

Study suggests need for broader use of individualized learning plans for physicians

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Physicians would be better prepared for the accelerating rate of scientific discovery — and more in step with the latest in patient-care — if they added an important tool to their medical bags: a plan for how to keep pace with emerging health-care advances.

That is the finding of a national study published online today in the journal *Academic Pediatrics* which examines whether pediatric residents know how to develop plans to ensure they'll keep abreast of current [medical practice](#).

"Medicine is not a static profession," said Su-Ting Li, assistant professor and associate residency director in the Department of Pediatrics at the UC Davis School of Medicine. "It's a profession where things change all the time. If you don't keep up, you're not going to be providing the best care for your patients."

The study, "Factors Associated with Successful Self-Directed Learning Using Individualized Learning Plans During Pediatric Residency," involved 46 — or 23 percent — of all pediatric residency programs in the United States and nearly 1,000 of the approximately 1,700 pediatric residents surveyed. Participants were dispersed throughout the country, in the north, south, east and west, at large and small hospitals, and university-affiliated and community institutions.

Residents are [physicians](#) who have finished medical school and are completing their training under the guidance of fully licensed physicians.

There is widespread agreement that residents — and all doctors — must participate in lifelong learning activities. Many are required to document those efforts with self-directed "individualized learning plans," or ILPs.

For the study, the residents responded to computerized survey questions developed at UC Davis about their ability to continuously assess their level of skill and their use of ILPs. Ninety percent of respondents said they knew their strengths and 92 percent knew their weaknesses. But only 26 percent said they tracked their progress toward achieving their learning goals.

But tracking progress on achieving their learning goals was found to be one of the most important factors in attaining them. The finding suggests that among the many ways that training programs could support self-directed learning, "putting in place systems that make it easier for residents to track their progress toward achieving their goals would likely be the most effective and bring the greatest return on investment."

"The residents were confident in their ability to identify their strengths and areas for improvement. But they were less confident in their ability to write goals to improve their performance and develop plans and follow through with them. This tells us that this is something that faculty mentors can do to help our residents be better doctors," said Li, the study's lead author.

For example, at UC Davis, pediatric residents are required to create individualized learning plans three times a year and have them reviewed with their faculty advisor.

The study findings are important and have implications for all physicians, not just pediatric residents, Li said.

Research has shown that once doctors complete their residencies, if they

do not continue to keep up with current advances in medicine, they quickly have a "knowledge base that is lower in terms of current treatment regimens for disease than more recent graduates.

"There is all of this wonderful new technology and there are all of these research papers being published all the time, and you'd love to be able to read them all. But there is such a large proliferation of biomedical advances that you have to figure out how to prioritize more than ever before," Li said. "Then you need to figure out how to incorporate the information into your practice."

Provided by University of California - Davis

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