A Systems Approach to Health Professional Education Reform

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Well Being

Health

Health Care
Dilemmas

• We are educating students for practice in a health system that no longer exists
• Health system redesign is forcing
  – Development of integrated care models
  – More attention to populations and communities
• System redesign and educational reform are poorly aligned
The “Triple Aim”

- Health Outcomes
- Experience of Care
- Per Capita Cost
Integrated Health

- Caring about persons, communities and populations
- Cross-sectorial engagement
- Learning that emphasizes shared workplaces
- High functioning interprofessional teams
- Continuous quality and performance improvement
- Cost control
IOM Consensus Study

• Conclusions
  – Systems Alignment
  – Conceptual Model
  – Study Design & Reporting

• Recommendations
  – Learning Outcomes
  – Health & System Outcomes
Enabling or Interfering Factors

Foundational Education
Graduate Education
Continuing Professional Development

Reaction
Attitudes/perceptions
Knowledge/skills
Collaborative behavior
Performance in practice

Learning Outcomes

Health and System Outcomes

Individual health
Population/public health
Organizational change
System efficiencies
Cost effectiveness

Professional culture
Institutional culture
Workforce policy
Financing policy

Learning Continuum
(Formal and Informal)
Systems Changes

• Enhanced alignment between education and health delivery systems
• Joint investment by the academic and practice communities
• External support from private foundations based on potential societal benefits
• Infusion of public funds based on documented societal benefits
• Broad-based, cross-professional public financing of health professions education
Three Generations of Reform

1900

Science based

Problem based

Systems based

2000+

Instructional

Scientific curriculum

Problem-based learning

Competency driven: local-global

Institutional

University based

Academic centres

Health-education systems