PROMOTING LEARNER ENGAGEMENT WITH THE TOBACCO CESSATION CURRICULUM IN THE SOM

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| Purpose | Our goal is to shift the SOM Tobacco Cessation Curriculum away from the traditional syllabus/lecture format towards the flipped classroom model by:  
|         | ▪ Replacing in-class didactic learning with independent learning modules featuring Khan Academy-style videos.  
|         | ▪ Using the large group presentation as a more interactive learning session that includes a case presentation and a mock-patient interview. |

| Background | Though progress has been made to address teaching tobacco cessation counseling in medical schools, various studies have shown that gaps still exist within undergraduate medical education, including a lack of integration of the material throughout all four years and training that addresses social and cultural issues. In addition, research has been done showing that interactive, patient-centered instruction is more effective than traditional, didactic learning in the teaching of tobacco intervention. Thus, there is a need for more innovative learning techniques that will improve our teaching of tobacco cessation. The “flipped classroom” replaces traditional lecture time with more engaging learning activities and allows students to learn the lecture material beforehand at home via instructor-created videos. Medical students are self-motivated and technically savvy, making them the perfect subjects for testing this model. |

| Methods | 1) Reviewed course evaluations of current curriculum and instruction provided by students from the past two years.  
|         | 2) Reviewed existing curriculum and existing tobacco cessation video content.  
|         | 3) Performed a literature review of tobacco cessation curriculum in undergraduate medical education and researched the flipped classroom model.  
|         | 4) Coordinated with the IPE team on the topic of tobacco cessation to share resources and brainstorm ideas.  
|         | 5) Outlined the curriculum and a timeline for our project with the help of our mentors.  
|         | 6) Created independent learning modules (ILMs) containing Khan Academy-style videos.  
|         | 7) Condensed former Pharmacotherapy ILM into a more concise learning module.  
|         | 8) Revised syllabus sections for large and small group sessions.  
<p>|         | 9) Met with faculty member who will be leading the large group presentation to plan the session. |</p>
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| 10) Developed assessment questions for required quiz.  
11) Designed questionnaire for future students to evaluate the new curriculum.  
12) Incorporated feedback from peers and mentors.  
13) Finalized and posted products onto the CLE. |   |

**Evaluation Plan**

To evaluate this project, we will be asking the current second year medical students who take this course to review their experiences with the ILMs and large group presentation via an online questionnaire that is posted to the CLE. In addition, the new curriculum will be evaluated by second year students participating in a focus group run by the department of Technology Enhanced learning.

**Dissemination**

In addition to using this material for second year medical students, we plan on disseminating the modules to the UCSF Interprofessional Education team, Stanford School of Medicine, and the Khan Academy.

**Reflective Critique**

We received feedback on a weekly basis from our primary advisor, and his help was particularly important in polishing the final products. In addition, we received feedback twice from the CA program leaders and our CA peers after giving presentations on our project. Furthermore, we had individual peers and faculty members review the actual content of the ILMs and quiz questions. Lastly, we are awaiting student evaluations that will be completed following the M3 course.