

Teaching Tips

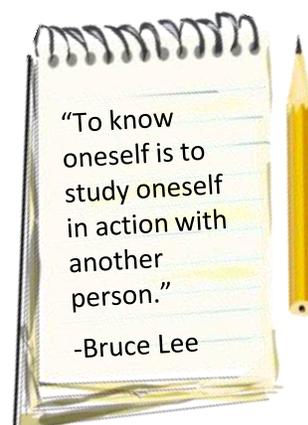
Volume 5 Issue 3 March 2014

Department of Family & Social Medicine Faculty Development E-Newsletter



Teaching & Learning Styles in the Clinical Setting

Every clinician has a unique style of interacting with patients. Similarly, every clinical teacher develops their own style of teaching. Our last issue looked at the differences between pedagogy and andragogy from the perspectives of the teacher and learner. This month we provide more detail on different strategies for assessing knowledge, attitudes, and clinical skills, as well as acknowledging personality preferences in our learners and ourselves.



Assessing Knowledge		
Assertive Style	Suggestive Style	Collaborative Style
Preceptor asks pointed questions to elicit specific answers.	Preceptor incorporates their opinions and experiences into teaching points.	Preceptor invites the learner to share their ideas and experiences and focuses on understanding the learner's clinical reasoning.
"What would you prescribe for the treatment of ____?"	"____ is one treatment option, but in my experience, ____ may be a better choice in this case because ____."	"What if you found ____ during the physical exam? Would your diagnosis be different?"

Assessing Attitudes
Facilitative Style
Assessing learner attitudes is most accurately done through behavioral observation, but asking questions in a facilitative style also provides information about a learner's feelings. Facilitative questioning allows teaching to go beyond clinical content and creates opportunities for role-modeling potential responses to challenging situations.
"I know the last patient you saw shared some difficult information. How did that encounter make you feel?"
"I sense that something about your interaction with this patient is frustrating you. What do you think is going on?"

Assessing Clinical Skills		
Demonstrate	Supervise & Monitor	Assist
Preceptor role-models specific clinical skills for the learner to observe.	Preceptor supervises the learner as they practice a skill, then watches as they perform it. Monitoring involves minimal interference, but the preceptor is present to ensure patient safety.	Preceptor prepares learner to perform skill by discussing it beforehand and debriefs afterwards, but does not necessarily observe.
"How about you observe my technique during this exam, and I will observe you next time."	"You said you feel comfortable doing this on your own, so I will watch and be here to help if you need it."	"What if you came across ____ during the exam. What would you do next?"

Personality Preferences

Appreciating personality preferences can be helpful in assessing a learner's knowledge, attitudes, and skills. Some learners will need more time to adjust to the clinic than others, and while some people feel they learn best when questioned quickly and unexpectedly, others need more time to reflect.

Asking students about their preferences can promote learner comfort.

References / Resources:

Langlos, J. and Thach, S. Teaching and learning styles in the clinical setting. *Family Medicine*, 2001;33(5):344-6.