

Digital Tattoo - A Workshop to Support Student Understanding of the Impact of Social Media Platforms

Time: 2:00 – 2:15 (1st Presentation)

Presenter: Patricia Gerber

Authors: **Patricia Gerber** University of British Columbia, **Alexandra Kuskowski**, University of British Columbia, **Kathleen Scheaffer** University of Toronto, **Lucas Wright** University of British Columbia, **Salma Abumeeiz** University of British Columbia, **Laura Atiyeh** University of British Columbia, **Emily Fornwald** University of British Columbia, **Ursula Ellis** University of British Columbia, **Eseohe Ojo** University of British Columbia

Background/Purpose:

Online communication tools and platforms for peer and professional connections are widely adopted by students across health professional programs. Programs and professional standards, guidelines, and codes, emphasize the importance of using social media in a responsible and respectful manner which embodies professionalism. However, there are limited pedagogical tools and strategies to highlight the importance of making informed decisions about aligning digital identities with the expectations for health professionals. This project aimed at addressing that gap.

Summary of the Innovation:

Following a literature review and consultations with students and faculty clinicians, we developed authentic case studies with companion questions and resources for use in a "Digital Identity Workshop" for 224 first-year Doctor of Pharmacy students. A facilitator guide was also developed. All materials were made publicly available using a Creative Commons CC-BY license for reuse by other institutions. The Workshop engaged participants in discussions regarding privacy risks, exercising ownership over data distribution, the impact of ethically questionable behaviour on patient care, and the reputation of health professionals. The case studies, activities, and resources aimed to support students' confidence in aligning their emerging professional identities with their existing digital identity. Pre- and post-workshop assessments were deployed to measure students' ability to navigate this terrain.

Conclusion:

Faculty, staff, librarians, and students collaborated to develop, implement, and evaluate a digital identity workshop for pharmacy students. In this presentation we will share our innovation, experiences, and strategies to help support other health programs' efforts to enhance student development of professionalism in online platforms.

Perceptions of Incoming Medical Residents About Their Role as a Teacher

Time: 2:15 – 2:30 (2nd Presentation)
Presenter: Wilson Luong

Authors: **Wilson Luong** University of British Columbia, **Kiran Veerapen** University of British Columbia, **Erica Amari** University of British Columbia, **Jennifer McKay** University of British Columbia, **Sharon Doucet** University of British Columbia, **Henry Broekhuysse** University of British Columbia, **Clarissa Wallace** University of British Columbia

Background/Purpose:

Incoming medical residents transition from being learners to both learners and teachers over a short time. This period is marked by increased responsibilities and provides an opportunity for reflection on their own educational experience and their perception of the teaching role. Early experiences impact the enactment of their role as teacher and the development of their identity and could be harnessed to inform further training.

Summary of the Innovation:

To equip incoming residents with an understanding of their teaching role and basic clinical teaching skills, the Office of Faculty Development has developed a mandatory online module which all incoming residents complete within six weeks of entry. This module forms the introduction to a longitudinal Resident as Teacher (RaT) program. Embedded within the module are reflective exercises about the qualities of memorable resident teachers and questions about their expectations of their teaching role. Since 2017, 1200 complete data sets have been collected and analyzed for emergent themes.

Conclusion:

The emergent themes are: 1) The top memorable qualities of resident teachers are being approachable, enthusiastic, and consistent, and these were some of the qualities they sought to emulate while they themselves began to teach; 2) 'Pimping', 'being crabby' and making the student feel stupid were the poor qualities they had experienced; 3) Residents felt that teaching would solidify their own knowledge but that they would be challenged by time constraints, lack of experience and not knowing how to address different levels of learners. These themes inform Residency Program Directors as they plan teaching opportunities and training for residents, and also inform the continuous development of the RaT program.

Moral Distress Among Critical Care Physicians: Implications for Medical Education

Time: 2:30 – 2:45 (3rd Presentation)
Presenter: Dominique Piquette

Authors: **Dominique Piquette** University of Toronto, **Aimee Sarti** University of Ottawa, **Franco Carnevale** McGill, **Karen Burns** University of Toronto, **Peter Dodek** University of British Columbia

Background/Purpose:

Moral distress and its consequences (burnout, attrition), are deleterious to health care workers, to patients and the health care system. We aimed to explore commonly reported causes and consequences of moral distress in ICU physicians, but also relationships with broader conditions and consequences related to ICU physicians' wellbeing.

Methods:

We conducted a national cross-sectional survey, including structured and free-text comments, to understand the magnitude, causes and consequences of moral distress as well as other wellness measures in ICU physicians in Canada. Inductive thematic analysis of the free text comments of survey respondents by an inter-disciplinary team of four investigators who have expertise in qualitative research.

Results:

Eighty-three of the 225 survey participants shared 135 written comments, which identified contextual and relational factors that contributed to either moral distress or work-related stress in the ICU. Certain factors appeared modifiable, whereas others were not under physicians' control. As these challenges drew upon limited ICU physicians' resources, cumulative stressors represented a threat to wellbeing, but also impacted physicians' relationships with other healthcare professionals, patients and relatives, and physicians' family members. Occurrence and consequences of moral distress varied across physicians. Many participants described their work as rewarding. These rewards combined with individual coping strategies helped ICU physicians face work-related stressors.

Conclusion:

Understanding moral distress among practicing physicians is important for medical education. Relational factors involved in physician's distress and professional rewards are more likely to be effectively targeted by educational interventions than contextual factors.

Who Are You? The Roles of Practice Remediators

Time: 2:45 – 3:00 (4th Presentation)

Presenter: Gisèle Bourgeois-Law

Authors: **Gisèle Bourgeois-Law** University of British Columbia, **Glenn Regehr** University of British Columbia, **Pim Teunissen** School of Health Professions Education, **Lara Varpio** Uniformed Services University of the Health Sciences

Background/Purpose:

There is little literature addressing the remediation of practicing physicians and even less investigating the unique role of practice remediators. As part of a larger program of research exploring social constructions of remediation in medicine, this study explored remediators' understanding of the remediation process through their stories of engaging with practicing physicians.

Methods:

Using experience-focused narrative research, we elicited the stories of nine clinicians in five provinces who had been asked by regulatory authorities to oversee the learning and practice of physicians with significant competence gaps. We analyzed their stories of particularly memorable remediation experiences using a hermeneutic approach. We explored the meanings that participants articulated about their work as remediators by iteratively reading their stories, examining the sense-making that participants achieved through these narratives, and identifying the roles and responsibilities participants described.

Results:

Participants' narratives articulated a wide range of roles, responsibilities and activities related to their remediation work. Remediators rhetorically positioned themselves as coaches and/or mentors. However, when engaging in remediation, they described practices and actions inconsistent with these roles, e.g. providing summative assessment for the regulator. Several people narrated poignant challenges for which they were unprepared.

Conclusion:

Ambiguities regarding the process of remediation manifested in our remediator participants as a lack of clarity, and some conflict, regarding their role when engaging with physicians requiring remediation. Faculty development might help, but more importantly, discussions regarding the nature and purpose of the remediation process are still needed across the profession.