LEARNER-FACULTY FEEDBACK AND REFLECTIVE PRACTICE IN A RURAL UROLOGY CLINIC

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Faculty/Presenter Disclosure

• Faculty: Emmanuel Abara

• Relationships with commercial interests:
  – Participated in clinical trials ABBVIE JSS Medical Research & CMX Research: JANSSEN/CMX Research
  – Speaker Honoraria: N/A
  – Consulting Fees: N/A
  – Other: N/A
INTRODUCTION AND BACKGROUND

- Definition of “Feedback”
- Types of Feedback
- History of Community Urology in the North
- Need and Needs Assessment for a Good Feedback Process in Health Professional Education
Aims & Objectives

- To enumerate the various types of feedback and identify the role of feedback in ‘Learner-Faculty’ relationship.
- To understand a form of feedback described as ‘the learner-faculty feedback loop’ that emphasizes critical analysis and reflective practice.
- To explore some benefits and challenges of reflective practice in the era of competency-based health professional education.
Materials and Methods –

- **Rural Communities** - Isolation; Busy Solo Practice; Multiple Tasks; Committee work

- **Learners from everywhere** - High School; University/College Undergraduates; Residents; Post graduates.

- **Methods of Feedback** - Word of Mouth; Debriefing; Written Reports; Focused or targeted reports; Anonymous or Open; Electronic or Paper questionnaire; Focused Group Interviews
Materials & Method (cont’d)

- Learner arrives. Meets the Faculty and the Unit Staff
- Discussion of Learning Contract/Plan
- Goal Setting for the day
- Works ‘hand in hand’ with Faculty and Staff
- END OF DAY DEBRIEFING
  - Learner selects 1 or 2 topics/cases for in depth review + literature search
  - Learner reflects on the day’s activities
  - Produces a report after critical analysis and literature review; Submits report electronically to Faculty
Evaluation Strategies & Results

- Faculty reviews the Feedback and responds after reflection on the activities of the day - How the time was spent? Any lessons learned?

- Learning Environment - Hospital, Office, High School, Operating Room.

- Feedback Results - Positive, Negative, Moderate

- Change - New knowledge, Skill and Attitude change, adoption of Reflective Practice.
## Results: Learner Encounters, Institutions, and level of Training

<table>
<thead>
<tr>
<th>Centres of Encounter</th>
<th>Learners</th>
<th>Institution</th>
<th>Level of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sudbury</td>
<td>2</td>
<td>Sudbury High School</td>
<td>Grade 12/13 **</td>
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<tr>
<td>Timmins</td>
<td>1</td>
<td>University of Toronto</td>
<td>Resident (Surgery)</td>
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<tr>
<td></td>
<td>3</td>
<td>Timmins High School</td>
<td>Grade 12 **</td>
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<tr>
<td>Kapuskasing</td>
<td>14</td>
<td>NOSM</td>
<td>Medical Students (3rd year)</td>
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<td></td>
<td>3</td>
<td>NOSM-2; Ottawa -1</td>
<td>Residents</td>
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<td></td>
<td>1</td>
<td>High School</td>
<td>Grade 12 **</td>
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<tr>
<td>Kirkland Lake</td>
<td>6</td>
<td>NOSM</td>
<td>Medical Students (2nd year)</td>
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<td>1</td>
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<td>Nursing Student</td>
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<tr>
<td>Cochrane/Iroquois Falls</td>
<td>4</td>
<td>NOSM</td>
<td>Medical Students (2nd year)</td>
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<tr>
<td>Hearst</td>
<td>1</td>
<td>U. Ottawa</td>
<td>Resident</td>
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<td>Medical Student (2nd year)</td>
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<td></td>
<td>1</td>
<td>Hearst High School</td>
<td>Grade 12**</td>
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<tr>
<td>Richmond Hill</td>
<td>10</td>
<td>University of Toronto</td>
<td>UGE</td>
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<tr>
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<td></td>
<td>McMaster</td>
<td>BSc(Hons)</td>
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<td>UWO</td>
<td>MSc</td>
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<td></td>
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<td>York</td>
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<td>4</td>
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<td>Grade 12 **</td>
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<td>Richmond Green</td>
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<td><strong>Total</strong></td>
<td><strong>44</strong></td>
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** Had a different Feedback Protocol**
Results: Case 1

- Student 1 - University of Toronto - 19 year old female, BSc(Hon) Candidate
- 1-Day Shadowing experience:
  - Goals:
    - i. “I want to gain better understanding of the role of technology in modern healthcare.”
    - ii. “I want to better understand the life of a urologist/physician...what percentage of the day is spent seeing patients...admin...quality of life...balance family life and work.
    - iii. “I want to learn about a physician’s perspective of current issues in modern healthcare in Canada, eg. Inequities in access
Results: Case 1

- Day experience Office Practice: Community Office Urology; Telemedicine Clinic; Debriefing
- Reflection and Feedback: 3 cases/Topics – Serum PSA and its Nuances; Prostate Cancer; Overactive Bladder
- Follow-up: Feedback loops- several
- Latest: “Dr. Abara, I am well. I have graduated...I am a Registered Nurse now”.
Results: Case 2

- Student 2 - McMaster University, Hamilton - 20 year old female BSc(Hon) Candidate
- Accompanied grandmother to her Urology appointment, then requested for ‘placement and shadowing’
- Experienced: Several weeks in our Office practice
- Goals: i. “I want to be a doctor” ii. “I will like to do research” iii. “I want to learn more so that I can help my grandmother”.
- Feedback and Reflections: Several ‘feedback loops’
- Follow-up & Outcome: Feedback loops resulted in a peer-reviewed Case Report
- Presented at local, regional, and national meetings and published in a Urology journal
- She later attended Medical school in Europe. Graduated. Currently practising in Europe.
Results: Case 3

- Student 3 - Northern Ontario School of Medicine (NOSM) 31 year old male MD Candidate
- Experienced placement in one of our rural Satellite Clinics
- Goals: i. “To understand and learn about urology to help with his Family practice on graduation” ii. “if possible, learn some basic surgical skills in urology” iii. “acquire knowledge and repertoire when to refer to Urology appropriately”
- Reflection and Feedback - 3 cases and “Teaching & Learning: Moment both for Faculty and Learner
- Attended a webinar with Dr. Abara to learn about latest treatment strategies on Renal Cell Cancer
- Follow-up and Outcome: Graduated from NOSM. Now in Community Medical Practice.
Discussion: Reflective Practice & Feedback

Dr. Abara and two NOSM 3rd year students in an online seminar with a Professor from France at Sunnybrook Hospital, Toronto from Kapuskasing, Ontario
Discussion: Reflective Practice & Feedback

What is Reflection?

- Reflection involves thinking about and critically analysing our experiences and actions and those of our learners in order to improve our professional practice

The Experiential Learning Cycle

Adapted from Kolb and Fry, 1975
Discussion: Reflective Practice & Feedback
- Benefits of Reflective Practice

- Allows us to consciously develop our own repertoire of strategies and techniques to draw upon in our practice

- Helps us to take informed actions that can be justified and explained to others and that we can use to generate answers to problems that confront us

- It allows us to adjust and respond to issues and problems
Discussion: Reflective Practice & Feedback - Benefits of Reflective Practice

- Helps us to become aware of our underlying beliefs and assumptions about learning and teaching.

- Helps us to promote a positive learning environment – our teaching becomes responsive to learner feedback and needs.

- Helps us to locate our teaching in the broader institutional, social, and political context. Understand many factors that influence learners’ learning.
Lessons Learned

- Majority of learners appreciated the strategy (>90% compliance)
- Learners reported great opportunity for critical thinking and analysis
- Many adopted REFLECTIVE PRACTICE as a lasting strategy in learning
- Led to literature review and a few Case reports for meetings and journal publications
- Faculty Benefits +++; Records of Learners; Useful tips on what learners value
Reflection – A Continuum of Practice

Cyclical Reflection → Systematic Inquiry

Communities of Practice ← Collective Information Interaction
Limitations

- Solo Rural Urology Practice
- Small Numbers
- Time Factor
- Learners and Faculty already have busy schedules


Conclusions

- The Learner-Faculty-Feedback Loop is a healthy strategy for Professional Health Education.

- Benefits to Learner and Faculty. Leads to growth and sustainable workplace relations.

- Respectful, honest, and genuine feedback generates confidence and trust.

- Negative feedback (when taken seriously) can result in lasting benefit from knowledge gained and more.
Acknowledgments

- Staff and Research & Development Officer at Richmond Urology Practice
- All the ‘student scheduling office ’ staff in the rural Ontario Hospitals
QUESTIONS?
Thank you!! MERCI!! Meegwetch!!!