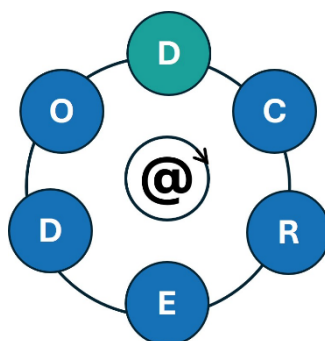


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Digital Health Technologies-Augmented Clinical Reasoning Education

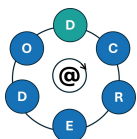


2024-1-PL01-KA220-HED-000247790

D3.3 Development of learning units for educators (train-the-trainer)

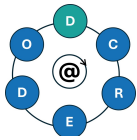
Deliverable number	D.3.3
Delivery date	30 June, 2026
Status	(final)
Authors	UMIT, Instruct

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Document Revision Table

Version	Date	Author(s)	Organization	Comments
0.1	12/06/26	Instruct	Instruct	Initiated document
0.2	12/06/26	Instruct	Instruct	General description of the development process
0.3	29/06/26	UMIT	UMIT	Draft of tables with outcome of key performance indicators and methodology
0.4	29/06/26	UMIT	UMIT	Draft of the full-text of the deliverable
0.5	22/07/26	All	All	Comments by the consortium
1.0	30/07/26	All	All	Final version of the deliverable addressing the comments by the consortium
1.1				Updated version to reflect changes in learning units



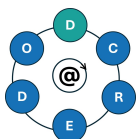
Summary

Objectives: The objective of this activity was to develop a set of train-the-trainer learning units (TTT LUs), focused on the use of digital health tools in clinical reasoning. The developments were to be aligned with the student learning units, which were developed in D3.2 and the educational approach outlined in the D-CREDO white paper (D2.3).

Approach: Working together as a group consisting of the leads from the student learning units, the train-the-trainer LUs were developed and refined in accordance with their related student LUs. This included outlining activities, discussing multimedia materials, developing educator resources and assessments. The completed outlines were sent to the consortium for review prior to development and upload of the materials to the learning management system.

Results: We developed 7 adapted LUs covering the teaching of digital health in clinical reasoning including: Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning, Designing and Adapting Clinical Reasoning Educational Activities with Generative AI, Telehealth, Clinical Decision Support Systems, Electronic Health Records, AI in image analysis, and wearables.

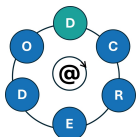
Conclusion: The developments followed the list of student LUs outlined in D3.2, with adjustments to cater to educators. The quality of the materials was ensured through a system of iterative internal reviews. The next steps in the project include conducting a pilot evaluation of the developed units and subsequently refining the LUs based on user feedback.



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1 Introduction

The goal of the D3.3 deliverable is to report on the development process of the D-CREDO train-the-trainer (TTT) learning units (LUs) to support educators in implementing the D-CREDO curriculum on digital health technologies in clinical reasoning. The TTT LUs build on the student learning units developed in Deliverable D3.2 [1] and follow the educational approach described in the D-CREDO White Paper (D2.3) [2]. Their primary purpose is to prepare educators to use the D-CREDO learning resources, facilitate learning activities, and adapt the curriculum to their own educational contexts.

The TTT LUs were developed following the student learning units and include educator-specific learning activities, teaching resources, guidance for implementation, and assessment tasks. Together with the student LUs and supporting materials, they form the educational resources that will be piloted and evaluated in Work Package 4.

This deliverable describes the development process of the TTT learning units, including their design, review, implementation in Moodle, and alignment with the quality indicators.

2 Methods

Preparation

To prepare the deliverable, we asked all the student LU leads to convene to develop the train-the-trainer LUs accordingly. Subsequently, the consortium as a whole was responsible for an internal review after completion of the LUs. We ensured that all partners were involved either as developer or as reviewer and that a multiprofessional perspective on the topic was provided.

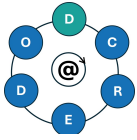
Another preparatory step was providing the development infrastructure. Consistently, the train-the-trainer learning units used the same templates and documents that were used for the student LUs. A folder was set up in Google Drive, which included:

- Prepared LU outline template
- Links to the preparatory work (student learning units from D3.2)
- Documents for didactical and content review as designed in WP4.

Changes from the blueprint

During the development process, we made one substantial adjustment to the blueprint regarding the structure of the train-the-trainer (TTT) learning units. Rather than combining several student learning units into broader educator modules, we decided to develop a separate TTT learning unit for each student learning unit wherever possible. This increased the total number of TTT learning units and provided greater flexibility for educators who wish to integrate the D-CREDO curriculum into their own teaching.

This decision was motivated by the anticipated diversity of implementation contexts. At the time of development, educators may not yet know which student learning units will be most relevant for their curricula or institutional needs. Providing a dedicated TTT learning unit for each student learning unit enables educators to select only those units that correspond to the topics they intend to implement, without requiring engagement with unrelated content. The only exception is the combined learning unit



Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning, which integrates the introductory and ethics-related student learning units. These topics provide a shared conceptual foundation for the remaining learning units and therefore form a coherent introductory module for educators. Figure 1 illustrates the alignment between the train-the-trainer (TTT) learning units (orange) and the corresponding student learning units (blue).

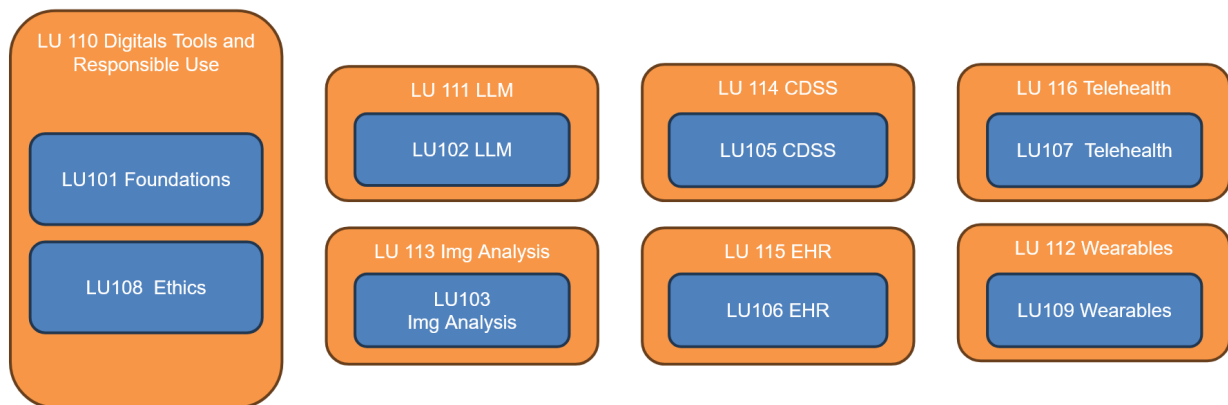


Figure 1: Mapping of the train-the-trainer (TTT) learning units (orange) to the corresponding student learning units (blue).

Implementation

The leads and teams worked in parallel developing the TTT LUs). We set up a table to monitor the progress of developing the LUs (Figure 2). To ease communication around the developed materials, we have assigned codes to each of the TTT learning units (110-116). However, these codes do not indicate a sequence of progression through the LUs in the D-CREDO curriculum and will not be visible to users.

Each LU was developed, reviewed, and implemented in Moodle. The draft versions of the educational material were developed in Google Drive and after the review rounds, the content was transferred and implemented in the learning management system Moodle. This transfer was coordinated by Instruct in close cooperation with LU team leads. The third face-to-face meeting of the D-CREDO consortium, which took place in Hall in Tirol in early June 2026, was a good opportunity to align the development and review of the TTT LUs (Figure 3).

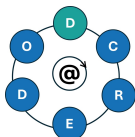


Figure 2: Table showing TTT LUs progress with leads and team and corresponding student LUs.

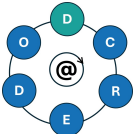
Planning TTT LUs

Deliverable deadline: 30.06.2026

LU Number	D3.3 Train-the-trainer LU	Lead	Review	Status	Timeframe	Covered Student LUs
110	Role of Digital Tools in Clinical reasoning Education (Pilot)	MB	Dariusz Inga Andrzej	Consortium Moodle Review (24.-30.6.)	Consortium review (24.-30.6.) Moodle implementation & new activities (27.6.-30.6.) first draft available Consortium Moodle review (24.6. - end June)	LU101 Foundation LU108 Ethics
111	LLM	MB	Joanna Inga Andrzej	Open questions mainly about phase 2, which is still quite knowledge- and less teaching-oriented	Consortium review (24.6. -30.6.) Moodle implementation & new activities (until 22.6.) Consortium Moodle review	LU102 LLMs
113	AI Medical Image Analysis	IH	MB	Start outline consortium review next team meeting (24.-30.6.)	Outline development (until Hall) Consortium review (24.-30.6.)	LU 103 AI img analysis

					Moodle implementation & new activities (-> end June) Consortium Moodle review	
114	CDSS (Pilot)	AK	Gosia Inga	Moodle implementation in progress (Andrzej, Gosia)	Consortium review (15.5.-25.6.) Moodle implementation & new activities (-> 22.6.) Consortium Moodle review (24. - 30.6.7)	LU 105 CDSS
115	EHR	GS	Michał Inga	Moodle implementation in progress (Inga) -> few questions to clarify with Gosia	Consortium review (15.5.-25.6.) Moodle implementation & new activities (-> 22.6.) Consortium Moodle review	LU 106 EHR
116	Telehealth	DW+H , IH	Andrzej	Moodle course ready for consortium review (24.6.-30.6.)	Consortium review (22.6. -30.6.) Moodle implementation & new activities (end June) Consortium Moodle review (24.-30.6.)	LU107 Telehealth
112	Wearables	MB	Andrzej Inga	needs some consolidation - start outline consortium review 30.6.	Outline development (until Hall)	LU 109 Wearables

					Consortium review (-> 24.6. - 30.6.) Moodle implementation & new activities (-> end June) Consortium Moodle review	
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Current state

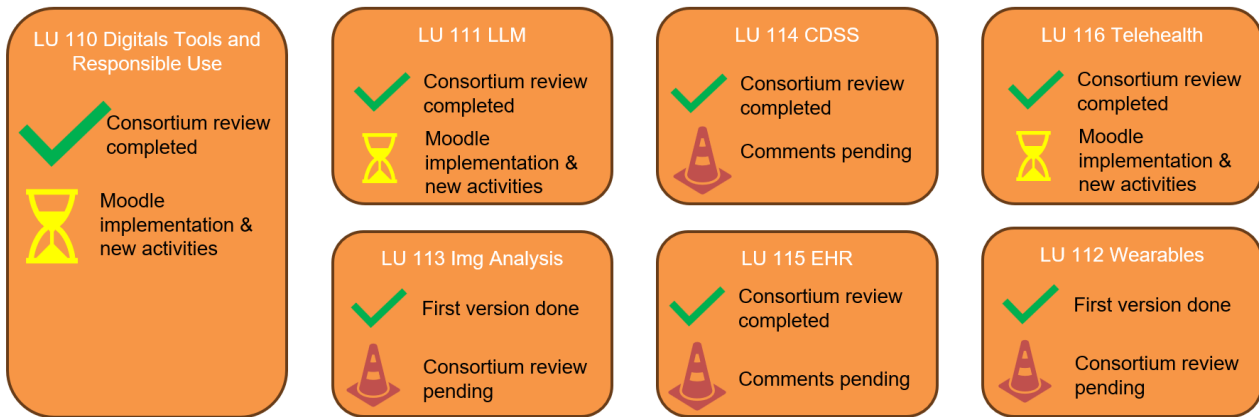


Figure 3: Excerpt of a presentation on the current state of the TTT LU development process.

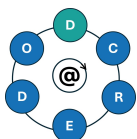
Review

The review process was implemented in parallel with the development process. The TTT LUs were sent to the consortium for review after their completion. The comments and suggestions from the review were taken into consideration and discussed in online meetings with the TTT LU leads and team.

3 Results

Learning unit outlines

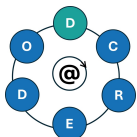
The learning units for educators are available in the project Moodle learning management system. The backbone of each D-CREDO TTT learning unit is the description spreadsheet. Based on the template, it specifies a detailed list of activities planned for each phase of the learning unit. Each learning unit consists of 2-3 (a-)synchronous phases and a separate assessment phase. The cover page presents the key metadata from the blueprint, such as the title, clinical reasoning (CR) theme, specific learning objectives (LOs), prerequisites, D-CREDO tool categories, and time estimation (Figure 4).



LU 110 Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning_Outline .XLSX ☆					
Datei Bearbeiten Ansicht Einfügen Format Daten Tools Hilfe					
Menüs 100% 123 Arial 10 B I A					
A1	Title of Learning unit				
	A	B	C	D	E
1	Title of Learning unit	Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning			
2	Learner level	Teacher			
3	Theme(s)	Theories of CR/Teaching CR			
4	Overarching and specific learning objectives	Teach the potential benefits of digital technologies in clinical reasoning and list their strengths and limitations. Teach the ethical and legal aspects of using digital technologies in the clinical reasoning process. - Identify the benefits and limitations of using digital tools in clinical reasoning education - Further reflection on the ethical and legal implications of using digital technologies in the clinical reasoning process by students (sounds more like a student LO) - Discuss the evolving role and responsibility of the teacher in the digital era - Analyze the educational potential and risks of D-CREDO learning units. - Evaluate and implement digital tools in an ethical and pedagogical manner into teaching of students			
5	Prerequisites	parts of 101-109 (D-CREDO) TTT cognitive errors & biases and what is CR (DID-ACT)			
6	Covered D-CREDO tool(s)	All			
7	Target group(s)	Educators			
8	Description	The LU encourages teachers to get involved with and dig into the D-CREDO curriculum, appreciating their expertise.			
9	Phases:	Asynchronous (online) Preparation	Synchronous (online or F2F)	Assessment	
10	Group size	Unlimited	10 - 15	10-15	
11	Approx. workload (ECTS)	90 min	90 min	60 min	
12	Adaptations				
13					

Figure 4: The cover page of a sample description spreadsheet for the TTT LU “Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning”.

In the following tabs of the LU description, each phase is specified in detail through a characterization of the constituent activities, classified according to specific LOs, ICAP activity category, used educational methods or strategies, group settings, approximate duration, required materials, and alternative scenarios (Figure 5 presents a sample phase tab from the LU110 description).



LU 110 Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning_Outline .xlsx

Phase 2: Synchronous Workshop

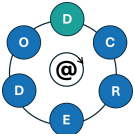
	A	B	C	D	E	F	G	H	I	J
1	Phase 2: Synchronous									
2	Phase of Instruction	Intention / spec. LOs	ICAP	Description	Methods/strategy		All / Small groups / Pairs / Individual	Approx duration (min)	Material needed	Alternative(s)
3	LO&agenda	Clarification of objectives and prior learning	Interactive	Brief presentation of learning objectives for the synchronous session and clarification of open questions from Phase 1.	Discussion	Text / Presen	All	5 min	Slides with learning objectives	
4	Information/Presentation	- Discuss the evolving role and responsibility of the teacher in the digital era	Interactive	Short input and discussion on the evolving role of teachers in the digital era. Emphasis on guiding students in critical and reflective use of digital tools, supporting ethical awareness, and facilitating reasoning rather than tool use alone.	Discussion	Text / Presen	All	10 min	Slides illustrating teacher roles, discussion prompts	Here Gosias idea with the discussion of the two theses could fit: are you more aligned with "digital tools are our saviours" or "digital tools kill our thinking"?
5	Problem/Case/Stimulus	- Identify the benefits and limitations of using digital tools in clinical reasoning education - Reflect on the ethical and legal implications of using digital technologies in the clinical reasoning process	Interactive	Building on the preparations in Phase 1, the participants analyze a short clinical scenario from the LUs in which a learner uses a kind of D-CREDO tool. They evaluate how the tool supports reasoning, identify risks and ethical/legal implications (including potential bias), and propose instructional strategies for fostering critical, responsible use. Links to LU101 and LU108 activities are highlighted.	Groupwork	Case / VP	Small Groups	20 min	Case description, worksheets with guiding questions	
6	Application/Exercise	- Apply learning theories to the use of educational digital technologies in CR - Evaluate and implement digital tools in an ethical and pedagogical manner	Constructive	Participants share their work with the group and discuss how the groupwork influenced the planned implementation in their own teaching context. Questions: How have the things you learned today affected your plans? What do you need to change? Peers give feedback and can integrate the points into their own plan.	Creation	Peer-feedback	All	40 min	D-CREDO LU planning template, access to D-CREDO learning units	
7	Summary/Closing	Consolidation of learning	Active	Summary of key lessons learned from participant and instructor perspectives. Instructor summarizes key elements of their implementation plans.	Discussion	Wrap-up	All	10 min	Summary	

Figure 5: Details of activities in a synchronous phase 2 for the TTT LU “Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning”.

Instructional materials

An important design decision concerned the educational approach of the TTT learning units. Rather than focusing on teaching educators the content of digital health technologies themselves, the learning units were designed to support educators in implementing these topics effectively within their own educational settings. Activities therefore encourage participants to critically reflect on the learning needs of their students, analyse the pedagogical rationale behind the D-CREDO student learning units, and consider how the provided teaching materials, virtual patients, assessments, and learning activities can be adapted to their own curricula, learner populations, available resources, and institutional contexts. This approach positions the TTT learning units as implementation and curriculum development resources, rather than as content-focused courses, while maintaining alignment with the educational philosophy described in the D-CREDO White Paper (D2.3).

Consequently, the instructional materials developed for the TTT learning units differ from those provided in the student curriculum. Rather than creating a separate collection of educational resources, the TTT learning units primarily guide educators through the existing student learning units and their associated instructional materials. Participants are encouraged to review and adapt these resources from the perspective of a facilitator. To support this implementation process, each TTT learning unit includes educator-specific resources, such as reflection prompts, implementation templates, and structured guidance for planning and adapting teaching activities. In addition, facilitator resources for the synchronous sessions, including suggested discussion points, model answers, and activity guidance, are available in the educator area of the D-CREDO Moodle platform. Figure 6 presents examples of the educator-specific resources developed as part of the TTT learning units.





D-CREDO Project
Digital Health Technologies-augmented Clinical Reasoning Education

Curricular Implementation of D-CREDO tools

Clinical Decision Support Systems

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Discussion

In small groups

- Present to the other the case you worked on before the workshop and the mode of use
 - early or late in the case-solving process
- Discuss what do you perceive as the positive aspects of using the system in undergraduate teaching?
- Discuss what do you perceive as the negative aspects of using the system in undergraduate teaching and how to prevent it?

SWOT Analysis Template for TTT Course Participants:

Evaluating Electronic Health Record (EHR) Systems

Purpose: This SWOT analysis helps assess an EHR system's clinical usefulness, safety, usability, and impact on patient care.

SWOT Analysis Framework

S — Strengths
Internal advantages of this EHR system.

Guiding questions:

- What works well in EHR?
- What supports clinical workflow?
- What improves patient safety?

Template for reflection on your integration of CDSS into your teaching

Your teaching context

e.g. CDSS system in use, date of the activity, course name, number of students, clinical topic discussed,

What memorable views, concerns, or questions did students express regarding the use of CDSS tools?

What did I learn from the discussion with students?

Figure 6: Overview of exemplary instructional materials developed for the TTT LUs.

Health profession adaptations

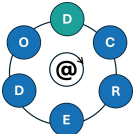
To ensure that the TTT learning units are applicable across healthcare professions, the materials were reviewed by the nursing experts within the consortium. In contrast to the student learning units, which required profession-specific adaptations in selected cases, no dedicated nursing adaptations of the TTT learning units were considered necessary.

The TTT learning units focus on the pedagogical implementation of the D-CREDO curriculum rather than on profession-specific clinical content. As they primarily guide educators in reviewing, implementing, and adapting the student learning units within their own educational settings, they are inherently applicable across professional contexts. Furthermore, the chosen student learning units referenced by the TTT curriculum had already been adapted where required to accommodate nursing perspectives.

Throughout the development process, particular attention was paid to maintaining profession-neutral language and implementation guidance. This enables educators from different healthcare professions to use the same TTT learning units while adapting the associated student learning units and teaching activities to their respective curricula and learner groups.

Assessments

Each of the TTT learning units has in the outline an assessment section which specifies assessment tasks. The assessment tasks often require educators to implement parts of the student learning units, including educator-specific adaptations, into the participants' teaching activities and to submit a structured reflection on this process.



Transfer to Moodle and CASUS

The completed learning resources were implemented, as the final step in the development workflow, in the project learning management system (Moodle) by Instruct. Each learning unit was implemented as a Moodle course.

Each asynchronous phase of a TTT LU begins with stating the learning objectives and a general description. In most LUs we provide an “initial thoughts” section, in which educators can collect and state their experience with the unit’s subject matter and digital tool usage. This is followed by a familiarization of the student learning unit, in order to provide guidance on what will be taught in this learning unit. Figure 7 presents an example of a partial view of the content for the TTT LU116.

Curricular Implementation of D-CREDO tools: Telehealth

Kurs [Einstellungen](#) [Teilnehmer/innen](#) [Bewertungen](#) [Berichte](#) [Mehr ▾](#)

General information

[Alles einklappen](#)

Welcome to "Telehealth in Clinical Reasoning Teaching"

This learning unit prepares health professions educators to design, adapt, and implement CR learning activities that integrate digital health technologies such as mHealth tools and telehealth platforms. The focus is on practical curricular integration: embedding these tools into existing teaching activities, creating realistic simulations, and addressing ethical/legal responsibilities. Participants will explore how to adapt CR scenarios, facilitate telehealth simulations, and critically assess the affordances and limitations of these tools. Special attention is given to responsible use, safeguarding privacy, and supporting students in navigating both technical and cognitive challenges.

By the end of the unit, educators will be equipped to facilitate learning experiences that help students apply digital technologies in clinical reasoning process effectively and with ethical safety.

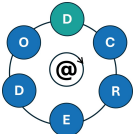
Learning objectives

After this learning unit you will be able to teach and adapt learning activities that prepare students to effectively apply clinical reasoning in a simulated telehealth setting.

- Compose a learning activity for students about CR in telehealth
- Reflect on how telehealth settings affect CR

Prerequisites/Prior knowledge:

- TTT cognitive errors & biases and what is CR? (DID-ACT)
- A module or reading prep covering ethical/legal standards across the two tool types (mHealth, Telehealth). (Covered in unit 110)
- A simulation in earlier LUs where educators interact with the tools as learners. (Parts of unit 101-109)
- Specific preparation in digital/AI bias literacy, separate from classical cognitive bias. (Covered in unit 102 & 110)



1. Initial Thoughts (ca. 10 min)

Please think about your experiences with telehealth consultations and / or with teaching clinical reasoning in telehealth settings to your students. If you have no experiences, please think about ideas you have. Please provide at least three bullet points of what you would like your students to learn about clinical reasoning in telehealth settings (e.g. challenges, biases, benefits, how-to etc.).

 Please post your thoughts

 Zu erledigen ▾

2. Familiarization with student learning unit (ca. 30 min)

Please take a look at the student learning unit on telehealth (see links below). Your task is to identify activities you can imagine to use to teach your students about the three teaching points you have identified in the previous activity.

Please map these teaching points with the activities identified (adding your own ideas is also possible). In addition, please be prepared to present your ideas (or an example) in a max 3 min elevator talk in the synchronous phase and think about one question related to your presentation you want to get feedback from your colleagues.

 [Student course outline](#)

If you are not familiar with the outline format, please watch the video in the right navigation panel.

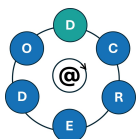
 [Student course in Moodle \(asynchronous phase\)](#)

 Please submit your answer



Figure 7: Partial view of the content for the TTT LU116, “Curricular Implementation of D-CREDO Tools: Telehealth”.

Teacher resources for the synchronous phases are available in the D-CREDO educator area on Moodle (example in Figure 8).



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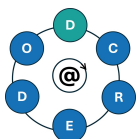
The screenshot shows the did-act platform interface. At the top, there is a navigation bar with 'Home', 'Dashboard', and 'More' options. A search icon, a bell icon, a chat icon, and a user profile icon labeled 'AK' are also present. An 'Edit mode' toggle switch is on the right. Below the navigation bar, a sidebar on the left contains a hamburger menu icon. The main content area displays a title 'D-CREDO: Role of Digital Tools in Clinical reasoning Education' with a blue arrow icon. Below this, a section titled 'D-CREDO: Curricular Implementation of D-CREDO tools: CDSS' is expanded, showing a list of resources: 'Curricular Outline', 'Participant Course', 'Participant instruction for phase 1' (with a DOC icon), 'Facilitator slides - phase 2' (with a PPT icon), and 'Template for Assessment' (with a DOC icon). A question mark icon is visible in the bottom right corner of the resource list.

Figure 8: Teacher resources for the synchronous tasks of LU101, “Foundations of Digital Health Technologies in Clinical Reasoning”.

Quality indicators

In summary, we present a comparison between the quality criteria for this deliverable and the level of achieved results (Figure 9).

Quality indicator	Result
Development of ≥ 3 new or adapted train-the-trainer LUs	We have developed 7 new or adapted LUs for educators: Role of Digital Tools in Clinical Reasoning Teaching and Responsible Use of Digital Tools in Clinical Reasoning, Designing and Adapting Clinical Reasoning Educational Activities with Generative AI, Telehealth, Clinical Decision Support Systems, Electronic Health Records, AI in image analysis, and wearables.
New content and activities for at least 15h faculty development	The estimated total duration of activities in the LUs amounts to about 20 and a half hours (1220 minutes). The actual faculty development time will be verified in pilot studies (D4.3) planned for the winter semester of 2026/2027.
LUs implemented following blueprint and white paper	We used the white paper and student LUs developed in D3.2 as a guiding framework for the development of the TTT LUs. We have adapted the division of LUs in comparison to the state from the blueprint to make them more flexible and adaptable to the needs of the teacher as explained in the introduction to this deliverable.



Training for facilitation of each D-CREDO student LU is covered in at least one TTT LU	As illustrated in Figure 1 of this deliverable, each student LU is covered by a single TTT LU.
D-CREDO TTT LUs implemented in the DID-ACT Moodle	This step was completed by Instruct and is illustrated in Figures 7-8 of this deliverable.
All content in English	All TTT LUs are provided in English to ensure maximum global accessibility. In addition, some partners are planning adaptations into national languages. However, these activities go beyond the scope of the project and are supported by additional funding not covered by D-CREDO.

Figure 9: Comparison of the D3.3 results with the quality indicators for this deliverable.

4 Conclusions

This deliverable reports on the outcomes of Activity A3.3, which covered the D-CREDO student LUs by a set of train-the-trainer LUs and subsequent Moodle courses addressing all declared learning objectives and providing educator resources in preparation for piloting. All set KPIs were achieved.

The next steps in the project include a pilot evaluation of the developed learning units (A4.3), and subsequent refinement of the LUs based on user feedback (A3.4).

5 References

1. D-CREDO D3.2 Development of learning units for students https://d-credo.eu/wp-content/uploads/2026/06/D3.2-D-CREDO-Deliverable-Report_3_2.v1_1.pdf
2. D-CREDO Whitepaper <https://d-credo.eu/wp-content/uploads/2025/06/D2.3-D-CREDO-Teaching-Clinical-Reasoning-enhanced-by-digital-tools-A-White-Paper.pdf>