Surgical Residents as Teachers (SRAT)

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OBJECTIVES

To design, implement and evaluate an INTEGRATED, DEVELOPMENTAL and LONGITUDINAL surgical residents-as-teachers training program using best practice principles.

Residents and graduates from UBC surgical training programs will:
- think of themselves as teachers, as part of their role/identity as surgeons
- identify learning needs of medical students, residents, patients, health care providers and colleagues
- clearly communicate new research knowledge
- teach effectively in different settings

DATA COLLECTION

Needs Assessment – residents’ preferred year to learn various teaching skills
Resident Self-Evaluation – residents’ perspectives of their own teaching
Medical Student Evaluation – medical students’ evaluations of resident teaching on service
Attending Evaluation – faculty evaluations of resident teaching at the end of rotation
Senior Resident Evaluation – senior residents’ evaluations of a teaching encounter during clinical rotations
Objective Structured Teaching Exams (OSTE) – residents rotate through 15 minute stations featuring common clinical teaching scenarios with standardized medical student learners
Program Evaluation – ongoing process evaluation and feedback

CURRICULUM DEVELOPMENT

SRAT has integrated a NEW standardized and developmentally appropriate residents-as-teachers training program into the existing educational curriculum and clinical rotations of UBC surgical residency programs.

The SRAT program includes:
1. A yearly “Surgical Residents as Teachers” workshop integrated into the Surgical CRASH Course (Competencies in Resuscitation and Stabilization of Hospital Patients) which is mandatory for first year surgical residents. These are active learning sessions where residents practice and receive feedback on a range of teaching skills.
2. Two yearly Academic Half-Day (AHD) sessions implemented as developmentally appropriate sessions within the pre-existing academic half-day schedule for surgical residents across all training years.
3. Ongoing one-on-one support for surgical residents from members of the Resident Advisory Group and the Program Directors of participating departments.
4. Ongoing ad-hoc teaching sessions on topics such as how to effectively present at rounds, conferences, or other activities requiring communication and teaching skills. These are timed to coincide with resident presentation opportunities and help reinforce the concepts learned in the workshops and AHDs.
5. The integration of SRAT content into Clinical Rotations. The Trauma and Acute Care services will incorporate discussions and evaluations of resident teaching in order to reinforce, enhance and apply teaching knowledge into real clinical practice.

NEEDS ASSESSMENT DATA

A few results …
- All residents prefer to learn teaching skills between years 1-3
- Residents in Years 4 & 5 use their teaching skills more than residents in Years 1, 2 and 3.
- The most senior (Year 5) and the most junior (Year 1) residents prefer to learn teaching skills earlier in their training.
- Residents specializing in Orthopedics prefer to learn ‘how to break bad news’ significantly later than other residents.
- Residents planning to work in community settings prefer to learn how to present a case to an attending or consultant significantly earlier than residents who plan to work in an academic/university setting.

PGY1&2 residents think of themselves as learners, not teachers!
PGYS’s have had a lot of teaching experience but not a lot of training as teachers.
“Isolated offerings” or “one size fits all” approaches are unlikely to be effective in meeting the specific needs of residents at different phases in their development.

TIMELINE OF ACTIVITIES

Project Funding:

A place of mind
THE UNIVERSITY OF BRITISH COLUMBIA
Teaching and Learning Enhancement Fund (TLEF)