Running head: KELSOE AND FALLON CASE STUDY

Fallon and Kelsoe Case Study

Team C

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This paper provides input and recommendations to an instructional design for a new web-based program targeted for training physicians, nurses, and health professionals at the pediatric clerkship at State Medical University. The paper will approach the instructional design proposal by following the ADDIE model for the analysis, design, and development of the new program. The ADDIE model will provide a structured format to help make recommendations for the new program. As part of the analysis phase a needs assessment will identify and briefly outline gaps in the current program and performance-based objectives. Team C will present recommendations for the design and development of the new program to resolve the gaps in the current program, align instruction with the performance-based objectives, and make specific recommendations for how to modify the current program. As part of the recommendations, an estimated cost of the new program will assist the leadership at State Medical University in making a final decision on the benefits of changing to the new web-based program. Finally, to validate the new program, the team will provide formative assessments.

Analysis, Design, and Development

The planning team has determined that the current teaching design continues to have a strong foundation, but requires enhancements to the scope and sequence for areas no longer addressed, due to the changing dynamics of medicine. Broad exposure to a variety of medical problems has slowly declined as improvements within the field of medicine have decreased the need for extended hospitalization.

 Areas identified as strengths of the current plan include the expertise of the physicians and teachers and the increased exposure to children’s medical issues through the pediatric internships. Areas requiring enhancements or new procedures include increasing standardized learning experiences of interns, increasing exposure of interns to more variety of medical techniques, and training instructors to incorporate teaching techniques that will encourage the interns to share and learn from each other’s experiences rather than straight lecture.

 The design of the team’s new plan will continue with internships at the pediatric facilities. It will continue the weekly group instruction, but modifications needed to improve instructional techniques will provide variety aimed at making lessons more interactive; thereby, encouraging students to participate actively in the learning process. New elements of the design will increase exposure to variety and severity of medical issues through interactive simulations.

 Dr. Jean Fallon and Dr. Pat Kelsoe will be primary facilitators of the team. They will send out weekly updates to all members and schedule meetings as needed to ensure continued progress. Dr. Fallon will bring in trainers to increase the instructors’ knowledge and understanding of performance-based techniques working to reinforce learning and increase benefits for students. Dr. Fallon will work on writing the grants required to help cover the expenses of the new training model. Dr. Kelsoe will pull together a team of interns to assist her in authoring the interactive, instructional simulations and will rely on the physicians and teachers to proof the training materials, ensuring quality and accuracy.

 Each team member will assist in the primary goal of developing and implementing a system of evaluation and documentation of progress of the program in a manner that will meet requirements of the grants and keep the standards current with today’s technology. The team’s secondary goal is that the program design, implementation, informative data collection, and summative evaluation will fulfill the new requirements for meeting tenure.

Overcoming Resistance to Change

Today, change is constant. “Organizations regularly go through significant changes - using new practices, adjusting to new requirements or competitive conditions, adopting new technologies” (Epling, Morrow, Stuphen, &Novick, 2003, p. 114). Implementing change typically involves altering one’s knowledge, skills, and attitudes. At State Medical University, the proposed changes to the training program are no exception. Our team observed resistance to change by Dr. Sam McConnell, senior faculty leader, who was asked to participate on the program’s planning team. Dr. McConnell demonstrated his reluctance by reminding the planning team of the current program’s success and stellar reputation. McConnell expressed concerns about costs and time commitments, but once he fully understood what his role would be, he became receptive to the proposed changes. “Human beings are reluctant to change their perceptions and ideas to accommodate the facts” (Kirby & Goodpaster, 1999, p. 27), particularly when there has been a miscommunication or lack of information.

Gaining acceptance from others, such as the President’s Office, faculty, and industry, will require a well-designed plan and the ability to present the proposed changes well. Communicating project details, including the long- and short-term benefits and costs, to faculty members and responding to their feedback is essential in helping them accept and promote program changes. Recruiting the faculty’s help with the redesign will reassurefaculty members that their expertise is essential to the success of the new program.

Team Perception

The short amount of time that third-year residents spend in pediatrics limits the cases that these students will encounter. Ourteam believes web-based scenarios will expose these students to more cases and this will benefit pediatric patients because the residents will have a more rounded education. In our research, we found that many nursing schools, pharmacy programs, and other health care related training programs use web-based scenarios to expose students to more increased varieties of situations than a traditional clinical setting. Web-based case studies reduce the number of faculty members needed to teach in the clinical setting thus reducing personnel costs for medical universities (Epling, et al., 2003, p. 88). Based on the increased exposure to a variety of scenarios and the reduced cost of personnel, our team believes this program would be successful.

Conclusion

While the pediatrics department at State Medical University is one of the top 10 in the nation, learners receive minimal training in pediatrics. Under Dr. Fallon’s direction, a project team is tasked with redesign of the pediatric clerkship training program. The team will follow ADDIE principles as they research, analyze, design, and develop a new web-based case studies program that will give learners more in-depth exposure to real-life cases. Considerations of the proposed changes include the costs versus benefits and a concern that incorporating too much technology into the new program could be an inappropriate use of resources. The potential for receiving a grant is high, and if received, that funding will help offset costs, and there are many advantages of adding an interactive, web-based program to the curriculum. An additional challenge needing attention is gaining faculty members’ support of the new program. People are often reluctant to accept change until they learn all the facts and can make informed decisions. Educating the faculty about project details and allowing them to have input will help move the new program forward.

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