and their leadership skills. Each of the sessions was facilitated by a clinical faculty member and attended by some faculty members who taught in that block. Staff members from the Medical Education Scholarship Centre (MESC) and the Health Science Information and Media Service (HSIMS) also assisted with the operation of the sessions. At the end of each ILS session, there was a quality improvement (QI) segment which asked students for feedback. Student feedback helped contribute specifically to the evolution of the ILS through its various iterations. For example, initially faculty members attended the small-group discussions, but student feedback suggested they were comfortable discussing the questions on their own because the purpose of the sessions was not learning new content but rather integrating content. The students also asked the facilitators to re-think the nature and substance of the questions so they could be provided with more complicated questions that would challenge them more to integrate the content they had learned thus far. A key success of the ILS was that the QI portion afforded the opportunity for timely, responsive changes to the sessions while they were running. One of the criticisms of end-of-course evaluations was that it is too late to act on the feedback or mediate the problems until the next offering. Furthermore, the students did not limit their comments only to ILS content. Students used the QI sessions to comment on various aspects of the program including facilitation/instructor, organization of courses and phase, content, assessment, ILS, and logistical considerations (scheduling, rooms). The timely, rich feedback used for the QI sessions during ILS have been expanded to include sessions
with faculty, staff, and students to capture a snapshot of the first iteration of Phase I.

**Purpose:** One of the key objectives of Memorial’s new spiral curriculum is better integration of concepts across different domains of learning. One way this integration is achieved is through the introduction of regular integrated learning sessions. ILS also affords us a means to put a more responsive phase evaluation model into place. The purpose of the presentation will be to explain how ILS evolved over the fall of 2013 and how that evolution was able to take place.

**Methods:** A combination of evaluation methods were used including input from the regular large-group ILS session related to quality improvement (QI), collection of complete QI forms, and focus groups as well as the presence of a student representative on the working group.

**Results and Conclusions:** Having scheduled integration sessions is valuable to students and implementing a responsive, iterative evaluation model can improve course outcomes.