

Strategies to Overcome Six Common Clinical Teaching Challenges¹

1) Overcoming unequal contributions from a group of learners

- a. Set expectations for equal contributions at the beginning of the interaction
- b. Ask each individual to prepare for the topic to be discussed in advance (email resources/ask students to provide resources to the group)
- c. Assign roles to group members and rotate these roles (board scribe, patient presenter)
- d. Call on students by name
- e. Go around the room and call on each group member
- f. Promote hands-on exercises
- g. Redirect the over-contributors (challenge their knowledge/ask probing questions / assign research topic to share with the group/ provide feedback on their group contribution)
- h. Reduce distractions (shut the door/ use less computers/ mute the TV)
- i. Prepare interactive lessons (physical exam/ procedure demonstrations/ pictures/ EKGs/ radiology rounds)

2) Addressing learner's lack of interest/enthusiasm (e.g. no one wants to be there)

- a. Establish a comfortable environment for learning (introduce yourself on professional and personal level)
- b. Use icebreakers and small group strategies (have students introduce themselves)
- c. Be enthusiastic
- d. Be aware of different learning styles (visual, auditory, kinesthetic) and adjust teaching accordingly (e.g. use board, lecture, role play)
- e. Directly engage the student and promote interaction – e.g. engage students by calling on them
- f. Allow silence to encourage student participation (remain silent until students involve themselves)
- g. Provide incentives (food/candy, shorten period of class)
- h. Identify student interests and motivations
- i. Stress necessity of participation (e.g. make student aware that participation is part of the evaluation, reinforce importance as it relates to future patient care and exams)

3) Responding when the teacher does not know the answer

- a. Acknowledge your own lack of knowledge
- b. Use the approach: “We are going to help each other learn”
- c. Turn the question back to the students and follow-up → learning pearl
 - Agree on research goals.
 - Determine where and when to discuss the answer.
 - Direct learners about where they can find the answer.
 - Be explicit about the duration of the student presentation; resources to use (UpToDate, textbook, original research article); depth of research; specific information to obtain.

¹ Authors: Deza, C, Dickstein, A., Dmytrasz, K., Freebern, E., Kendale, S., Lucke, M., Meyer, C., Nathenson, M., Ritze, P., Sarges, P., Scaffidi, R., Silverman, E., Stafford, T., Taghizadeh, N., and Teplinsky, E.; Medical Education Elective, MED 436 TM, March 2009.

4) **Balancing clinical obligations with teaching**

- a. Be well-organized.
- b. Teach learners to be organized.
- c. Set clear objectives for yourself and other team members (see roles/expectations section below).
- d. Prepare teaching material in advance (i.e. teaching scripts, articles, handouts).
- e. Incorporate teaching scripts into work rounds.
- f. Teach pearls during rounds.
- g. Assess learner's fund of knowledge and target material appropriately.
- h. Take notes/keep lists of potential topics/questions to discuss during available time
- i. Create list of key topics for the rotation that the student should be aware of by the end of the teaching session.
- j. Take notes on the learner's performance throughout the rotation. Set time aside to go through your notes with the learner.

Tips:

- Use Teaching Scripts effectively:
 - 1-2 minute scripts that can be delivered on the wards – i.e. teaching on the fly.
 - Topic – “less is more” – specific, relevant, brief, provide framework.
 - Importance of topic – why is it critical for the student to know this information?
 - Pitfall – highlight the common mistake that results from misuse of the information.
 - Focus on key points – what are the take-home messages.
 - Ask questions/assess if the material is effectively conveyed.
- Think of topics on clinical pearls → focus on pearl.
- Identify learner's readiness for learning.
- Develop a framework for thinking about the problem.
- Set aside teaching time.
- Schedule time to follow up on questions.
- Teach the hot topics for rotation.
- Ask for feedback on teaching (strengths and suggestions for improvement).

5) **Articulating roles and expectations**

- Review teaching and learning expectations:
 - a. Pre-rounding: Set specific expectations for pre-rounding. Examples include average arrival time, what specific information to collect (vitals, labs, overnight events, physical exam findings, etc.), number of patients for which student is responsible.
 - b. Patient interaction: Explain expected level of interaction between student and patient (shadowing vs. independent), level of responsibility for patient plan.
 - c. Schedule:
 - Arrival: What time is the student expected to arrive? Where does the student meet the team?
 - Day End: When and how does the day end?
 - Agenda: Explain an average day's agenda including any expected lectures or conferences.
 - d. Call: Define how often students are expected to take call, and how the call schedule will be determined.

- e. Notes: Clarify types of notes the student is expected to write (for example, admission note, progress note, post-op note, etc.). Define contents of the note, and when notes should be completed. Review student's notes and provide feedback.
- f. Reading:
 - Resources: Provide students with recommendations for appropriate books, articles, etc.
 - Quantity: Define expectations for how much independent reading is appropriate, and whether students should read in the hospital or at home.
 - Presentations: Define the types and duration of presentations for which the student is responsible (work rounds, attending rounds, grand rounds, etc.).
 - Teaching: Explain what students can expect from the team in terms of formal or informal teaching.
 - Assessment: Define how the learning will be assessed.

6) Providing Feedback

- a. Provide feedback throughout the rotation.
- b. Good feedback begins with self-assessment from the learner. It should be specific, timely, non-judgmental, based on specific behavior rather than personality.
- c. Student should be allowed the chance to reflect, and to create an action plan with you.
- d. Ask the student for feedback on your assessment.