

The Effectiveness of Team Based Learning on Learning Outcomes in Health Professions Education: A Best Evidence for Medical Education (BEME) Systematic Review

Mim S. Fatmi, Lisa Hartling, Tracey Hillier, Sandy Campbell, Anna E. Oswald

UNIVERSITY OF ALBERTA
FACULTY OF MEDICINE & DENTISTRY

¹Faculty of Medicine and Dentistry, University of Alberta ²University of Alberta Libraries

background

- There is a growing interest in active learning strategies in health professions education due to the belief that active learning may enhance knowledge retention.
- Team based learning (TBL) is an active learning method grounded in studentcentred learning, requiring less faculty time and fewer resources than other active learning methods.
- First developed by Larry Michaelsen in a business curriculum, TBL is characterised with three main phases:
 - (1) advanced preparation by students
- (2) individual and group readiness assessment
- (3) application exercises, including discussion and analysis with the entire class (Koles et al., 2010).
- While TBL may have real pedagogical value, individual studies present inconsistent findings.
- The **aim** of this systematic review was to assess the effectiveness of TBL on improving learning outcomes in health professions education in order to provide curriculum planners with more direction in their decision-making with regard to TBL implementation.

characteristics

- This is the first systematic review that we are aware of that examines the effects of TBL in health professions education.
- The inclusion criteria required studies to comply with a definition of TBL verified with two experts in the field and use a valid comparator group.
- The 14 studies assessed at least 3,535 participants (exact numbers are not known as 3 studies did not report the number of control group participants).
- Among the included studies were 13 undergraduate and 1 graduate study assessing students in medicine, pharmacy, dentistry, and nursing programs.
- Kirkpatrick's framework of learning outcomes was used to categorise each trial (Kirkpatrick, 2006). All 14 trials assessed changes in knowledge, and 7 studies assessed changes in learner reaction.

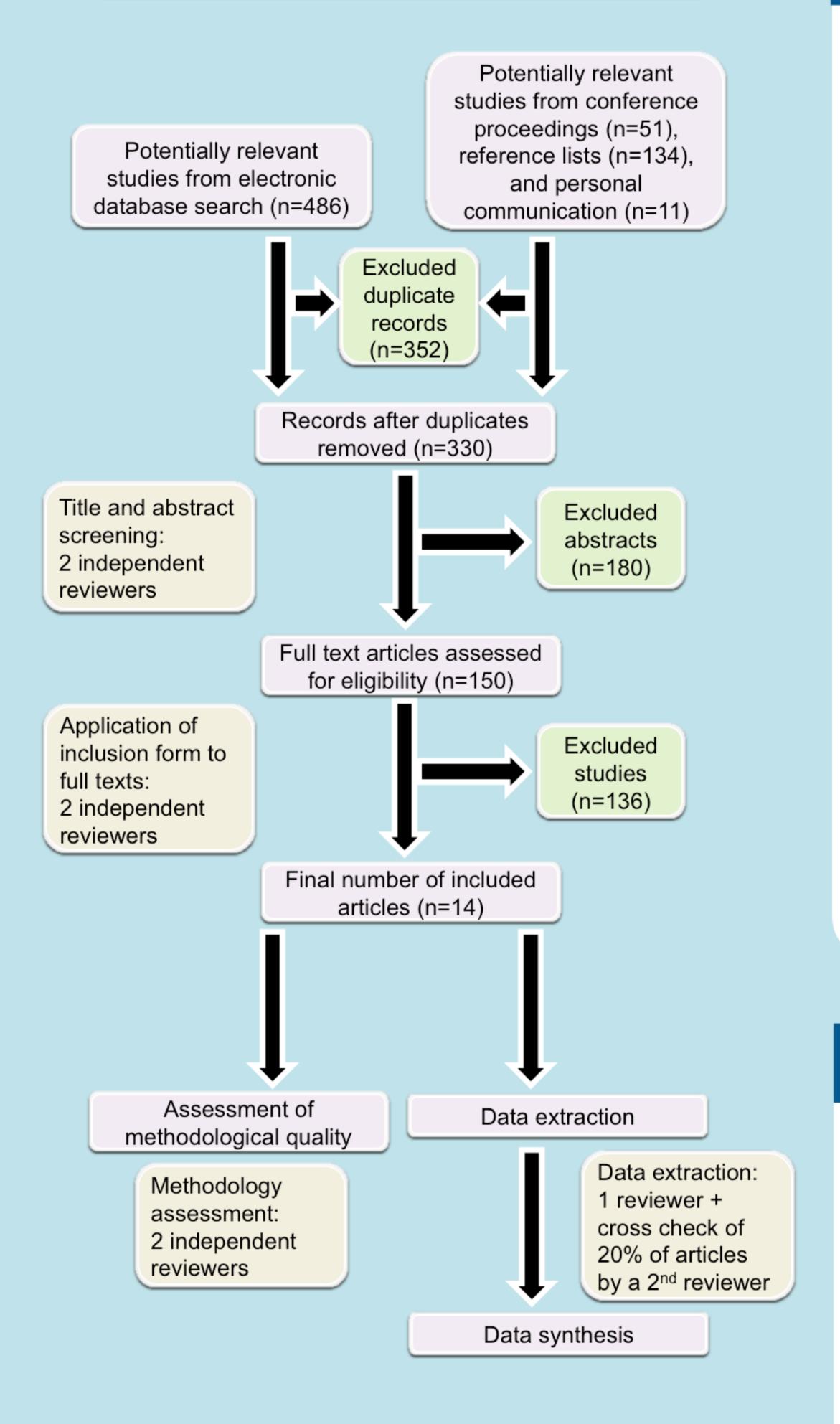
References

Kirkpatrick, D. L., & Kirkpatrick, J. D. (2006). *Evaluating training programs : The four levels* (3rd ed.). San Francisco, CA: Berrett-Koehler.
Koles, P. G., Stolfi, A., Borges, N. J., Nelson, S., & Parmelee, D. X. (2010). The impact of team-based learning on medical students' academic performance. *Academic Medicine*, 85(11), 1739-1745.

Funded by:

The Faculty Education Advisory Committee, University of Alberta

flow of studies



quality assessment

	Type of study	Number	Common sources of bias
	Randomized controlled trials	1	1/1: allocation concealment/blinding were incomplete
	Non-randomized controlled trials	2	1/2: inadequate comparability of control
			2/2: allocation concealment/blinding were incomplete
	Concurrent cohort studies	4	4/4: inadequate comparability of control
			3/4: not truly representative of the average health professions student
	Non-concurrent cohort studies	7	6/7: inadequate comparability of control
			3/7: incomplete participant follow-up

results

Knowledge Outcomes:

- all 14 studies assessed knowledge outcomes
- 7 of 14 studies reported a statistically significant increase (p < 0.05) in the knowledge scores for the TBL group
- 4 studies reported no statistically significant difference between knowledge scores of the TBL and non-TBL group
- 2 of these 4 studies found a significant difference in subgroup analyses, but could not report a significant difference between TBL and comparator groups overall
- 3 studies did not report a p-value and did not comment on significance, despite a clear trend in reported knowledge scores favouring TBL

Learner Reaction Outcomes:

- 7 of 14 studies looked at reaction scores
- Only 1 study reported significant improvement (p < 0.05) favouring the TBL group
- Another study reported significant student preference the TBL comparator
- 3 studies reported non-significant differences
- 2 studies did not report p-values

discussion

- This review presents predominantly positive and neutral effects of TBL on knowledge scores.
- Learner reaction scores were mixed and did not present any trends.
- The results were consistent across study designs, comparison groups, and health professions settings.
- The major limitations of this review are due to the methodological quality of studies; most were cohort designs and had limited reporting with respect to statistical results.

conclusion

- Team based learning may improve knowledge scores but yields mixed positive and negative learning reaction; the authors hypothesize that this may be due to increased student workload.
- While a causal relationship cannot be inferred from these studies, this review shows that TBL may be associated with increased knowledge scores in health based education.
- TBL can improve outcomes in a variety of settings and populations within health professions education.