

PEER OBSERVATION – CLINICAL/SMALL GROUP TEACHING



Peer Observation of Teaching

Course Information

Instructor: _____

Date: _____

Observer: _____

Setting: _____

Pre-observation meeting

The following are intended as guiding questions that may be addressed in the pre-observation meeting. The term "session" (below) is intended to be inclusive and may encompass didactic lectures, laboratory and/or discussion sessions, clinical rounds, teaching during clinics, problem-based learning sessions, etc. Please provide the observer with any relevant teaching materials (may include handouts, learning objectives, powerpoint slides, syllabus etc.).

What do you wish the students to learn by the end of this session? Do you feel that your objectives are clearly communicated to the students?

How does this session fit into the overall course or curriculum?

Are there specific aspects of the session or your teaching style for which you would like to receive feedback?

What is the proposed format of the session to be observed and will it be typical of your teaching?

What revisions, special efforts, new ideas/techniques, or trials have you made to this type of session? What motivated you to make these changes (if any)?

Are any pre/post session assignments or ancillary teaching materials required/provided?

What areas or techniques are you working on to enhance your teaching?

Is there anything else you would like to share? What do you hope to gain through this observation?

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Please refer to Peer Observation Guide for Clinical Teaching

Instructor:	Observer:	Setting:	Date:
Initiating the Session			
<ol style="list-style-type: none"> 1. Connects with the participants 2. Provides context/background 3. Integrates learner pre-session preparation 			
Presence			
<ol style="list-style-type: none"> 4. Nonverbal skills (pace, eye contact, etc) 5. Dynamism/engagement 6. Demonstrates respect for learners 7. Targets language to learner experience 			
Ensuring interaction and active learning			
<ol style="list-style-type: none"> 8. Provides session structure 9. Elicits and refers to learners' perspectives 10. Fosters critical thinking & interaction 11. Engages ALL learners 12. Uses multiple questioning techniques (open, closed, Socratic) 13. Listens actively and allows time for responses 14. Uses chunking and checking 			
Other factors contributing to effective clinical teaching and learning			
<ol style="list-style-type: none"> 15. Uses/manages humor and emotions effectively 16. Manages wrong answers/mistakes effectively 17. Manages conflicting points of view 18. Demonstrates professionalism & safety 19. Responds to inattention/unprofessional conduct 			
Content and Clarity			
<ol style="list-style-type: none"> 20. Uses evidence-based medicine/best practices 21. Helps learners structure clinical information 22. Balances depth and breadth of information 23. Uses patient data, images, handouts, models, demonstration, visuals 24. Models clinical skills (reasoning, procedural skills, communication, problem solving) 			
Closing the session			
<ol style="list-style-type: none"> 25. Summarizes, integrates, highlights key points 26. Provides opportunities for last questions 27. Sets up/transitions into next session/case (assignments, expectations, etc.) 			

Additional Comments:

PEER OBSERVATION GUIDE FOR CLINICAL TEACHING

This guide outlines a way to structure the notes you make while observing teaching and learning in a clinical or problem-based setting and participating in the post-observational feedback session. The guidelines pertain to small group or laboratory facilitation, coaching, clinical teaching, rounds, etc. There is no expectation that all numbered items will be applicable or discussed for every observation. Rather, these items are representative of what might be addressed under each main and sub heading.

Initiating the session

1. Connects with the participants – greets, acknowledges the learners
2. Provides context/background – establishes rationale for this session, clarifies how this session/learning fits with previous learning, other sessions, other parts of the curriculum
3. Integrates learner pre-session preparation – for example, use of pre-session quizzes, reviewing patient charts, case introduction, literature review

Presence

4. Nonverbal skills
 - a. Eye contact and facial expressions
 - b. Pace
 - c. Other vocal cues - volume, intonation and pitch
 - d. Posture, position, gestures, and other movements
5. Dynamism/engagement – responsiveness, flexibility, presence
6. Demonstrates respect for learners
7. Targets language to learner experience – Language appropriate for experience and knowledge level of learners

Ensuring interaction and active learning

8. Provides session structure - Provides explicit structure and makes that structure visible
 - a. Signposting – highlighting or categorizing information for emphasis or to aid recall (e.g. ‘There are two important facts you need to remember: 1st ..., 2nd ...’)
 - b. Use of transition statements (verbal structuring)
 - c. Use of periodic summary throughout the session
 - d. Logical sequence – organization
 - e. Attending to time
 - f. Keeping on task or diverting appropriately
9. Elicits and refers to learners perspectives – Asks for learners’ perspectives and incorporates those perspectives while giving and explaining information
10. Fosters critical thinking and interaction -
 - a. Models and discusses the process of clinical reasoning and critical thinking, e.g. thinks out loud to assist with this process
 - b. Creates opportunities for learners to engage in critical thinking and problem solving
 - c. Encourages interaction with the instructor and each other
11. Engages ALL learners

12. Uses multiple questioning techniques (open, closed, Socratic)
 - a. Closed – Questions for which a specific and often 1 or 2-word answer is expected such as yes or no.
 - b. Open – Questions that invite elaboration. They may direct learners to a particular area, but they allow more latitude in their response; e.g. what are the differential diagnoses? Problem list?
 - c. Socratic – Questions that guide learners when they are struggling; e.g. if the learner is headed down the wrong track, ask questions that help them rethink the process and guide them to get back on track.
13. Listens actively & allows time for responses – use of silence, ‘wait time’, facilitative responses (verbal and non-verbal)
14. Uses chunking and checking – assists learners with understanding and recall by giving a chunk of information or breaking content into manageable pieces and checking for understanding before going on.

Other factors contributing to effective clinical teaching and learning

15. Uses/manages humor and emotions effectively – recognizes grief, anxiety and frustration, practices compassion, appropriate use of humor
16. Manages wrong answers/mistakes effectively
17. Manages conflicting points of view and other conflicted situations
18. Demonstrates professionalism and safety – recognizes ethical dilemmas and promotes professional conduct, inclusiveness, ensures a safe physical and emotional environment
19. Responds to inattention, disengagement, disrespect or other unprofessional conduct

Content and Clarity

20. Uses evidence-based medicine/best practices
21. Helps learners structure clinical information – e.g. uses conceptual frameworks (the system of concepts, assumptions, expectations, beliefs, and theories that support and inform critical thinking)
22. Balances depth and breadth of information – accounts for various levels of knowledge and experience, e.g. 1st year versus 4th year students.
23. Uses patient data, images, handouts, models, demonstration, visuals, etc, to augment learning
24. Models clinical skills
 - a. Making content concrete by applying it to clinical reasoning, procedural skills, communication, taking client perspective into account, problem solving, etc
 - b. Demonstrating and discussing/analyzing what you are doing explicitly.

Closing the session

25. Summarizes, integrates, highlights key points
26. Provides opportunity for learners to ask last questions
27. Sets up/transitions into next session/case (assignments, expectations, etc.)

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Post-observation meeting

Instructor: _____

Date: _____

Observer: _____

Setting: _____

Did you accomplish what you intended for this session? If not, why not?

Were you able to determine whether your students learned what you intended? How?

What do you feel worked well (major strengths) in this session? Consider the following: initiation, presence, ensuring interaction, active learning, content, clarity, and closing of the session.

What challenges did you encounter?

What might you change for next time?

What else would you like to discuss?

OBSERVER'S FINAL COMMENTS AND SUGGESTIONS:

Overall perception of teaching: Emerging Evident Exemplary