Clinical Teaching Microskills
Evaluation and Feedback

Bringing Education & Service Together (BEST)
Learning Objectives

After participating in this session, participants will be able to:

- Describe the “teachable moment”.
- List the five “microskills” of clinical teaching.
- Give detailed and useful feedback to a colleague about teaching.
FIVE-STEP MICROSKILLS MODEL OF CLINICAL TEACHING

• Neher et al. (1992) model for clinical teaching with time constraints

• Basis: preceptorial encounters offer opportunities to teach ways of thinking as well as information.

• Recognizes “teachable moments.”
FIVE-STEP MICROSKILLS MODEL OF CLINICAL TEACHING

• **Step One: Get a Commitment**
  
  – “*What do you think is going on with this patient?*”
  
  – “*What would you like to do?*”
  
  – *Even a hunch or guess is better for learning than no commitment.*
FIVE-STEP MICROSKILLS MODEL OF CLINICAL TEACHING

• **Step Two: Probe for Supporting Evidence**
  
  – “What led you to that diagnosis?”
  
  – “Why did you choose that drug?”
  
  – Helps teacher identify what the learner does and does not know.
  
  – Must not be unpleasant.
FIVE-STEP MICROSKILLS MODEL OF CLINICAL TEACHING

• **Step Three: Teach General Rules**
  
  – “If the patient has cellulitis, incision and drainage won’t help. That’s for an abscess, which you recognize by its fluctuance.”

  – Can skip if learner already knows general principles.
Step Four: Reinforce What Was Done Right

- “It was good that you considered the patient’s age when you prescribed that drug, because other drug classes can cause more side effects in the elderly.”

- Must reward specific competencies.
Step Five: Correct Mistakes

- “You could be right that you won’t harm the brachial artery when you draw that blood gas. But if you use the radial artery, you won’t risk cutting off the arterial supply to the whole arm.”

- Have them self-critique first.

- Best done in private. Be specific.
LEARNER EVALUATION

- **Formative evaluation**
  - Purpose is to guide learning

- **Summative evaluation**
  - Purpose is to judge performance

- "Objectivity" is rarely possible.
PITFALLS IN EVALUATION

• The error of leniency
• The error of stringency
• The error of central tendency
• The halo effect
Feedback should be...

- Constructive
- Timely
- Valid
- Specific
- Useful
Feedback Sandwich

- Specific positive feedback
- Constructive criticism
- Specific positive feedback
TAKE-HOME POINTS

• **Formative evaluation** is just as important as summative evaluation.

• The **five-step microskills model** helps clinical teachers use teachable moments even under time constraints.

• **Feedback** should be constructive, timely, valid, specific and useful.