Appreciative Inquiry:
a Strategy For Evaluation of a CBME Pediatric Antimicrobial Stewardship Curriculum

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J’ai (ou j’ai eu) une affiliation (financière ou autre) avec une entreprise pharmaceutique, un fabricant d’appareils médicaux ou un cabinet de communication.

Merck

Pfizer
CBME curriculum for Antimicrobial Stewardship (AS) for infectious disease and medical microbiology trainees

Royal College accreditation changes

Entrustable Professional Activities

CDC Core Elements for hospital based Antimicrobial Stewardship Programs

Rennert-May et al. development of a competency based medical education curriculum for AS. JAMMI. 2018
https://www.cdc.gov/antibiotic-use/core-elements/hospital.html

**Purpose**
- Needs Assessment completed
- Milestones across competency continuum
- CanMeds roles mapped competencies

**Inputs**
- EPA’s generated by the CDC elements of ASP

**Activities**
- Didactic AS teaching
- Prospective Audit and Feedback initiative
- AS interactive cases session
- AS metrics applied session

**Outputs**
- Stakeholders presentations
- Business case write up
- Antimicrobial utilization reports generated

**RC** requirements for new AS curriculum

**EPA**:
- Entrustable Professional Activities
- Royal College

**CDC**:
- Center for Disease Control

**ASP**:
- Antimicrobial Stewardship Program
## Curriculum for AS

<table>
<thead>
<tr>
<th>CDC</th>
<th>EPA</th>
<th>Where to teach</th>
<th>Output</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Action:</strong> Implementing at least one recommended action</td>
<td>Manage implementation of one or more AS measures at a specific site</td>
<td>Daily Prospective audit and feedback of all antimicrobial starts for rotation</td>
<td>AS team with pharmacy, ID staff and intervene on CTU and PICU rounds</td>
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RC: Royal College

AS: Antimicrobial Stewardship Program
CDC: Center for Disease Control
EPA: Entrustable Professional Activities

Acad Med 91(10) October 2016
Appreciative Inquiry: collaborative, strengths based

"best of what is"

Discover

“what will be”

Destiny

“what could be”

Dream

“what should be”

Design

coachingleaders.co.uk/what-is-appreciative-inquiry
Discovery
What have been your best experiences?
What do you value?
What is working well?

Dream
What would the ideal future situation be like?

Design
What do we need to do to realise that future?

Destiny
What can we sustain what we are doing?

Evaluation:
Continue Doing, Do More, Start Doing

Share stories of similar rotations

Ideal situation for an AS rotation, focus on Do More, Start Doing

Discuss Priorities

Work on implementation plan: Outcomes and Logic Model
### Applying AI as an evaluation tool to the CBME AS curriculum: Outcomes results

<table>
<thead>
<tr>
<th></th>
<th>Continue doing</th>
<th>Do more of</th>
<th>Start doing</th>
</tr>
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<tbody>
<tr>
<td><strong>Short term outcomes</strong></td>
<td>Detailed tailored schedule for trainees for the rotation</td>
<td>More presentations to stakeholders</td>
<td>Incorporate pediatric case discussions in rotation</td>
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<tr>
<td><strong>Medium term outcomes</strong></td>
<td>Maintain close working relationship with pharmacy</td>
<td>Feedback on AS interventions to pharmacists</td>
<td>Protection of time for trainee on AS rotation and therefore highlight importance of this aspect of ID training</td>
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<td><strong>Long term outcomes</strong></td>
<td>Faculty 1:1 involvement Long term pharmacy involvement Value-added trainees contribution</td>
<td>Respect for trainees contribution by looping them into hospital based outcomes</td>
<td></td>
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</tbody>
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*Long term outcomes: Using data from the curriculum to integrate AS education and AS programs at our hospital*
Conclusions

AI is a novel and potentially useful tool to enrich program evaluation and development in the era of CBD

• May be a way to get to the outcomes of an educational program: optimized relationship between givers and receivers of feedback

• Positive feedback on process from residents and faculty alike