

SALFORD ROYAL HOSPITALS NHS TRUST

**HOPE HOSPITAL
POSTGRADUATE EDUCATION**

**GETTING THE BEST
OUT OF YOUR TRAINING
IN SALFORD**

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***IDEAS USED IN THIS BOOK ARE DEVELOPED FROM
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***"ON THE JOB TRAINING FOR PHYSICIANS" AND "ON THE JOB
TRAINING FOR SURGEONS".***

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1. AM I TAKING RESPONSIBILITY FOR MY LEARNING?

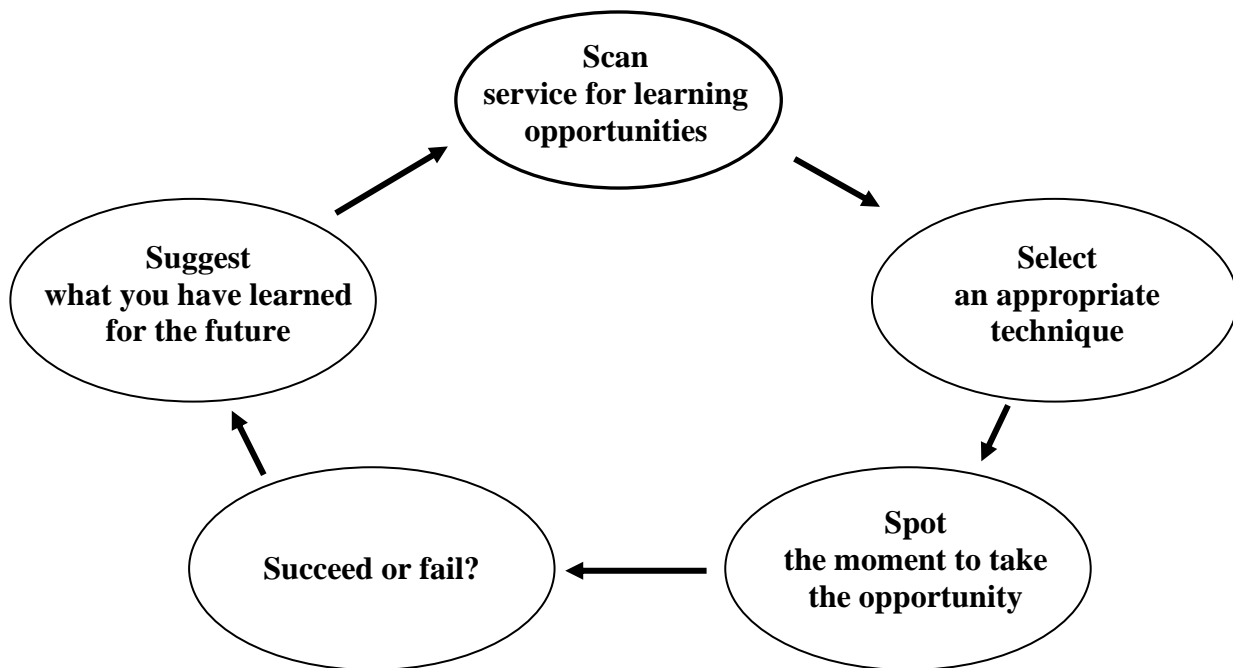
Take control of your learning - if you want to make it less haphazard, unstructured and dependent on osmosis

- If you don't take control of your learning, you become a victim. Training nearly always loses out to service. Either you let training get squeezed into odd spaces left by service, or you make sure that you get some of your training *into* service.
- Do you have a training plan? Does it set out clear targets and a time-scale for you? Is it clear how your trainer will help you to achieve these targets? If not think about developing such a plan.
- Meet with your supervisor to discuss your plan with them.
- Every day devise a 'training menu' for yourself. *A training menu consists of the learning you want to get out of the opportunities repented by today's service* The training menu is your personal training plan in everyday clinical action.
- Used every day, a training menu ensures that you capture the numerous, small moments of learning. Taken together, these contribute to progress in your training and to your growing competence as a clinician.
- By making a habit of using a training menu, you become skilled at recognising, maximising and optimising all your learning opportunities.
- At the end of each session review your training menu and make a note on what you should read up later.

2. AM I MAKING AND TAKING OPPORTUNITIES TO LEARN?

Develop and appetite for learning-but be a gourmet not a *gluten*

Read through the 5S learning cycle:
.....scan - select - spot - succeed - suggest.



- Using this cycle continually during service is the way to get control over training opportunities. The key is make the first move - the scanning - at regular intervals. Scanning is the way you keep on the look out for learning opportunities, something you have to do for yourself. Practise to make this a habit.
- Not every learning opportunity can be exploited. You have to learn how to select a good technique and spot the right moment. There are also barriers and obstacles to be overcome. Watch juniors who are more senior to you and see how they do it. You can learn from other people's mistakes and successes as well as your own.
- Don't wait to be spoon-fed. Get out there and exploit the potential.

3. AM I GETTING THE BEST OUT OF MY PRESENTATIONS?

Make sure you and your audience learn from your presentations

- * Start with an advance organiser, that is, give a summary of what you are going to say under the main headings you intend to use. This gives your audience an overall structure into which they can fit the detail.
- * Use audio-visual aids whenever possible to help people remember the content and make the session more interesting. Before you start, make sure you're familiar with the equipment and that it works. Don't overload the overheads.
- * Don't prepare too much content. Most presenters underestimate the time they need. It's better to finish early and allow time for discussion than to run out of time with your talk.
- * Leave plenty of room for questions and discussion. Encourage your audience to ask questions during your presentation or say you will talk for X minutes and leave Y minutes for discussion at the end. When people participate they enjoy it more and remember the content better.
- * Wherever possible relate your presentation to recent events or current patients. This makes the point concrete and relevant to your listeners.
- * Conclude by drawing out implications or questions for clinical practice - it makes your presentation practically relevant.
- * Giving everyone a hand-out of key points at the end of the meeting is appreciated.
- * Ask your colleagues for constructive feedback on your presentation. Specify exactly what aspects of your presentation you want feedback on. This is best done in private rather than in public.

4. AM I GETTING THE BEST OUT OF CLINICS?

Create a learning climate in clinic

- * Treat every clinic as, at some points, a training opportunity. Keep scanning or service will take over.
- * Make up a 'training menu' for the clinic - a short list of topics/cases/conditions in relation to the clinic, about which you intend to learn something.
- * If, before the clinic there is a pre-meeting with the consultant, take the opportunity to discuss your training menu explicitly, so that appropriate cases/patients can be filtered to you, or you can be called in to see how the consultant deals with the case/patient.
- * When you need advice from a more senior doctor think ahead and work out some possible answers so that you can:
 - * demonstrate that you've thought about it beforehand.
 - * check the quality of your reasoning.
 - * ask more penetrating questions
- * Remember that you learn more by allowing your trainer to correct your thinking than you do by simply asking 'What do I do with...?'
- * Where opportunities to learn at the time of seeing cases/patients/conditions are limited, store up questions for the end of the clinic, or for a later 'slack' moment between patients.
- * At the end of the clinic, check whether there is a chance to ask for a 'three-minute round up' - when the consultant can give you a protected three minutes for discussion or your questions.
- * If you don't get as much feedback as you need, ask for some - be clear what you want and choose the moment when you ask for it.
- * At the end of each session review your training menu and make a note on what you should read up later.

5. AM I GETTING THE BEST OUT OF WARD ROUNDS?

Remember: every round is relevant to your training

- * Treat every ward round as, at some points, a teaching round. Keep scanning or service will take over.
- * As part of preparing for the ward round, think out a ‘training menu’ for yourself - this is a short list of topics/cases/conditions about which you intend to learn something on the round. Alternatively, agree a joint training menu for the round with your colleagues.
- * If, before the round, there is a pre-meeting, use this to agree your training menu with whomever is leading the round.
- * Decide which cases/patients/conditions you are likely to want to ask questions about, and then scan for opportunities to then ask them. Make one learning point from each patient seen, or you can store up questions for ‘slack’ moments, such as moving between beds or between wards.
- * Offer suggestions about how you think the patient/condition should be managed as well as asking questions.
- * When there is a patient on whom you would like to do a physical examination, scan for an opportunity to ask if you may do so. Where you do ask, make sure you’re ready for the responsibility.
- * At the end of the ward-round, check whether there is a chance to ask for a ‘three-minute round up’ - when the consultant gives you a protected three minutes for discussion or for your questions.
- * If you don’t get as much feedback as you need, ask for some - be clear what you want and choose the moment when you ask for it.
- * Decide on, and make a note of, any matters you should read up later.

6. AM I GETTING THE BEST OUT OF ON-TAKE?

Ensure that on-take takes your learning on

- * Treat every on-take as a rich source of learning opportunities.
- * On-take is unpredictable - but both the pandemonium of emergencies and the peace of slack periods offer ways of learning.
- * Work as a learning team as well as a clinical team.
- * Be on the collective look-out - scan continually for chances to teach and learn from team members.
- * In a slack period, review any aspects of the last case that you did not fully understand. Prepare a training menu - e.g. work with a colleague to go through procedures that are likely to come up. If there are procedures you've never done, ask a more senior or experienced colleague to talk you through it when on turns up. If you're preparing for an exam, have a book ready to read in a quiet moment.
- * Some skills are particularly needed when on-take, Use the opportunity to develop these generic clinical skills:
 - * learning to prioritise
 - * working collaboratively as a team
 - * communicating clearly and unambiguously
 - * delegating tasks
 - * breaking bad news
 - * dealing with relatives.
- * Use the post-take ward round to get specific feedback on your diagnostic and management skills.
- * Keep a note of patients transferred to other firms so that you can track their progress and use this to develop your own feed back on your diagnostic skills.

7. AM I GETTING THE BEST OUT OF THEATRES?

Advice for Surgeons

- Treat every operating list, in some respects and at some points, as providing you with learning opportunities you can exploit. Keep scanning or service will take over.
- Consult the list and from it, think out a 'training menu' for yourself - a set of topics/cases/operative procedures about which you intend to learn something.
- If before the list begins you are able to talk with the surgeon you're assisting, agree the training menu with him/her.
- Ask to do part of an operation - but only when you're ready and properly prepared.
- While you are assisting, ask questions from time to time, but only when answering will not disrupt your trainer's concentration.
- Learn to anticipate your trainer's moves and use of instruments - it makes a positive contribution to service and shows that you're becoming ready to take a more active role in the surgery.
- If you are operating and are not sure what to do next, don't be afraid to ask for help and advice, for this shows you do not want to exceed your ability and experience.
- If you make a real contribution to a case, ask for feedback at the end of the operation or during the break between cases. This is often a good time to ask questions.
- Make friends with all the theatre staff. They can help you and teach you.
- At the end of each session review your training menu and make a note on what you should read up later.

7 AM I GETTING THE BEST OUT OF THEATRES?

Advice for Anaesthetists

- Treat every operating list, in some respects and at some points, as providing you with learning opportunities you can exploit. Keep scanning or service will take over.
- See the patients pre-operatively. Assess how their problems will influence the choice of anaesthetic plan. Make your own anaesthetic plan.
- Try to see some lists with the consultant. Use this to find out about consent for anaesthesia and see how consultants prepare patients for theatre.
- After you have seen the patients, the evening before the list, make a training plan of topics that you would like to cover. These are more interesting to you and the consultant if they are relevant to the patients that will be on the list. Read any relevant material.
- Discuss your own anaesthetic and training plans with the consultant at the start of the list.
- If you carry out a practice procedure ask for feedback that will help you carry out that procedure better the next time.
- You will not be able to cope with being "taught" continuously for a whole list. Restrict your self to one or two relevant topics.
- Focus your subsequent study around the topics you have discussed. You are much more likely to retain information that is connected to an episode of patient care you were involved with.
- Make friends with all the theatre staff. They can help you and teach you.
- At the end of each session review your training menu and make a note on what you should read up later.

8. AM I GETTING THE BEST OUT OF PRIVATE STUDY?

Set up a system for your studying

Studying for College examinations tends to be squeezed into evenings and weekends when one is tired and anxious to catch up on sleep. Time set aside for study may not materialise and so planning is hazardous. It is difficult for study to be effective and efficient. Here are some practical suggestions.

- Try to study on a regular basis, difficult though this might be. The habit of frequent, even if short, study sessions pays off.
- Sleep then study rather than study then sleep - have you tried it?
- Develop the habit of an initial skim reading of a chapter you are studying, so that you grasp the main points but not the detail. Read the chapter's introduction, final summary and any sub-headings to get the key ideas and structure. This acts as scaffolding on which to hang the detail you absorb through later re-reading. Without scaffolding, any interruption of the detailed reading means you retain little. You may have to practice to get the hang of skim reading.
- On the first detailed reading, at the end of each sub-section, repeat out loud the main points. If you can't remember them, glance through again so that you can. At the end of the chapter, say out loud your version of a summary of the whole.
- On later readings, say out loud a summary before you start to read again and skim through to make sure the scaffolding is in place. Then fill in the detail.
- Form the habit of making 'training menus' for yourself - Follow through your reading into some aspect of daily work - e.g. looking out for a related case or talking to a colleague about it. Make a note on a pad in your white coat pocket of things you come across that you don't fully understand, then you can read up about them later.
- Talk to other trainees who have passed the exam. Discuss problems with other trainees who are studying with you.

9. Working relationships

Conquer conflict - cultivate collaboration

- Every one you work with - patients, relatives, doctors, nurses, paramedics, secretaries - is potentially a source of learning, so get them on-side. As your potential teachers, treat them with the respect that is due to them.
- When you start a job, make sure that you introduce yourself to your new colleagues. Find out about their idiosyncrasies and ways of working so that you can work with the grain of established routines rather than against it - that rubs people up the wrong way.
- If you make mistakes, admit to them early and apologise. This earns respect. Mistakes are a way of learning.
- Be a team player - learn and teach,
- You learn by teaching. Explain something you think you know to another person. You may find you understand it less well than you thought.
- Use your peers who are more expert than you to talk through what you are studying - to ask you questions or to correct your explanations.
- Agree reciprocal cover for the ward with your peers to free you to go somewhere of interest, e.g. a specialist clinic.
- You are entitled to training. If you feel you aren't being properly trained, see if your peers agree. If you all do, talk the problem over initially with your Educational Supervisor. If that does not work or is not appropriate, turn to the clinical tutor or the postgraduate dean. If you complain politely and constructively, the chances are that you'll be taken seriously and obtain redress.

10. AM I GETTING THE MOST FROM FEEDBACK?

Receive feedback positively

- Receiving feedback is an essential activity if you are going to rapidly focus on areas than you need to develop. Some feedback will suggest areas for improvement. If this is always rejected without consideration then your rate of learning may suffer.
- Feedback is for your benefit. Make sure that you ask for feedback both in the work place and in your planned meetings with your Educational Supervisor.
- Listen carefully to what is said rather than immediately preparing your response.
- Ask for it to be repeated or clarified if there are areas you are unclear about.
- Accept it positively for consideration rather than dismissively.
- Ask for constructive suggestions of ways that you can modify your behaviour.
- If you disagree about matters-of-fact make sure the Consultant is aware of this.
- Thank the person giving feedback. Feedback is more helpful to you than the person giving feedback. By thanking the Consultant you will encourage further feedback.

11. HOW DO I KNOW IF THIS IS WORKING FOR ME

Glance through the booklet again after a few weeks.

Think about the parts you have put into practice.

- did it work?
- did you have to work at it before you saw a change?
- has it become obvious advice?
- are you clearer about what you want from the job?
- do you feel more confident about your work and training?
- do you take the initiative more frequently?
- do you feel more positive about your work relationships?
- are you able to see and exploit more learning opportunities?
- is service now a way into training, not an obstacle to it?

Think about the parts you did *not* put into practice.

- did you have a good reason for not doing so?
- do you want to change your mind now?
- are conditions more favourable for having a go now?
- do you feel more comfortable about it now?
- have you talked the pros and cons through with a colleague?
- do you know anybody who did try it?
- how did they fare?
- is their experience influencing you?

