

8 Minute Micro-Teach: An Alternative Method for Delivering Regular Teaching

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Introduction

The delivery of teaching during a placement is essential to meet the continuing professional development/ educational needs of the members of the team¹. Often teaching is confined to a few long in-depth talks which are tailored to the needs of those setting the departmental teaching rota. These talks are often poorly attended as team members are called away to fulfil on-call commitments. We feel that shorter more informal teaching sessions lead to greater attendance and addressing the trainees educational needs.

The 'micro-teach' used in the Training the Trainers course is well recognised and known to surgical trainees from many specialties². The format was adapted to provide regular departmental teaching.

Romanelli, 2008 has employed a similar format alongside didactic lectures and a written assignment in the education of Pharmacists³. Participants reported high levels of agreement with the statement confirming acquisition of new skills as per the course objectives.

Methods

Trainees were asked to deliver 8 minute teaching on an ENT subject to cover their own educational needs. A teaching schedule was created to cover the learning objectives from the 2012 Intercollegiate Surgical Curriculum Project (ISCP) Otolaryngology syllabus⁴. A proforma/ guidance notes was created to standardise the format and ensure adequate coverage of the subject (figure 1). The session was recorded onto a A2 flip chart with marker pens. Emphasis was placed on the use of diagrams (figure 2). The teacher was also required to end the session with "take home messages" aimed at each of the main groups within the team i.e. Core Surgical trainees, GPVTS, Foundation year 1 doctors.

Results and Discussion

A shorter more informal teaching session delivered using limited visual aids leads to greater attendance, improved teaching skills and high levels of satisfaction by trainees as assessed through participant feedback (figure 3). The majority of participants (77%) preferred the micro-teach format.

Sessions can be delivered wherever and whenever the team are gathered together, after a ward round or just before clinical governance meetings.

In our experience the sessions often lead to more in-depth discussions regarding the management of particular cases/scenarios encountered by senior staff.

Wigan ENT Microteach Guidance Notes

Here is a list of subheadings as a guide to what to include. We will start with a flip chart and a marker. Emphasis of the presentations will be to include diagrams and practical aspects of management and relevant anatomy. Obviously some of the subheadings will not be applicable to all subjects.

- Incidence
- Prevalence
- Risk factors
- Key points history
- Key examination findings
- Initial Management/Investigation
- Management
- Follow Up
- NICE/SIGN/Other guidelines
- Cochrane reviews
- Systematic reviews
- Tips and pitfalls

Figure 1: Proforma/ guidance notes for participants

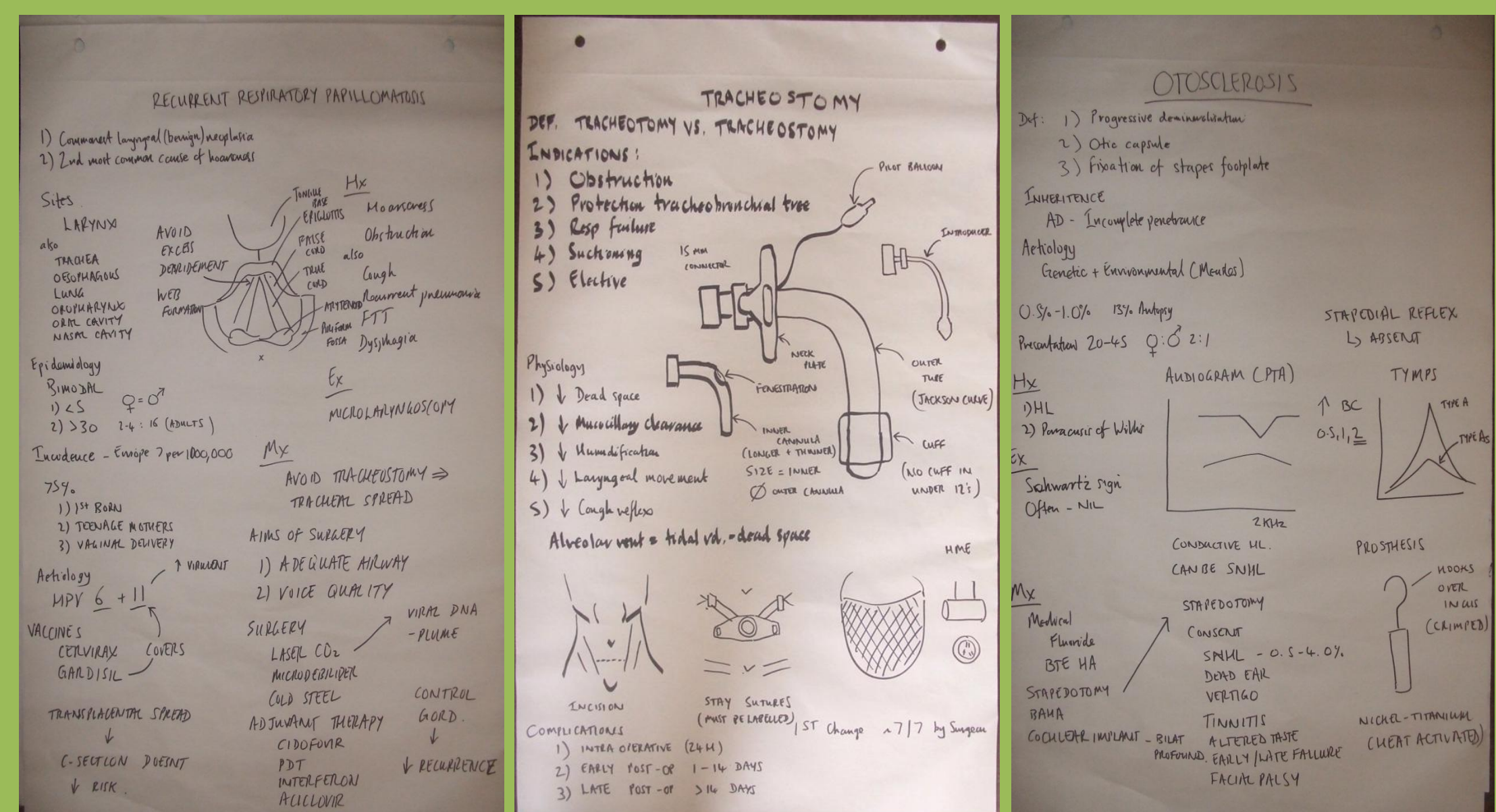


Figure 2: Examples of completed posters showing use of diagrams (Tracheostomy tube types and potential complications, Otosclerosis and Recurrent Respiratory Papillomatosis)

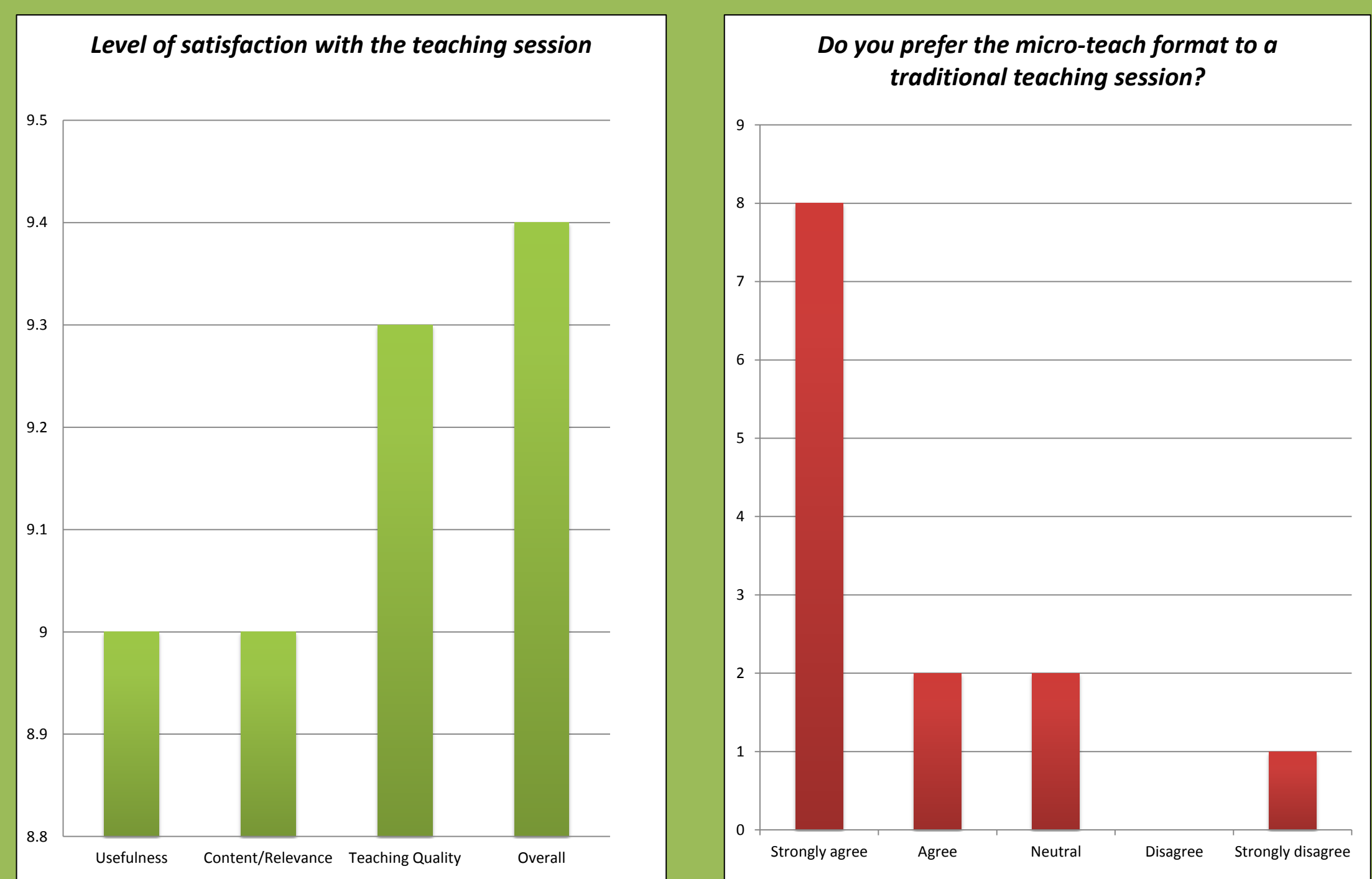


Figure 3 Feedback from participants showing level of satisfaction

References

1. GMC Good Medical Practice. http://www.gmcuk.org/guidance/good_medical_practice/maintaining_good_medical_practice_performance.asp
2. Training the Trainers: Developing Teaching Skills. *Course Material, Royal College of Surgeons of England*
3. Romanelli F(2008) Seminar series course to teach essential knowledge and skills not covered in the traditional pharmacy curriculum. *American Journal of Pharmaceutical Education*, 08, vol./is. 72/4(84), 0002-9459;1553-6467 (2008 Aug 15)
4. Intercollegiate Surgical Curriculum Project. <https://www.iscp.ac.uk>