The One-Minute Teacher:
Six Microskills for Clinical Teaching

Six Microskills

1. Get a commitment - What do you think is going on?
2. Probe for supporting evidence - What led you to that conclusion?
3. Teach general rules - When this happens, do this....
4. Reinforce what was right - Specifically, you did an excellent job of....
5. Correct mistakes - Next time this happens, try this....
6. Identify next learning steps - What do we need to learn more about?

Model concepts:

- Focuses the teacher-learner encounter on the decision-making process used by the learner (i.e. diagnose the learner!).

- Teacher has access to facts the learner uses in decision-making as well as to the decision-making process itself.

- Teaching moments must be highly efficient; encounters are <5 minutes.

Get a Commitment

- Early into an encounter with a teacher, the learner should be encouraged to make a commitment to a diagnosis, work-up, or therapeutic plan.

- The learner feels responsible for patient care, and enjoys a more collaborative role in problem solving.

- Supportive environment of intellectual honesty required.

- Cue: when learner presents patient facts and then stops; resist urge to fill in the verbal blanks!

- Example questions:
  "What do you think is going on with this patient?"
  "What laboratory tests do you feel are indicated?"
  "What would you like to accomplish on this visit?"
  "For what reasons do you think this patient has been noncompliant?"

- Do not confuse this step with collecting further data (ok, and limit it!).

Probe for supporting evidence

- Help the learner reflect upon the mental processes used to arrive at a decision.
- Identify what the learner does and does not know.

- Cue: the learner commits to a stance and looks to the teacher for confirmation; suppress the desire to pass judgement!

- Example questions:
  "What were the major findings that led you to that diagnosis?"
  "For what reason did you choose that medication?"
  "What factors did you take into account when you...?"
  "What else did you consider?"

- This is not a grilling session! "Thinking out loud" must be a low-risk adventure.
Teach general rules

- The teacher can skip this step! It is not imperative that the teacher "teach something" every time.

- Keep it to 1-3 general rules at most.

- Keep information general, avoiding anecdotes and idiosyncratic preferences.

- Example:
  "If the patient has cellulitis, incision and drainage are usually not possible. However, an abscess, which can be drained, is typically heralded by the development of fluctuance."

Reinforce what was done right

- Competencies must be repeatedly rewarded and reinforced.

- Build upon the learner's professional self-esteem.

- Focus on specific behaviors.

- Example:
  "You considered the patient's finances in your selection of therapy. Your sensitivity to this will certainly contribute to improving his compliance."

Correct mistakes

- We tend to put this step first.

- An appropriate time and place must be chosen.

- Ask learners to critique their own performance first.

- Focus on how to correct the problem or avoid it in the future.

- Example:
  "You could be right that this child's symptoms are due to a viral URI; and, without checking the ears, you could easily overlook an otitis media. So, try to include an ear exam on every patient with URI symptoms."

Identify next learning steps

- Fosters self-directed learning; facilitate the learner identifying his/her needs.

- Offer specific resources; the teacher can role model their own learning approaches.

- Agree upon an action plan.

- Examples:
  "What do you think you need to learn more about?"
  "That's a good topic to look up. I tend to use ______ as a first step in looking up information. Let's agree to meet ____ to discuss what you've reviewed."
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Residents-As-Teachers Conferences

Title: The One-Minute Teacher (Six Microskills in Clinical Teaching)

Goals: Residents should be able to:

1. Describe the six microskills of the One-Minute Teacher model.

2. Practice using these microskills.

Format:

Icebreaker: roleplay 5 mins.

Mini-lecture: goals, Irby model, One-Minute Teacher 15 mins.

Demonstration role play of model 10 mins.

Practice in pairs or triples 15 mins.

Questions-and-answers 10 mins.

Materials:
- overheads (Irby model, One-Minute microskills)
Role Play

Resident:
History: I have a 50 year old white female who comes in today complaining of fatigue and loose stools. This has been going on for about 3 months. These symptoms seem to be getting worse, and she's worried it might be due to Chronic Fatigue Syndrome. She has hypertension and is on a beta-blocker for that. Review of systems is otherwise negative.

Physical exam: BP = 140/82, P = 84. Her exam is essentially unremarkable. HEENT is benign, lungs clear, cardiac normal, no edema.