Objective
This poster describes a pilot project seeking to define the attributes of teaching faculty deemed helpful to foster learning in child psychiatry and general pediatrics.

Background
In residency psychiatry, what is the role of the teacher—learner relationship to promote learning? To date, little has been written about the attributes of the postgraduate child psychiatry teacher that enhance knowledge and attainment of the essential competencies of the psychiatric professional.

In psychiatry residency, three major and distinct teacher roles are seminal to the educational process: 1) clinical rotation supervisor, 2) seminar/didactic leader, and 3) psychotherapy supervisor. There have been attempts to define the core elements of the learner/psychotherapy supervisor relationship promoting learning including: defining goals and supporting individual differences, giving and receiving explicit specific feedback, a safe and supportive relationship, and serving as a role model (1,2). The qualities of the exceptional teacher in clinical medicine include excellence in communication, the ability to inspire, support and involve students (3).

Medical educators have also attempted to describe the teacher attributes promoting learning in surgery and primary care (4). In child psychiatry residency training, the attributes necessary for excellence in each of the three core teaching roles have not been previously well-defined; thus, objective measures to assess desirable attributes are not available. In addition, faculty often arrive in the role as preceptor, seminar leader, or supervisor with little experience as an educator.

Key Questions Being Asked:
1. What are the positive attributes of faculty that contribute to learning in the three learning settings?
2. What are attributes of faculty that impede learning in the three learning settings?
3. How do the residents/fellows' views compare with a similar number of faculty being surveyed?

Methodology

The setting of the study was Maine Medical Center’s Department of Psychiatry and Division of Child Psychiatry Residency Training Programs. All residents and fellows participating in the training programs were invited to participate (n=25); an anonymous survey was administered via Survey Monkey. A similar number (25) of physician faculty in the department was invited to participate. Recruitment efforts included “consciousness raising” about the study; announcements were made at a monthly meeting with the residents and fellows, two faculty meetings, and notification at a departmental grand rounds lecture. Participation was voluntary. Email invitations were sent via Survey Monkey with weekly follow-ups for a three-week time period.

The survey was developed following a review of the literature. Through Academic Search Premier and Medline EBSCO database searches utilizing the following key terms: Medical Education and Clinical Teaching, and secondary: Psychiatry and Education and Supervision. An initial survey was piloted for trial by a resident, a medical educator, and two residency program directors for input, review and revision. The final survey contained two open-response questions followed by eleven forced-choice answers and could only be answered sequentially.

The two open-ended questions were reviewed and coded for key themes by two independent evaluators blinded to the status of the respondent; ratings were then compared for consensus. Due to the small number of responses, all ranked responses for 1st, 2nd, and 3rd were summed. Statistical analyses were performed using Microsoft Excel 2007 (Microsoft, Inc) for descriptive findings of each group (resident and faculty). Fisher’s exact test, was used to test for differences in proportions of ranked answers.

The MMC IRB deemed the project exempt from review approved a waiver of informed consent according to 45 CFR 46.116(d) and a waiver of authorization according to the Common Rule and HIPPA Privacy Rule 164.520(3).

Results

Overall response rate was 54% (27/50). Resident/fellow n=25 (12/25), Faculty n=25 (12/25). Ages of respondents: < 30, n=5; 30 to 40, n=13; 40 to 45, n=9 (4 residents/9 faculty); > 45, n=9 (1 resident/8 faculty).


Forced answer ranking of the top three attributes for three teacher roles revealed differences between residents (R) and faculty (F).

Discussion

Enthusiasm of the teacher was highly endorsed by both faculty and residents; thus, carefully assessing faculty for burn-out and professional dissatisfaction may enhance the learning experience. Faculty members who serve has as positive role models was a positive attribute in all teaching roles. In this small pilot study, all psychiatry residents (general, CAP, PFP) highly value the faculty member who can teach from multiple perspectives and is readily available for support, attributes not equally endorsed by the faculty. Interestingly, in this small pilot project, traditional practices in medical education (e.g. teachers giving formal didactic presentations, teachers requiring formal case presentations) were not highly endorsed by either learners or teachers. The results of this study may guide faculty development. This study was limited by the small number of respondents. The results of this study will be used for a large multi-site study.

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References available upon request.