

	Abstract Form
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Project Title:	Enhancing Clinical Training through Coaching: Resident and Student
	Perspectives on a Resident-Run Clinical Coaching Program for Internal Medicine
	Clerkships
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Abstract

Introduction: Inpatient medicine clerkships are a cornerstone of clinical training for medical students, yet individualized educational opportunities can be limited due to time constraints inherent to patient care. Residents are responsible for a significant amount of clinical teaching and direct observation of medical students, yet they receive few formalized opportunities to learn effective teaching strategies. Coaching is a distinct educational modality that is learner-driven and focuses on direct observation, facilitation of learner self-reflection, and self-directed growth. Clinical coaching adopts methodologies to create learner-driven sessions that focus on teaching critical patient care clinical skills such as obtaining a patient history, performing a physical exam, giving an oral presentation, writing notes, and developing clinical reasoning. The Resident-Run Clinical Coaching Program was designed to provide individualized educational opportunities to strengthen clinical training for medical students, while helping residents learn coaching skills. The purpose of this study was to identify student and resident perspectives on the Resident-Run Clinical Coaching Program to refine the program structure and content to optimize both residents' and students' educational experience. Methods: The Resident-Run Clinical Coaching Program was implemented in May 2021 that has since been incorporated as a core activity within the UCLA Internal Medicine (IM) Medical Education Pathway. Residents who participate in the pathway are scheduled for coaching activities during the academic year and are paired with DGSOM UCLA IM Clerkship medical students, while they are rotating at Ronald Reagan UCLA (RRUCLA) Medical Center. All RRUCLA IM clerkship students are notified of this voluntary program during their orientation, with an option to "opt-in" for a coaching session in a follow up email. They also complete a Qualtrics survey, in which they identify target clinical skills to focus on during a 90–120-minute, one-on-one coaching session. Coaches complete a pre-coaching Qualtrics Survey and are provided with coaching resources. After the session, coaches and students complete a post-coaching Qualtrics survey. Results: From May 2021 - May 2024, 62% of students who were scheduled for an internal medicine clerkship at RRUCLA Medical Center signed up for clinical coaching on a voluntary basis. We organized 95 coaching sessions, with 59 resident coaches and 95 medical student coachees. On the pre-coaching survey, 100% of residents agreed that medical students on inpatient wards would benefit from increased clinical coaching opportunities, with 89% of residents agreeing that they felt comfortable serving as clinical coaches. On the post-coaching survey, 100% of residents reported comfort with serving as clinical coaches. Ninety percent of residents agreed that this program improved their clinical coaching skills. Additionally, 95% of resident coaches agreed that residents would benefit from additional clinical coaching opportunities. All students who completed the post-coaching survey agreed that they felt more comfortable with their identified skill as a result of the coaching session. Additionally, all student survey respondents agreed that they were likely to sign up for additional 1:1 coaching experiences and agreed that they would recommend the program to other students. Conclusions: Our Resident-Run Clinical Coaching Program is a unique, learnerdriver opportunity that provides direct observation and additional education for medical students during their internal medicine clerkship. Furthermore, it provides residents an opportunity to expand their teaching skills in a focused environment. There was an 11% increase in resident-reported comfort in serving as clinical coaches for medical students on their inpatient clerkship, with 100% of residents reporting comfort in the post-survey. Additionally, the vast majority of residents agree that residents may benefit from additional clinical coaching opportunities. All students who responded to the post-coaching survey reported increased comfort in their self-identified skill as a result of the coaching session, and all indicated interest in additional coaching experiences. Future directions include enhancing our coaching curriculum for residents, expanding our coaching program to include different clinical sites and/or providing additional coaching sessions for interested coach/coachee pairs for a longitudinal coaching relationship.



