PEER COACHING: A POWERFUL FACULTY DEVELOPMENT TOOL

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Peer Coach for Harvard Medical School Flipped Classroom Session Leaders
• I do not have any relevant relationships with industry
Peer coaching

1. What is it?

2. Example of a peer coaching program and resources

3. How to do a peer observation
Background

• Teaching faculty routinely receive written feedback on their teaching performance in clinics, lectures, and small groups from their trainees.

• Although a potentially a rich source of feedback, studies have found that
  • attendings’ acceptance of resident feedback may be low
  • residents may use shortcuts to complete these and may not provide substantive constructive criticism

Background: what is it?

• Peer observation of teaching/peer coaching programs allow medical teachers to:
  • reflect on and augment their own teaching skills
  • engage in a discourse about teaching and share best teaching practices
  • create a community of educators

• Programs may be structured to be formative or summative
  • peer coaching = formative
Background: what is it?

- A colleague who has had training (coach) will observe a peer’s (host) teaching session
- Host and coach will debrief after
- With/without a teaching observation form

  - The host may choose any area that he/she would like feedback on (learner-centered approach)
  - General educational strategies, such as engagement of learners, question asking, time management etc. can also be shared
Peer coaching

1. What is it?

2. Example of a peer coaching program and resources
The Academy at Harvard Medical School

- Fosters the careers of educators in medicine and science
- Members selected because of their leadership roles and commitment to medical education at the UME and GME levels

The Academy is established to advance the education of physicians and scientists throughout the Harvard Medical School community by:

- Creating and supporting a community of leaders in education and a culture of excellence in teaching and learning
- Fostering the careers of educators in medicine and science
- Providing programming to improve the skills of teachers
- Stimulating and supporting the creation and implementation of innovative approaches to learning and assessment
- Supporting educational research and scholarship in medical and graduate education
<table>
<thead>
<tr>
<th>Interest groups</th>
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<td>Communication, compassion, empathy</td>
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<td>Critical thinking</td>
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<td>Cross-cultural care</td>
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<td>Education technology</td>
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<td>Feedback and evaluation</td>
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<td>Hidden curriculum</td>
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<td>Mentoring</td>
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<td><strong>Peer observation</strong></td>
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<td>Resident as teacher</td>
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<td>Science of learning</td>
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<td>Simulation</td>
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<td>Writing for scholarship</td>
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Peer observation interest group

• Primary goals:
  • to develop a culture of teaching improvement across HMS
  • provide individualized faculty development for those involved in teaching at the UME, GME, and CME levels
  • generate a community-wide conversation about best teaching practices
“The flipped classroom”

Project: Development of a worksheet and compendium for case-based collaborative learning (CBCL)
Harvard Medical School revamps curriculum

The changes at Harvard Medical School mirrors a wider movement to shift methods that have been used for a century.

By Laura Krantz | GLOBE STAFF  SEPTEMBER 20, 2015

Harvard Medical School has debuted a major set of changes to its curriculum that the school says will cater to a generation of technologically savvy students and will better prepare them for an ever-changing health care environment.
First year HMS: Case-based collaborative learning (CBCL)
Process

• Studied “flipped classroom” method: literature review, discussion with expert teachers, review of “flipped classroom” teaching

• Created a worksheet for best practices for CBCL teaching through the Delphi method

• Piloted it and sought feedback from teachers and observers to augment worksheet

• Performed co-observations with teachers across courses

8 categories of effective CBCL facilitation strategies

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<tr>
<th>Connects prior learning and pre-class assignment to in-class activities</th>
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<td>Explicitly determines student preparation and understanding of core concepts</td>
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<td>Prompts deeper learning by using one or more active learning strategies</td>
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<td>Responds to students’ questions in ways to promote further learning</td>
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<td>Uses a variety of learner-centered activities to engage students in the application, transfer, or generation of knowledge</td>
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<td>Conducts frequent, formative assessment of students’ understanding to allow for immediate feedback and inform real-time instruction</td>
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<td>When co-teaching with other faculty, does so in a coordinated and collaborative manner</td>
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<td>Blends facilitated instruction with student self-directed learning</td>
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CBCL

• The Compendium further identifies and defines for the CBCL facilitator and the peer observer the varied, demonstrable behaviors associated with each category.
## Compendium for Peer Observation of Case-Based Collaborative Learning

### Category/Behavior

<table>
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<th>1. Connects prior learning and pre-class assignment to in-class activities</th>
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<tr>
<td>• Evident that pre-class assignment was:</td>
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<td>• Uses pre-class communication (e.g. email, online forum) to identify challenging concepts</td>
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<td>• Provides clear rationale as to how pre-class assignment connects to that day’s topic</td>
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<td>• Informs the class the questions that will be answered by the end of the session</td>
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<td>• Begins session by presenting a mini-didactic to fill knowledge gaps and correct misunderstanding</td>
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<td>• Starts session by asking students which part of the pre-assignment they found most challenging or need further clarification</td>
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<td>• Starts by asking open-ended or challenging question derived from the assignment</td>
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<td>• Starts session by having students work in small groups (e.g. 4 students) in which they are asked to discuss a case or work through a problem based on the prior session’s learning objectives</td>
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<td>• Asks students to summarize what they learned during the previous class as the instructor takes notes on the board</td>
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<td>• At the beginning of class, students form pairs or groups of 4 and generate a summary of the main ideas covered during the pre-class assignment</td>
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<td>• Starts the class with a “Think, Write, Share.” Instructor poses a problem or case to the class; students are then given time to write or map their ideas, after which they are asked to share their reflections in small groups or with the whole class.</td>
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Resources

• Best practices for conducting peer observation have previously been outlined and are covered in this excellent MedEdPortal publication

Peer coaching

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3. How to do a peer observation
Before the observation

- Share any observation worksheet too
- Rest assured it’s confidential
- What aspects would you like me to focus on today?
- Please let learners know why I am here
During observation: need detail and specifics: write down what you observed and heard. Use an observation form.
After the observation

You had mentioned you wanted me to observe for… anything else?

I noticed that everyone was engaged…

Thank you for having me… How did it go for you today?

I noticed… I saw…
Conclusion

• Peer coaching
  • an additional source of feedback to clinical teachers
  • fosters formation of a community of educators
  • allows sharing of best practices

• For more on “how to”:
  • Newman’s MedEdPortal article
  • sburgin@bidmc.harvard.edu
Thank you!
sburgin@bidmc.harvard.edu