

Introduction to teaching for junior doctors 2: collecting feedback and developing expertise

Doctors are likely to be involved in teaching activities and need to show evidence of their practice. For junior doctors this means gaining an understanding of educational principles and practice. This second of a two-part article focuses on how to collect feedback on teaching and develop educational expertise immediately and over the longer term.

Although portfolios may differ through training (both clinical and any separate teaching portfolios), you will be expected to provide a record of your teaching activity and evaluation of your practice. You will need to follow any specific requirements, but it is likely this will include providing documented feedback from a peer and a senior teaching figure.

Obtaining feedback from a clinically qualified senior colleague may be very beneficial since this can be reassuring when you are teaching in an unfamiliar style or on a clinical topic about which you are less certain. But bear in mind that feedback from other sources can be equally valuable – patients, non-clinical medical educators based in your linked medical school and, of course, your students. All too often feedback for ward-based or spontaneous teaching exercises remains uncollected. There may be many reasons for this: it is not thought of as ‘formal teaching’ and therefore not analysed, time pressures may hinder gathering this information or individual doctors have limited knowledge about techniques for collecting feedback. Ultimately this means data are not available for analysis and in order to collect evidence and develop your teaching methods, obtaining feedback is essential. This article considers how you might set about doing this.

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There are different ways in which you may collect feedback, including asking for informal comments or more formally through questionnaires which tend to be the most common form of evaluation tool (Morrison, 2003). Since you need to be able to document feedback, the latter may be most useful to you and this article includes two examples of feedback forms (Figures 1 and 2) which you can use and adapt as you wish.

Try to gain feedback on your teaching in different types of settings (bedside, one to one, small groups). Different types of teaching may require slightly different skills and you will find it useful to see

where your strengths lie across a range of activities. Figure 2 can be used to collect feedback from small group or bedside teaching. It will take only a couple of minutes for learners to complete and the resulting comments will provide you with good material for reflection and learning (Kolb, 1984; Eraut, 2004).

However, if you do find yourself in a situation where you have been teaching informally and time is really short, then using a questionnaire of any sort may simply not be fitting or practical. Try the following techniques: ask learners for their key points of learning and ask them to describe any remaining areas of uncer-

Figure 1. Sample evaluation form for teaching evaluation by peer or senior colleague.

Achieved?	Any comments (particular strengths or areas for development)
	The learning objectives or focus of learning were clear
	Any introductions were made and consent issues addressed
	Students' prior knowledge and understanding was established
	Teaching strategies were appropriate to the subject
	There was a logical structure and progression in the activities
	Students were actively involved in the learning
	Feedback was given appropriately
	Students had the opportunity to ask questions and clarify points
	Learning was checked

Based on Barts and the London School of Medicine and Dentistry peer review forms.

Figure 2. Sample evaluation form for student evaluation.

Yes/no/not applicable	Comments?
	The focus or outcomes for learning were made clear to me
	The level and content were pitched right for me
	I felt able to ask questions and clarify points
	I had sufficient opportunity to practice skills
	I felt my learning was checked
	I received helpful feedback
	I learnt new knowledge and skills

Based on Barts and the London School of Medicine and Dentistry peer review forms.

tainty. Record any comments yourself and when you have time use them as a basis for your reflections. Ask them to point out aspects of the situation you might improve next time and, again, record and use to improve your practice. See if they would agree to e-mail any further thoughts after the session. The learners may need to collect feedback from you on their clinical skills – so there may be mutual benefit in negotiating some exchange of feedback at a later stage.

Remember to keep a log of all your teaching activities and keep to hand the type of generic form suggested so that you can adapt them easily to your sessions. Also, keep a record of teaching plans, written handouts including those from Powerpoint presentations and any reflective notes. A portfolio can soon be built up through collecting and recording evidence in this way. Take time to reflect on any teaching and record your reflections with pointers for development. Such deliberative, purposeful reflection (Eraut, 2004) is a good way to improve practice. To help with this process, you could review your own performance against the criteria in *Figure 1*.

This evidence can be analysed with educational supervisors at the end of rotations and used to monitor development. It may also be used as evidence for interviews when needed.

Beyond questionnaires, it is worth thinking about using nominal group technique to evaluate your teaching. Nominal group technique is a method of group discussion which can be used for evaluating small group work (Carroll, 2003). Individual learners are invited to make suggestions about the best and worst points of a teaching session and then the group vote to prioritize these comments. It can be adapted easily to most group teaching situations and helps to cast light upon the most important aspects of your teaching practice from your learners' perspective.

How can I develop my expertise as a teacher?

Collecting and acting on feedback will undoubtedly help you develop your expertise. However, it is becoming increasingly important in medical education that you are able to demonstrate your expertise

through some form of certification. For example, by undertaking an introductory course on teaching, you will be able to provide formal recognition that you have attained a minimum level of teaching competence.

It is highly likely that your postgraduate centre or linked medical school will have introductory training courses in teaching. These courses are also provided by local deaneries. In addition, some deaneries also run intensive observation schemes through which your teaching is observed on possibly three occasions with individual feedback given. Check to see what is offered by your local deanery.

You can also find ways to develop your practice at work. For example, consider finding an informal mentor – a more senior experienced colleague. He/she can support your practice in a number of ways: checking through plans for teaching, offering observation and feedback, advising on patients whom you might include in teaching situations, resources, spaces and opportunities for teaching. Also, they might be willing to co-teach with you which can be a particularly fruitful way of learning about teaching.

You may decide to progress on to the increasing number of longer postgraduate courses such as postgraduate certificates, masters, diplomas in medical education, some examples of which are listed in the further information below. How far you wish to pursue educational quali-

fications beyond introductory courses will depend on your interest, role and future intentions. Standards are now set by the Postgraduate Medical Education and Training Board (2008) for educational supervisors, so if this is a role you wish to pursue then, again, check your local deanery for their accreditation scheme. The London Deanery (2009) has set out a professional development framework for supervisors setting out both the expectations of an effective supervisor and the hallmarks of an excellent supervisor.

Integral to developing expertise is being aware of the evidence base for educational practice. It is worth visiting the websites of the Association for the Study of Medical Education (ASME) and the Association for Medical Education in Europe (AMEE). These organizations publish journals, organize workshops and conferences and have schemes for research grants. In 2006, the Academy of Medical Educators was established to support and set standards for medical educators – again consult their website for further details.

Conclusions

Becoming a good teacher will require knowledge of basic educational principles and practice and the willingness to collect feedback and act upon it. There is much on offer in terms of developing your expertise – courses, conferences and a growing evidence base. It is worth think-

Further information

Short courses

Teaching the Teachers, Teaching Improvement Programmes, Physician as Educators (Royal College of Physicians programme), Deanery websites for multiple courses

Postgraduate courses

Many universities offer postgraduate certificates or diplomas in teaching and academic practice which may well be suitable for clinical staff

Subject centre

Higher Education Academy Subject Centre for Medicine, Dentistry and Veterinary Science

Conferences

Association for the Study of Medical Education (www.asme.org.uk), Association for Medical Education in Europe (www.amee.org)

Web-based distant learning programmes

Cardiff, London Deanery (www.faculty.londondeanery.ac.uk)

Professional body

Academy of Medical Educators (www.medicaleducators.org/)

ing about where you might wish to travel in terms of the educational ladder, doing your homework and planning activities accordingly. **BJHM**

Conflict of interest: none.

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KEY POINTS

- Keep a log of all your teaching exercises, i.e. topic, date, who is being taught, reflective comments.
- Keep generic feedback forms to hand to distribute.
- Obtain formative feedback from peers, senior colleagues and students.
- Try to use any feedback formatively and show evidence of development.
- Retain any lesson plans, resources and reflective notes.
- Keep your educational supervisor informed of your teaching activities and keep updating your portfolio.
- Attain a formal teaching qualification.
- Think about the type of educational roles you might undertake in the future.