



Weill Cornell Medicine

Writing Outcomes and Objectives: A Faculty Roadmap

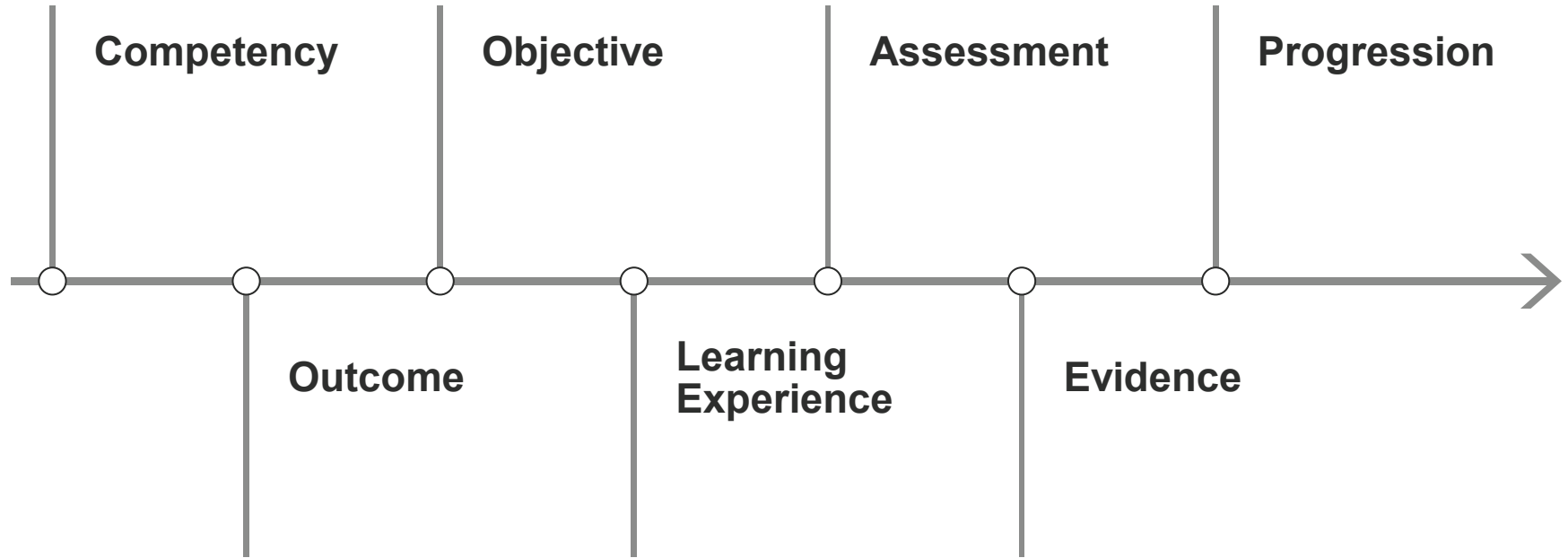
From Competencies to Assessment, Alignment, and Mapping
A Competency-Based Medical Education Tutorial for Faculty

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Welcome: Why This Matters



Curricular Architecture

A Phase-Based Hierarchical

Program

Phase

Course

Unit

Session

Best for showing progression from broad program expectations to specific session performance.

B Block / Course

Program

Block

Course

Session

The block functions as the major integrative curricular level.

C Module-Based

Program

Module

Session

The module represents a discrete, coherent capability rather than a list of content.

D Longitudinal Competency Strand

Program

Strand

Milestone

Experience

Session

A professional capability is developed repeatedly across time and settings.



Competency-Based Medical Education

Traditional Model

Content →
Lecture →
Objective →
Exam

CBME Model

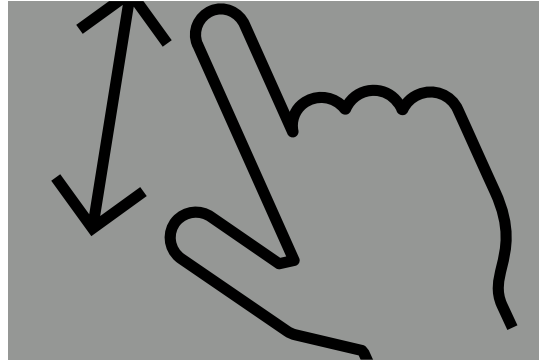
Practitioner →
Competency →
Outcome →
Objective →
Learning →
Assessment →
Measurement

Knowledge, Skills, and Attitudes & Behaviors



Knowledge

What they know.



Skills

What they can do.



Attitudes & Behaviors

How they act.

Competence emerges when these domains work together.

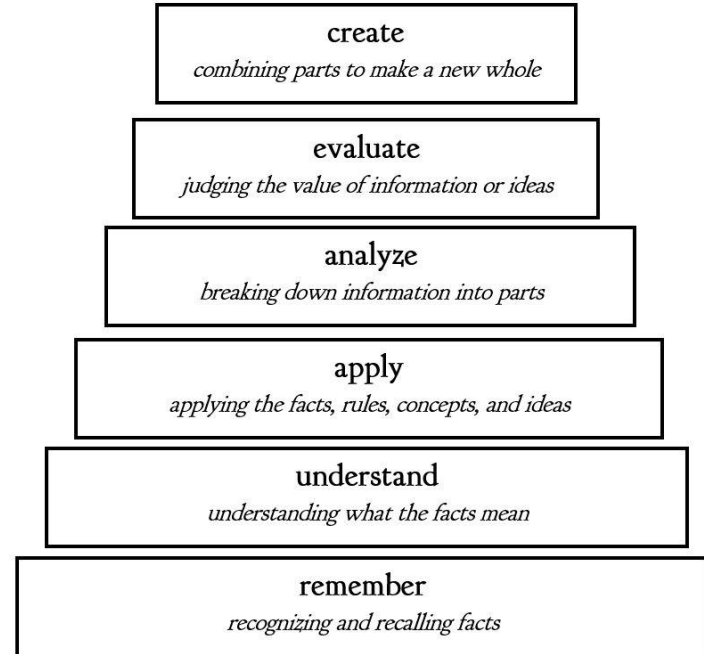
Developmental Progression

Higher levels are not automatically better.

The goal is selecting the right level for the learner, objective, and context.

The most educationally sophisticated objective is not always the highest objective.

It is the most appropriate objective.



Essential Learning and Performance

Avoid verbs such as:

- Know
- Understand
- Learn
- Appreciate

These are difficult to observe.

Instead use verbs such as:

- Explain
- Interpret
- Analyze
- Apply
- Differentiate
- Prioritize
- Formulate
- Communicate
- Collaborate

Compare Objectives

Beginning

Identify the common signs, symptoms, and basic pathophysiology of diabetes mellitus.

Developing

Explain the relationship between insulin dysfunction, glucose regulation, and the clinical manifestations of diabetes mellitus.

Accomplished

Interpret clinical, laboratory, and patient history findings to distinguish among common types of diabetes mellitus.

Exceptional

Perform a comprehensive evaluation of a patient with suspected diabetes mellitus and present and defend an evidence-based diagnostic and management plan that meets 90% or more of the criteria on a standardized clinical performance checklist.



Learning Experiences

Unit Objectives	Domain	Instructional Methods	Assessment Methods	Course Objectives
UO-1. Objective	[Knowledge, Skills, or Attitudes]	[Instructional Methods]	[Assessment Methods]	[CO1, CO2]
UO-2. Objective	[Knowledge, Skills, or Attitudes]	[Instructional Methods]	[Assessment Methods]	[CO1, CO2]
UO-3. Objective	[Knowledge, Skills, or Attitudes]	[Instructional Methods]	[Assessment Methods]	[CO4]
UO-4. Objective	[Knowledge, Skills, or Attitudes]	[Instructional Methods]	[Assessment Methods]	[CO1, CO2, CO5]
UO-5. Objective	[Knowledge, Skills, or Attitudes]	[Instructional Methods]	[Assessment Methods]	[CO 1]



Example

UO-1. Obtain a focused cardiovascular history and perform a focused cardiovascular physical examination using patient-centered communication.

Domain: Skills

Instructional Methods: Clinical Skills Sessions (mastered); Clinical Preceptorships (meets expectations)

Assessment Methods: Clinical Skills Assessment $\geq 80\%$

Aligned Course Objectives: CO-2, CO-5

CO-2. Demonstrate core clinical skills required for patient assessment and care.

CO-5. Communicate effectively with patients, peers, and members of the healthcare team.

Conclusion

- Where does the outcome or objective sit in the curriculum architecture?
- What larger outcome or competency does it support?
- What should learners do?
- Is the verb observable?
- Is the scope correct?
- What knowledge is involved?
- What skills are involved?
- What professional behaviors are involved?
- What evidence will demonstrate achievement?
- How does this contribute to competence and progression?

Thank you



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