Incentivizing Medical Teachers: Exploring the Role of Incentives in Influencing Motivations

Objective

Medical education is dependent on clinicians and other faculty who volunteer time and expertise to teaching. Unfortunately, the literature reports increasingly high levels of dissatisfaction, burnout, and attrition. Incentivization strategies provide an obvious intervention, but they must be implemented judiciously or risk unintended consequences by promoting problematic forms of motivation or reducing motivation altogether. With little known about the effects of incentives in medical education, we investigate key insights and differentiators across three disciplines to explain how, why and when incentives are positively influential and negative impacts are mitigated.

Method

In this critical synthesis, we conducted a purposeful and iterative literature search by exploring a variety of databases to identify seminal articles, key concepts, and generative search terms. Particularly fruitful disciplines were then explored more deliberately.

Results

Psychologists argue that the impact of an incentive depends on an individual's motivational drives. Organizational behaviourists draw our attention to environmental incentives and disincentives that build or detract from motivation. Behavioural economists posit that the size, type, and way in which an incentive is provided affect motivation differently.

Conclusions

The influence of an incentive depends on how it interacts with underlying mechanisms deemed important for motivation. These mechanisms change across tasks, individuals, and contexts. We present a set of recommendations to consider when contemplating incentives, and argue that the field needs greater clarity regarding how, when, and why incentives operate within the many contexts in which medical educators work.
Electronic knowledge resources and point-of-care learning: A scoping review

Purpose

The authors sought to summarize quantitative and qualitative research addressing electronic knowledge resources and point-of-care learning in a scoping review.

Methods

The authors searched MEDLINE, Embase, PsycINFO, and the Cochrane Database for studies addressing electronic knowledge resources and point-of-care learning. They iteratively developed and revised inclusion criteria and operational definitions of study features and research themes of interest. Two reviewers independently performed each phase of study selection and data extraction.

Results

Of 10,798 studies identified, 304 were included and reviewed. Most studies (233; 77%) included physicians at various stages in training. The most frequently-mentioned electronic resources were UpToDate (95; 31%), Micromedex (57; 19%), Epocrates (48; 16%), LexiComp (33; 11%), WebMD (32; 11%), MD Consult (31; 10%), and Wikipedia (22; 7%). Ten studies (3%) evaluated electronic resources or point-of-care learning using outcomes of patient effects, and 46 studies (15%) reported objectively-measured clinician behaviors. Twenty-five studies (8%) examined the clinical or educational impact of electronic knowledge resource use on patient care or clinician knowledge, 125 (41%) compared the usage or usability of various knowledge resources, 63 (21%) examined the quality of knowledge resource content, and 118 (39%) explored the process of point-of-care learning. We identified two conceptual clarifications, namely the distinction of impact on clinical or educational outcomes vs impact on decision support, and the distinction of the accuracy/quality of information content vs the correctness of information obtained by a clinician.

Conclusions

This review identified research gaps and added conceptual clarity to the field of knowledge resources and point-of-care learning.