



Transforming Educational Strategies on a Dime

by Adina Kalet, MD, MPH

The COVID-19 pandemic has hit our economy hard. On our own campuses, saving and protecting lives has caused unprecedented revenue shortfalls within our community, to our hospitals, and to the Medical College of Wisconsin. Ironically, just when health care provision, education, and research are needed most, our work is threatened. Those on the “front line” of the pandemic deserve hazard pay for taking on risks for the rest of us, yet our staff is facing salary reductions and furloughs. Along with many of our peer institutions, MCW is implementing a financial austerity plan. We have hit a very rough patch and more changes are coming. Our futures are uncertain. People are scared. In this context, the Kern Institute is working to be good citizens by aligning emerging needs with our resources.

Finding Opportunities

Historians point out that even devastating crises offer opportunities to societies*. We have already seen unprecedented innovations in the face of immediate problems. Unable to deliver required clinical rotations faculty and students are co-creating ways to fill curricular gaps through telehealth and service learning. New levels of collaboration and cooperation among medical schools and with accreditors have broken-down traditional silos, suddenly changing systems and shifting long-held policies. We must leverage these transformative opportunities for the better. If we work together to retain our senses of mission, purpose, and meaning, we will increase our individual and organizational well-being and resiliency.

Pivoting to Transform Education

In our pre COVID-19 lives, the Kern Institute had been working to clarify our philosophy of medical education transformation. We have referred to this as our “topology of transformation,” seeking to best understand why we are doing what we are doing. By thinking, dialoging, reading, and writing, we wrestled with uncovering which experiences are essential as a student transforms into the “good physician.” Then, and only then, would we allow ourselves to talk about the instructional or pedagogical evidence that drives the design and implementation of programs that achieve this transformation. For most of us, especially impatient physicians, it takes discipline not to jump into the “doing” too soon.

Suddenly, COVID-19 Arrived and Things Changed.

Plato is credited with the phrase, “Necessity is the mother of invention,” sometimes translated more literally as, “our need will be the real creator.” While I prefer the more feminine flourish, there is no doubt that now is the time when innovation is needed most.

Over the past few weeks, Kern has pivoted to assist MCW’s rapidly transforming educational programs in response to immediate needs and we are designing ways to streamline and sustain the best of these changes. The virtual Night on Call I described last week is one good example. We are collaborating with partners in Academic Affairs and Student Affairs to support well-being, prepare students to meet their graduation requirements, provide meaningful clinical experiences, sustain and strengthen MCW’s long-term investments in diversity and inclusion, and speed the design and implementation of a dynamic, state-of-the-art fully virtual curriculum.

These are historic times globally and locally. As we adapt our educational work to the new reality, we will study the outcomes, learn from our successes and shortcomings, and look for the new topology of transformation.

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[*https://www.brookings.edu/research/sometimes-the-world-needs-a-crisis-turning-challenges-into-opportunities](https://www.brookings.edu/research/sometimes-the-world-needs-a-crisis-turning-challenges-into-opportunities)

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