how to

TEACH IN CLINICAL SETTINGS

Mary Seabrook

WILEY-BLACKWELL

How to Teach in Clinical Settings

How to Teach in Clinical Settings

Mary Seabrook
Medical Education Consultant
Former Senior Lecturer in Medical Education
King's College London School of Medicine
London, UK

WILEY-BLACKWELL
A John Wiley & Sons, Ltd., Publication

This edition first published 2014 © 2014 by John Wiley & Sons, Ltd.

Registered office: John Wiley & Sons, Ltd, The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, UK

Editorial offices: 9600 Garsington Road, Oxford, OX4 2DQ, UK
The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, UK
111 River Street, Hoboken, NJ 07030-5774, USA

For details of our global editorial offices, for customer services and for information about how to apply for permission to reuse the copyright material in this book please see our website at www.wiley.com/wiley-blackwell

The right of the author to be identified as the author of this work has been asserted in accordance with the UK Copyright, Designs and Patents Act 1988.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, except as permitted by the UK Copyright, Designs and Patents Act 1988, without the prior permission of the publisher.

Designations used by companies to distinguish their products are often claimed as trademarks. All brand names and product names used in this book are trade names, service marks, trademarks or registered trademarks of their respective owners. The publisher is not associated with any product or vendor mentioned in this book. It is sold on the understanding that the publisher is not engaged in rendering professional services. If professional advice or other expert assistance is required, the services of a competent professional should be sought.

The contents of this work are intended to further general scientific research, understanding, and discussion only and are not intended and should not be relied upon as recommending or promoting a specific method, diagnosis, or treatment by health science practitioners for any particular patient. The publisher and the author make no representations or warranties with respect to the accuracy or completeness of the contents of this work and specifically disclaim all warranties, including without limitation any implied warranties of fitness for a particular purpose. In view of ongoing research, equipment modifications, changes in governmental regulations, and the constant flow of information relating to the use of medicines, equipment, and devices, the reader is urged to review and evaluate the information provided in the package insert or instructions for each medicine, equipment, or device for, among other things, any changes in the instructions or indication of usage and for added warnings and precautions. Readers should consult with a specialist where appropriate. The fact that an organization or Website is referred to in this work as a citation and/or a potential source of further information does not mean that the author or the publisher endorses the information the organization or Website may provide or recommendations it may make. Further, readers should be aware that Internet Websites listed in this work may have changed or disappeared between when this work was written and when it is read. No warranty may be created or extended by any promotional statements for this work. Neither the publisher nor the author shall be liable for any damages arising herefrom.

Library of Congress Cataloging-in-Publication Data
Seabrook, Mary, 1960- author.
How to teach in clinical settings / Mary Seabrook.
p. ; cm.
Includes bibliographical references and index.
ISBN 978-1-118-62093-9 (pbk.)
I. Title.
[DNLM: 1. Education, Medical. 2. Teaching – methods. 3. Clinical Competence. 4. Learning. W 18]
R834.5
610.71 – dc23

2013029215

A catalogue record for this book is available from the British Library.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic books.

Cover design by Meaden Creative

Typeset in 9.5/12 pt Minion by Laserwords Private Limited, Chennai, India

1 2014

Contents

Acknowledgements, ix
Introduction, xi

Chapter 1 Creating an effective learning environment, 1
Practical ways to create an environment conducive to learning, 4
Design of clinical placements, 6
Continuity between learners, teachers and patients, 8
Teaching and learning resources, 9
The teaching climate, 9
What makes a good clinical teacher?, 10
Involving patients in teaching, 11
Involving other disciplines in teaching, 13
Some principles of effective clinical teaching, 15
Useful strategies for clinical teaching, 15
Five tips for clinical teaching which do not take time or money, 17
References, 17

Chapter 2 Teaching in clinical contexts, 19
Teaching on ward rounds, 19
General principles, 19
Useful strategies, 21
What you teach unwittingly, 23
The psychiatric ward round, 25
Handover meetings, board rounds and bench rounds, 26
Bedside teaching, 29
Preparation, 29
Structure for bedside teaching, 30
Feedback at the bedside, 34
Examination practice at the bedside, 36

Teaching in clinics, 38
General principles, 38
Supervising trainees in parallel clinics, 40
Effective questioning on presented cases, 41
Seeing the patient together, 42
Supervising students or trainees who are supernumerary, 43
Teaching in the Accident and Emergency department, 46
Teaching the interpretation of images/specimens, 47
Teaching in theatre, 49
General principles, 50
Useful strategies, 50
Teaching practical skills, 56
On-call/remote teaching, 60
Teaching patients, 62
Teaching other disciplines, 64
Further reading on clinical teaching, 65
References, 66

Chapter 3 Workplace-based assessment and feedback, 67
The workplace-based assessments/supervised learning events, 67
Using the tools effectively, 69
Case-based discussion, 71
The mini-clinical evaluation exercise (Mini-ACE in psychiatry), 73
Directly observed procedural skills, 75
Multi-source feedback (MSF), 77
Teaching observation tools, 79
Giving feedback, 81
Giving negative feedback, 81
General principles of feedback, 82
Useful strategies for giving feedback, 82
Feedback models and structures, 85
Further reading on assessment and feedback, 89
References, 90

Chapter 4 Common problems in clinical teaching, 91
Balancing teaching and service demands, 91
Pitching teaching at the right level , 94
Dealing with complaints and clinical incidents, 96

Ad hoc teaching, 100
Teaching people at different levels together, 101
Teaching older or more experienced colleagues, 103
Engaging the quiet or reluctant learner, 104
The difficult consultation, 106
Teaching multiple students, 107
Teaching trainees with no interest in your speciality, 108
References, 109

Chapter 5 Next steps, 110
Developing as a teacher, 110
Evaluating your teaching, 111
Useful resources, 115

Appendix Glossary of assessment tools, 118

Index, 119

Acknowledgements

Thanks to the following people who have assisted with providing examples, reviewing draft material or other support:

Amrit Sachar, Stephanie Strachan, Catherine Bryant, Adam Chambers, Fahmida Chowdhury, Nicholas Culshaw, Yaya Egberongbe, Jeban Ganesalingham, Richard Gummer, Deepak Joshi, Diana Kelly, TJ Lasoye, Mary Lawson, Heidi Lempp, Thomas Lloyd, Camilla Kingdon, Deepti Radia, Catherine Scrymgeour-Wedderburn, Alex Seabrook, Matt Staff, Nishanthan Srikanatha, Rosalinde Tilley and Alan Taylor. I am also indebted to all the doctors and colleagues I have worked with over the years.

Special thanks to Helen Graham and Rachael Morris-Jones for inspiring me.

Introduction

Traditionally, learning to become a doctor has been an apprenticeship, with students and junior doctors working alongside practising clinicians and gradually taking on more responsibility for patient care. In recent years, the nature of the apprenticeship has changed: in many places, the master–apprentice relationship has become less prominent and junior doctors now work within wider teams of colleagues. At the same time, there has been an increased formalisation of training with the development of curricula that specify what is expected at each stage. There has also been more emphasis on providing regular, structured teaching, which tends to take place away from immediate clinical demands.

Nothing, however, can replace the centrality of 'on-the-job' learning because assessing and managing patients requires so much more than can ever be taught in a lecture theatre. Over 100 years ago, William Osler said that

> *To study the phenomena of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all* [1].

In a clinical environment, people, often unconsciously, take in the sights, smells, sounds, the way in which the team works and decisions are made – multiple facets and subtle nuances of practice that can only be learnt on the job. Doctors often call this 'learning by osmosis' and, although much can be learnt in this way, learning can be greatly enhanced by good supervision.

Individual supervisors can make a real difference, but face conflicting demands as clinical environments have become increasingly pressurised. Greater bureaucracy, busier clinics, less time with patients and targets focused on clinical work rather than education, all make finding time for teaching challenging.

This book aims to help medical teachers/supervisors at whatever stage – from students to consultants – to explore different ways in which to help others learn. It is designed primarily as a practical manual, providing examples

of hands-on strategies that can be used in daily supervision and teaching. These have been gathered from first-hand observation or reports of effective teaching provided by students and doctors. The content is underpinned by educational theory and evidence, but references and theoretical explanations are kept to a minimum as there are many existing books that cover this material (see Further Reading sections).

The book is divided into five chapters:

1. Creating an effective learning environment.
2. Teaching in clinical contexts: strategies suitable for teaching during routine clinical work and for teaching patients and other disciplines.
3. Workplace-based assessment and feedback: effective ways to use the current tools.
4. Common problems in clinical teaching: guidance on issues such as teaching multiple students and pitching teaching at the right level.
5. Next steps: suggestions for further developing your teaching.

Not everything will be relevant to everyone, but there should be something for all. Some suggestions may seem idealistic, but the contexts in which doctors teach vary enormously, so select what is appropriate to your context. The book was written for doctors in hospital and community trusts, but some sections may also be relevant to general practitioners or other disciplines.

Some ideas or information relate specifically to *students* (undergraduates), others to *trainees* (postgraduates) and some to both (*learners*). *Teachers* and *supervisors* refer to those in a teaching or supervisory role, whatever their level of seniority.

Each chapter has a number of sections containing some or all of the following:

General principles of teaching relevant to particular clinical settings.

Useful strategies: drawn from good practice observed by the author or described by medical students or doctors.

Vignettes: practical examples of teaching and learning, chosen to illustrate specific points.

Quotes: from famous people about education.

Teachers' and learners' comments: views from the shop floor (sometimes paraphrased).

Challenges and thinking points: designed to help you explore key issues and apply ideas to your own teaching.

Discussions: commenting on the challenges and thinking points.

Theories of learning: a few theories of particular relevance are included.