PURPOSE OF CHARTER
This document provides an overview of what we aspire to create in the Bridges Curriculum: a view of the future physician, important concepts to sustain and incorporate, and guiding principles for curriculum development.

VISION OF 21ST CENTURY PHYSICIAN
The UCSF Bridges Curriculum will prepare the 21st century physician to work collaboratively in promoting health and reducing suffering while continually improving our health care system. Our students will contribute to improving healthcare outcomes today while being educated to work within complex systems to improve health care tomorrow.

RATIONALE FOR CHANGE
Despite years of dramatic advances in biomedical science and over a decade of attention to the problems of quality and safety issues, progress towards achieving the IOM goals for high quality health care has been slow. Medical education is part of the problem. If medical education is to fulfill its social contract and work to ensure that all members of our society have access to care that is safe, timely, effective, efficient, cost conscious and patient centered, it is time for a major change.

ENDURING AND EMERGING COMPETENCIES NEEDED TO IMPROVE THE HEALTH OF PATIENTS, POPULATIONS AND DELIVERY SYSTEMS

Adapted from Lucey CR. Medical Education: Part of the Problem and Part of the Solution. JAMA Intern Med. 2013: July 25, E1-5.
GUIDING PRINCIPLES FOR CURRICULUM DEVELOPMENT

The UCSF Bridges Curriculum will enhance the acquisition of enduring knowledge and skills while integrating the emerging knowledge and skills that are critical to becoming a 21st century physician. The following foundational principles will guide the work of the curriculum steering committees:

IMPROVING HEALTH BY FOCUSING ON PATIENTS AND LEARNERS

1. **Grounding in Science and Patient Centered Care:** Students will learn, practice and continuously apply critical thinking and problem solving skills for patients and populations using foundational concepts derived from the biomedical, social, behavioral and systems sciences. Students will also learn to recognize the limits of existing knowledge, and be encouraged to participate in the discovery of new knowledge and its translation to clinical practice.

2. **Immersion in Authentic Workplace Learning:** Students will develop 21st century physician clinical, scientific and systems skills by participating in authentic, developmentally appropriate and longitudinally arranged workplace learning experiences from the beginning of medical school.

3. **Integration into Interprofessional Collaborative Care:** Students will learn, practice and demonstrate effective team-based and interprofessional collaborative practice skills across all settings.

4. **Formation of Professional Identity:** Students will embrace the identity of the 21st century physician and continuously identify and develop their own unique skills, contributions and leadership; while being supported by advising and mentoring.

5. **Advancement based on Competency Based Progression:** Students will demonstrate mastery of Entrustable Professional Activities (EPAs) through a competency-based progression, based on milestones for knowledge, clinical and systems skills, and professional attributes.

IMPROVING HEALTH BY FOCUSING ON SYSTEMS, INSTRUCTIONAL STRATEGIES AND DEVELOPMENT

6. **Engagement with Health Care Delivery Systems:** Students will be prepared to add value to and learn from clinical microsystems while minimizing faculty/staff burden during workplace learning experiences.

7. **Flexibility for Individualized Tracks:** Learners will have opportunities to pursue individualized and specialized tracks of study both through the admissions process (PRIME, JMP, MSTP) and following the start of training (Pathways to Discovery). In selected cases, students with prior training and demonstrated competencies will have the opportunity to combine a shortened course of study coupled to early entry into internship.

8. **Reliance on Technology and Sound Pedagogical Principles:** Students and faculty will employ technology to advance learning, assessment and curriculum management while also using research from the learning sciences to select, implement and study instructional and assessment strategies.

9. **Development of Faculty, Residents, Fellows and Staff:** Faculty members, residents, fellows and clinical partner staff members will be empowered to create and continuously improve learning environments and activities that improve patient care and support our students.