Ambulatory/Clinical Teaching

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Learning Objectives

- Review clinical teaching core principles
  - Learning Environment
  - Teacher Skills-Questioning
- Introduce teaching with limited time skills
  - One Minute Preceptor
  - RIME
- Review UTUBE videos, if time permits or post session
- Reinforce Assessment Drives Learning
Teaching with Limited Time

**Step 1:** Identify the needs of each individual learner:
- Ask questions - AND/OR -
- Conduct a two-minute observation/
- Set/align expectations

**Step 2:** Select a model for rapid teaching:
- Today:
  - One minute preceptor
  - RIME
  - Questioning

**Step 3:** Provide feedback on performance:
- Be specific
- Self-assessment
- Comment on strengths
- Discuss areas for improvement
- Give direction ie next steps, which should include a self-directed question
A tool for preceptors/Gather Facts

RIME

R = reporting
I = interpretation
M = management
E = education
RIME-based Tool

- Frames evaluation for our trainees
- Improves trainee performance
- Preceptor describes what they see in RIME terminology (R+I+M+E)
- Learners practice several levels at once
R=Reliably gather, organize and communicate clinical information

I=Successfully take ownership of the creation and justification of diagnostic hypotheses

M=Successfully take responsibility for all aspects of care

E=Consistently educates others, including patients & self

*See handout*
UTUBE Clinical Scenarios

- [https://youtu.be/hmKvei3thwQ](https://youtu.be/hmKvei3thwQ)
  - (one minute preceptor)

- [https://youtu.be/P0XgABFzcgE](https://youtu.be/P0XgABFzcgE)
  - (One minute preceptor)

- [https://youtu.be/ifTAzAiTPQY](https://youtu.be/ifTAzAiTPQY)
  - (RIME)
Additional Skills and Behaviors

- Interpersonal & Communication Skills
- Professionalism & Educational Attributes
- “Next Steps”
  - Suggest and document 1-2 further steps to progress learner along the continuum of competence
Diagnosing a Learner

- **Ask Questions** *(Pre)*
  - Diagnosis, treatment or workup questions

- **Diagnose learner**
  - Get a commitment and probe for evidence assesses learner knowledge and reasoning skills

- **Pause and wait for an answer**

- **Teach/Tailored Instruction** *(During)*
  - General rules
  - Provide feedback
  - Reinforce what as right

- **Correct mistakes** *(Post)* and/or reinforce a self-directed learning opportunity
Help students to identify what they already know

- “Activate” prior knowledge through brainstorming and briefing

Help students elaborate their knowledge

- Provide a bridge between existing and a new information - for example, use of clinical examples, comparisons, analogies
- Debrief the students afterwards
- Promote discussion and reflection
- Provide relevant but variable contexts for the learning
“One-minute preceptor” model

Patient encounter (history, examination, etc)

Get a commitment (“what do you think is going on?”)

Probe for underlying reasoning (“What led you to that conclusion?”)

Reinforce what was done well (“Your diagnosis of X was well supported by the history…”)

Help Learner identify and give guidance about omissions and errors (“Although your suggestion of Y was a possibility, in a situation like this, X is more likely because…”)

Teach general principles (“When that happens, do this…”)
Five-Step Microskills Model of Clinical Teaching

1. Get a Commitment- “Reporter”
   1. What do you think is going on?

2. Probe for Supporting Evidence- “Interpreter”
   1. What led you to that conclusion?

3. Teach General Concepts-promote “manager” skills
   1. How do you approach/think about…? (“Manager”)

4. Ask/Tell Them What They Did Right
   1. Specifically, you did a great job of…

5. ASK/Correct Mistakes-developmental improvements
   1. Next time this happens,…(self-direction)
**How to give effective explanations??**

- Check understanding & grasp of the topic
- Give information in “bite size” chunks
- Put things in a broader context when appropriate
- Summarize periodically (“so far, we’ve covered…”)
- Reiterate the take home messages; again, asking students...
Seating arrangements for teaching in clinic

“Sitting In” as observer

Three way consultation

“Hot seating”
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Miller’s Pyramid-Assessment

Figure I Framework for Clinical assessment

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Overcoming obstacles to teaching: TIME

- Use “point of care” practices as teaching opportunities (connect book medicine with clinical medicine)

- Teach in “small bites” (2-3 minutes)

- “Just in time” – emails, review log books, look ups assignments with f/u with discussions,

- Teach your learners to be proactive (contract a minimum of one teaching point per session)
RIME Clinical Competency Framework

- R.I.M.E Model
  - Describes performance goals for trainees.
  - Apply to single encounter or to overall performance.

From Sally Santen M.D., Ph.D: Teaching and Assessing Clinical Skills https://www.coursera.org/course/clinicalskills