

# RAE Program

College of Medicine

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## [RAE PROGRAM SESSION TOPICS]

This document outlines the types of issues and topics presented as part of the Residents as Educators (RAE) Program. Residency Program Directors may request that workshops address additional or different topics or issues [updated February 2016].

## Outline of RAE Topics

The following is a sample of topics available for RAE Program participants. The RAE Program will tailor your program to address the instructional development topics identified by the instructional development needs assessment (iDNA). The iDNA includes shadowing residents as they teach, getting input from residents and directors on the unique demands of the particular clinical context for the integration of medical students in clinical experiences.

➞ [More about iDNA...](#)

### **Building on the CRC's Structured Approach to Medical Problem-solving: Making connections between the Preclinical and Clinical Curricula**

It's important for residents to understand what medical students are doing during Preclinical Years and how these experiences might connect with what residents are expected to teach medical students during clinical years. RAE sessions can include a discussion of the Clinical Reasoning Course in the first two years, the course goals, expectations for student behaviors and a structured approach to medical problem-solving. These skills are the foundation for students' development of differential diagnoses. The purpose of including this topic is to assist residents in drawing on this curriculum to guide students in applying medical knowledge in real patient situations during clerkships or internships.

### **Reflective Teaching and Learning**

This session invites resident educators to consider the questions in developing an educational philosophy to guide their brainstorming about helping students achieve educational program objectives during clinical years:

- What makes me a good teacher?
- What's my educational philosophy?
- Who are my best teachers? Why?
- How do I know what to teach?
- How can I reflect on teaching in ways that will improve my teaching?
- How do I promote reflection on the part of medical students?

### **Constructive Feedback**

- The Reflective Feedback Conversation model - This session ...
  - Distinguishes between evaluation and feedback
  - Describes the reflective feedback conversation model for giving constructive feedback
  - Provides practice applying the model to feedback scenarios
- Strategies for Addressing Challenges in the Feedback Process
  - Linguistic Strategies
  - How to re-establish or clarify expectations for student performance (BDA/RIME frameworks)

- Offering Actionable Guidance in Narrative Feedback

### **Guided Inquiry Learning Strategies**

This session addresses how to craft and use effective questions to facilitate learning and development. The goal is to offer practical support for effective inquiry as a method of teaching and learning. Sessions on guided inquiry strategies may include:

- How to formulate effective questions – Description of the formula, its theoretical basis, and an opportunity for practical application of the approach
- A taxonomy of question types – Description of the formula, its theoretical basis, and an introduction to various types of questions, each with a specific aim to evoke a particular kind of thinking on the part of the student. Below are examples of a few question types discussed:
  - Convergent v. Divergent questions
  - Questions on a cognitive scale
  - Question circles (*effective* compound questions)
  - Knowledge dimensions (factual, procedural, conceptual) and knowledge domains (Procedural; Conceptual; Metacognitive)
- Psychosocial factors in crafting effective questions for guided-inquiry learning – This session addresses the intangible factors involved in teaching through inquiry. Many students are afraid to be asked questions, feel they are “being put on the spot” unnecessarily, and “freeze up” when asked questions in the presence of others. This session discusses these challenges and strategies for addressing them.
  - Educational strategies for creating psychological safety
  - Phrasing questions to frame the issues
  - Strategic Wait Time: Getting comfortable with and using silence
  - Sequencing
  - Rapid reward
  - Balance
  - Life lines
  - Think, Pair, Share & Compare
  - Motivating students to engage beyond peripheral participation

### **The B-D-A & RIME Frameworks for Teaching in Clinical Settings**

RAE sessions also address two frameworks for teaching: (1) BDA; and (2) RIME. These are described below. A session can combine these into a single approach to teaching in clinical settings, or these frameworks can be addressed in two separate sessions.

- BDA stands for Before-During-After. The term derives from a theory on content area literacy instruction and offers a structured, learner-centered approach to teaching that adapts well to clinical settings. The BDA framework reminds the clinical educator to establish expectations for student performance and learning BEFORE, and encourage the student to be mindful of their learning process DURING the clinical encounter. It also structures the teaching experience so that the resident remembers to debrief with the student AFTER the experience to make sense of or extend the learning experience or to give the student constructive feedback.
- The RIME Framework (Pangaro, 1999) offers a model for establishing or clarifying medical students' roles in clinical encounters. RIME stands for Reporter, Interpreter, Manager and Educator. Each clinical role is attended by a set of expected behaviors, skills and attitudes. Applying this framework to clinical teaching can assist residents in clarifying what they expect students to do in particular clinical situations.
- Combining BDA and RIME offers a strategy for reflective teaching.

### **Cultivating Effective Teacher-Learner Relations**

Workshop topics include:

- Essential Communication Skills: Public Speaking, Presentation & Professionalism
- Professionalism – Patience, Positive Attitude, Respect, Trust & Confidence: A Tall (But Necessary) Order
- Intercultural Communication: Promoting awareness of the potential for and how to negotiate conflict in communicating with students (or others) who have different cultural practices for professional and patient communication

### **Smart Apps for Clinical Teaching**

The RAE Program can demonstrate and provide opportunities for resident educators to learn how to use smart apps to enhance their teaching and engagement with students, including:

- Using audience response software (Poll Everywhere, Socrative) to promote reflective practice before, during and after patient engagement or during teaching sessions.
- Using technology as a formative feedback tool
- Reflective electronic journaling for clinical educators and students