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Individualized learning plans (ILPs) for residents in difficulty are essential tools in medical education, offering structured, personalized approaches to address specific learning needs.¹ Creating effective ILPs involves several steps.

1. Early Identification and Assessment:

Prompt recognition for early identification of learners in difficulty is crucial.² Residencies should perform comprehensive assessment of residents' performance across various competencies, including medical knowledge, clinical skills, professionalism, and communication on a regular basis.² The assessments should include feedback sessions with the resident.^{1,3}

2. Collaborative Development of the ILP:

The learner in difficulty should be engaged in the ILP development process to foster ownership and motivation. ^{1,3} A mentor or advisor who can provide consistent support and guidance throughout the ILP should be assigned.

3. Setting specific, Measurable Goals:

Goals should be specific, measurable, achievable, relevant, and time bound (SMART).³ They must be tailored to address the learner's unique challenges and strengths.¹

4. Structured and Diverse Learning Methods:

The ILP should incorporate a mix of learning methods or varied educational strategies such as case discussions, simulations, and didactic sessions focused on addressing the goals of the ILP.¹ There should be focused remediation with targeted activities (such as additional clinical rotations or simulation training) developed to address specific areas of weakness.^{1,2}

5. Ongoing Monitoring With Feedback:

Frequent evaluations, both formal and informal are important to regularly assess progress.³ This will be important to ensure that the ILP is adaptive to the learner and is modified based on the learner's progress and evolving needs.³

6. Supportive Learning Environment:

For a learner in difficulty to thrive with an ILP, the learning climate must foster a supportive, non-punitive environment that encourages learning and growth by addressing aspects of wellness and resilience and recognizing the stress that learners face.^{1,4}

7. Documentation and Communication:

Clear and detailed documentation of the ILP, including goals, strategies, and progress must be maintained. This helps ensure effective and clear communication among all parties involved, including the resident, mentor, and program leadership.^{1,3}

8. Utilization of Resources:

The residency should leverage available educational resources and tools within the institution to support the goals and strategies outlined in the ILP.^{1,5} Additional consideration for external resources, such as workshops and coaching, to support the faculty member and learner in difficulty may be helpful.⁵

9. Reflection:

The learner should be encouraged to engage in reflective practice to enhance self-awareness and learning.^{1,3} Reflection may be accomplished through an established feedback loop that allows for adjustments and improvements in the ILP.^{1,3}

10. Transition and Follow-up:

There should be a plan for gradual transition out of the ILP as the learner achieves their goals. A learner's progress should be continually monitored even after the completion of the ILP.¹

Individualized learning plans for residents in difficulty should be well-structured, goaloriented, and adaptive. They require collaboration between the resident and educators, regular monitoring, and a supportive learning environment. By following these best practices, residency training programs can effectively support residents in overcoming their challenges and achieving their full potential.

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