



Jaime Correia de Sousa, MD, PhD  
jaimecsousa@gmail.com

## ***26 – How to Deliver a Successful Learning Package for Family Medicine Trainees?***

*Jaime Correia de Sousa, MD, PhD  
Community Health, School of  
Health Sciences, University of  
Minho, Portugal*

Like most learners, FM trainees are eager to learn to become competent professionals. It is the task of tutors and course organisers to guarantee the quality of learning. In order to be successful, learning programmes require a certain number of features. Family Medicine has been in the front line of innovation in designing learning and teaching programmes to fit the objectives and learning needs of trainees (1). Furthermore, it has published guidance and developed several courses to allow the development of teaching skills of tutors and teachers in family medicine (2,3).

### ***What Makes a Teaching Programme Successful?***

This text will review some of the characteristics of a teaching package that can include in-person learning, such as small group work modules combined with distance learning, mostly using problem based learning and integrating practical work in a real primary care setting.

Learning objectives and content can be adapted to work with small groups, individual learning or one-to-one teaching in a residency programme. We will consider the six key features that make such a comprehensive programme effective.

### ***Content***

In most countries, there is already a good syllabus defining the content of learning and teaching in the training phase (4). In the planning stage of each learning package, teachers have to define very clearly the purpose of the module that should be based in the assessment of the training needs, the skills and knowledge deficits of students and the learning objectives (5). The objectives have to be written in a clear way as measurable statements of what participants should know or be able to do. Ideally, the specific training needs of each trainee or group of trainees should be evaluated previously to the design of the programme, so that the teaching and learning package is tailored to the participants' knowledge or skills gaps (5,6).

### ***The Human Factor***

Training involves different people who agree to participate and need to be aware of their roles and tasks. Trainer and trainee have to be capable to build and maintain a continuing relationship. They should also be able to involve the practice nurses and staff and to obtain the consent from patients, who should be clearly informed of their rights and assured that their voluntary participation is important for the teaching programme and that any inconvenience should be minimised.

## **The Environment**

Teaching and learning is facilitated by an adequate environment. Premises for group work should allow a distribution of seats so that all participants and the speaker can face each other. If a group sits in a circle without a table, communication is likely to be easier. Designing web based teaching requires certain skills and the support of a good technical team. In a teaching practice, the premises have to meet certain requirements such as a minimum number of consulting rooms and areas for meetings and presentations. Besides the normal clinical tools there should be equipment specifically dedicated for teaching, such as a fast internet access, data-show and screen, flip charts, and video cameras.

## **Types of Learning**

Other important features that need attention are the types of learning required with relation to different aspects of education. Types of learning fall into three categories. The first one consists of the knowledge of specific facts, patterns, and concepts. The second category includes the skills that require practical abilities, manual skills measured in speed and / or precision, clinical reasoning and problem solving aptitudes. The third one contains the attitudes, realising feelings, values, and motivation (5).

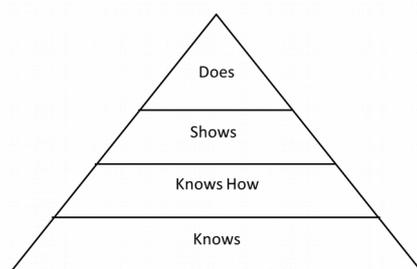
Learning also requires adaptation of the program to individual trainees as people have different individual learning styles. Some persons learn quickly by listening, some others need to complete listening by reading and memorising; others have to repeat and correct the skill until they know it. This requires the tutor to take into account the trainee's preferred learning style and to consider the trainee's learning needs.

## **Communication**

Good communication is essential for effective teaching and learning. Tutor and trainee should develop an adequate communication mode. This requires frequent interaction aimed at clarification, problem solving and course correction. Adult learning though, is a process that requires independent learning and the role of the tutor is more of a facilitator and organiser coaching the trainee through the learning process. Qualities such as openness, networking, and proactive communication are important ingredients in the process of personal and organisational change (7).

## **Assessment**

Assessment is important because it drives learning, allows measures of individual and programmatic progress and assures the public that providers are competent. It is fundamental to outcomes or competency-based education (8). Assessment methods have to be adapted to the type of learning. Common methods of assessment such as multiple choice questions, simulation tests, and objective structured clinical examinations (OSCEs) target the lowest levels of the learning pyramid (7,8), while work based methods of assessment target the highest level of the pyramid and collect information about doctors' performance in their normal practice and should be preferred in a more comprehensive teaching program.



**Miller's Pyramid of Competence. (8)**

