

Residents as Teachers

Wisconsin ACP meeting



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SEPT 12, 2009

Goals for Session



- Describe attributes of good teachers
- Identify barriers to teaching
- Review some educational theory
- Learn strategies for teaching in the clinical setting

Attributes of Great Teachers



- Enthusiastic
- Knowledge of the learner, of patients and subject matter
- Provides clarity and organization
- Models desired skills
- Gives frequent and specific feedback
- Ability to create a positive learning environment
- Ability to connect with learners, involve them and have fun

Creating a positive learning environment



- Set aside time for teaching
- Treat learners with respect
- Role-model behaviors you think are valuable
- Interact with learners
- Ask questions
- Admit when you do not know something

Opportunities for teaching



- **Any Patient interactions**
 - At admission
 - On morning rounds
 - Attending rounds
 - X-cover issues
- Whenever orders are placed (think aloud!)
- Whenever students/patients asks questions
- Extra sessions can be done when there is time

Overcoming the barriers



Barrier

- Lack of time
- Perceived lack of knowledge
- Learners too busy
- Someone else on the team is better qualified
- Too tired

Solution

- Make it quick
- Teach something you know
- Make it quick
- See it as a group effort

- Coffee (just kidding!)

Adult Learning Principles



Five Assumptions

Kaufman, 2003

1. **Adults are independent, self-directed learners**
 - Students control their own learning

2. **Adults have experiences on which to build**
 - Students come with a lot of knowledge



3. Adults want learning to be meaningful and applicable
 - Students want to be able to apply what they learn
4. Adults want problem-based learning
 - Students want to solve real problems, not just learn a subject
7. Adults are motivated by internal drives, less by external
 - Students want to learn, not just satisfy a requirement

Implications of Adult Learning Principles



1. Allow students opportunities to direct own learning
2. Learn and take advantage of what students already know
3. Use real cases for teaching meaningful information
4. Approach learning as problem-solving
5. Use students' interests as a guide

Case



You were called to evaluate one of your patients while on call for chest pain. The patient was admitted 3 days ago with a non healing diabetic foot ulcer with cellulitis. He has been doing well on his current antibiotics, and his diabetes is now better controlled with an insulin regimen.

What are your plans about the patients chest pain?

What could you teach your student about this case?

Case



- **Prime the student**
 - Given the student some information and let them know your expectations
 - For example:
 - ✦ We are going to go see one of my patients with chest pain, he was admitted 3 days ago with a diabetic foot ulcer and cellulitis. We are going to go assess his chest pain, and decide what we need to do from there.
 - ✦ You could ask the student one the way to see the patient:
 - What is your differential diagnosis for chest pain?
 - Now from your differential diagnoses what questions are you going to ask the patient?
 - What will be looking for on the physical exam?
 - What tests would you order right away?

Observe the H&P



- Watch the student ask what you discussed and fill in as needed.
- In real time you are able to observe their skills, and confirm physical exam findings, and you are able to show correct technique for physical exam findings they miss.
- If the patient is very acute, you could let the student know that the patient is very ill and if they could observe your approach and you can discuss after things calm down (then remember to debrief), (Role Modeling)

Assessment and Plan



- Let's see what your student/learner knows
- It is time to ask questions.
 - Ask questions in a supportive, nonthreatening way
 - Avoid questions that require a yes or no answer
 - ✦ What do you think is going on with the patient?
 - Remember to wait for the answers
 - Encourage interaction (if in a group), what do you think about Dan's answer?

Frame Work For Clinical Teaching



A Five-Step Model*

1. Get a Commitment
2. Probe for Supporting evidence
3. Teach General Rules
4. Reinforce what was done right
5. Correct Mistakes

*Neher, JO, et.al, A Five-Step “Microskills” Model for Clinical Teaching

Get a Commitment



- What do you think it going on with this patient?
- What Laboratory tests do you feel are indicated?
- What do you think we should do next?

Probe for Supporting Evidence



- What findings led to your diagnosis?
- Why did you choose this hypertension medicine vs another?
- What else did you consider?

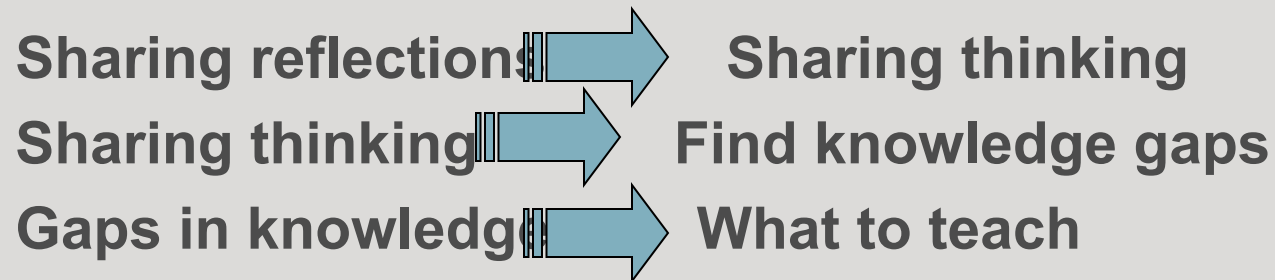


Microskills 1 & 2



Dual tasks:

1. Diagnose patient / assess needs
2. Diagnose learner / assess needs



Teach General Rules



- The patient has many features of liver disease, ascites, caput medusa, palmar erythema, spider angiomas, etc.
- In writing orders for a patient with CHF, we need to include daily weights and strict I & O's so that we can monitor the response to diuresis closely.
- Or, could note that you do not know the answer and where you are going to look for it.

Using teaching scripts to teach general rules



- A brief overview of a common topic that you can memorize and go over quickly
- Examples:
 - Differential diagnosis of chest pain
 - How to manage a GI bleed
 - Initial management of CHF exacerbations
 - What are some others?

Reinforce What Was Done Right



- It is clear you listened very closely to that patient's concerns about cost of medications so that we were able to prescribe a medication he could afford and will be compliant with
- Need to be very specific about what was done right....
Not just general praise

Correct Mistakes



- While it is important to give feedback whether positive or negative soon after the event occurred, you may need to wait depending on the sensitivity of the situation
- Example:
 - You did a good job obtaining a good history, but you missed the elevated jugular venous pressure, let's go back so I can show you.

Review of Approach to Teaching



- A Five-Step Model
 1. Get a Commitment
 2. Probe for Supporting evidence
 3. Teach General Rules
 4. Reinforce what was done right
 5. Correct Mistake

Scenarios



- <http://www.residentteachers.com/video/predoctoralvideos01.html>

Role Modeling



- **Observational Learning: Learning by observing others**
- **Role model: Demonstrates practice, attitude**
 - Role modeling is a powerful way of teaching
 - Residents are constant role modeling, intentional or not
 - Share your thinking “think aloud” to solidify the experience
 - Look at how your role models act for ways to improve your role own modeling skills

Reflect on Teaching



- How did it go?
- What could have been better?
- What will you do differently next time?
- Ask for feedback!
 - Reflect on you and your role and how you are perceived by others.
- Again, set goals to monitor your progress.

Set Goals



- At the beginning of the month set some goals of how you are going to incorporate teaching.
- Reflect on those goals early on and adjust according to your learners.
- Reflect on you and your role and how you are perceived by others.
- Make goals now about where you want to be at the end of your first ward month, in 6 months and at the end of your 1st year

Summary



- Residents are key in the education of students
- Teaching can be done daily in a variety of ways without adding time to your day
- Think about your approach to teaching before you start your month, then reassess as the month goes on.
- Actively involve the students
- Don't forget about priming students and utilizing the microskills

References



- Neher J, Gordon K, Meyer B, Sevens N. A five-step “Microskills” model of clinical teaching J Am Board Fam Pract 1992;5:419-424
- Kaufman. *ABC of learning and teaching in medicine*
Applying educational theory in practice
BMJ 326 (7382): 213. (2003)
- www.residentteachers.com
- AAIM
 - <http://www.im.org/Resources/Education/Residents/Learning/InterpersonalCommunicationSkills/Pages/Residents-as-Teachers.aspx>