Teaching and Learning Practices among Physicians: Facilitators, Style Preferences, Expectations, and Recommendations for Improvement

Udoka Okpalauwaekwe,¹ Tom Smith-Windsor¹, Carla Holinaty, James Barton,¹ Cathy MacLean¹

¹University of Saskatchewan, Saskatoon, SK, Canada

INTRODUCTION

- Physicians are expected to teach and continue learning as part of their professional careers to deliver quality health care.
- These different kinds of teaching and learning practices are facilitated for physicians through continued professional development (CPD) programs which include Faculty Development (FD) and Continuing Medical Education (CME).
- As such, determining the facilitators, style preferences, expectations and recommendations for improvement informs CPD initiatives.

OBJECTIVES

- 1. To learn teaching and learning practices among physicians
- 2. To explore motivating and de-motivating factors to these learning/teaching preferences
- 3. To explore opportunities for change to encourage faculty engagement to CPD events

METHODS

Study Design

 Secondary data analysis of qualitative data (interview and focus group discussion transcripts

Data Sources

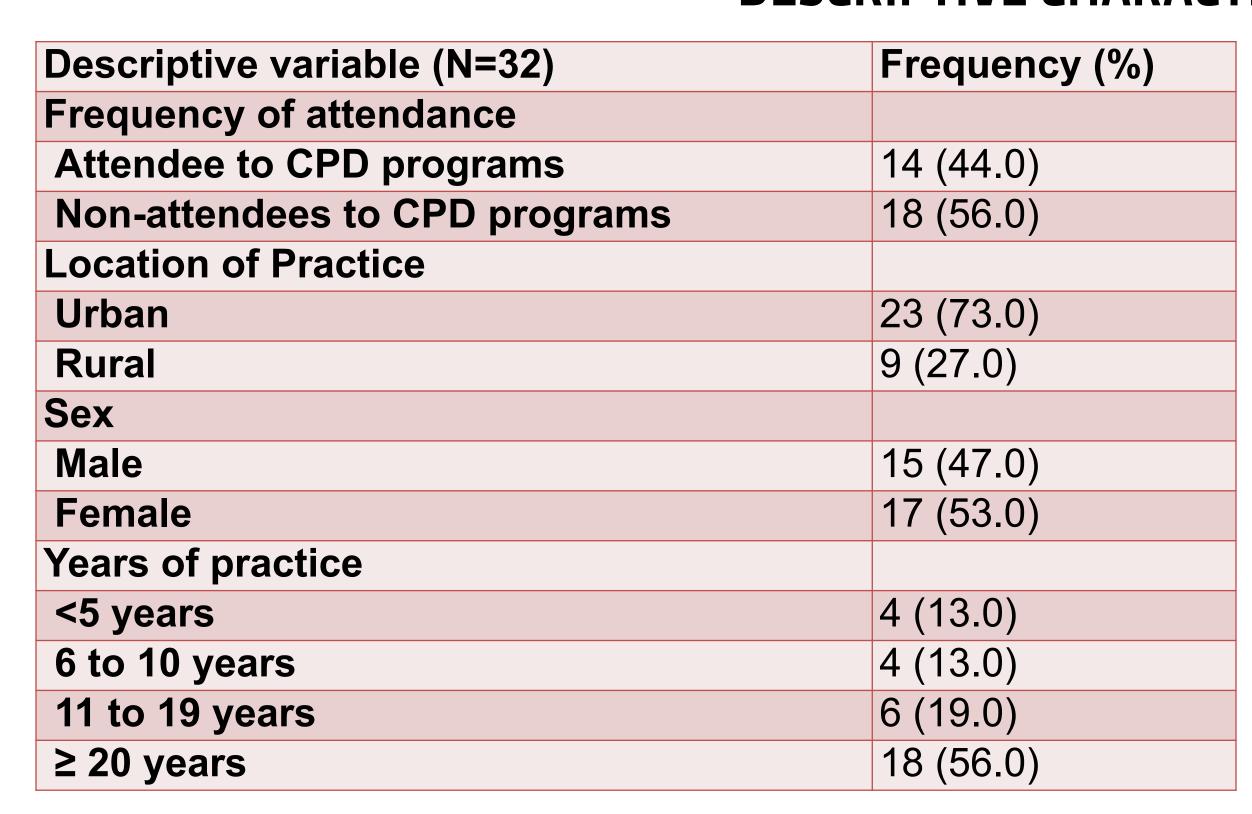
 Previous study exploring barriers and facilitators to participating in universityorganized FD and CME programs.

Variables

- Data analyzed descriptively and thematically
- Sub-group analysis were also carried out by sex, location of practice, years of practice and frequency of attendance to FD/CME events.

RESULTS

DESCRIPTIVE CHARACTERISTICS



Lectures

31.3%

Informal

teaching

31.3%

43.8%

46.8%

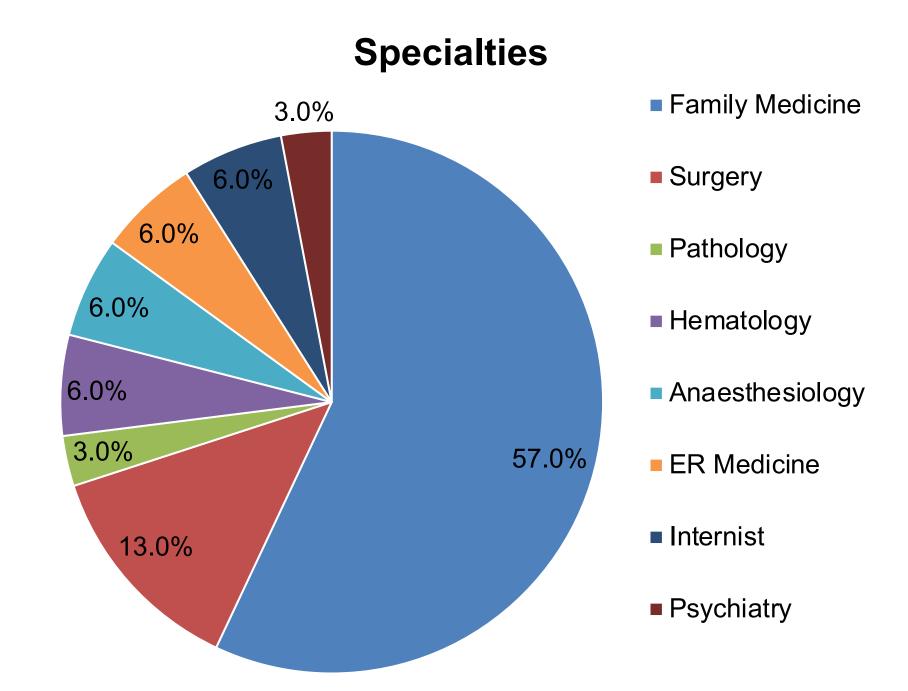
31.3%

Lectures

46.9%

Workshops

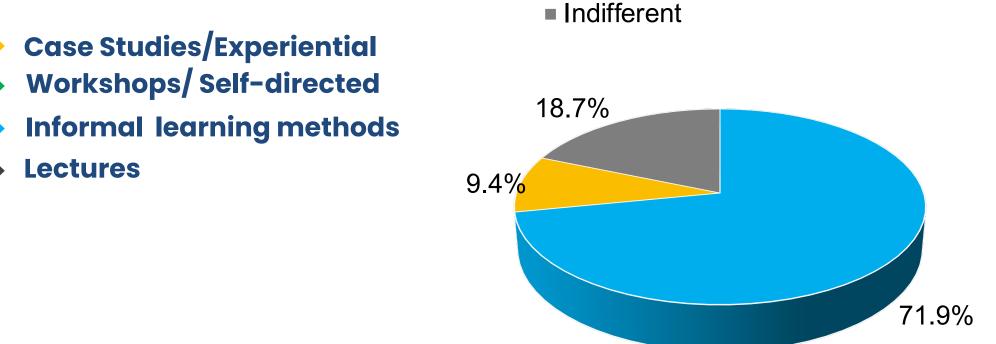
0.003)



PREFERRED TEACHING METHODS

Learning setting

Small groups - Large groups



PREFERRED TEACHING METHODS

Teaching format

time, etc)

Case studies

Workshops

Experiential

• Self-directed

Examinations

Questionnaires

• Audio-visual media

Informal learning methods

(bedside learning, tea-

Simulations

Lectures



62.5%

Lengthy sessions

- Workshops
- Informal teaching methods (bedside learning, tea-time,

Common teaching methods

Common learning methods

- etc)

• Female physicians preferred teaching using short sessions of informal learning methods compared with male physicians (female 80% vs male 20%; p=

Attendees to CPD programs compared with non-attendees, preferred hands-on learning methods (71% vs 33%; p = 0.033) Rural practitioners compared with urban physicians preferred Web-based seminars (56% vs 8.6%; p = 0.004)

15.6%

Audio-visuals

(podcasts, etc)

Physicians with ≥20 years of practiced compared with physicians <20years preferred lectures as a preferred learning and teaching method (88% vs 43%; p

Short sessions

indifferent

31.3%

DISCUSSION

- Factors that facilitated physicians' preferences and disapprovals included:
 - Convenience (for virtual programs being asynchronous),
 - Opportunity to interact (for small group discussions),
 - Boosting self-motivation (for simulations, experiential, workshops, and small-group discussions) and
 - Memory retention (for experiential, and small group discussions).
- Recommendations to improve learning and teaching in university organized CPD programs included:
- should be fun and engaging;
- should affirm a love for learning;
- should emphasize high points to enhance memory and practice;
- enjoyable and not burdensome;
- should support accountability for career advancement (through evaluation and feedback support mechanisms).

CONCLUSIONS

- Our study demonstrated a wide array of preferences for teaching and learning methods.
- CPD programs tailored with a wide range of teaching and learning methods could facilitate engagement and participation to programs.

ACKNOWLEDGEMENTS

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