ART OF TEACHING …

KEY TO SUCCESSFUL LEARNING

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DISCLOSURE

The presenter has no actual or potential conflict of interest associated with this presentation

OBJECTIVES

• Describe four different preceptor roles based on learner's needs.

• Discuss teaching strategies to promote critical thinking.

• Discuss teaching and assessing emotional intelligence.

PROCESS OF COGNITIVE LEARNING

Obtaining knowledge
Comprehend the knowledge
Applying the knowledge
Analyzing the knowledge
Synthesizing an answer to the clinical problem
Evaluating the end result

ASHP ACCREDITATION STANDARD

Standard 4.8 Preceptors' Qualifications

"Demonstrating the ability to precept residents' learning experiences by use of clinical teaching roles (i.e., inducting, modeling, coaching, facilitating) at the level required by residents"

PRECEPTOR ROLES

Direct instruction
Modeling
Coaching
Facilitating
**PRECEPTOR ROLES**

- **Direct Instruction**
  - Conveys knowledge **DIRECTLY** to the learner
  - Lectures, discussion, assigned topic/articles
  - **GOAL:** Assist learner understanding foundational skills and knowledge
  - Fill in information necessary to acquire before skills can be performed
  - **APPLICABLE**
    - Beginning of rotation
    - New learning experience

- **Modeling**
  - **GOAL:** Learner to witness
  - Identification of problem
  - Thought process (steps of problem solving)
  - Observable actions
  - **APPLICABLE**
    - Learners who has established foundational knowledge and skills

- **Coaching**
  - Learner performs the process or skill “thinking out loud”
  - Observed by the preceptor
  - Preceptor provides immediate feedback or reinforcement
  - **GOAL:** Learner to perform the skill with preceptor guidance and feedback
  - **APPLICABLE**
    - Learner ready to be member of the process
    - Not ready for independence

- **Facilitating**
  - Learner performs **INDEPENDENCY**
  - Preceptor is available as needed and debriefing after the fact
  - **GOAL:** Learner to practice decision making skill
  - **APPLICABLE**
    - Both the preceptor and learner feel confident of the learner’s ability to function independently.
    - Towards the end of learning experience
    - Self-evaluation grow professionally and more independent

**ASSESSMENT QUESTION #1**

- During the beginning of learning experience, the resident expressed his/her enthusiasm in the new rotation. However, you identified that the resident displays lack knowledge, confidence and experience in the rotation. What preceptor role should you begin with this resident?
  - a. Direct instruction
  - b. Modelling
  - c. Coaching
  - d. Facilitating
CRITICAL THINKING

- DISCRIMINATE RELEVANT AND IRRELEVANT DATA
- ORGANIZE DATA INTO HYPOTHESIS
- REALIZE CONSEQUENCE OF HYPOTHESIS

TEACHING STRATEGIES

CASE-BASED TEACHING

- Presenting patient case to be solved
- Aid in applying knowledge to direct patient care
- Challenge - assisting learner to understand thought process involved in clinical problem solving
  - Gather pertinent information
  - SOAP approach
  - Identify errors and missed opportunities
  - The learner's decision making process should be guided by the use of direct questioning

FIVE MINUTE PRECEPTOR MODEL

Step 1: Get a commitment
Step 2: Probe for supporting evidence
Step 3: Teach general rules
Step 4: Reinforce positive aspect of performance
Step 5: Correct mistakes

GOAL: learner must be able to engage in a better and deeper understanding of patient clinical status as well as processing patient information.

TEACHING STRATEGIES

SOCRATIC METHOD

- Ancient, highly disciplined powerful process
- Question based
- Structured to lead better understanding of topic
- Require references to support the hypothesis
- Bridge to further analysis and research
- GOAL: learner must be able to engage in a better and deeper understanding of patient clinical status as well as processing patient information.

TEACHING STRATEGIES

SOCRATIC METHOD

- Provides realistic experience to learn complex clinical skills
- Applicable for less skilled and less confident learner; concern of potential harm to patients
- Increased knowledge, confidence, and skills leading to better management of actual patient cases

Simulated scenarios

- Provides realistic experience to learn complex clinical skills
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Chart review

- Provides realistic thought process
- Analyze, reason, and evaluate
The emergency medicine learning experience requires the resident to respond to codes. The resident expressed her concern that her lack of confidence and skills may harm the patient. What is the best approach to enhance critical thinking and at the same time learning experience without negative consequence from incorrect management to patient?

a. Chart review
b. Case base teaching
c. Socratic method
d. Simulated scenarios

**ASSESSMENT QUESTION #2**

> "OUR EMOTIONS HAVE A MIND OF THEIR OWN, ONE WHICH CAN HOLD VIEWS QUITE INDEPENDENTLY OF OUR RATIONAL MIND."  
> Daniel Goleman, Emotional Intelligence

> Effective communication skills
> - Time, when, and where to talk

**TEACHING AND ASSESSING EMOTIONAL INTELLIGENCE**
Communication competencies

- Utilize open-ended questions
- Do not use acronyms, complicated medical terminology
- Directly face the patient
- Utilize specific questions for clarity
- Avoid slang
- Maintain eye contact

ASSESSING EMOTIONAL INTELLIGENCE

- Feedback
  - How, when, where at what to say
  - Timely
  - Written self-reflection

ASSESSING EMOTIONAL INTELLIGENCE

Reflection questions

- Perceive
  - What did your colleague or patient say?
  - How did he express his concern?
- Understand
  - What do you think he/she was thinking?
- Manage
  - What could have said to improve the interaction?

ASSESSING EMOTIONAL INTELLIGENCE

KEY TAKE AWAY POINTS

- Four different roles a preceptor can take responsibility: direct instructions, modeling, coaching and facilitating. Assessing and identifying learner's needs assist in adopting the role.
- Critical thinking is a skill that all possess, teaching strategies to learners molds them to apply it in decision-making processes.
- Preceptors need to assess and teach emotional maturity and intelligence. Perceive, use, understand and manage self and social emotions lead to safe and excellent patient care.

REFERENCES

- 5 Tips for Improving Communication in the Pharmacy
- Socratic Teaching. [www.criticalthinking.org/pages/socratic-teaching/606](www.criticalthinking.org/pages/socratic-teaching/606)