

Improving **Engagement**
and **Performance** through

DISEASE-STATE EDUCATION

Disease State Education (DSE)

- Introduction
- Rationale
- **What does it take?**
- How do we assess?
- Workshop

Disease-state education

- In the context of training, an education program is a vital intervention with a targeted structure of education with an direct and positive effect on learners' confidence, knowledge, and ability to perform tasks.
- Creating a fundamentally low-risk environment using adult learning principles to provide effective learning related to anatomy, pathophysiology, diagnosis, and treatment of disease.
- A learner-centric framework that tracks participants' knowledge and mastery of unique learning objectives to help discover areas of strength and those that might require further training.



Disease-state education

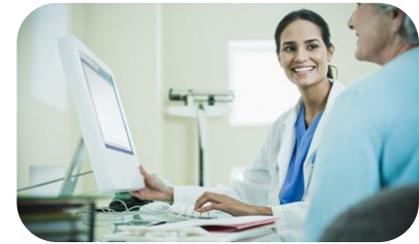
- The core contents, goals, and methods are incorporated into the material or tools that the participants are provided
- The curriculum utilizes the latest evidenced-based guidelines, clinical information and individualized goals for patient treatment



Informed HCP



**Improved
Treatment**



**Better Patient
Outcomes**

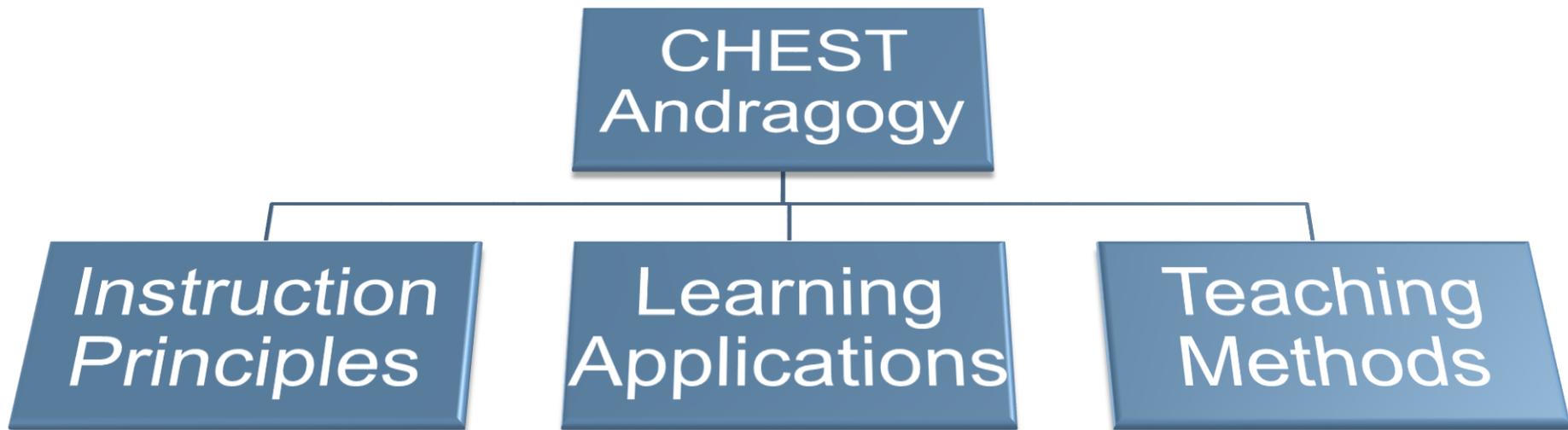
Creating Disease State Education (DSE)

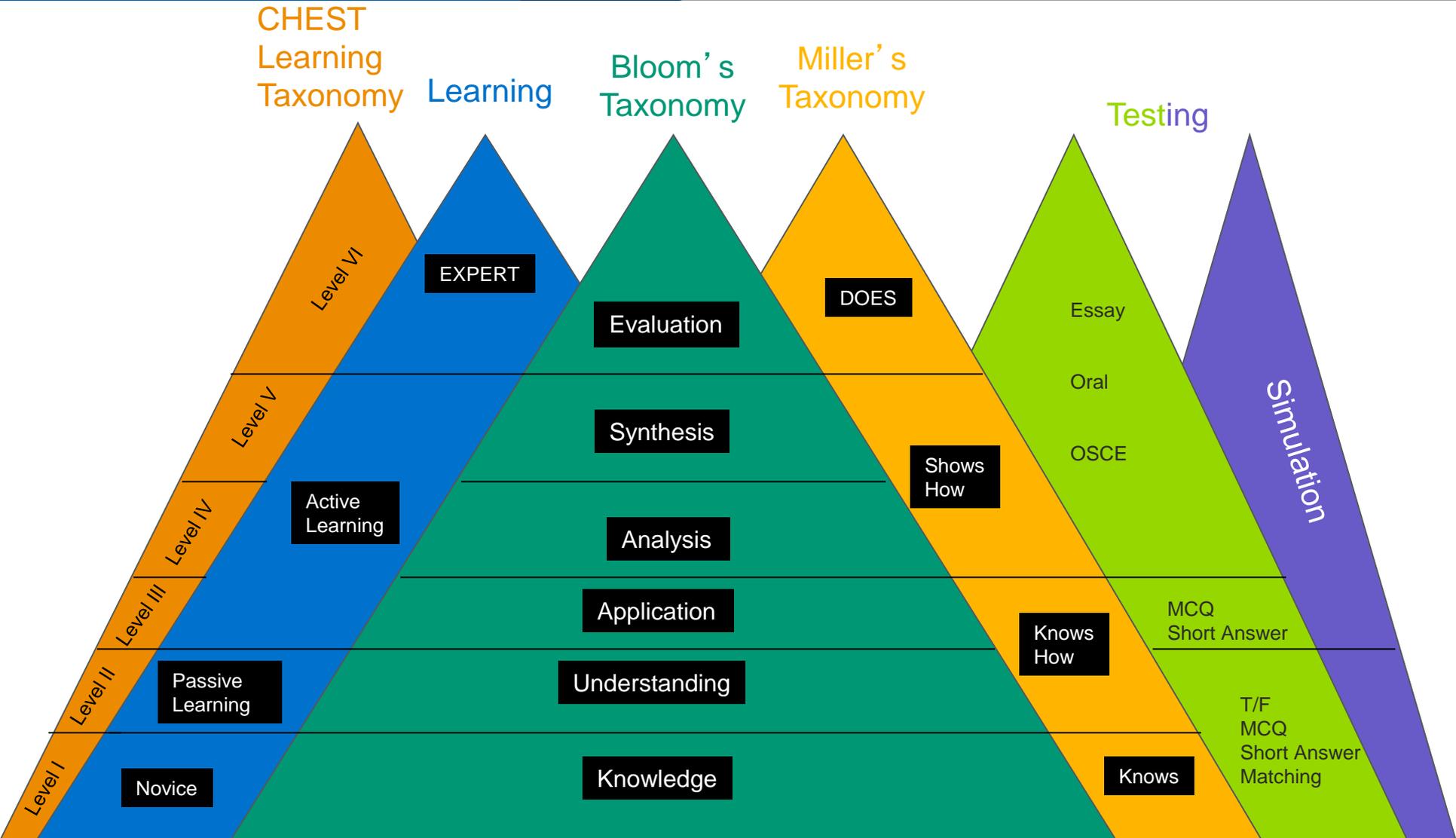
Clinical factors common to all DSE Programs that should be included:

- Identifying the Disease
- Underlying risk factors to the patients
- Diagnosis
- Testing
- Treatment
- Long-term care

Best Practices

How does CHEST facilitate teaching and learning?





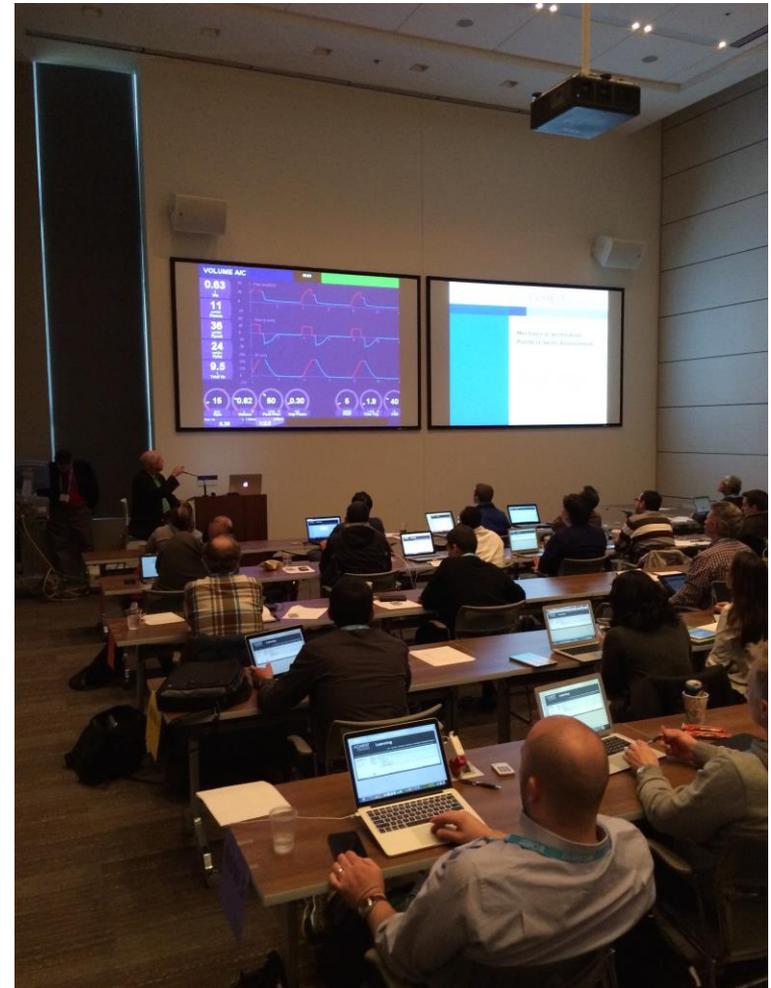
Learning Categories

From the CHEST Guideline on CME from 2009, showing the least effective educational offering to most effective:

- Level 1 – Didactics
- Level 2 – Self Study
- Level 3 – Evidenced based medicine
- Level 4 – Case-based education
- Level 5 – Simulation
- Level 6 – Performance Improvement

Category I: Lecture-Based

- Traditional teaching methodology of a lecture.
- Lectures encompass a presentation on a disease state or health-care system subject, given in order to teach about that subject.
- Lectures convey critical information regarding the history, background, theories, and statistical data from clinical trials and/or other forms of medical research.

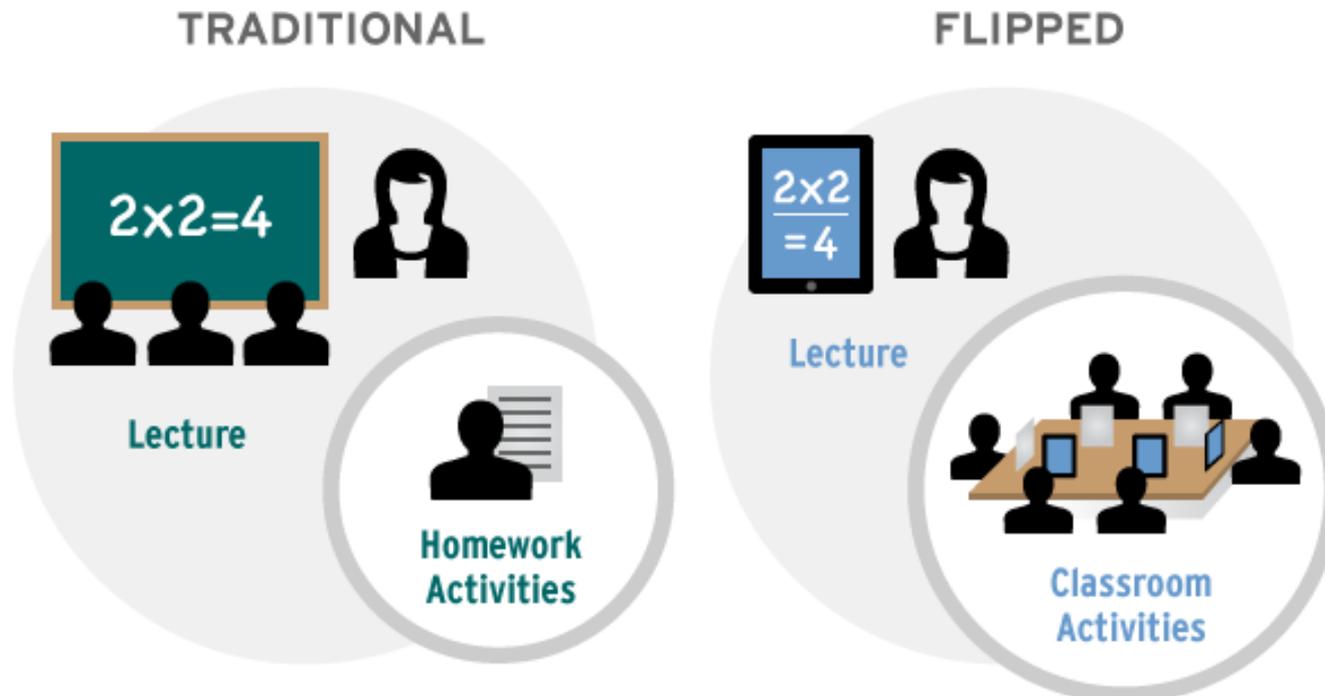


Category II: Self-Directed

- Rapid change in the environment, the continuous creation of new knowledge, and ever-widening access to information in chest medicine create an increasing need to have access to information.
- Several things are known about self-directed learning:
 - Individual learners can become empowered to take increasingly more responsibility for various decisions associated with the learning endeavor
 - Self-direction is best viewed as a continuum or characteristic that exists to some degree in every person and learning situation
 - Self-direction does not necessarily mean all learning will take place in isolation from others
 - Self-directed learners appear able to transfer learning, in terms of both knowledge and study skill, from one situation to another
 - Self-directed study can involve various activities and resources, such as self-guided reading, participation in study groups, internships, electronic dialogues, and reflective writing activities
 - Effective roles for teachers in self-directed learning are possible, such as dialogue with learners, securing resources, evaluating outcomes, and promoting critical thinking
 - Using more open-learning programs, individualized study options, non-traditional teaching methodologies to complement learning.



'Flipped classroom' or 'Blended Learning' approach

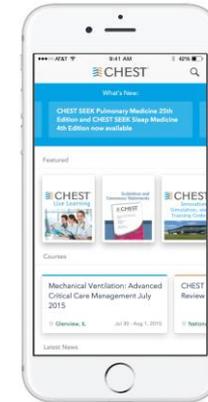


Learners explore concepts online through videos and articles and then discuss and apply them in class

Learning Categories

Category III: Evidence-Based

- Emphasizing the direct examination of evidence from clinical research to support clinical decision making, evidence-based medicine has been proposed as a “new paradigm” for the practice of medicine.
- This approach requires unique skills of the physician, including the abilities to articulate a focused clinical question, efficiently search the literature, apply rules of evidence to clinical studies, and interpret the results for an individual patient.



Guidelines Methodology Online Course

Module 1 - Guideline Development Overview



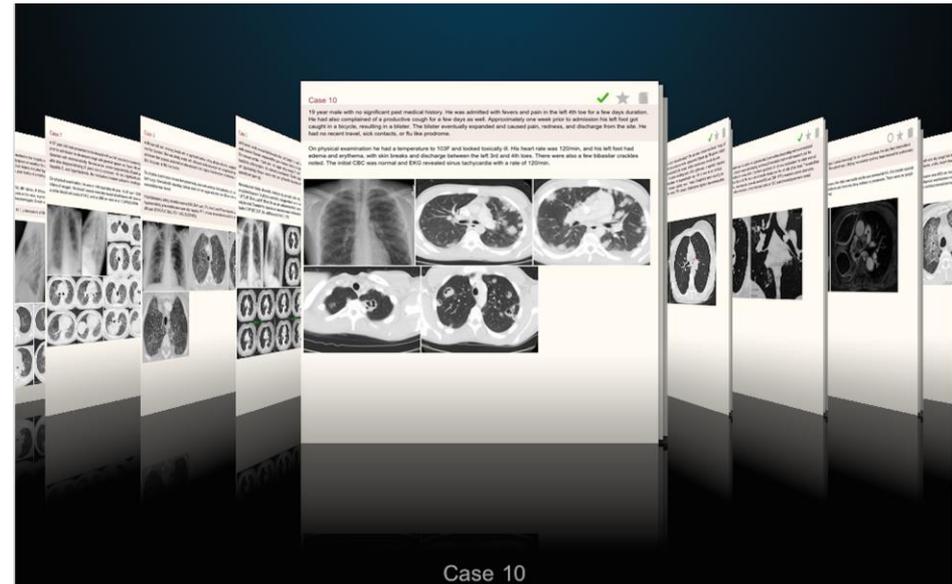
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Learning Categories

Category IV: Case- and Problem-Based

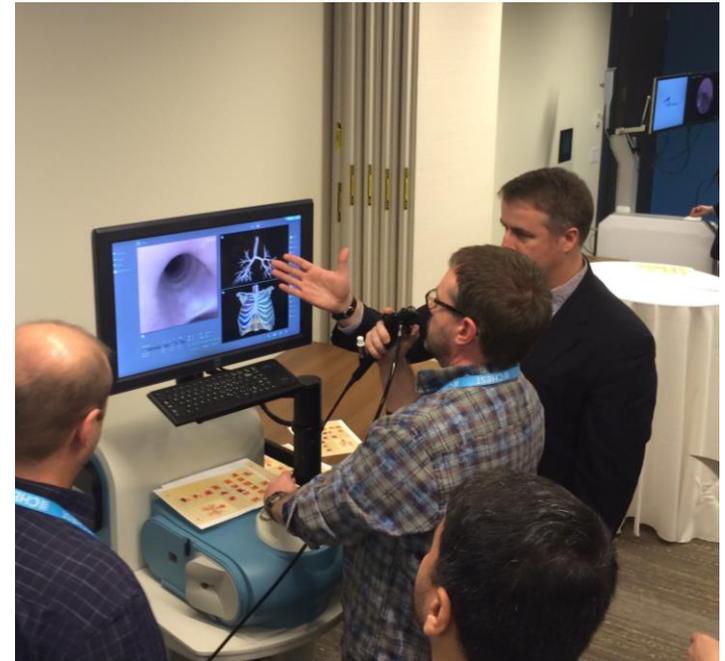
- Case- and problem-based learning is a total approach to education.
- Problem-based learning is both a curriculum and an educational process.
- The curriculum consists of carefully selected and designed clinical problems that demand from the learner acquisition of critical knowledge, problem-solving proficiency, self-directed learning strategies, and team participation skills.
- The process replicates the commonly used systematic approach to resolving problems or meeting challenges that are encountered in life and career.



Learning Categories

Category V: Simulation

- Simulation is an instructional strategy that artificially replicates an event or process by assuming sufficient qualities that resemble reality that can achieve a measurable learning goal for individual(s) who participate in the experience.
- Types of simulation might be mannequin-based or standardized patient-based.
- Simulated environments are extremely effective in measuring what someone would actually do in a situation, as opposed to what they say they would do.
- Our approach provides the learner with an environment that may be even more conducive to learning than the real workplace.



Learning Categories

Category VI: Quality Improvement

- Evaluations of quality improvement interventions are an important source of how specific interventions work and how they should be used or implemented in health-care organizations.