

4 REASONS

TRAINING PROGRAMS NEED TO EVOLVE



The evolution of training programs will yield benefits for all stakeholders – health systems, clinicians, faculty, and patients. Increased effectiveness will improve efficiency and continuity among teams.

These are the four primary reasons training programs need to evolve.

Even before the COVID-19 pandemic, facets of medical education had antiquated components in need of a refresh. The shift of all schooling formats to remote learning has amplified some already present challenges that physicians and healthcare systems experienced. The “silver lining” is that these challenges are now top-of-mind for healthcare systems and educators.





4 Reasons Training Programs NEED TO EVOLVE

1. An Online Learning Plan is Essential:

The swiftness with which educators moved their teaching and training online was a mark of adaptability and agility at the beginning of the COVID-19 pandemic. Online learning as a component of overall training programs will be essential for resilience and academic continuity.

It's not just online learning that will be [a strategic priority in the post-pandemic world](#), but rather blended learning. It's important to note that digital tools are only complements, not substitutes, for face-to-face learning. Participatory teaching methods [result in far greater retention of knowledge](#) than passive methods alone.

2. Physicians Require More Individualized Education:

Not every team member will struggle with or excel at the same topic. Traditional training programs slowly work through large volumes of material step-by-step. Assessments are complete and the holistic score is the value that measures whether or not a training program was successful and [if a physician is "ready"](#).

More granular, individualized data is needed to truly understand what areas a trainee is proficient in, and where they need further training. Tracking their development and aligning their knowledge and skill progression with exam scores is a step toward individualized education that's beneficial for all parties. With insights like this, positive training opportunities can be readily identified and focused on.

3. Physician Burnout is Impacting Knowledge Retention:

Physician burnout gets a significant amount of attention – as it should. But there's more that can be done to address it. Increasing administrative tasks and increasing number of hours spent at work are among the top contributors to physician burnout. We know that a commitment to lifelong learning is essential in the medical field, with new [medical knowledge doubling](#) approximately every 2 months. But how is anyone

supposed to find the energy to be engaged and interested in their training with other stressors weighing heavy?

Revising the approach to training programs to increase their effectiveness will also increase their efficiency, allowing trainees to focus on specific areas of improvement and updates that are highly relevant to their specialty.

4. Convenient Does Not Equal Effective:

The catalyst for varied educational formats – videos, podcasts and the like is the convenience factor. Trainees can access these materials at any time, and they should be thankful for that. Translating hours of lectures into a "podcast" doesn't quite count.

The shift that training programs must make is translating their previously stagnant material into multiple formats, and **microlearning modules**. With microlearning, concepts learned are more easily transferable to a clinical situation. Concepts can be recognized more quickly and mapped to the appropriate action. This approach is not only convenient – but increasingly effective.

Adaptability is key for health system training programs. This adaptability is not only in preparation for another pandemic, but rather to keep lock-step with the innovating, evolving, modern healthcare professional.

Knowledge to Practice delivers clinical education and faculty development to physicians online in bite-sized chunks wherever and whenever they want it. **This decreases the time physicians spend on continuing education by 75% with 5x the boost in knowledge retention of traditional CME.** Learn more about how training programs can change to meet the needs of the modern professional.

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