



Quality teaching and learning in clinical practice for F2 doctors

AN EVALUATION OF THE ALL-WALES PILOT

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EXECUTIVE SUMMARY March 2012

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Background

Commissioned by the Wales Deanery, *Ed4medprac Ltd* ran a two-day course designed to develop teaching and learning in clinical practice for Foundation Year 2 (F2) doctors. The intention of the course is to enhance learning from case-based discussions (CbDs) and equip participants with a means of teaching, recording and exploring clinical decision-making and professional judgement with a view to understanding better some key patient cases and the management of them. Participants learn about the ‘invisibles’ and how to develop ‘rainbow’ reflective writing.

The focus of the evaluation was the participants on the two-day course held on 14 October and 3 November 2011 and the knowledge and skills they developed and applied to their practice.

Method

Data were collected from observation and audio-recordings made during the course, audio diaries (approximately 115 minutes of recordings from five F2s and five consultants), CbD paperwork and an on-line questionnaire (completed by 13 respondents). Analysis was shaped by the Kirkpatrick framework.

Research ethics approval was obtained from Cardiff University.

Main Themes

Level	Sub themes - overview
Reactions	Engaging the concepts and practising reflective writing <i>Comparisons with previous experience of CbDs</i> <i>The value of the structure and invisibles</i> <i>Challenges (distinguishing invisibles, notably knowledge forms)</i> Responses to the teaching <i>Praise for facilitators and activities</i> <i>Sharing writing and the need for trust</i> Suggested changes <i>Clarifying intention to share – trust relationships, high emotions</i> <i>Choice of case</i>
Learning	Framework for reflecting – making the implicit explicit Thinking in a different way Similarity in trainee experience Need for further education and training
Application	Personal use Use with other trainees Distortions? <i>Perceived difficulties (time, complexity; need for supervisor support and trust; alternative approaches)</i>

Main Findings

Reactions to the course were generally positive. Participants found it enjoyable, stimulating and challenging. They praised the facilitators and thought that they were well-prepared.

Participants benefited from learning a structured approach to their reflective writing about their clinical decision-making. However, participants were not uniform in their response and the odd participant was critical of the approach.

The course developed thinking and some participants contrasted this with the more superficial approach to case discussion fostered by medical school and generally adopted in foundation training CbDs. However, participants found the rainbow writing process time-consuming and struggled with some of the invisibles, notably distinguishing between different forms of knowledge. The most useful invisible was judged to be 'context'.

Powerful emotions were elicited from the reflective writing process and some of these were revealed during the course. The ensuing discussions could be very personal in nature. The relationship between trainer and trainee was significant and needed to be based on trust. There was a risk of the trainee feeling vulnerable by exposing their morals and beliefs, and possibly their errors of judgement, to the consultant educational supervisor with whom they were paired. The activities worked best with established and trusting trainer/trainee pairings.

Some of the participants were able to apply their learning of new techniques to their practice, although this was not true of all. We have evidence of trainers using some of the techniques with trainees in CbDs and of individuals using the techniques in their own reflections. Of those who did try out the techniques, context was a feature that appeared most beneficial. From educational supervisors' reports, we demonstrate how learning from the course extended and benefited trainees beyond the course participants.

Until experienced in this process of clinical reflective writing, it was suggested that participants might use only one or two of the 'invisibles'. Related to this, our data included requests for further education and training in order for the techniques to be developed and maintained.

Conclusions

The aims of the course were achieved. The participants developed new skills in reflective writing and most recognised the value of engaging in these processes.

The course was stimulating, developed thinking and was helpful to both trainers and trainees as the framework provided a way of making thinking around clinical decisions explicit. Without doubt, by engaging in this reflective process the trainees developed insight into their clinical decision-

making in specific cases. We have evidence of trainees learning to “think in a different way”. However, the rainbow writing was a demanding exercise and time consuming and this limited its regular application in day-to-day practice. Further, being at variance with the dominant workplace learning culture created an implicit barrier to its wider uptake. For trainees to benefit fully from the approach, they need their supervisors to be sympathetic and supportive of the approach. One participant suggested that “the theory of the invisibles should be available to all F2 doctors... Ideally educational supervisors should also be engaged to improve CbdDs.”

Suggestions and recommendations

- A widely available, short, introductory overview would enable both trainers and trainees to determine together if this is something they would like to pursue further.
- Follow-on education and training should be available for those who wish to further consolidate their skills following the two-day course.

Regarding the two-day course:

- Underlying even simple cases is complexity so participants (particularly trainees) might be advised to bring a straight-forward case to the course.
- More examples of rainbow drafts might be offered to participants.
- The reflective writing process brings out powerful and personal emotions. Participants should be warned about this possibility and facilitators should be ready to support emotional responses and equip participants with mechanisms to cope with the emotions that surface.
- Trainees should be reminded that they are expected to share these potentially highly personal reflections (rainbow drafts) with the educational supervisor with whom they are paired.
- Pairings work best if the trainee/trainer relationship is established and trusting.
- The trainees were the main recipients of feedback (from their educational supervisors) on their rainbow drafts. More, formative feedback to trainers, from the facilitators, would support the further development of their rainbow writing.

