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New Faces in OED

Four new faces have found their way to the Office of Educational Development in the past year. Janet Whitten, formerly of Creative Services, joined OED as the Business Systems Manager summer 2004. Janet is responsible for monitoring all financial and personnel actions and managing office operations. Elizabeth Hicks has been with OED since February as a research assistant for our work with Graduate Medical Education. Elizabeth assists OED staff in searching and reviewing the literature, collecting and analyzing data, and writing scholarly reports and manuscripts. Carol Thrush, formerly of the Department of Psychiatry, recently joined OED as an Assistant Professor with responsibilities in educational research and program evaluation.

Much of Carol’s work relates to Graduate Medical Education.

Lastly, Dr. Lee Lee Doyle, Assistant Dean for Faculty Development in the College of Medicine, will serve as interim part-time Director of OED while Diane Heestand takes a sabbatical in Nigeria from September through June. Diane will be working at the University of Jos School of Medicine in Jos and the University of Nigeria Teaching Hospital in Enugu.

What Do Excellent Teachers Do?

By Diane Heestand

Teaching is like many other skills. Some people are born with exceptional teaching talent while many of the rest of us fall into the “average” category. But as with other skills, individuals
Excellent Teachers (Continued)
can learn to become good and
even excellent teachers.
However, it does take work.
Pinsky, Monson, and Irby
describe a study of physicians,
identified as excellent teachers
by student and resident ratings, to
assess the practices that made
them successful. The physicians
were asked, “In terms of
teaching, is there an example of
some way you are a better
teacher now because of
something you tried that
succeeded?”
1. **Involve the learner**…the
more you involve
students/residents in active
learning, the better the
learning experience for all.
2. **Create a positive learning
environment**…Enthusiasm
and a sense of humor help.
Excellent teachers respect
learners, care about teaching
and learning, and admit their
limitations.
3. **Consider learners**…Know
what the learners know
already and what they need to
learn. Assess the learners’
needs by asking questions.
4. **Innovate**… “Be creative,
have fun,” “Talk to
colleagues, experiment, keep
revising,” “Invest in
innovative activity”
5. **Engage the learner**…Use
analogies, images,
metaphors, and cases. Some
teachers identify themselves
with the learners; e.g., “We
know this doesn’t make
sense.”
6. **Prepare adequately**…Know
your subject matter. Read,
talk with colleagues, gather
examples from the medical
literature (and popular
literature), write or outline
what you will say/do.
7. **Limit content**…Know what
your main objectives are and
teach to them. Keep it
simple.
8. **Maintain flexibility in
action**…Monitor your
learners’ reactions as you
teach and modify as needed.

Pinsky, L.E., Monson, D., & Irby,
teachers are made: Reflecting
on success to improve teaching.*
*Advances in Health Sciences

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**Writing and Using a Personal Mission Statement**

By Lee Lee Doyle

“Where do you want to go
today?” is the question we’ve all
been asked in one form or
another by everyone from our
mothers to Microsoft. It’s a good
question, one that made
Microsoft millions, but figuring
out the answer really won’t be
good enough when you’re
planning a career in academics or
aiming to be the leading software
company in the world. To
succeed in business or
academics, you have to look
beyond today and plan for the
future; you have to pick a
destination and then design a
plan to get there.

The enormity of such a project
may overwhelm us, and we often
can’t seem to find a way to
begin. One simple way to start
the process is to do what
businesses and organizations do
when they are beginning:
construct a mission statement. It
doesn’t matter if you’re a private
citizen or public corporation; if
you want to succeed, you have to
have a clear purpose with a sense
of who or what you are, what you
want to do, and how you want to
do it. These are the building
blocks of your own personal
mission statement.

When you begin to create your
own mission statement what
more do you need to know?

*First*, a mission statement
traditionally has three parts:

- **Target** – Who - Key Market
- **Contribution** – What - Activity
- **Distinction** – How – Unique

*Second*, it
should pass the
elevator
doortest
which
means that
it should be

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Personal Mission Statement (Continued)
short enough to be stated in the
time it takes an elevator door to
close. No more than one or two
sentences are required.
Let’s look at a good example
from a successful local
corporation, Wal-Mart. “To offer
all the fine customers in our
territories all of their household
needs in a manner in which they
continue to think of us fondly.”
“The customers in all our
territories” defines the target;
“To offer …all their household
needs” says what the contribution
will be; “…in a manner in which
they continue to think of us
fondly” tells what will be the
distinction that makes Wal-Mart
unique. Now think just what it is
you really want to do in your
academic career, for whom you
want to do it, and how will you
do it in a way that is different,
better, or uniquely yours. If you
are not sure you really can define
this for the long term, start by
writing a statement that covers a
shorter period, perhaps a three
year plan.
Writing the mission statement
helps you focus but it is not an
end in and of itself. The real
value of the statement is that it
becomes the polar star by which
you set and check your academic
course. At the end of the year
when you’re preparing your
annual review, you pull out your
mission statement and compare
your list of activities and
accomplishments which may
change yearly to your mission
statement. If the activities match
the mission, you’re on target for
success, but what if there’s a
mismatch? You have two
possible courses of action.
Perhaps circumstances and your
interests have changed, and you
need to revisit and rewrite your
mission statement to reflect this
and set a new course. If you still
like your mission statement,
however, it’s clear that what
you’re doing is not advancing it.
In this case, your mission
statement serves as a wake-up
call to change your activities—
and what better time to do this
than during your annual review
when negotiating your future
activities?
Success or failure in our
academic careers is up to each of
us so it is clear at the outset we
need to develop a plan, to map
out our journey. Writing a
personal mission statement is
only the first step, but no journey
can ever start without a first step.

Security of WebCT Quizzes and Exams

Security of exams is always a
concern for faculty, and it can
be more of an issue when
teaching a web-based course.
Several recent instances of
cheating have led to
investigations of additional
security features for web-
based testing.
In August 2005, UAMS
added Securexam® Browser, a
security product for web-based
testing within WebCT. This
product prevents students from
doing anything with their
computer other than taking
their web-based test. During a
test, this browser prevents
students from accessing other
files, internet sites (including
e-mail), communication
deVICES, or printing the screen.
In order to use Securexam®
Browser, faculty will
password-protect their WebCT
exams, and students will need
to download this new browser
prior to the exam. Grades are
still recorded in the same
manner, test feedback is still
provided just as before; in
other words, all quiz functions
within WebCT are the same.
Faculty will have the
opportunity to learn more
about how to use Securexam®
Browser in an upcoming
Friday-at-Noon session. You
may also contact Robin Smith,
Ph.D., at 686-7052 for
additional information.
Health Professions Education Exhibit

By Lea Mabry

On January 21, 2005, the UAMS Teaching Scholars Health Professions Education Exhibit took place in the College of Public Health. The Exhibit featured two exhibit areas: the Educational Research Poster Exhibit and the Teaching with Technology Exhibit.

UAMS faculty participated to showcase their educational research efforts and to demonstrate how technology is used to enhance instruction. Faculty from UA Fayetteville’s Educational Technology Program in the College of Education and Health Professions and UALR’s Scholarly Technology program and the UALR Department of Higher Education were invited to judge the two exhibit areas. Two professional development awards were presented in each exhibit area.

The exhibits featured 19 posters and 8 educational technology projects presented by faculty members from all five colleges at UAMS. The exhibit also featured technology demonstrations and displays of academic services available from UAMS Creative Services, Library Services, and the Teaching with Technology Committee. Impatica, Inc. also participated by sending a representative and providing a license for Impatica for PowerPoint as a door prize. WebCT also provided door prizes.

The judges were impressed with all the projects, and they had a difficult time choosing just one winner in each category. The posters and projects chosen for the professional development awards as well as the judge’s honorable mention choices are:

**Educational Research Poster Exhibit**

*1st Place Award Winners:*

“Development of a Scale to Evaluate Patient-Centeredness of Physicians’ Interviewing Skills” - Debra Simmons, M.D., Kara Belue, M.D., James Clardy, M.D., Patricia O’Sullivan, EdD*; COM, Departments of Medicine and Psychiatry, and OED

“Using Standardized Alzheimer’s Disease Patients and Families to Improve Clinical Management by Speech-Language Pathology Graduate Students” – Richard I. Zraick, Ph.D., and Terri J. Hutton, M.F.A., CHRP, Department of Audiology and Speech-Language Pathology

*Honorable Mention:*


"Benefits of a Sexual Harassment Workshop for Medical School Faculty and Students" - L.J. Perrot, M.D., J.D., COM, Department of Pathology, Linda A. Deloney, Ed.D., COM, Dept. of Radiology, and Virginia A. Johnson, Ed.D, CRC, OED

*Teaching with Technology Exhibit*

**Best Practices Category**

*1st Place Award Winner:*

“Environmental Health Course Designed for Distance Learning” - Tom Rimmer, ScD, CIH, COPH, Department of Environmental and Occupational Health

*Honorable Mention:*

“Teaching in the Operating Room with Personal Digital Assistants” - Frank E. Block, Jr., M.D., COM, Department of Anesthesiology

**Innovation in Teaching with Technology Category**

*1st Place Award Winner:*

“Patient Simulator Program in Medical Physiology” - James N. Pasley, Ph.D., and Jehad Albataineh, M.D., COM, Departments of Physiology and Biophysics and Anesthesiology

*Honorable Mention:*

"Internet-based 90-second Multimedia Student Training Vignettes for Ophthalmic and Otic Administration Techniques” - Ross E. Vanderbush, Pharm.D., and Donna West, Ph.D., COP, Department of Pharmacy Practice

*Due to Dr. O’Sullivan’s association with OED and the Teaching Scholars program, she is ineligible to be a recipient of the professional development award.*
The literature review portion of research manuscripts can be the most intimidating part of the entire project. First, you have to do a reasonably comprehensive literature search to find articles relevant to your project and to ensure that your research project is unique and builds upon previous work. After you have found articles that inform your project, how do you go about synthesizing all of that information into a readable format? Writing a literature review is a skill that can be learned—and anyone can learn it. These ten steps can help make your task easier.

1. **First**, you want to **double-check the thoroughness of your literature search**. Did you search all possible relevant keywords? Did you search all library resources and databases available to you? Did you search libraries in the surrounding area to find additional information? I **HIGHLY** encourage you to input **ALL** of your articles into RefWorks ([www.refworks.com](http://www.refworks.com)). This can easily be done via the Ebsco, Ovid, PubMed, and FirstSearch databases (at UAMS). It can also be done manually without too much effort. If you use RefWorks, you will want to include **ALL** possible information (reference information and abstract). This will come in extremely handy later.

2. **Next**, **print a hard copy** of each of the articles that you think you might reference.

3. Attempt to **organize these articles by theme** if your literature review is going to cover multiple topics. You can do this efficiently by scanning the article abstracts. Suggested themes include a brief history of your topic, recent advances
10-Step Guide (Continued)
made in the field of your topic, other projects that support your methods, other projects that had similar results as you anticipate, and other projects that had different results than you anticipate having. You may also consider using articles that cover both experimental techniques and assessment techniques.

4. Next, read carefully every article, with a highlighter, and mark information that you consider particularly relevant to your project that should be included in your literature review. Since you have grouped your articles by themes, highlight information relevant to that theme. For instance, if you have an article under the theme “experimental techniques,” highlight information within that article that informs your own experimental techniques; highlight the historical review portion of your articles that are under your “history” theme. This way, you will ensure that you have highlighted all necessary topics for your literature review.

5. Then, using your word processor, type a list of your themes, with page breaks between each theme.

6. Then, within each theme, type in the relevant information that you have highlighted, referencing the information with its corresponding article (be sure to include author, title, journal name, date, volume, issue, and page number). If you have used RefWorks, the referencing is easy because you can simply copy and paste the reference from the RefWorks bibliography—and they are already in the required format for you. With each reference, you may want to include the author’s abstract of their article. This will aid your memory in recalling what that article is about. You can either re-type the abstract or, if you have used RefWorks to manage your references, you can simply copy and paste the abstract from the RefWorks bibliography.

Now, you have ALL the information that is pertinent to your project in one simple, easy-to-manage electronic file. Having the abstracts included in this file will save you having to refer to your stack of articles too frequently.

7. Then, put topic sentences at the top of each theme. An example of a topic sentence is, “Many groundbreaking advances have been made recently in the field of MRI imaging techniques.” Then, you would have your “recent advancements” themed information following.

8. Next, go through and tweak the information that you have typed to make the sentences flow together smoothly, using words such as “then,” “although,” “in addition,” etc. You will see information and sentences that are redundant or that you no longer need; delete or summarize as needed. You may need to change the order of some of the sentences in your list. Your paper is practically writing itself for you now.

9. Then, wait a day or two, and re-read what you have written. Change wording, sentence structure, grammar, and anything that sounds awkward to you.

10. You will be amazed how what you think is perfect today; you will think needs improvement tomorrow. Be sure to give yourself plenty of time to go through several drafts. You will finally change your references to footnotes/endnotes in the format that the journal to which you plan to submit prefers (again, RefWorks can help you with that).

Your literature review will come together nicely if you follow these steps. RefWorks is a wonderful tool that can be extremely helpful with writing literature reviews; the UAMS Library can give you pointers on how to use it. RefWorks also has an easy-to-follow online tutorial. OED can personally assist you with your literature review methods and techniques, and any case of writer’s block that you may develop. For assistance, please contact Elizabeth Hicks at 526-6584 or ehicks@uams.edu. Happy writing!
Students in CON Prematriculation Program Use Web-based ‘Learning Skills’ Instruction

By Judy Garrett

Increasing evidence from individual ‘learning skills’ counseling sessions at UAMS suggests that one reason for low achievement is that students often do not realize what they know and don’t know until after they get the results of their first round of tests. The goal of a collaborative project between OED and the College of Nursing (CON) faculty to address this problem has resulted in a series of web-based lessons to teach students some of the skills needed to monitor their understanding as they are studying.

The first step in the project was to identify skills that students needed to monitor their understanding. Some of these skills were the ability to identify relevant material, visualize lecture and textbook information, condense and organize information, and the ability to identify learning tasks represented by different types of test questions.

Data from several UAMS studies have verified the importance of comprehension monitoring of some of the above skills. In one study (Garrett and Perrot, 2002), two groups of students in a pathophysiology course were matched on the basis of scores on a previous exam. One group used web-based practice exams several times to monitor their learning, along with study sessions after each practice test. The other group answered practice test questions only once, the night before the exam.

When test scores of the two groups on the next exam were compared, the average score of students who used practice questions more than once to monitor their learning was 87.2. The average score of students who used the practice questions only once was 81.4, which was significantly lower than that of the group which used practice tests to continuously monitor their learning (p<0.01).

In another study (Garrett, Gardner, Born, and Alman, 2004), three skills thought to be involved in comprehension monitoring—1) comprehend spoken information (students sketch structures as descriptions are read), 2) interpret diagrams (students describe and/or answer questions that test their understanding of diagrams), and 3) traditional reading comprehension, such as passages typically included on entrance exams—were studied in a group of entering College of Pharmacy students. With achievement on the first physiology exam as the criterion variable, the ability to comprehend spoken information (r = 0.23) and the ability to interpret diagrams (r=0.24) correlated significantly with achievement on the first exam (p < 0.05), whereas reading comprehension skills similar to those traditionally tested on entrance exams did not correlate significantly with achievement.

Materials from actual textbooks for two entry-level CON courses, Health Assessment and Foundations, were used in developing examples and exercises included in each instructional program. Each program (PowerPoint slides with audio) was compressed using Impatica so it could be used more easily by students who connect to the Internet by phone modems. Another component of the learning skills program was a pretest (not web-based) to assess certain types of learning skills considered to be used in comprehension monitoring.

Draft versions of these materials have been used in ‘face-to-face’ CON
Prematriculation Program (Continued)
prematriculation sessions since 2003. After two years of testing, final editing of slides was completed, audio for these programs was recorded by Dale Seidenschwarz of Creative Services, and the web-based materials were ready for use on May 19, 2005.

One advantage of these web-based materials is that they will be available to all entering CON students, not just those participating in the prematriculation program. Although these materials are specific to learning skills that are especially important in CON courses, another advantage of these programs is that they can be used as a template to develop ‘learning skills’ for students in other UAMS programs. For further information about these materials, contact Dr. Judy Garrett at 686-7349.

OED Mission

The mission of the Office of Educational Development is to improve teaching and learning at the University of Arkansas for Medical Sciences. To this end the office provides consultation to teachers and learners on the teaching and learning methodologies that have been shown to be effective and efficient. Faculty in the office work collaboratively with the faculty and administrative staff at UAMS to develop and evaluate new educational programs and the appropriate teaching and learning methods. In addition to providing consultation and collaborative development, the office manages several support areas that relate directly to the teaching and learning processes throughout the campus.
Having attended the 4th Annual National Conference on Team-Based Learning (TBL) in Medical and Health Sciences Education this summer, I want to provide more background on TBL. The use of TBL as a small group teaching method is expanding rapidly from one focused in the Texas health science community to one of national interest.

Attendees included educators in nursing, veterinary medicine, pharmacy, osteopathic medicine, and physical and occupational therapy, as well as those in undergraduate and graduate medical education, coming from nationally known universities, regional campuses, and local community hospitals.

TBL (formerly Team Learning) is a teacher-directed instructional method promoting student accountability, small group discussion, and large group interaction for the purpose of impacting learning by promoting the use of higher order thinking skills by students. The TBL method can be used throughout a course, or at specific times during a course selected by the instructor, to move students beyond rote memorization of facts. Three components are involved in the process:

1. Preparation – content delivery
2. Readiness Assurance Test – testing of content knowledge (RAT)
3. Application – questions requiring higher order thinking

Additional information is available in OED Notes, June 2004.

http://www.uams.edu/oed/newsletter/team_learning.asp

The conference focused on preparing educators to facilitate TBL sessions, developing RAT and application questions, and conducting scholarly research in TBL. The major point emphasized by all faculty involved in TBL was that preparation is key. In terms of facilitation, the most difficult obstacle for faculty members is remaining silent during the intra-group and inter-group discussions. The role as facilitator is to guide questioning, not to respond to questions. Offering your interpretation is saved for the closing moments of inter-group discussion. As for developing RAT items, these are typically very straightforward questions designed to measure prior comprehension of content. The difficult part is determining weighting of grades for the individual (IRAT), group (GRAT), and participation (peer evaluation). The most successful approach was to set guidelines, but allow the students as a group to determine weights. For example, if the Team Learning portion of a course were to count for 25% of the overall grade, stating that each of the three domains could be set between 5-10% allows input from the students to promote buy-in, especially needed for peer evaluation.

For success in introducing TBL, devoting sufficient time to designing the application question(s) (15-25 hours) was deemed essential. Every presenter at the conference emphasized this point. Application questions formed with insufficient preparation time usually are seriously flawed. Having other faculty read and re-read your application question(s) is integral to the process. Your interpretation of a word may be very different than your colleagues. On the other hand, one shouldn’t be surprised if errors in thinking are caught by the students even after having spent 25 hours on a question. All of the presenters had experienced this as well. They simply used the students’ input to modify the process the following year, even to the extent of leaving poorly written questions in the TBL session to emphasize a pertinent point of interest.
Finally, the concept of scholarly work in TBL was addressed. Many times this came in the form of determining whether someone’s approach to TBL was adequately designed to be able to identify a causal relationship (not yet) or simply a correlational relationship (sometimes). One researcher has demonstrated strong correlational data for a psychiatry clinical clerkship (significant increase in shelf exam scores 2001-2004) and has data from another clerkship at the same institution that follows a similar trend of improving scores over a 2 year period (2002-2004).

Other researchers are showing similar results, but none correlating as strongly as this research. Identifying the many possible confounding variables present in educational research of this kind is a substantial problem. Strong research design processes upfront will add to the value of scholarly teaching endeavors.

TBL researchers are starting to define when someone uses TBL legitimately and when they do not. The focus is on “T” – developing team integrity. A team cannot be formed and become a cohesive entity with only one or two exercises over the course of a semester. The conference faculty stated that a minimum of 4 to 5 TBL sessions in the same course were required to start the process of developing team cohesiveness.

Faculty at the conference recommended that participants not be afraid to attempt the TBL process for fear of failing, but learn from the mistakes everyone will inevitably make. They freely offered their “words of wisdom,” but stated that implementation was a very idiosyncratic process. An application exercise we performed in a TBL session involved identifying in which of several scenarios TBL was and was not successful.

Agreement among seven group members (all teaching faculty) was difficult, but the outcome was even worse once we were told that most of us had chosen as an unsuccessful scenario one that was in fact a successful application, and our choice for success had failed.

Every conference faculty member had been humbled during their learning process and expects to be humbled again in the future. All we can do is to try our best and learn from those who came before us.

**Using an RSS Feed Aggregator for Professional Development**

By Anna Moses

Do you feel like you are drowning in information? In order to stay on top of the newest developments in your profession, there are 147 different Web sites, 17 newspapers, 33 journals, and 8 funding sources that you are trying to keep up with, but never seem to have the time or can’t remember the URL and forget to bookmark it. Let’s look at a tool that might just help with these problems.

*What is an RSS Feed?* According to various sources, RSS is an acronym for either Rich Site Summary or Real Simple Syndication. What the letters stand for is not as important as how it can be used. Basically, many Web sites, including news sources, Weblogs, and funding sources, are beginning to generate RSS feeds. These feeds are made up of very simple code that can be read by an RSS aggregator.

*What is an Aggregator?* An aggregator is a tool that allows you to subscribe to RSS feeds that interest you and combines those feeds. Some aggregators are software that runs on your computer and others are hosted on a Web site on a remote server. An aggregator periodically checks the Web sites that you have subscribed to for new content. This new content from the various sites is combined in a list, usually with a title and brief synopsis, for you to view. If you see something that sparks further interest, you can click on a link and go to the appropriate Web site to read the full article or news story.
RSS Feed Aggregator
(Continued)

How to Set Up an RSS Feed Aggregator: Just go to one of the following URLs and follow the directions for setting up that particular aggregator.

- Bloglines: http://www.bloglines.com/register?r=/myblogs (Web-based with a small notification program that runs on your PC)
- NetNewsWire: http://ranchero.com/netnewswire/ (runs on your Mac)
- SharpReader: http://www.sharpreader.net/ (runs on Windows)
- NewsGator: http://www.newsgator.com/home.aspx (reads the news from within Microsoft Outlook)

How to Find Feeds for Your Aggregator: Well once you are set up, you will want to find those feeds that are of interest to you. When you are browsing Web sites, look for this symbol: This will link you to the site's RSS feed. You can also search for feeds through a number of Web sites, including:

- Syndic8: http://www.syndic8.com/
- Moreover…: http://w moreover.com/categories/category_list rss.html

You can also generate a search feed in most of the well-known search engines. Then, you can read updates to your search through your RSS aggregator. Jeremy Zawodny has created a form that generates a feed for a Yahoo search, available at http://jeremy.zawodny.com/ynews-search-rss.php. For MSN, you can create a search and then use your RSS aggregator to subscribe to the search by entering the URL of the Web page that your search generates.

Some Interesting Feeds

- BMC Medicine Education: http://www.biomedcentral.com/bmcmededuc/
- List of Journals that have RSS Feeds: http://www.library.unr.edu/ejournals/alphaRSS.aspx

Sources Consulted
Why Consider Using Small Group Instruction?

By Carol Thrush

There are a wide variety of small group instructional methods that are increasingly being used by health educators throughout the world. Some of these methods have been referred to as team learning, problem-based learning (PBL), collaborative learning, and cooperative learning, just to name a few. There are a number of reasons why health professions educators might want to consider using small group instruction approaches.

A quick review of the literature on small group instruction suggests that small group teaching skills are essential for modern day health professions educators. According to a review by Lusardi et al. (2002), students who participate in small group instruction, particularly those involved in PBL methods, are more likely to engage in scholarly activities (e.g., use more textbooks, journal articles, and informal discussion with faculty and classmates) and are more likely to study in a way that promotes deeper understanding of the material.

Research has shown that the benefits of small group instruction methods may even include better pass rates on board exams, better problem solving skills, better self- and peer-evaluation skills, better communication and listening skills, and better collaborative skills. Perhaps most importantly, because the small group learning environment gives students opportunities to build and develop their interpersonal skills, these students tend to have improved abilities to address the social and emotional issues of patients effectively (Blue, Stratton & Donnelly, 1998; Peters et al., 2000; Moore, Block, Briggs-Style & Mitchell, 1994; and Levine et al., 2004).

Part of the rationale for using small group instructional methods in the health professions is based on the reality that for health care professionals to be able to function successfully in the complex and dynamic health care environment, it is important that as students they develop not only competencies required of their profession (knowledge, skills, and attitudes), but also process-oriented capabilities that help them to function in various contexts, continue their learning, and adapt to change over time (Fraser & Greenhalgh, 2001). Several small group instruction techniques have been heralded as methods to help achieve these goals.

Methods such as PBL may be uniquely suited to help learners become more effective in delivering team approaches to patient care and more skilled in ongoing self-directed learning activities, such as the ability to access and use evidence-based information. The importance of acquiring these skills has been noted by a number of national associations, accrediting bodies, and others concerned with the quality of health professions education.

As noted by previous investigators, the lack of rigorous, controlled educational research on this topic makes it difficult to sort through and understand how contextual factors and variations in implementing and carrying out small group instruction methods might affect the results of research. Overall, however, the available evidence suggests that small group instruction approaches are at least as effective as traditional lecture-based curriculum in preparing students for clinical practice and appear to provide students with a more enjoyable and richer learning experience.

Of course, there may also be some disadvantages and challenges in using small group teaching methods. For example, small group methods that are highly structured such as PBL have been criticized for being too time-intensive and costly. When students are expected to work together and learn in teams, as in team learning, there are often concerns from both instructors and learners about how to best assess and “grade” each individual.

In addition, another disadvantage is that instructors and students involved in small
Small Group Instruction (Continued)
group instruction methods may have a hard time adjusting to new roles in the educational process. Educators who use small group teaching methods should be comfortable with their group process skills and with allowing the learners to become more involved in the educational process. Learners, on the other hand, may experience difficulties in assuming a more active responsibility for participating in the learning process with others.

In short, small group instruction methods and techniques have demonstrated effectiveness across a variety of outcome domains and although there are often significant challenges in using such methods, these concerns may be offset by the unique advantages of group/peer interaction and student enthusiasm and motivation.

References


