Abstract Type: Original Research
Michael G. Richardson, M.D.
Vanderbilt University School of Medicine

Introduction: Learning is a social phenomenon. Increasingly recognized are the vital roles that case discussion, peer teaching, & collaborative learning play in development of deep, conceptual understanding (Cooke 2010). This study examines resident perceptions of educational effects of Case Based Assessments (CBAs) conducted in group format.

CBAs involve selecting a complex case of one’s own, generating detailed learning objectives, collecting & synthesizing relevant evidence, & a 1-hour presentation to 2 faculty assessors who interact & probe in order to evaluate understanding of case management, relevant concepts, alternatives, “what if’s”, etc. Piloted in 2006, CBA was implemented for OB anesthesia residents in 2009. Two modifications: Fall 2009, individual “pre-CBA meetings” to review/guide case selection & to ensure substantive learning points; Spring 2010, switch from “solo” to “group” CBAs (sessions conducted with all 3 residents present). 66 CBAs were conducted from Apr 2009 - Dec 2010.

Methods: E-mail request sent to current residents & graduates (with contact info). Anonymous survey evaluating CBA experience: 11 open-end questions + demographic data. Survey period: Nov 5 - Dec 15, 2010. Data were analyzed after survey period concluded. Analysis included thematic coding of responses & identifying dominant themes. Analysis was facilitated by qualitative data management software (NVivo9, QRS Internat’l).

Results: Survey completion rate: 26/32 (81%). CBA experience included “solo” only (11/26, 42%), “group” only (6/26, 23%), both (9/26, 35%). Nearly all (8/9) who experienced both group & solo sessions preferred group. Expanded learning & peer teaching/learning were dominant themes identified by those who experienced at least 1 group session (15/32) (table). Those who had not participated in group were mixed about the idea: 4 positive, 3 negative, 2 ambivalent. The faculty’s role as mentor, discussant, and assessor, and the collegial, non-threatening, formative feel/climate of group sessions were identified as important positive factors.

Conclusion: Some residents with no “group” experience cited potential drawbacks, while others, & all residents with “group” experience, cited many benefits (expanded learning, peer teaching/learning, diverse perspectives) of group CBAs, consistent with known beneficial effects of group/collaborative learning.