



TEST:

**Techniques and Effective Strategies
for Teaching
within a dynamic medical curriculum**



**RADFORD
UNIVERSITY
CARILION**

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└ Learning Objectives:

- Define social presence as relevant to a virtual environment and discuss challenges and strategies for engaging learners.
- Identify the principles of constructivism that can be utilized during teaching.
- Identify a framework, using constructivist strategies, to teach while rounding on the wards or other clinical settings.
- Discuss challenges and strategies related to teaching in the operating room environment.



Effective Teaching Strategies for the Didactic Environment

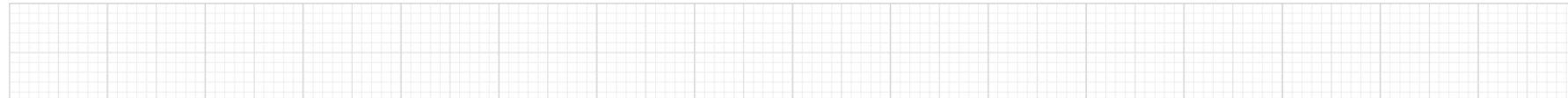
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DECEMBER 14, 2020

Effective Teaching Strategies for the Didactic Environment

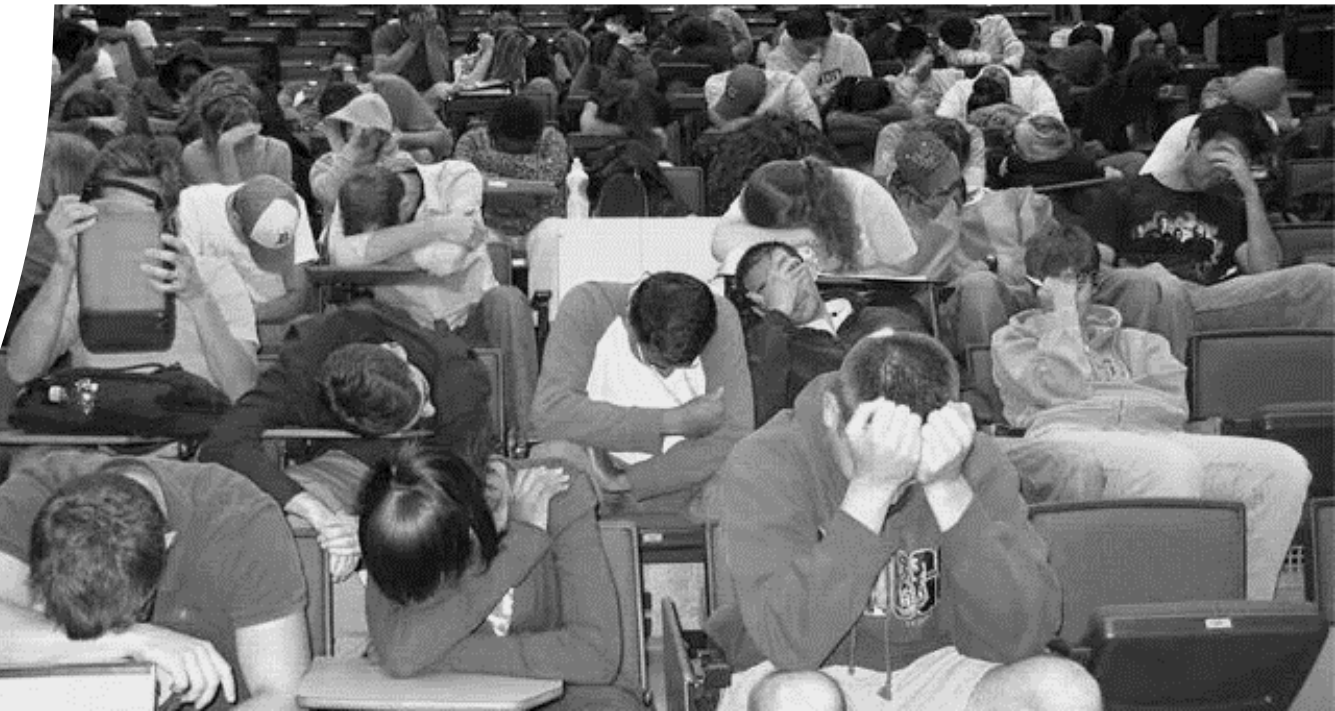


Didactic: designed or intended to teach, intended to convey instruction and information



Effective Teaching Strategies for the Didactic Environment

- Lectures aren't just boring, they're ineffective
- Patel M. Changes to postgraduate medical education in the 21st century. *Clin Med (Lond)*. 2016 Aug;16(4):311-4.
- Van Way C. W., 3rd (2017). Thoughts on Medical Education. *Missouri medicine*, 114(6), 417–418.
- Ferguson PC, Caverzagie KJ, Nousiainen MT, Snell L; ICBME Collaborators. Changing the culture of medical training: An important step toward the implementation of competency-based medical education. *Med Teach*. 2017 Jun;39(6):599-602.
- Emanuel EJ. The Inevitable Reimagining of Medical Education. *JAMA*. 2020;323(12):1127–1128.
- Guse AH, Kuhlmeier A. Model study programs in medicine : Innovations in medical education in Hamburg and Berlin. 2018 Feb;61(2):132-140.
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Effective Teaching Strategies for the Didactic Environment

- Stop lecturing
- Engagement with purpose without reprisal
- Visualization
- Cooperative learning
- Inquiry-based instruction
- Differentiation
- Technology in the classroom, before the classroom, and after
- Professional development through historical context



Social Presence in a Virtual Environment

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DECEMBER 14, 2020

Who has taken material intended for in person instruction and utilized it in the virtual environment without making modifications?



Who has experienced a perceived lack of engagement from students within the virtual environment?

TEST CASE RUC Pharmacotherapeutics

Spring Semester (Pre-COVID-19)



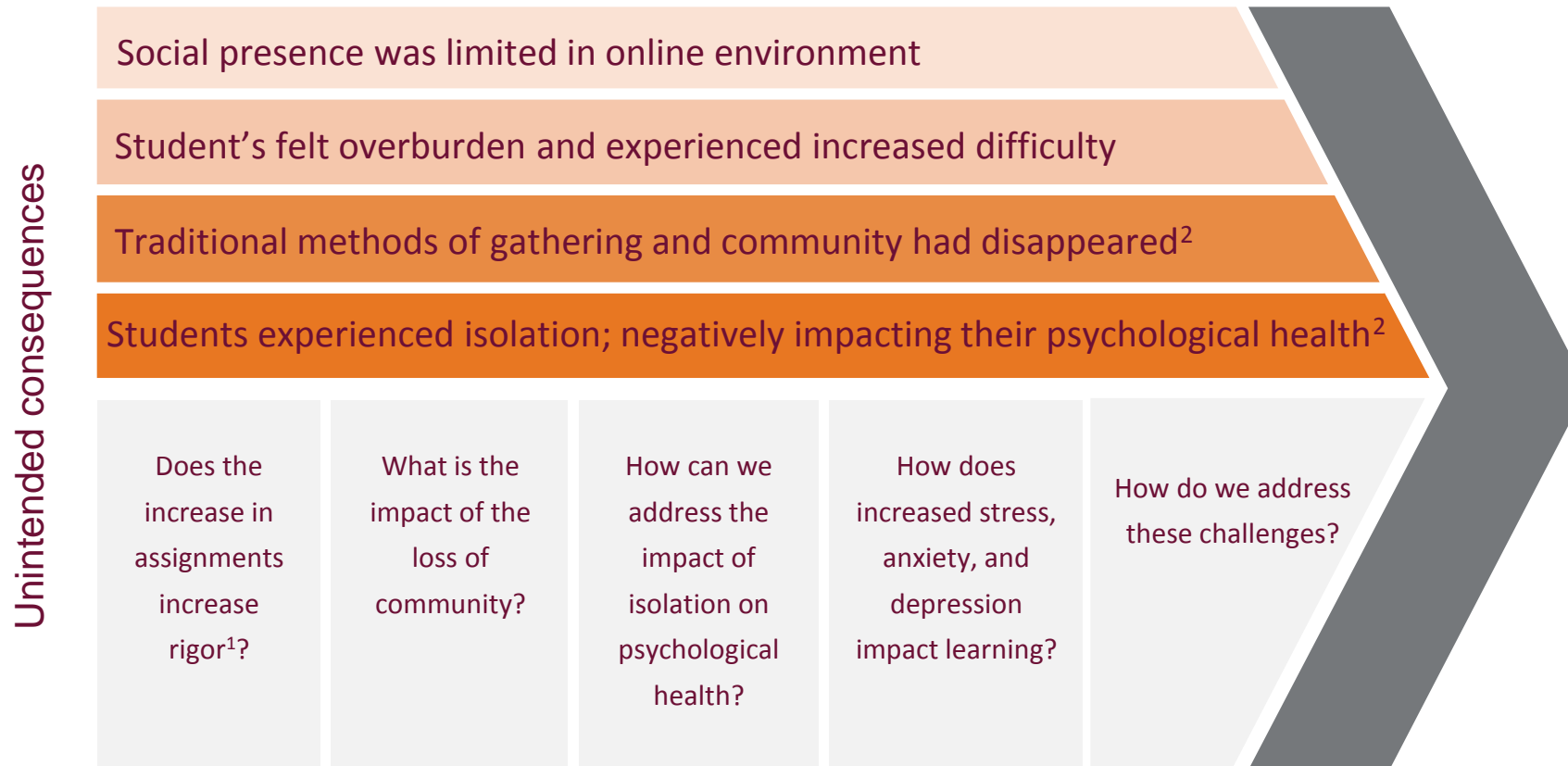
- 8 weeks in person
- 3 - hour **didactic lecture**
- Group-based **case discussions**
- MCQ exam every 4 weeks



- 6 weeks - Pre-recorded voice over PPT
- **2 cases per week** utilizing a minimum of 3 references
- Two **discussion board posts**
- **Required** 1-hour weekly questions and answer session
- MCQ exam every 3 weeks

Spring Semester Post—COVID-19

Reflection: What was the impact?



1. Graham C, Essex C. Defining and Ensuring Academic Rigor in Online and On-Campus Courses: Instructor Perspectives. Annual Proceedings of Selected Research and Development [and] Practice Papers Presented at the National Convention of the Association for Educational Communications and Technology (24th, Atlanta, GA, November 8-12, 2001). Volumes 1-2; see IR 021 504.

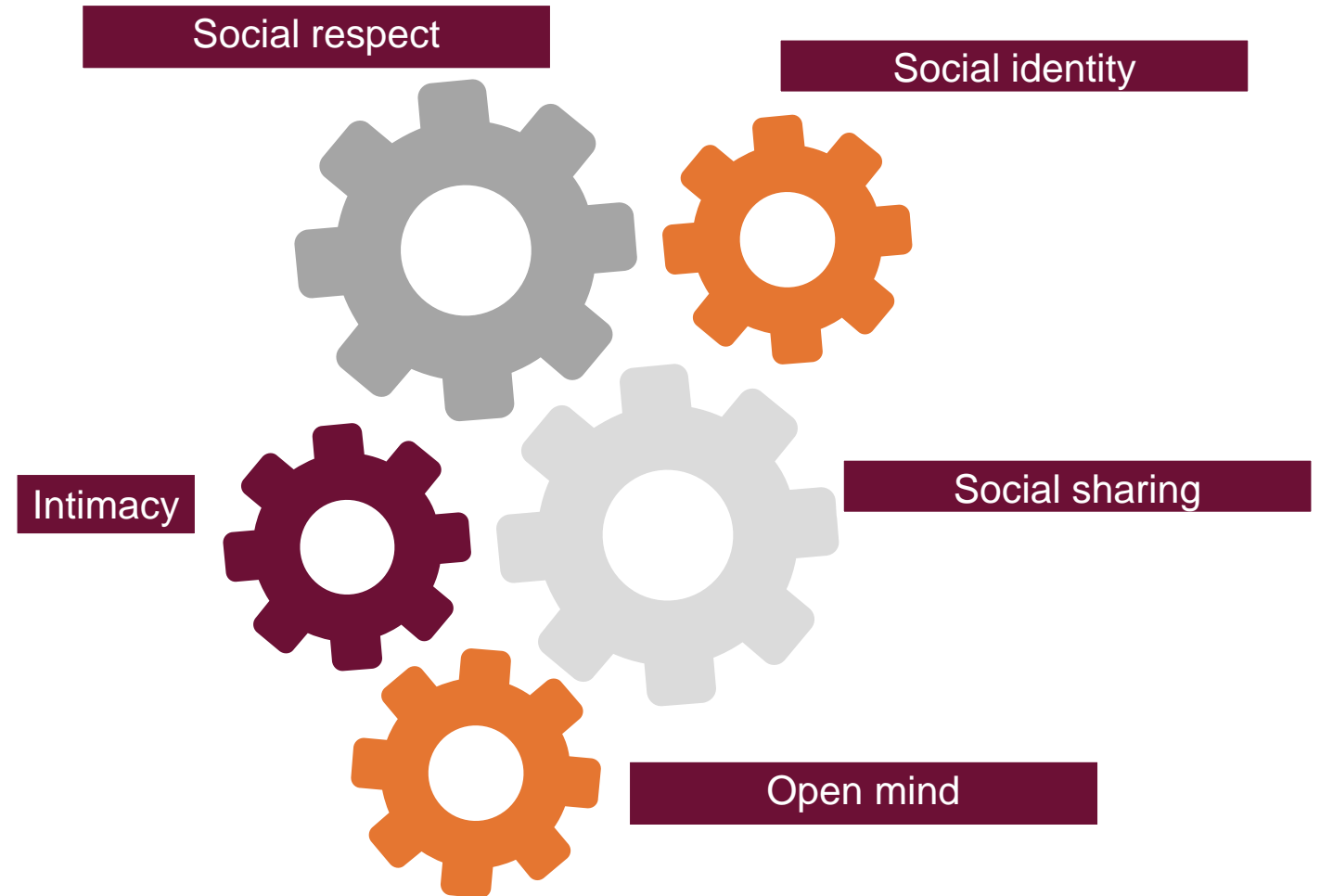
2. Hilburg R, Patel N, Ambruso S, Biewald MA, Farouk SS. Medical Education During the Coronavirus Disease-2019 Pandemic: Learning From a Distance [published online ahead of print, 2020 Jun 23]. *Adv Chronic Kidney Dis*. 2020;doi:10.1053/j.ackd.2020.05.017



WHAT IS SOCIAL PRESENCE?

The **level of connectedness** among instructors and students that determines how motivated participants are to take an active role in their own and their peer's learning within the online environment.^{3,4}

Five Facets of social presence:



3. Sung E, Mayer, R. Five facets of social presence in online distance education. *Comput Hum Behav* 2012. Volume 27, Issue 5. Pages 1738-1747 <https://doi.org/10.1016/j.chb.2012.04.014>.

4. Whiteside A, Dikkers A. 2014. *The Power of Social Presence for Learning*. [online] Available at: <https://er.educause.edu/articles/2014/5/the-power-of-social-presence-for-learning> [Accessed 1 December 2020].



Establishing social connections is a **basic human need** and is necessary in the online realm.

- Maslow's before Blooms

High social presence positively impacts:

- Online learning and interaction
- Learner's achievement
- Satisfaction, affirmation, support, and a sense of community

Lack of social presence attributes to:

- Negative attitude towards teacher's effectiveness
- Decreased learner achievement

Social Presence

Instructor accessibility

Create social connections to build community

Utilize available tools for connectedness

Leverage student prior experience on assignments

Allow for the opportunity to express opinions

Consistent communication



Online office hours

Email and phone

Private spaces

Public discussion forum



Increases engagement with ownership

Learning environment

Timely feedback

Create a safe space for respectful disagreement

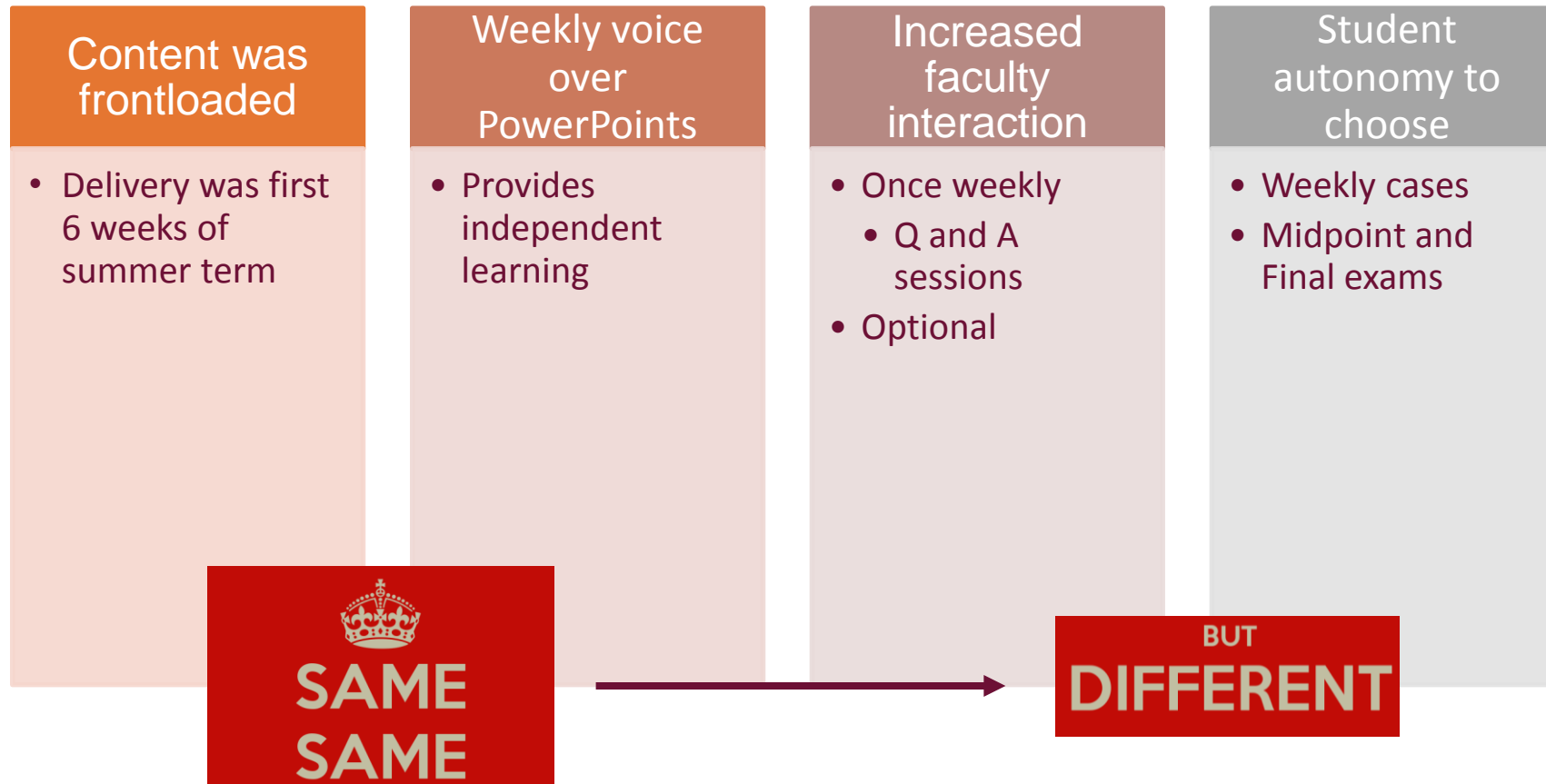
Weekly summary

Weekly previews

Timely grading



Adjustments to Summer RUC Pharmacotherapeutics course





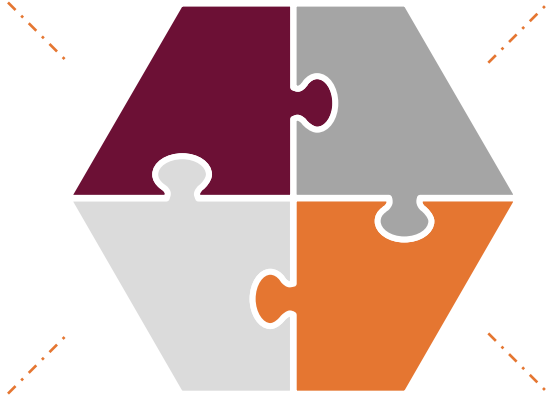
SUMMARY

SOCIAL PRESENCE

Small changes can have big impacts

Embrace the change

Address the differences and be transparent



Empower the learner to make choices

Work towards an environment of social respect and collaboration

Constructivism applied to Medical Education

CHAD J. DEMOTT, MD

DECEMBER 14, 2020



“The most important factor influencing learning is what the learner already knows.
- Ausubel

Constructivism Defined (loosely)

- Knowledge is not acquired as a blank slate but is built upon frameworks already established.
- *Schemas*
- Assimilation and Accommodation
- The teacher uses multiple ways to build or facilitate understanding

Constructivist Framework Applied

- Ask Questions.
- To determine the *schema* or framework that the learner already has created.

Constructivist Framework Applied

- Ask why and how questions to help the learner solidify the framework already created.
- Ask “what if” questions to help build (assimilate) new frameworks.
- **This does not take the place of reading to obtain baseline knowledge. You have to know something to start building anything.

Teaching within the Operating Room Environment Challenges and Strategies

T. A. LUCKTONG MD, FACS

DECEMBER 14, 2020

Background

- Laparoscopic/Robotic General and Bariatric surgeon
- Resident education in complex technical surgery since 2002
 - Laparoscopic suturing, stapling, GI anastomoses, revisional surgery
 - Elective and emergent settings
- Surgery Clerkship Director 2004-2019, VTC from 2010
 - Student Simulation Course 2010-present
- Co-Director of Surgical Quality 2019-present

OR Environment Features

- Task focused
- Team based environment—multiple interdependent roles
- Requires cohesive teamwork
- Relies on good communication, understanding of tasks at hand, adequate preparation and anticipation
- Rich environment for education



Model and Discuss Ideal Behavior

- Team interactions
- Communication
- Leadership
- Process compliance
- Room awareness
- Crisis management
 - Maintaining composure
 - Optimizing resources
 - Recruiting help
- Trainee education



Operative Patient Care

- Significant potential danger—prolonged careful concentration
- Potential rapidly changing conditions—quick reactions to adapt



Obligation to Patient vs Obligation to Trainee

- Reconciling the ethical challenge via appropriate supervision
- Best possible patient care
- Graduated responsibility towards independent practice
- Convey technical skills and intraoperative judgment



Teaching Technical Skills

- Remember new task is unnatural for novice
- Partial task learning for complex tasks
- Improvement occurs over weeks not hours
- Patience—recognize trainee and own limitations
- Concentration fatigue--Take breaks

**PLEASE BE PATIENT
STUDENT DRIVER**



Teaching Technical Skills

- Everyone starts small—involve students and interns early
- Escalate difficulty when appropriate
- Immediate actionable feedback
 - Nonjudgmental when possible
- Frequent demonstration, vary explanations
- Tone of encouragement—learning environment




This Park contains the following features

S M L XL

LOOK BEFORE YOU LEAP!

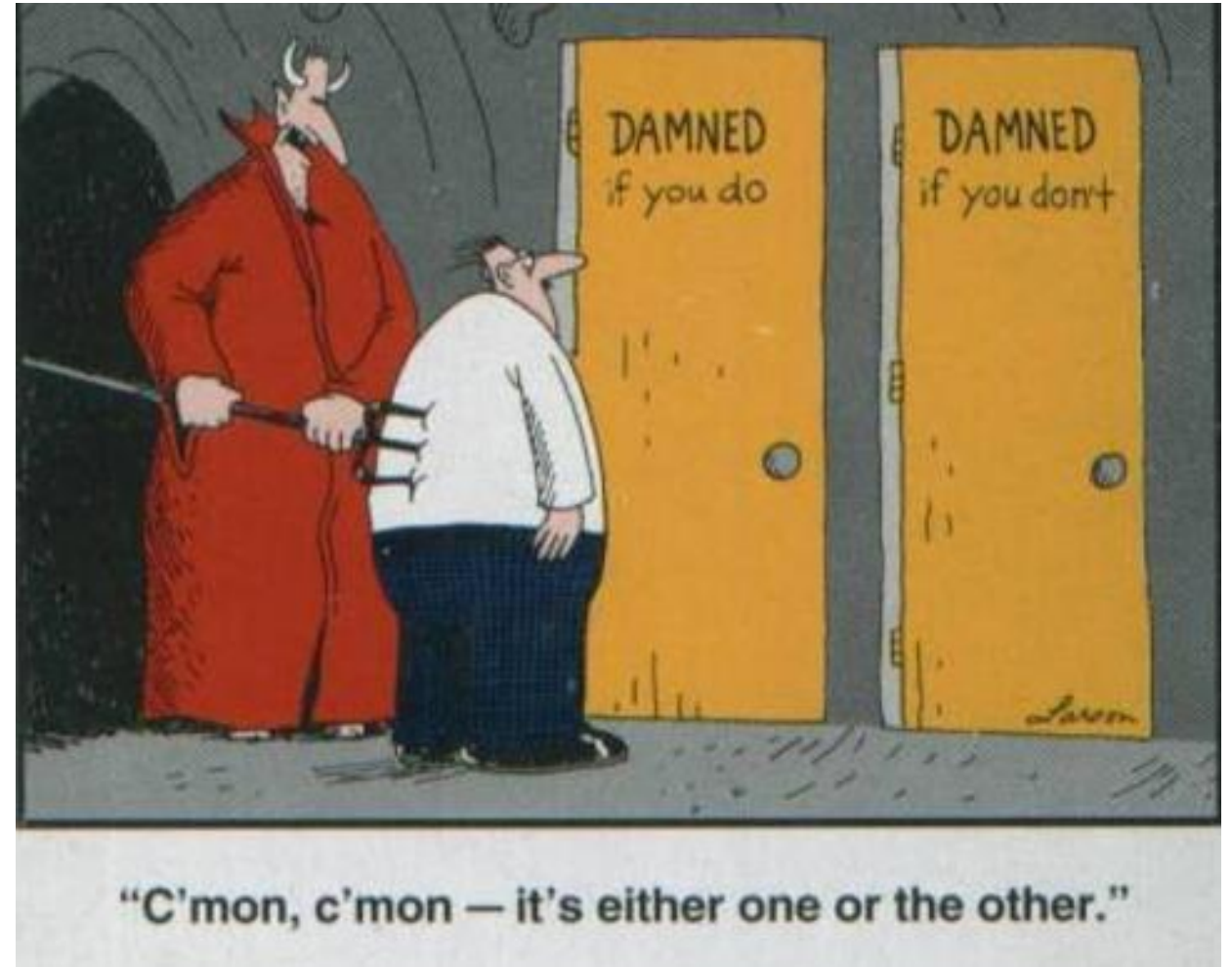
Freestyle Terrain has four levels of progression and designation for size. Start small and work your way up. It is your responsibility to familiarize yourself with the terrain before attempting any of the features.

Designations Are Relative To This Resort

 <p>Freestyle Terrain S Know It. Respect It. Ride It.</p>	<ul style="list-style-type: none">- Introductory freestyle terrain- Small features, surface-level rails & boxes- Less Difficult features
 <p>Freestyle Terrain M Know It. Respect It. Ride It.</p>	<ul style="list-style-type: none">- Small to medium size features- Ride-on rails & small to medium half pipe- Difficult features
 <p>Freestyle Terrain L Know It. Respect It. Ride It.</p>	<ul style="list-style-type: none">- Medium to large size features- Introduction to jump-on rails- Rail's with gaps & narrow surfaces- Large half pipe- More Difficult features
 <p>Freestyle Terrain XL Know It. Respect It. Ride It.</p>	<ul style="list-style-type: none">- Largest size features & jumps- Jump-on rails with gaps & narrow surfaces- Advanced and Experts only- Most Difficult features

Teaching Judgement—Tough Choices

- Beyond anatomy and pathophysiology
- Share the bad experiences that have taught good judgment
- Think aloud, express concerns
- Discuss choices
- Encourage thinking ahead
- Discuss exit strategies
- Discuss how to fail safely when success is less likely



Summary

- Utilize features of OR environment for education
- Teach through example and discussion
- Acknowledge the challenges of teaching in OR
- Balance good patient care with trainee education
- Re technical skills—start small/early, give feedback, and be patient
- Discuss intraoperative choices and decisions to teach judgement

