Challenges of Complete Transformation from Block to a Longitudinal Integrated Clerkship Model

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Established in 2011 as part of U of T Faculty of Medicine
Urban location – West Greater Toronto
Based on 2 tertiary hospitals
54 Students
Block Model
Majority of faculty new to their role as educators
Very few post-graduate trainees
LInC at MAM

• Why
  – Already a preceptor-based learning environment
  – Majority of preceptors are involved from year 1 to clerkship
  – Easy access to health records because of consolidated IT system

• When & How
  – September 2017
  – Pilot project of 9 students
**LInC at MAM**

- **What happens after the pilot project?**
  - Expand the LInC capacity further
    - May cannibalize the block preceptors
    - Two separate administrations
    - Increased cost
  - Complete transformation to LInC
    - Curriculum change requirements
    - Candidates should be notified in advance – Feb 2018 applicants/class of 2022
    - Need to address students who do not do well in LInC model
Questions

• Are there any medical faculties with an all-in model? Or started with an all-in model?
• Would an all-in model cater to all students? Does it matter?
• What is the capacity threshold after which a 2-model format is not sustainable?