Transform a teaching moment into your own learning moment

Fundamental Teaching Activities Framework

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s clinical preceptors, we often find it difficult to make time for faculty development activities. It is also natural for us to wonder what is expected of us and what our next professional development steps should be.

The Fundamental Teaching Activities (FTA) Framework developed by the College of Family Physicians of Canada¹ can help inform this process and provide practical ways in which to improve our day-to-day teaching activities. In this way, daily "teaching moments" can become "learning moments" for us as preceptors.

The FTA Framework succinctly describes the activities teachers must undertake within the context of each teaching task, whether in a clinical setting or elsewhere. A list of these tasks and activities appears in Figure 1,1 which summarizes all of the areas covered by the FTA Framework. It was developed by the Working Group on Faculty Development of the College of Family Physicians of Canada's Section of Teachers. The working group consulted groups of teachers at every stage of the writing and editing process and took into account the opinions of residents and students. In preparing the FTA Framework, the working group made a direct connection to our teaching tasks and responsibilities.

To better understand the application of the FTA Framework, we will use the example of the role of a clinical coach, which is a clinical supervisor who uses the opportunities provided by day-to-day practice to act as a coach and support learning. This role has been broken down into 5 key activities in Figure 1.1

This article presents a few specific ways in which we can use this section of the FTA Framework to develop our skills as teachers by reflecting on our actions as preceptors—a principle that we are already applying to our clinical tasks 2



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Gain a fuller understanding of the expectations of a clinical teacher

It might seem natural to go from being a resident to being a preceptor, or from being an experienced clinician to being a clinical teacher. However, it is not as simple or as automatic as it might appear, even if you endeavour to make your interventions as meaningful as possible for your learners. For many years, the expectations for clinical teachers were implicit; however, this is changing.3

The simple fact of reviewing these expectations and anticipating them using the FTA Framework will help you to prepare and be more effective. Glancing at the list of activities in the section on the clinical coach (Figure 11) might inspire you. These activities will enable you to transform straightforward clinical exposure into important learning opportunities for your learners. They will enable you to transform these moments into something that will make a lasting contribution to their development as future clinicians. Specific actions are described to the right of each activity (Figure 2).1 Try 1 or 2 every day and pay close attention to the effect of your intervention on learners.

You might think that you are using some of these best practices spontaneously; however, check the feedback you receive from learners and colleagues to make sure this is the case. If it is, try to deepen these practices, as suggested in the next column (Figure 2).1 This evolution from one level to the next corresponds to the natural development of a clinical coach. It might also require more experience or additional training.

Create the next step in your learning plan as a preceptor

Keep this tool on hand so that when preceptor training is announced and you are asked to describe your needs, you can be specific. You might find that you already know how to use specific strategies to facilitate clinical reasoning, but now you need to learn how to discuss clinical reasoning processes with learners who are at different levels. Or you might realize that you already know how to provide effective constructive feedback, but you are unsure how to encourage learners to make meaning of feedback.

If you engage in this process iteratively and as often as possible, you will develop gradually; always focus on

Figure 1. Fundamental Teaching Activities Taxonomy

CLINICAL PRECEPTOR

TASKS

Clinical Coach

A supervisor in day-to-day practice

An educational advisor along the course of learner training

Competency Coach

ACTIVITIES

- Explicitly embodies the roles, attitudes, and competencies of a family physician in clinical work
- Promotes and stimulates clinical reasoning and problem solving
- Gives timely, learner-centred, and constructive feedback
- Uses program assessment tools to document observed learner performance according to level of training
- Employs reflective processes to refine clinical supervision

- ▲ Helps learner design and update his or her individual learning plan
- ▲ Guides a comprehensive periodic progress review informed by the learner's self-analysis
- Assists learner in his or her professional development
- Adjusts teaching interventions to support a learner facing progression challenges

TEACHER OUTSIDE THE CLINICAL SETTING **TASKS**

Teacher – Design and delivery of teaching sessions outside the clinical setting

ACTIVITIES

- Prepares teaching session (before)
- Facilitates teaching session (during)
- Reflects on teaching session (after)

EDUCATIONAL LEADER

TASKS

Educational Programmer - Design and development of educational programming

Educational Administrator – Leadership roles in teaching sites and educational programs

ACTIVITIES

- Develops curriculum
- Develops strategies for teachers working with learners experiencing progression challenges
- Evaluates programs
- Applies and develops standards
- Engages stakeholders
- Utilizes and develops resources

Adapted from Walsh et al.1

Figure 2. Clinical preceptor

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ite assessment develop rner
and increased

Domain: CLINICAL PRECEPTOR

Applies basic educational principles to each teaching activity

Applies basic and advanced ed principles to each teaching act

Task I: Clinical Coach – A clinical supervisor in day-to-day practice, employing cli work for opportunistic teaching and learning

Helps learning through reflection in action

Explicitly embodies the roles, attitudes, and competencies of a family physician in clinical work

- Verbalizes clinical reasoning processes for learners (including challenges, reactions, and ethical dilemmas)
- Displays enthusiasm for family medicine
- Provides a safe learning environment for patients and learners

patient care

- Utilizes appropriate educationa to explicitly articulate decisions
- Expresses family medicine value principles within day-to-day clin

Promotes and stimulates clinical reasoning and problem solving

- Uses specific strategies to facilitate/assess clinical reasoning
- Adapts to learner's reasoning process
- Guides learner in the refinement of clinical reasoning
- Discusses clinical reasoning pro learners who are at different lev
- Provides opportunity for learner and reflect on his or her own w

Gives timely, learner-centred, and constructive feedback

- Provides and receives formative, effective feedback according to the components of effective feedback
- Encourages learner to make meaning of feedback
- Helps learner select relevant learning strategies and resources for self-learning
- Fluidly adapts observation and depending on learner's needs for less independence
- Guides and directs learner's ref next steps to encourage learnin feedback
- Encourages learner to reflect or role as teachers

Helps learning throug reflection on action Uses program assessment tools to document observed learner performance according to level of training

- Demonstrates skill at using different assessment tools
- Uses appropriate tools to correctly describe the learner's performance (eg, field notes)
- Collates and interprets evidence and provides meaningful feedba on multiple sources, including observation
- Consistently chooses appropria tools and coordinates them to a comprehensive picture of lea performance
- Encourages learner's reflection a independence in self-assessment (including identification of strengths and challenges)

Employs reflective processes to refine clinical supervision

- Solicits learner's feedback on clinical supervision
- Seeks peer observation and feedback on specific preceptor-learner encounters
- Incorporates self-reflection and feedback in enhancing supervision
- Collaborates with learner to refine supervision to meet needs
- Seeks educational opportunities beyond the daily reflective process to improve clinical supervision

Adapted from Walsh et al.1

the next step in your development as a teacher. You might also find it helpful to review the statements that describe how each of the 5 clinical coach activities is applied (in the 2 right-hand columns of Figure 2).1 Circle activities that you can already do easily; put a question mark beside those that you need to learn or perfect. Use this list to select the faculty development activities best suited to your needs.

Why not take another step in this direction and transform your next clinical teacher training activity into a reflection on your practice—a Linking Learning to Practice exercise? It has been shown that this is how we truly commit to changing our behaviour. 4 And it is why accreditation systems such as Mainpro® specifically accredit activities that allow us to link learning directly to everyday practice.

Here is a simple way to do this: Find a few supervision activities that you have difficulty applying. Jot down practical questions based on a few incidents that have been challenging for you recently as a preceptor. During the session, identify key elements that might help you and, if necessary, ask the facilitator additional questions. In a few short sentences, write down what you have learned and what you will try to apply next time. All you need to do now is enter this information on the appropriate form on the Mainpro website to receive credits.5

Discuss best practices and strategies for clinical teaching

Observing a colleague who is supervising a learner and discussing the strategies that he or she uses can provide a valuable opportunity to adopt best practices or face challenges that come up in our role as teachers.

You can use your group of fellow preceptors (or community of practice) to create a learning community that is made up of the teachers on your team. This will enable you to spend time periodically discussing your supervisory practice with your colleagues.⁶

Imagine for a moment that you will soon participate in one of these meetings and that you wish to suggest a teaching topic for discussion. In these situations, the FTA Framework can provide a common language and a starting point for a discussion on process. It can also be used with "teaching scripts" or common situations arising from teaching practice. These situations can be based on the classic situations we encounter as preceptors; the practical knowledge and experience of good preceptors can then be used to develop a prototype for discussion or for a process that most preceptors will find useful.⁷

Making the FTA Framework the focus of discussions among preceptors will help us to become more familiar with its content; it will also facilitate a consensus on what constitutes high-quality clinical

teaching. Why not also use the FTA Framework as a tool for observation and feedback among preceptors?8

Conclusion

We hope that these examples will encourage you to use the FTA Framework to reflect on your teaching practice, both "in action" and "on action." We hope that you will explain to your residents exactly how you use the FTA Framework. This will give them an opportunity to see you employ reflective processes to refine clinical supervision—the fifth key activity in this section of the FTA Framework. In doing so, you will be a role model for your learners, guiding them to reflect on their own practices and helping them to optimize their learning during training. In the process, they will develop these essential skills, which they need to become and remain competent clinicians throughout their careers.

The FTA Framework can be seen as a map, guiding your progress as a reflective clinical preceptor on the road to competency. As preceptors, you will be responsible for guiding your learners' progress throughout their training; the FTA Framework can also guide this process for you. It contains information on your tasks as teachers outside the clinical setting (eg, in small or large group training such as seminars or lectures). Familiarize yourselves with the list of activities linked to these tasks; you will see that there is a strong emphasis on actions to perform before, during, and after teaching activities and that reflection on your teaching is encouraged in each of these contexts.

We hope that the FTA Framework provides you with many possibilities for your own enrichment!

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Acknowledgment

We thank the Working Group on Faculty Development of the College of Family Physicians of Canada for their contribution to this article.

Competing interests

All authors are members of the Working Group on Faculty Development, which prepared the Fundamental Teaching Activities Framework.

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TEACHING TIPS

- Preceptors can use the Fundamental Teaching Activities (FTA) Framework to better understand what is expected of them by anticipating the key activities that make up this task and trying to apply them in the manner described.
- The FTA Framework can help preceptors define their own training plan by identifying next steps to improve their skills and reflect on their own practices.
- Discussion of supervision strategies with fellow preceptors can be facilitated by discussing the FTA Framework within preceptors' communities of practice and by using the FTA Framework as a tool for collaborative peer observation.

Teaching Moment is a quarterly series in Canadian Family Physician, coordinated by the Section of Teachers of the College of Family Physicians of Canada. The focus is on practical topics for all teachers in family medicine, with an emphasis on evidence and best practice. Please send any ideas, requests, or submissions to Dr Miriam Lacasse, Teaching Moment Coordinator, at Miriam.Lacasse@fmed.ulaval.ca.

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