

Strategically Integrating Instructional Designers in Medical Education

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Medical educators must answer questions about what they teach, how they teach, and how they assess learning in the Digital and Information Age. Related questions involve what personnel (i.e., talent) organizations should select and cultivate to drive their missions. Learner-centered paradigms, instructional design, and educational systems are growing areas of interest that must be deliberate, not reactionary.¹

Increased Demand for Instructional Designers (IDs)¹⁻³

> 5,000

JOB OPENINGS
across the United States
posted on LinkedIn in 2013



3x

JOB GROWTH
in the last
three years



28%

INCREASE IN JOBS
by 2025 predicted³



Factors Contributing to the Rise in IDs¹⁻³

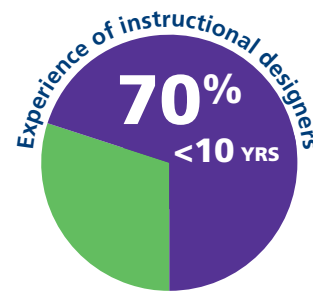
- Advances in digital learning and use of technologies in education
- Time and productivity pressures for medical education faculty
- Rapidly evolving pedagogical models and science of learning



Instructional Design and Academic Medicine

Instructional design is a relatively new, evolving, and burgeoning field with 70% of IDs on the job for fewer than 10 years, and 38% for fewer than 4 years.³

Major competition for ID talent is not within education or health care, but in business and industry.³



1. WHAT ROLE WOULD AN ID PLAY?

ID roles can vary widely from technology gurus, e-learning builders, and learning management system (LMS) experts to educators, consultants, researchers, and quality analysts.^{1,3,4}

2. DOES THE INSTITUTION NEED MORE THAN ONE OR MORE THAN ONE KIND OF ID?

Both immediate and long-term organizational needs and goals may drive hiring strategies and selected skills. All organizational needs/roles may not be met by the expertise of one individual.^{1,3}

3. WHO WILL THIS ID REPORT TO?

Reporting structure impacts funding, perceptions, access to people, and technology. IDs can report to IT, departments (e.g., pediatrics), central administration, faculty development offices, or curriculum offices.^{2,3}

4. WHAT SKILLS WILL THIS ID NEED?

Expertise may include health care or higher education, learning platforms, technological literacy, learning asset development, graphic design, project management, and/or communication.^{2,3}

5. BY WHAT METRIC WILL THIS ID'S PERFORMANCE BE ASSESSED?

Metrics may include number of faculty served, number or degree of course quality improvements, number of learning assets developed, number of educational research projects completed, and operation of the LMS.^{3,4}

6. WHAT RESOURCES ARE ALREADY AVAILABLE IN THE ORGANIZATION?

Given the anticipated shortages of IDs and the many pathways to ID careers, developing talent from within the organization may be the best approach for fulfilling ID personnel needs. Ongoing technology assessments and investments are also integral.^{2,3}

7. WHAT ARE THE BEST STRATEGIES FOR HIRING THE RIGHT ID?

Portfolios can help medical education leaders better assess skills, aptitudes, and/or experience in areas such as collaboration, productivity, innovation, and technology. Maximizing ID networks may significantly improve hiring success.⁵

As medical education and its workforce continue to evolve, judiciously investing in talent is a key responsibility of leaders.

References:

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