INFORMATION

• CLINICAL TEACHING requires a unique knowledge and skill set ranging from competency-based assessment to digital technologies and teaching interprofessional teams.

• ACGME EVALUATES satisfaction with faculty development to supervise and educate residents/fellows on their annual faculty survey.

• BARRIERS TO FACULTY DEVELOPMENT: and the elements of successful programs/Community of Practice (CoP), are well enumerated in the literature including lack of:
  ○ Time to prepare and incentives
  ○ Support for one’s identity as a clinician teacher (isolation)

• CASE DISCUSSION IS GME’S SIGNATURE PEDAGOGY focusing on:
  o Making the reasoning underlying the assessment, diagnosis and management of the patient’s condition visible

• CASES TEACH THE “WISDOM OF PRACTICE”:
  ○ Illustrative cases are compared with experience and one observes how experienced clinicians wrestle with uncertainty

PROJECT AIM

To implement a brief, on-going faculty development case conference series that expands participants teaching strategies and strengthens their connections as a Community of Practice (CoP) for teachers

METHODS: CASE CONFERENCE

• IMPLEMENTED 1/MO 45-MINUTE TEACHING CASE CONFERENCE:
  ○ Moderator works with case presenter to frame discussion
  ○ 1-2 days in advance, moderator emails precis of the case
  ○ Dial into an audio conference call – no prep needed
  ○ Case is sequentially reviewed - participants ask questions & explain how they may frame the “assessment” and “plan”
  ○ Ends with key teaching pearls/take home points with follow-up readings/resources distributed post conference

METHODS: DIFFICULT TEACHING CASE EXAMPLES

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REFERENCES


RESULTS

ATTENDANCE:
• Audio case conference averages 7 participants with upper limit of 11
• 18 different physicians have participated

EVALUATION
• Unanimous Rating of 4 = “Yes, Definitely”
  4-point rating scale 1 = “No, Definitely NOT”
  o Case scenario was relevant/important?
  o Given a similar situation I have expanded approaches to apply?
  o Case discussion climate was respectful, safe, supported my learning?
  o Connects me to others who value clinical teaching – a community of practice?

• Representative Comments
  o These sessions are extremely valuable and will improve our learning culture in myriad ways!
  o It’s a “relief that I’m not the only one to have had this happen...” “I’d be on alone...”
  o Really appreciate the insight on “teaching emergencies” and flexing styles to match. Frankly I could not have handled this situation the same as the presenter and would likely have lost a significant opportunity for closure.

SIGNIFICANCE/RELEVANCE

• CLINICAL TEACHERS’ VALUE the difficult teaching case conference as a Community of Practice for educators providing a “safe” place to:
  o Explore and learn from colleagues
  o Affirm their roles and value as teachers

• APPROACH is easy and transferable requiring no participant preparation

• NEXT STEPS: Utilize CME learning platform as secure site for case-related resources

All Authors are affiliated with Aurora Health Care – Milwaukee, Wisconsin with clinical faculty appointments at UWSMPH and/or MCW