

## Communicating Your Program's Goals and Objectives

Patricia B. Mullan, PhD

Monica L. Lypson, MD, MHPE

### The Challenge

The Accreditation Council for Graduate Medical Education (ACGME) requires programs to develop goals and objectives for each educational level and distribute them to residents and faculty in written or electronic form,<sup>1</sup> and specifies that these learning objectives “must be accomplished through an appropriate blend of supervised patient care responsibilities, clinical teaching, and didactic educational events.”<sup>1</sup> These requirements reflect an understanding that explicit goals and objectives contribute to the planning, conduct, and evaluation of programs that prepare residents able to practice independently at the completion of training. The purpose of this article is to provide program directors with operational definitions, medical education examples, and features contributing to the quality of educational goals and objectives.

### What Is Known

*Goals, objectives, and competencies* are terms with specific meanings used to communicate expectations for educational programs. The ACGME directs programs to communicate effectively about each of these components, such that learning expectations are transparent, explicit, and predictable to residents, faculty, and accrediting agencies. A classic format for behavioral objectives is Bloom's taxonomy.<sup>2,3</sup> More recently, entrustable professional activities<sup>4</sup> and intended learning outcomes<sup>5</sup> have been added for communicating desired expectations to learners. Definitions and examples are provided in TABLE 1.

### What Can You Start Today?

1. Have faculty and residents review the written curriculum to guarantee that the goals and objectives make sense and are attainable within the constraints of the program.
2. Discuss with faculty and residents how often and in what way your objectives are actually used. What would make them more practical or useful?
3. Post pertinent objectives for residents at different training levels where the residents easily can review them: on the wards, procedural areas, or outpatient settings.
4. Revise learning objectives by using action verbs (TABLE 2).
5. Elicit from faculty a list of their top 5 expectations for trainees. These expectations should specify what trainees should be able to know and do at the end of a period of learning. Frame these within the 6 general ACGME competencies.

6. Elicit from faculty major professional care responsibilities that, when demonstrated by residents, are evidence that trainees are ready to practice independently (“entrustable professional activities”).
7. Review assessment tools in terms of how they reflect your goals and learning objectives.

### What Can You Do Long-Term?

1. Before a Residency Review Committee visit, the internal review process should examine your curriculum in detail.
2. Make your curriculum a living document that you refer to and update continuously.
3. At least once annually, obtain trainee feedback about the accuracy and utility of the learning objectives.
4. Schedule faculty development workshops for core faculty that focus on learning objectives and behavioral change, as well as new concepts in curriculum implementation.
5. Evaluate your current objectives. Where do they lie in the context of the cognitive taxonomy (level of acting on knowledge, shown in TABLE 2)? Are higher-order category objectives used for more advanced trainees? Would some of them serve better as entrustable professional activities?<sup>4</sup>
6. Contact your specialty organization for national curriculum guidelines.
7. Develop relationships with local education specialists, for assistance in reviewing your curriculum.

### Writing Clear Goals and Objectives

- Goals
  - Do these broad statements of what the program is intended to achieve align with the program's mission, board certification performance, and alumni careers?

#### BOX RIP OUT ACTION ITEMS

Program directors must

1. Distribute program goals to residents and faculty annually
2. Ensure goals are reviewed during the annual program evaluation
3. Ensure goals and objectives make sense to residents and faculty
4. Develop “Goals & Objectives” for each level of training (by year, experience, or rotation)

Patricia B. Mullan, PhD, is Professor, Department of Medical Education at University of Michigan School of Medicine; Monica L. Lypson, MD, MHPE, is Associate Professor, Departments of Internal Medicine and Medical Education at University of Michigan School of Medicine.

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Term	Definition	Example
Educational goal	Broad statements of the purpose an educational program or curriculum <i>hopes</i> to achieve <sup>6</sup>	For a preventive medicine residency: “to expand the cadre of physicians who have the skills to understand and reduce the risks of disease, disability, and death, both in individuals and population groups.” <sup>7</sup>
Educational/behavioral objective	Statement provided to learners that describes what they are expected to learn and how they will demonstrate their learning	By the second year of training, identify predictable barriers to quality improvement on an inpatient ward. <sup>8</sup>
Competency	Ability to perform successfully	The ACGME general competency areas include patient care, medical knowledge, interpersonal and communication skills, practice-based learning and improvement, and systems-based practice.
Entrustable <sup>4</sup> professional activity <sup>2</sup>	Important care responsibility within a specialty that a resident can be trusted to perform	Do you entrust to this obstetrics resident’s care uncomplicated pregnancies? Normal deliveries? Surgery estimated as low risk?

ACGME, Accreditation Council for Graduate Medical Education.

## • Objectives

### ○ Do these statements of what trainees will learn ...

- Use action verbs that specify observable behavior? Identify when the learning should be achieved?

- For example, “*understand* quality improvement” does not communicate an observable behavior, whereas “identify predictable barriers to quality improvement on an inpatient ward by the end of the second year of the program” does.<sup>8</sup>
- In addition, this objective’s inclusion of a specific time point satisfies the ACGME’s expectation that objectives

identify time-specific milestones and progressive levels of responsibility for trainees.

- Use action verbs in the context of Bloom’s cognitive taxonomy<sup>2,3</sup> (TABLE 2), the most widely used cognitive category system for classifying the level that learning objectives represent?
- Link the objectives to expected competencies?
  - For example, “perform chart audits using national benchmarks to identify possible explanations for deficiencies associated with physician, patient, or system factors”<sup>8</sup> is an objective linked to the ACGME’s practice-based learning competency.

Bloom’s Cognitive Taxonomy (Anderson and Krathwohl revision) <sup>2-3</sup>		
Cognitive Category	Description: Ability to...	Useful Verbs for Objectives
Remember	Recall previously learned material	Define, list, recall
Understand	Grasp meaning, explain, restate ideas	Classify, describe, discuss, explain, identify, locate, select
Apply	Use learned material in new situations	Choose, demonstrate, illustrate, interpret, solve
Analyze	Break information down into its component elements to determine how the parts relate to each other and to an overall purpose or structure	Compare, contrast, differentiate
Evaluate	Judge worth of material against stated criteria	Defend, support, evaluate
Create	Put together existing ideas to form new whole, establish new relationships	Construct, design, develop, generate

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