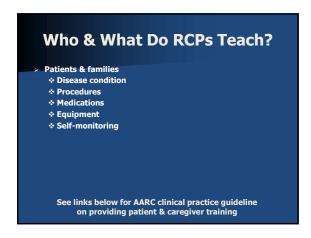
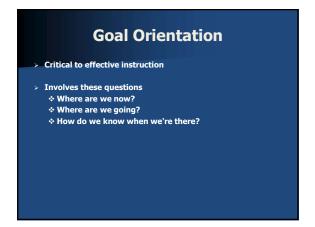
Instructional Skills for Clinical Practice Arthur Jones, EdD, RRT This Presentation is Approved for 1.5 CRCE Credit Hours

Learning Objectives > Develop effective instruction for students, colleagues, & patients

Introductory Information



Who & What Do RCPs Teach? > Students \$\displays \text{ Institutional & departmental details}\$ \$\displays \text{ Information pertaining to respiratory care practice}\$\$ \$\displays \text{ Professional conduct}\$\$

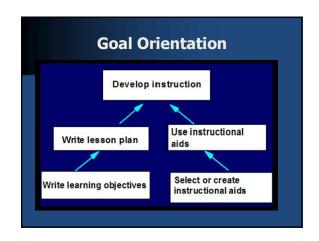


Goal Orientation > Instructional goal: a desired outcome of instruction which may be expressed in broad terms, without specification of criteria or conditions for measurement of attainment









Competency-Based Education

- Competency: set of skills that make a person capable of filling a role or performing a job
- Competency-based educational program: requires learners to demonstrate competencies to graduate

Competency Categories

- > Information: cognitive domain
- > Physical tasks (procedures): psychomotor domain
- > Professional behavior: affective domain

Competency-Based Curricula

- > Competencies for the job are identified
- > Students do not advance until the prescribed competencies are mastered
- > Theoretically, CBE permits learning time to vary
- > Theoretically, CBE is pass-fail

Summary & Review

- > Who & what we teach
- > Goal orientation & prioritization of objectives
- > Competency-based education

Learning Objectives

Definition

- Learning objective: concise description of what the learner should be able to do as a result of instruction
- ightarrow DO ightarrow learner demonstrates a behavior that is observable & measurable
- Learning objective = road map for instruction

Functions of Learning Objectives

- > Determine instructional subject matter
- > Guide selection of instructional methods & strategies
- Guide construction of evaluation instruments (quizzes, exams, etc.)
- > Alert the learner when they have learned the required subject matter

Domains & Levels of Skills

Skill Domains

- Cognitive: intellectual skills
- > Psychomotor: physical skills
- Affective: attitudes & values, as demonstrated by professional conduct

Skills: Levels of Complexity

- Cognitive domain: Bloom's taxonomy
 - * Knowledge: knowing that
 - * Comprehension: knowing why
 - * Application: knowing how
 - * Analysis: breaking down to discover structure
 - * Synthesis: creating new knowledge (includes problem-solving)
 - Evaluation: formulating judgments

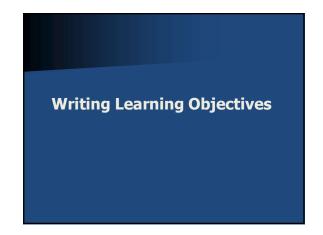
Skills: Levels of Complexity Least complex Knowledge Comprehension Application Analysis Synthesis Evaluation

Skills: Levels of Complexity

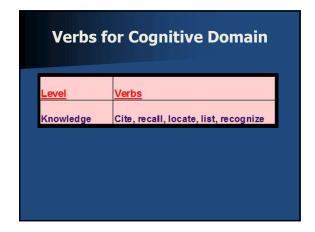
- > Cognitive domain: Bloom's taxonomy
- > Affective Domain: Kratwohl's taxonomy
- > Psychomotor domain: Simpson's taxonomy

See links below for Kratwohl's taxonomy & psychomotor taxonomies

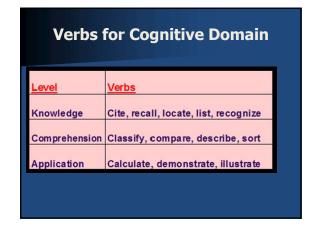


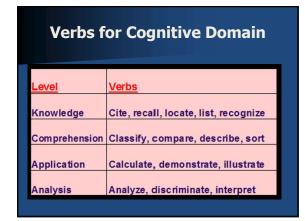


Conditions for Objectives Dispectives describe behaviors Skill: action verb pertinent to the behavior & level of performance



Verbs for Cognitive Domain Level Verbs Knowledge Cite, recall, locate, list, recognize Comprehension Classify, compare, describe, sort





Verbs for Cognitive Domain				
<u>Level</u>	<u>Verbs</u>			
Knowledge	Cite, recall, locate, list, recognize			
Comprehension	Classify, compare, describe, sort			
Application	Calculate, demonstrate, illustrate			
Analysis	Analyze, discriminate, interpret			
Synthesis	Compose, design, organize, plan			

Verbs for Cognitive Domain				
Level	<u>Verbs</u>			
Knowledge	Cite, recall, locate, list, recognize			
Comprehension	Classify, compare, describe, sort			
Application	Calculate, demonstrate, illustrate			
Analysis	Analyze, discriminate, interpret			
Synthesis	Compose, design, organize, plan			
Evaluation	Criticize, evaluate, judge, recommend			

Conditions for Objectives Dijectives describe behaviors Skill: action verb Performance conditions, e.g. Written exam Laboratory simulation Clinical setting Criteria for success At 90% accuracy Without critical error Within 60 seconds

Not Valid Objectives

- > Learner will KNOW muscles of the foot
- > Learner will UNDERSTAND function of foot

Can not observe Can not measure

Steps in Writing Objectives

- > Identify target skill
- > Identify level of performance
- > Select verb to correlate with performance
- > Write as 'learner will be able to...'
- > Describe conditions for performance
- > Describe criteria for success

FYI see links below for Mager's tips on learning objectives

Summary & Review

- > Domains & levels for skills
 - Cognitive
 - * Psychomotor
 - * Affective
- > Components of learning objectives
 - * Action verb
 - **&** Conditions for performance
 - ❖ Criteria for success

Instructional Platforms

Instructional platform: primary medium used to deliver instruction

> Instructional aid: medium used to support a platform

Instructional Platforms

- > Lecture
- > Oral questioning (Socratic)
- > Discussion
- > Tutorial
- > Simulations & games
- > Drill & practice
- > Printed media

Lecture

- Most commonly used platform
- > Ineffective in pure form 'talking head'
- > Applications
 - $\ensuremath{\div}$ Cognitive domain: from knowledge to analysis levels
 - * Affective domain: information to affect values, attitudes
 - * Procedures: introduce & describe them

Discussion

- > Applications
 - * Cognitive: higher levels
 - * Affective domain, professional behavior, especially interpersonal skills
- > Context
 - ♦ Small class
 - * Round table setting
 - Instructor moderates, referees; does not dominate discussion

Tutorial: Individualized Instruction

- > Applications all domains & levels
- Advantages
 - Interactive, active learning
 - Instruction individualized to learner
 - * Computer excellent medium
- > Disadvantages
 - * Few learners inefficient expensive for personal instruction
 - * Requires one-on-one instructional skills

Drill or Practice

- > Drill: cognitive
- > Practice: procedures
- > Context
 - * Assumes information, procedure has been taught
 - * Practice: teaching laboratory, clinical practicum
 - * Proctor available to guide practice & provide correction

Socratic Method - Oral Questions

- > Applications
 - * Cognitive: highest levels
 - * Affective, professional behavior
- > Context
 - ❖ Small class

 - * Motivated students: must want to think

Oral Questioning: Purposes

- Verify prerequisite knowledge
- > Activate prerequisite information: preparedness to learn
- > Gain & direct attention
- > Stimulate active learning: schemata building
- > Stimulate rehearsal of procedures
- > Stimulate & practice problem-solving
- > Stimulate thought about affective material

Oral Questioning: Techniques

- > Ask question at appropriate cognitive level
- > Ask one question at a time
- > Avoid questions with "yes, no" answers
- > Avoid ambiguity: requires narrow scope of question
- > Permit time to formulate answer
- > Cue learner to develop answer
- > Give corrective feedback

Printed Material

- > Applications
 - * Cognitive: all levels
 - * Affective, professional behavior
- Types
 - ❖ Conventional textbooks
 - * Instructor developed materials
 - ❖ Journal articles
 - * Combinations of materials
 - Programmed texts

Printed Material

- > Required learner characteristics
 - * Reading skills
 - ❖ Motivation
 - * Metacognition knowing what you know

Simulations & Games

- > Simulation: representation of reality
- > Game: simulation with competition
- > Applications
 - * Cognitive: all levels
 - * Affective: especially suited
 - * Procedures: especially suited

Summary & Review

- > Instructional platform primary method
 - Lecture
 - * Oral questioning (Socratic)
 - * Discussion
 - **♦ Tutorial**
 - ♦ Drill & practice
 - * Printed medi
 - * Simulations & games

Instructional Aids

People Generally Remember

- > 10% of what they read
- > 20% of what they hear
- > 30% of what they see
- > 50% of what they see & hear
- > 70% of what they say as they talk

So - instruction via multiple sensory channels, with learner activity, is most effective

Visual Aids - Do Not

- > Use more than 7 words per line
- > Use more than 7 lines per screen
- > Use all capital letters yelling
- > Center text hard to read
- > Use fancy fonts hard to read

Visual Aids - Do Not

- > Use more than 7 words per line
- > Use more than 7 lines per screen
- > Use all capital letters yelling
- > Center text hard to read
- > Use fancy fonts hard to read
- > Use weird colors eye discomfort
- > Use colors indiscriminately
- > Use acrobatic text distracting
- > Include misspelled words

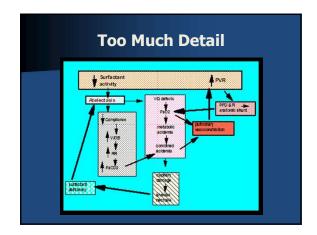
Visual Aids - Do

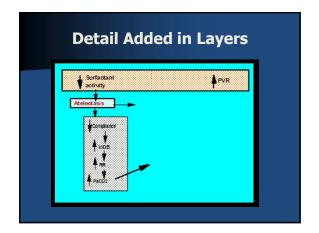
- > Select readable fonts
- > Use fonts that are readable from back row
- > Use color for a purpose: to highlight & differentiate
- > Consider effects of visual aids on eye comfort
- > Include appropriate detail add layers of detail

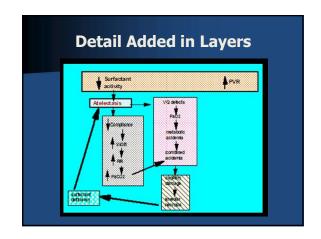
Visual Aids - Do

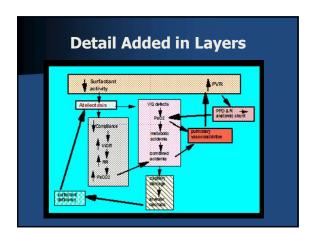
- Cue, highlight important details
 - Arrows

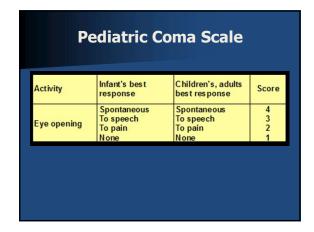
 - * Boldface
 - * Bullets
 - ❖ Underline❖ Size variation
- > Include appropriate detail add detail by layers











Pediatric Coma Scale					
Activity	Infant's best response	Children's, adults best response	Score		
Eye opening	Spontaneous To speech To pain None	Spontaneous To speech To pain None	4 3 2 1		
Verbal	Coo, babble Irritable, cry Cries to pain Moans to pain None	Oriented Confused Inappropriate Nons pecific sounds None	5 4 3 2 1		

Activity	Infant's best response	Children's, adults best response	Score
Eye opening	Spontaneous	Spontaneous	4 3
	To speech	To speech	3
	To pain	To pain	2
	None	None	
Verbal	Coo, babble Irritable, cry Cries to pain	Oriented	5
		Confused	4 3 2
		Inappropriate	3
	Moans to pain	Nons pecific	2
	None	sounds None	1
Motor	Normal moves	Follow command	6
	Withdraw- touch	Localize pain	5
	Withdraw- pain	Withdraw- pain	4
	Abnormal flexion	Flexion- pain	6 5 4 3 2
	Abnormal	Extension-pain	2
	extension None	None	1

Using Instructional Aids

Using Instructional Aids

- > Integrate aids into a lesson plan
 - Use with a purpose
 - * Decide when & how to use them
- > Check AV equipment before class
- > Preview before class

Using Instructional Aids

- > Integrate aids into a lesson plan
 - Use with a purpose
 - * Decide when & how to use them
- > Check AV equipment before class
- > Preview before class
- > Hide charts, models until they are needed
- > Cue important details
- > Encourage thinking about them allow time

Specific AV Aids

- > Chalk, Dry Erase Boards
 - * Limited by instructor's artistry & legibility
 - **Extensive displays must be done before class**
 - * Extensive displays should be hidden until used
 - Extensive displays for repeated use should be made in durable form
 - Do not try to talk while writing on a board

Specific AV Aids

- > Computer presentations, e.g. Powerpoint
 - * Easily edited
 - ❖ Easy to use
 - * No wasted materials
 - * Multimedia capabilities text, audio, video
 - * Internet capabilities
 - * Handouts, same as screens

Specific AV Aids

- > CD, DVE
 - * Multimedia & Internet capabilities
 - ❖ Good media for tutorials
- > Physical Models
 - \div Distracting, when left in full view
- > Audio recording
 - * Needed for sounds
 - * Not a stand-alone medium

Specific AV Aids

- Printed handouts purposes
 - ❖ Follow instruction
 - * Provide structure for learners to add their own notes
 - * Take away for review
 - * Supplement the textbook do not replace it

Summary & Review

- Guidelines for creating instructional aids, e.g. the 7 x 7 rule, eye comfort
- Guidelines for using instructional aids; integrate into lesson plan
- > Specific media
 - * Chalk, dry erase boards
 - * Computer-based presentations
 - ♦ CD, DVD
 - ♦ Physical models
 - ♦ Handouts

Lesson Planning

Lesson Planning - Why Bother?

- > Ensure that content is appropriate & comprehensive
- > Ensure that content is organized
- > Ensure that instruction includes appropriate strategies
- > Guide instructor through the lesson delivery
- > Permit evaluation of lesson & course content

Developing a Lesson

- > Specify learning objectives
- > Sequence learning objectives
- > Develop criterion test

Developing a Lesson

- > Specify learning objectives
- > Sequence learning objectives
- > Develop criterion test
- > Analyze instructional context
- > Specify instructional platform
- > Specify strategies & aids
- > Outline the lesson plan
- > Rehearse the presentation

Lesson Plan Stages

- Preparation (of learner)
- II. Presentation or demonstration
- III. Application
- IV. Verification
- v. Summary & review

Preparation (of Learner)

- > Gain attention
- > Establish relevance motivation
- Activate prior knowledge readiness to encode additional objectives
- > State the objective(s) alert learner to expectations

Presentation (Procedure)

- > Demonstrate at real speed, without explanation
- > Demonstrate at slow speed, with explanation
- > Stress key steps
- > Learner follows with procedure checklist

Presentation (Information)

- > Maintain learners' attention
- > Present distinct stimuli
- > Address multiple senses
- > Guide learning
- > Encourage active information processing (thinking)
- > Monitor learners' comprehension

Application

- > Rehearsal of information
 - ♦ Drill
 - * Oral questions
- > Guided practice of procedure

Verification

- > Criterion exam for information
- > Criterion evaluation for procedure

Summary & Review

- > Summarize material So what?
- > Review key points
- > Suggest further study

FYI see links below for Gagne's Nine Events of Instruction

Evaluation of Learning

Evaluation

- Formal appraisal of quality of educational processes & outcomes
- > Purpose: to guide decisions about
- ❖ Instructional programs: processes
 - * Student achievement: outcomes

Evaluation - Types

- Formative: guide modifications in students or programs under development
- Summative: guide final decisions about students or programs

Evaluating Cognitive Skills

Recall vs. Recognition

- Recall: student finds answer in memory
- > Recognition: student selects correct answer from list (easier)

Evaluation Methods - Cognitive Skills

- > Conversation: evaluate informally, without perceived threat
- > Oral questioning
- > Student presentations communications skills
- > Criterion-referenced, objective tests RCP, RRT

Written Examinations

Item Types

- > Essay hard to score
- > Short answer
- > Completion (fill-in)
- Matching
- > True-false 50% chance for guess
- > Multiple-choice

Multiple-Choice Items

- > Subject matter: all types
- > Levels of cognition: all
- > Strengths
 - ❖ Variety of subject matter
 - * Objectivity
 - * Levels of cognition
 - * Easy to score & assign points
- > Weakness: difficult to construct

Constructing Multiple-Choice Items

- > Select objective to test
- > Determine desired skill
- > Determine cognitive level
- > Construct stem
- > Write correct answer
- > Write distracters
 - * All should be plausible
 - * 'None of the above' should not be used
 - ❖ 'All of the above' should be limited

Constructing Tests

- > Identify objectives to test
- > Determine cognitive level for items
- > Determine item type
- > Write items: 1-2 for each objective
- > Determine scoring
- > Develop test key
- > Pilot-test the test
- > Revise as needed

Evaluating Procedure Skills

Evaluating Procedure Skills

- Oral questioning
 - * Verify learner's readiness for evaluation of hands-on
 - * Provide drill on recall of procedure-mental practice
 - * Verify learner's theoretical knowledge

Evaluating Procedure Skills

- > Criterion-referenced performance evaluation form (PEF)
 - * Developed from task analysis
 - * Each critical step is a criterion for evaluation

Evaluating Procedure Skills

- > Functions of checklists
 - * Guide lesson planning for instructors
 - * Provide study guide for learners
 - * Provide criteria for evaluations
- > Functions of checklists
 - Reduce subjectivity in evaluation: increase inter-rater reliability
 - Provide documentation of evaluations

Evaluating Procedures

- Learner must have opportunity to practice, with corrective feedback before undergoing final (summative) evaluation
- > Each step must be done correctly, e.g.
 - ♦ Determine patient ID \rightarrow check arm band
 - Position patient → correct technique, position

Evaluating Professional Behaviors (Affect)

Professional Behavior Evaluation

- We cannot objectively evaluate affect; that is, attitudes & values
- > We can evaluate behavior

Professional Behavior Evaluation

- People, e.g. students, can be very knowledgeable & clinically skilled, but unprofessional conduct or poor work habits renders these meaningless
 - What good is a very smart RT who cannot relate to patients?
 - What good is a very smart RT who is consistently absent or late?

Criterion Professional Behaviors

- > Efficiency: gets things done with minimal waste
- > Productivity: gets quantity of work done
- > Accuracy: measures, adjusts, documents correctly
- > Attentiveness: alert & responsive

Criterion Professional Behaviors

- > Efficiency: gets things done with minimal waste
- > Productivity: gets quantity of work done
- > Accuracy: measures, adjusts, documents correctly
- > Attentiveness: alert & responsive
- > Diligence: opposite of laziness
- Communication: sends, receives correct, goal-oriented messages
- Empathy: physical & non-physical handling of patients, families

Sources of Evaluation Data

- Observation & normal conversation: provides insight to learner
- Clinical conferring: good for simulating scenes to teach & evaluate behavior
- Learner presentations: also helps learners discover feelings & construct behavior

Evaluation Instruments

- Anecdotal reports: noteworthy information to be considered during evaluations
- Critical episode reports: information denoting outstanding or seriously deficient competency
- > Behavior rating scales: formative vs. summative
- Clinical instructors must provide timely, concise, accurate data: write it down

Summary & Review

- > Evaluation formative & summative
- > Written tests, types of items
- > Procedure evaluation checklists to structure evaluations
- > Behavior evaluations episode reports, rating scales

Clinical Instruction

Preceptor Roles

- > Practitioner
- > Teacher
- > Liaison
- > Evaluator
- > Role model
- > Mentor
- > Resource
- > Facilitator
- > Coworker

Topics for Clinical Instruction

- > Patient care
- > Equipment
- > Personne
- > Institutional policies & procedures
- > Institutional geography
- > Communications
- > Job responsibilities
- > Organizational skills
- > Coping skills

Progression With Procedures

- > Student observes
- > Student describes how
- > Performs with supervision
- > Criterion evaluation
- > Independence (loose supervision)

Clinical Lesson Plan

- > Preparation: preclinical conference
 - * Determine entry skills

 - * Describe likely events

Clinical Lesson Plan

- > Presentation
 - * Discuss patients, etc.
 - * Demonstrate new procedures
 - * Role model desired behaviors
 - Clinical conferences as situation indicates

Clinical Lesson Plan

- > Application
 - * Observe, correct skills
 - ❖ Simulations
 - * Role-playing
 - * Student presentations

Clinical Lesson Plan

- Verification
 - * Evaluate cognitive skills
 - ***** Evaluate procedures (when appropriate)
 - * Evaluate professional behavior

Clinical Lesson Plan

- > Summary, review: post-clinical conference
 - * Provide feedback
 - * Discuss events, patients

Common Preceptor Errors

- > Failure to develop learners' cognitive skills
- > Failure to use evaluation forms
- > Premature procedure evaluation
- > Easy grading
- > Poor professional role modeling
- > Clinical shortcuts 'this is how we do it in the real world'

Summary & Review

- > Clinical instruction
 - * Roles of preceptor
 - * Topics for instruction
- > Clinical lesson plan
- > Common errors in clinical instruction

