



Strengthening Your Teaching Toolbox

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Presented by:

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VALUES | EDUCATION | SERVICE

Disclosure

- I have no financial or other conflicts to disclose related to this presentation.

Attribution

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 - Pettit J, Rosenbaum M. Strengthening your teaching toolbox. *MedEdPORTAL*. 2014;10:9873. https://doi.org/10.15766/mep_2374-8265.9873

Learning Outcomes

- Describe challenges and barriers to effective teaching in the clinical setting
- Identify opportunities for time efficient teaching
- Choose appropriate strategies from your teaching toolbox to maximize teaching

Key Questions

- What should I teach?
- When should I make time to teach?
- How do I do it—what methods can I use efficiently?

Challenges to Clinical Teaching

- What are the challenges to effective and efficient teaching in the clinical setting?



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What is a challenge you face when trying to teach in a clinical setting?

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Teaching Toolbox

- Prevention
 - Setting the stage for efficient learning
- Intervention
 - Tools that maximize learning
- Maintenance
 - Ensuring your toolbox is ready for the next learner

Prevention

- Rotation objectives/expectations
- Orienting the learner
- Assessing and prioritizing learning needs



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Share one expectation you have of a learner.

① Start presenting to display the poll results on this slide.

Prevention

- Rotation objectives/expectations
- Orienting the learner
- Assessing and prioritizing learning needs



Intervention

- Daily schedule
- Priming the learner
- Role modeling
- Observation
- Staffing in the patient's presence
- Guiding presentation
- Teachable moments
- Team teaching
- Self-directed learning

Beginning of Clinic Session

- Review daily schedule to identify
 - Learning needs/goals
 - How much experience do you have with patients with X
 - What kinds of patients/conditions are you interested in seeing
 - Learner questions
 - What clinical areas/skills/conditions do you have questions about?
 - Ways to meet learning needs via patient care - themes

Selecting Patients

- Learners don't need to see all patients
- Consider wave scheduling

Preceptor Schedule		Learner Schedule	
9:00	See pt 'X'	9:00	Review pt 'A' chart
9:15	See pt 'Y'	9:15	See pt 'A'
9:30	See pt 'A' w/ student	9:30	Present pt 'A' to preceptor
9:45	See pt 'Z'	9:45	Chart pt 'A'
10:00	Repeat	10:00	Repeat

Priming the Learner

- Briefly preparing learners for patient encounters
- **Tasks:** what the learner will do and for how long
 - **Attending role:** when and how will reconnect
 - **Patient:** if known, review any pertinent information and/or chief complaint
 - New patient (differential diagnosis)
 - Return patient (health maintenance or management of chronic illness)
 - **Product:** provide a clear description of what is expected

Role Modeling

a.k.a. Advanced shadowing

- Guided opportunity for learner to observe teacher
 - **Priming:** Expectations of what learner should watch
 - **Emphasis:** Conscious demonstration of skills
 - **Debriefing:** Discuss what happened, questions, identify learning points

Observation of Learners: When?

- Especially useful early in rotation
- Can be done in brief increments
- Easiest to schedule at beginning or end of clinic
- Brief observations over time contributes more to learning than a single observation of a full encounter

Observation of Learners: How?

- **Priming learner**
 - Any useful information about patient
 - What the learner and you will do during the encounter
 - Anything in particular the student wants you to watch for
- **Emphasis:** While seeing patient
 - Orient patient to what is happening
 - Make sure your attention includes the learner
- **Debrief** after interview
 - Feedback is key
 - What they learned about the patient & their own skills
 - Any concerns or skill recommendations

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Comment on what you observe that you could provide feedback upon in these few moments of observation.

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Observation Activity



Staffing in the Patient's Presence

- Studies show this is ***as efficient if not more*** than conference room staffing
- Provides unique opportunities:
 - Correct and expand missing history
 - Focused PE and clinical reasoning teaching
- Increased satisfaction for patients
- Learners like it the more they do it

(Petersen, et al., 2008)

Staffing in the Patient's Presence

- **Prime learner**
 - What the learner and you will do in the room
 - Discuss any potential patient problems or problematic learner behaviors
- **Emphasis:** While in the room
 - Have the learner introduce you – avoid hijacking the encounter
 - Orient the patient and continue to signpost “talking about them”
 - Have the learner present to you and ask questions
- **Debrief**
 - Assessment and plan can occur in or outside the room
 - What they learned about the patient & their own skills
 - Any concerns and future skill recommendations

Guiding Presentations

- Set the stage ahead of time
 - Before they present
- “Aunt Minnie”
 - a.k.a. Pattern Recognition
 - Have learner present what they think is going on first then supporting evidence
- S.N.A.P.P.S.
 - **S**ummarize, **N**arrow, **A**nalyze, **P**robe, **P**lan, **S**elect

Teachable Moments

- Before you begin, consider what your goal is during the interaction with the learner
 - Clarification of a procedure
 - Explain a diagnosis
 - Develop more differentials
 - Provide understanding about pharmacology
 - Show an easier way to do something
 - Investigate the learner's level of knowledge
 - Share some of your experiences
 - Prevent mistakes in the future

Teachable Moments

Teaching Demonstration: Part 1

What teaching technique was used?

What did the student learn in this situation?



The “Aha”

- Student presents information and the teacher gives the answer and actions to be taken
- Student learns that the teacher will provide the answers
 - No need to think deeper
 - Dump all problem solving on teacher
- Time efficient but not conducive to student learning

Teachable Moments

Teaching Demonstration: Part 2

What teaching technique was used?

What did the student learn in this situation?



Asking Questions

- Use open-ended vs. closed ended questions
- Ask questions that maintain learner involvement
- Ask questions to help assess the learner's educational needs
- Emphasize questions beyond recall—investigating inference and evaluation
 - Low-level: recall, analysis
 - High-level: comparison, inference, evaluation
- Power of silence/ wait time

Teachable Moments

Teaching Demonstration: Part 3

What teaching technique was used?

What did the student learn in this situation?



Mini - Lecture

- Already prepared instruction that is brief
- Specific focus in mind
- Assess learner starting point
- Know ahead of time:
 - Types of patients to be seen
 - Types of diagnoses
 - Pharmacology
 - Health maintenance
- Do not need PowerPoint; possible readings

Teachable Moments

Teaching Demonstration: Part 4

What teaching technique was used?

What did the student learn in this situation?



Thinking Out Loud/Problem Solving

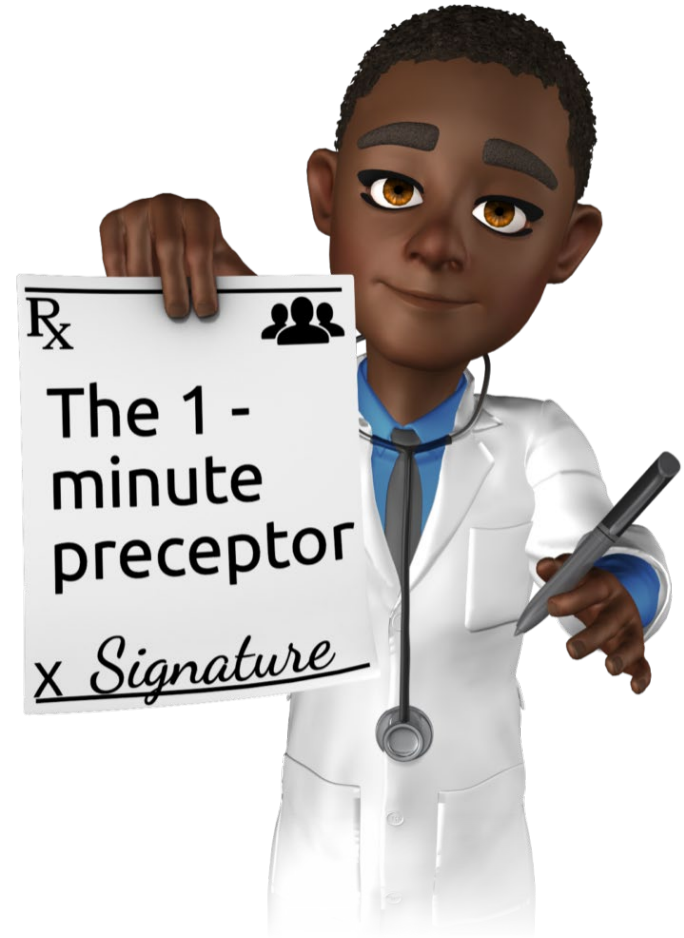
- A method to role model your clinical reasoning
- Instead of just answering learners' questions, talk learners through your thoughts
- Verbally explain what you are doing and why
- Allows learner to hear your thought process & be able to ask more in-depth questions

Teachable Moments

Teaching Demonstration: Part 5

What teaching technique was used?

What did the student learn in this situation?



Microskills or 1 Minute Preceptor

1. Get a commitment
 - *What do you think is going on with this patient? What other information do you think we need?*
2. Probe for supporting evidence
 - *What were the major findings that led to your diagnosis? What facts did you consider to support your conclusion?*
3. Teach general rules
 - *When this happens, do X.” “When I see a patient this sick, the first thing I think of is hydration.”*
4. Tell them what’s working
 - *You kept your mind open until they revealed their real agenda for coming in today instead of immediately jumping into solving the patient’s problem.*
5. Correct mistakes.
 - *Next time this happens, try this.*

Teachable Moments: General Pointers

- *Diagnose* the learner
 - What is the *level* of knowledge and skill?
 - What does the learner *need* to know?
- You cannot teach everything in one case
 - Emphasize “pearls” and clinical reasoning
 - *Brief, simple, focused, recallable*
 - Correcting errors may be the key point!

Team Teaching

- You do not have to be the only teacher
 - Professional staff
- Make arrangements ahead of time—*no dumping!*
- Pre-select possible learning topics
- Prime the learner
 - What to ask about
 - What you want as an outcome
- Provide feedback to other teachers

Self-Directed Learning

- As a supplement to patient contact to maximize clinical learning
- Guided by clinical questions from patient interactions
- Research topic through evidence-based clinical practice resources, chart reviews, etc.
 - Specific outcome
- On-line modules
- Library of materials

Audience Participation

- Are there any additional teaching strategies you have used that are effective and time efficient?



Key Questions

- What should I teach?
- When should I make time to teach?
- How do I do it—what methods can I use efficiently?

Maintenance

- Reflection

Boud et.al, 1985

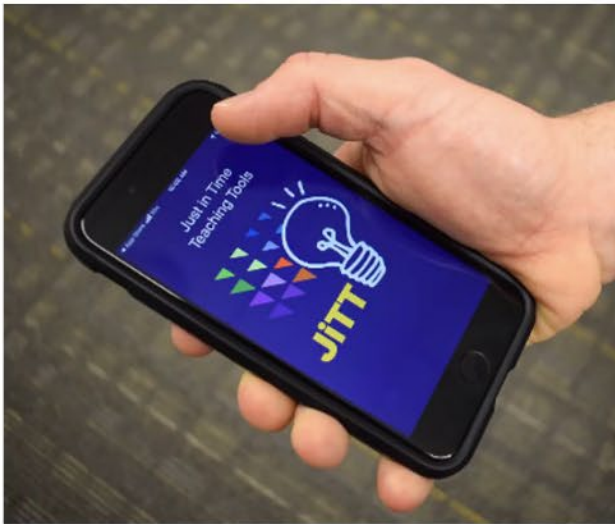
- Self-development
 - Just in Time Teaching app
- Peer coaching/feedback

Slater & Simmons, 2001

- Staff input



Available for free download on iOS and Android



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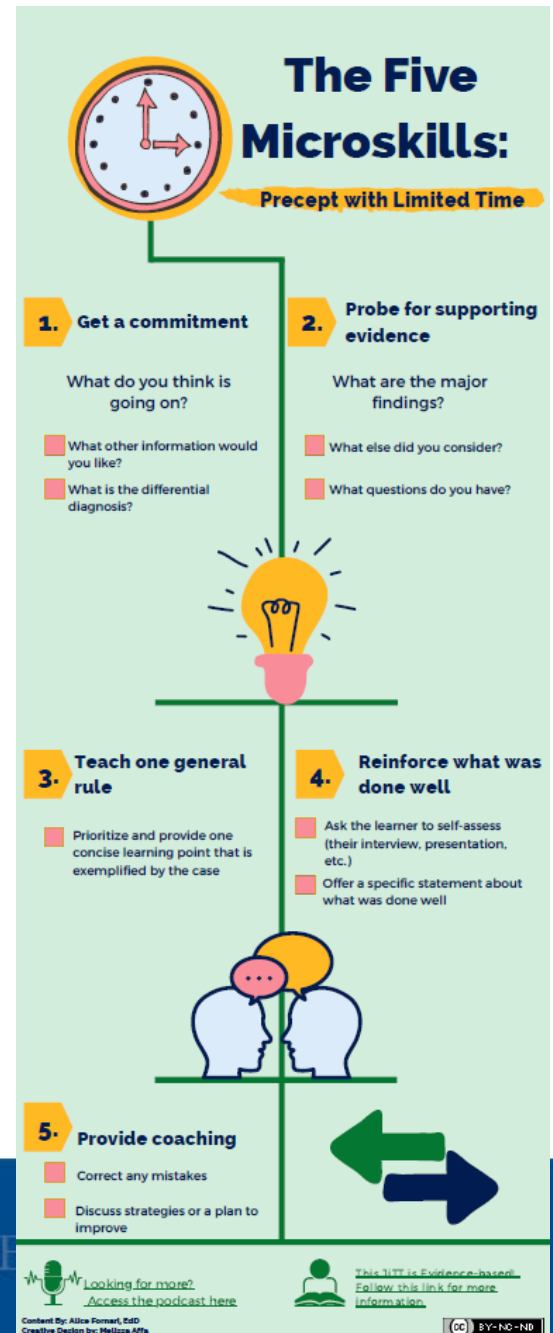
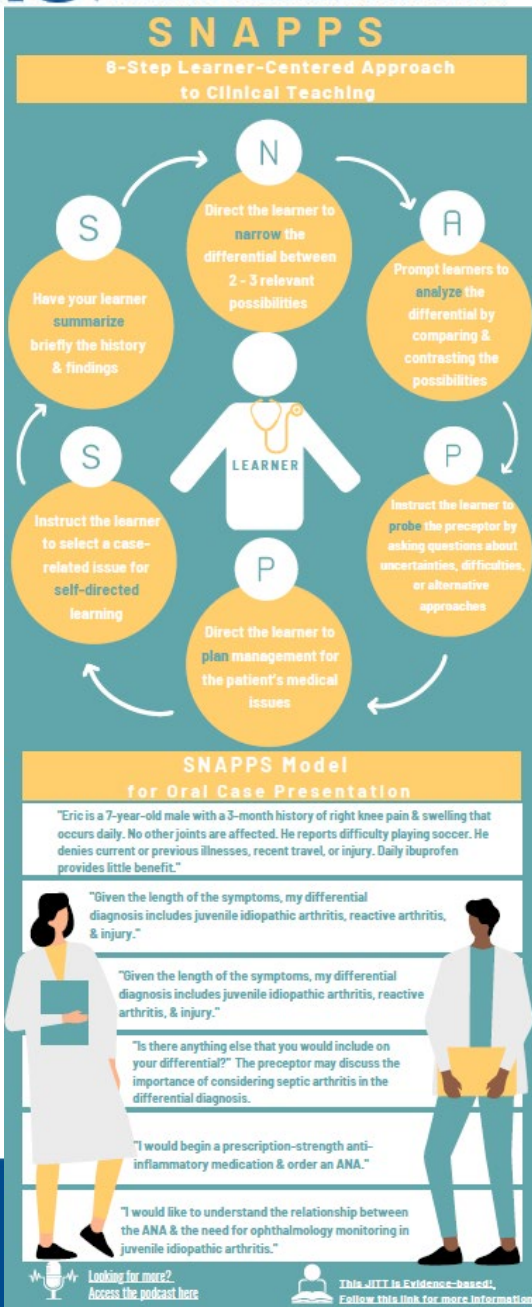
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- Questions?
- Contact Alice Fornari,
• afornari@northwell.edu
- Follow on Twitter & Instagram:
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Take Home Points

- Orient and assess learners early to help focus teaching and increase efficiency
- Increase your variety of teaching “tools” to assess learners and focus teaching
- Don’t need to teach everything or teach to every case
- Use other resources (people, self-directed learning) to supplement your teaching
- Reflecting on and developing teaching skills increases your effectiveness

Learning Outcomes

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References

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