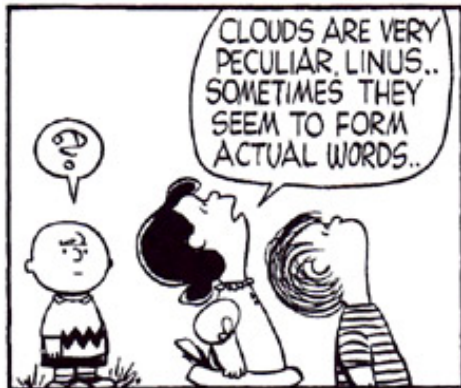


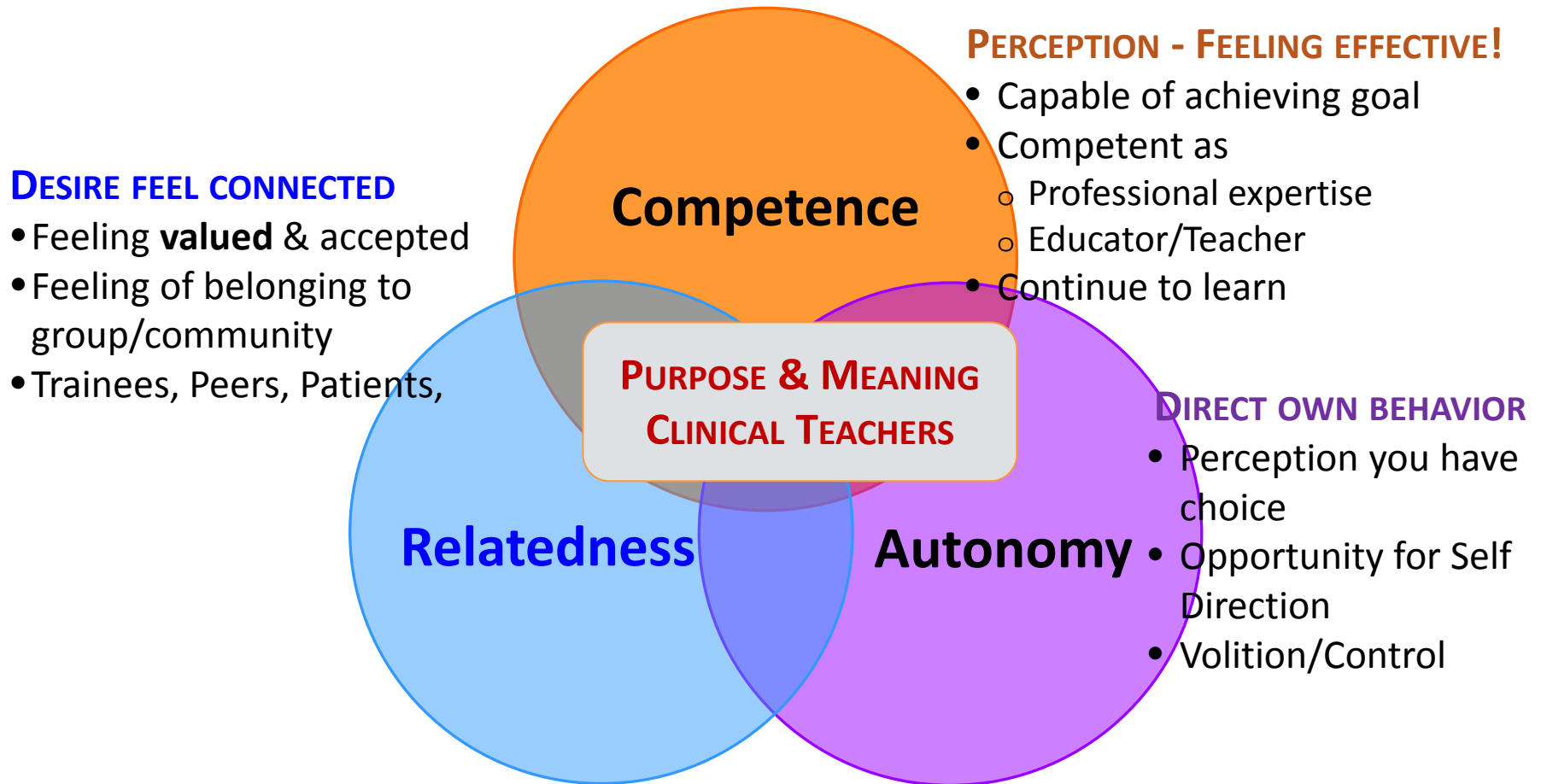
Integrating Well Being into Clinical Teaching – An *Improv* Faculty Development Experience

MedEd Improv Ensemble

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Well-Being /“Joy” as Clinical Teachers



NEED TO WARM UP AS TEACHER: WARM UP #1: “FAST/AGILE THINKING”

Improv “Go with Possibility...” Rules

- Round Robin
 - Starting with each MedEd Improv Ensemble member
 - Then one shout out per table
 - If no answers in 10 seconds – skip to next table/ensemble member
- Continue until exhaust

IMPROV WARM UP:

GO WITH THE POSSIBILITY THAT

Clinical teaching is like Improv because

- **Go!!**

WARM-UP #2

How many of you “warm up” teaching?

☑ **Mentally?** (*Go with possibility that*)

• **Physically** (\neq running to be on time)

○ Vocal: Enunciation/Pronunciation Warm Ups – x 3 FAST!!!!!!

1. C – Comical Economists

2. U - Unique New York, Unique New York, Unique New York

3. O - One-One was a racehorse. Two-Two was one, too.

When One-One won one race, Two-Two won one, too.

• **Emotionally?** *Present – excited, enthusiastic*

WARM UP #3 - EMOTIONAL

TEACHER'S PET PEEVES → WELL-BEING

- **Table – Dyads**
- **Participant #1**
 - 1 minute to complain about a clinical teaching Pet Peeve
- **Participant #2**
 - Listen carefully
 - Present complaint back using **positive terms** – stating what is truly important to that person (< 30 seconds)
- **Repeat**
- **Table Round Robin**

Improv.. “Injects the Person back into Interpersonal”

In Improv & Clinical Teaching
WARM UP -- Be Present in All 3 Domains
to Listen & Communicate

IMPROV TYPICALLY USED “COMMUNICATION SKILLS”

- **Northwestern** – Medical Improv Curriculum (Watson)
- **Alan Alda Center for Communication Science at Stony Brook** [U Michigan (Fesell)]
- **UWSMPH** – Improv4Health Professionals (Zelenski)
- **Penn State** - Jazz and Art of Medicine: Improvisation communication process (Haidet)
- **Evidence:** Improving communication with patients can reduce physicians job-related stress, burnout & litigation risk
- **Application to Medical Teaching – 1st!**

Atluru A. What improv can teach tomorrow's doctors. The Atlantic. Aug 24, 2016.

Schleiter KE. Difficult patient-physician relationships and the risk of medical malpractice litigation. AMA J of Ethics. 2009;11(30):242-246.

IMPROVE RULES

ESTABLISH THE SCENE

Who Learner

M1-2

M3

PGY 1

PGY 2

PGY 3

PA/NP

Attitude

What Feedback & Well-Being Teaching Focus

Disorganized

Overconfident

Missed Key Hx, Dif
Dx, Mgmt,

No SDH or
psychosocial

Long Present

Charts always
late

Where

Clinic (running
late, added pt)

Hospital (ED, ICU,
L&D, Wards)

Nursing Home

Urgent Care
Clinic

?????

How in Relationship

3rd day staffing team

Previously taught...

Assoc Program
Director

New/Sr Faculty
member

??????

TINA FEY ON IMPROV SKILLS



Confidence!	Clinical Teaching	Common Principles?
<p>1. Always Agree & Say YES</p> <ul style="list-style-type: none"> • Respect what your partner has created • Benefit of agreement is an open mind 	<p>“Yes, I agree! Those are dx options”</p>	<p>Respect</p>
<p>2. Say YES AND</p> <ul style="list-style-type: none"> • Add something • Make Statements - Takes the “pressure” off others to provide all answers • Don’t ask “questions” 	<p>“...AND I’m thinking there may be another possible something/dx going here_____”</p>	<p>Contribute Something</p> <p>Don’t ask Questions all the time</p>
<p>3. There are no Mistakes –</p> <ul style="list-style-type: none"> • Only Beautiful Opps 	<p>“... this important dx omission is opportunity”</p>	<p>Stay positive Learn to adapt Explore - Safe</p>
<p>4. Listen</p> <ul style="list-style-type: none"> • Give & Take (stop talking) 		

Goal: Make the “Team” look better

3.14.2016

<http://women2.com/tina-feys-rules-for-improv-and-your-career/>

10

Simpson - Improv

IMPROV: RULES

“ESTABLISH SCENE #1”



WHO: LEARNER	WHERE	WHAT Teaching Focus is on Feedback & Well Being	HOW IN RELATIONSHIP Learner & Teacher (Teacher ALWAYS Starts)
<ul style="list-style-type: none">• PGY2: IM Winter• Overconfident –• Sees herself as:<ul style="list-style-type: none">○ Role model○ “Team leader”• Plans on fellowship			

MedEd Improv Ensemble: 90 sec FB & WB Teacher/Learner + 60 sec Observer FB
Carla Senior Fac/Prog Director; Jake PGY 2 IM; Will Observer/Debriefers on
feedback and well being

Next round at tables!

SCENE #1: YOUR TURN

- Form Triads
- Pick 1: Teacher, Learner, Observer (Max 2)
- Teacher *initiates*: 2 min interaction with Learner (reminder well being)
 - AGREE – Say Yes AND; No mistakes –opportunities for learning, Listen, Goal is make team better
- Observer 90 sec FB Teacher

WHO: LEARNER	WHERE	WHAT Teaching Focus is on Feedback & Well Being	HOW IN RELATIONSHIP Learner & Teacher (Teacher ALWAYS Starts)
<ul style="list-style-type: none"> • PGY2: IM Winter • Overconfident – • Sees herself as: <ul style="list-style-type: none"> ○ Role model ○ “Team leader” • Plans on fellowship 	<ul style="list-style-type: none"> • Hospital “Team Rm” • Attending rounds just finished reviewing PGY2s last patient (who will be discharged by noon) • Other trainees are exiting 	<ul style="list-style-type: none"> • Omitted important considerations in different diagnosis for last patient • Management plan is unnecessarily keeping patient in hospital past noon discharge 	<ul style="list-style-type: none"> • Senior Faculty • Program Director • Staffed Resident as PGY1 for 1 week • 2nd day of staffing

SCENE #1: DEBRIEF

KEY TAKE HOMES 20 SEC

Key Improv Principles (and Well-being/FB) as “scripts”

- **Present (Head, Heart, Hands)**
 - Stay positive
 - Adapt
- **In relationship - listen**
 - One dominate?
- **Build: Yes And... Make Statements**
 - Not questions

MORE PRACTICE

- **Triad: Select a “scene” [from handout]**
- **Pick 1: Teacher, Learner, Observer (Max 2)**
- **Teacher *initiates*: 2 min interaction with Learner (reminder well being)**
 - AGREE – Say *Yes AND*; No mistakes – opportunities for learning, Listen, Goal is make team better, Make statements
- **Debrief 1 min**
 - Present (Head, Heart, Hands) - Stay positive / Adapt
 - In relationship - listen
 - Build: Yes And... Make Statements (Not questions)
- **Practice: Change roles and Repeat Scene or select new scene**

SMALL GROUPS

Key Improv Principles (and Well-being/FB)

1. Identify strategies for integrating well-being into clinical teaching – particular Feedback
 - “Teaching Scripts” you can use/adapt?
2. Identify benefits and barriers to Clinical Teaching Improv as faculty development strategy
 - ‘DOT – Identify the “Do One Thing” based on this session
3. Be prepared to report out (30 sec)

IN SUM

GO WITH POSSIBILITY FB = IMPROV

Improv Common Principles

WARM UP – Heads, Heart, Hands

Say “Yes” Respect the relationship, context learner brings

Say “Yes And” Contribute Something (not yes but...)

Yes and there is another dx that need to consider

Make Statements: Don't ask Questions ALL the time

There are no Mistakes: Only beautiful learning opps;

Listen: Learn to adapt

Goal: Achieve WOW - Learning, Well Being, Patient Care

WORK (CLIN TCH-WB) IS A STAGE

TINA FEY

- ... I can't help thinking work has more in common with improv than I even first realized.
- We all have behavior that comes naturally to us.
- And it's not always advantageous to behave this way at work.
- So we adapt.
 - We accept things that come our way...even though we don't like it.
 - We add our personal touch as projects come our way...to make work more enjoyable.
 - We make mistakes...and learn to roll with it.

Common Principles

"Yes" Respect

"Yes And"
Contribute
Something

**Make
Statements**
Don't ask
Questions
ALL the time

Stay positive

Listen: Learn
to adapt

Goal:
Make the
"Team" better

ADDITIONAL RESOURCES

- www.ImprovDoc.org an educational resource promoting communication, empathy, & teamwork – reading list, classes
- www.Merlin-Works.com great list of resources – tools
- Learnimprov.com
- [People and Chairs Blog](#)
- #MedImprov – (inactive?)

EXTRA WARM UP EXERCISES

“CUT TO THE CHASE”

- **2 participants**
- **Enact a scene for 1 minute**
- **Immediately replay the scene with the same message and pace – 30 seconds**
- **15 seconds – forces edit dialogue – enhances skills in efficient 2-way communication**

EXTRA WARM UP EXERCISES

LAST WORD – 1ST WORD

- **Table – 6-8 members**
- **Pick a topic – Rounds – Complex Pt & Well being**
- **Person #1 starts with 1-2 sentences**
 - Good summary of Mr. Jones who is indeed a complex patient with uncontrolled DM & HTN whose SDH make this difficult yet our proposed management plan
- **Person #2 starts with 1st word last sentence**
 - Plan....
- **Person #2 starts with 1st word last sentence**