

Emergency Medicine Education without Classrooms

Dr Ffion Davies

President Elect, International Federation of Emergency Medicine (IFEM)

Consultant Emergency Physician

University Hospitals of Leicester, UK



@IFEMPresElect

The challenge: training v immediate patient care is international



Time is precious

How to educate whilst treating patients

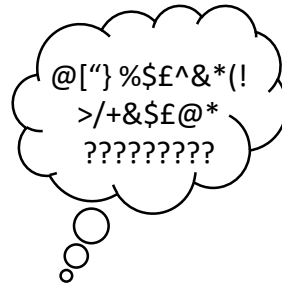
- Different ways of teaching & learning
- Educational theory



Non-traditional ways of teaching & learning



Fact
Fact
Fact



← Confused!

- Non-traditional:
The learning conversation

Break away from tradition

- Less classroom-based education
- Training integrates into the working day instead



Make education part of day-to-day work

Every shift can contain “mini-teach” moments

Don't just answer a question from a doctor:

What is the **learning point** for him/her?

- Pause. “Package” it in your own mind (think) then speak.....
- Announce “this is a mini-teach”
- Deliver!



I'm teaching

Creating a culture of education

- Consider introducing identified “teaching shifts”
- Different coloured scrubs help identify the education role
- Very good for team morale



Simulation training

Expensive mannekins are not necessary

“Pop-up” simulation (during normal work)

Frequent & short (eg. 20 minutes)

Doctors & nurses together



Pop-up simulation training (even in a busy ED!)

In situ Simulation (during COVID-19)

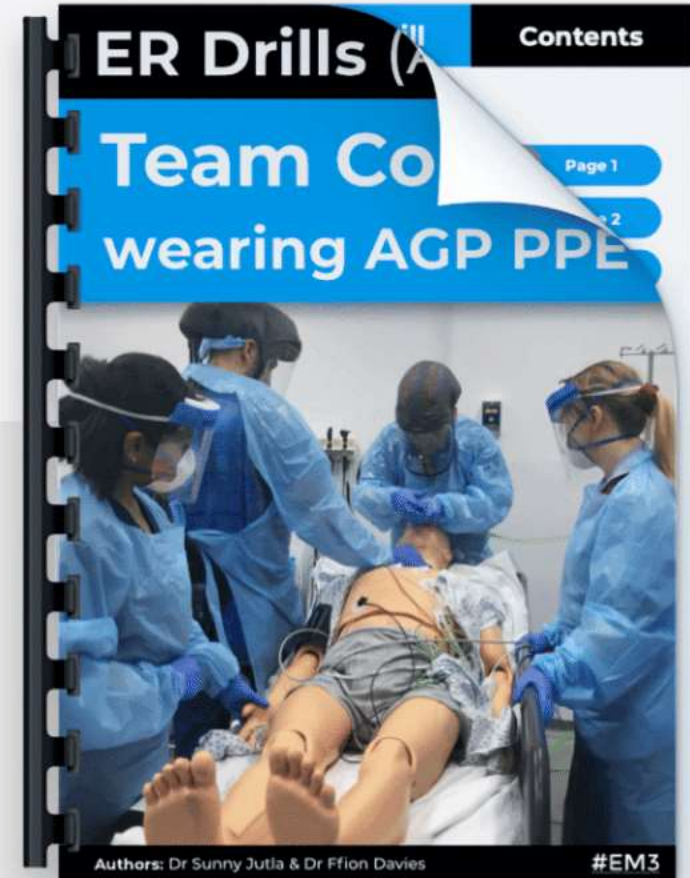
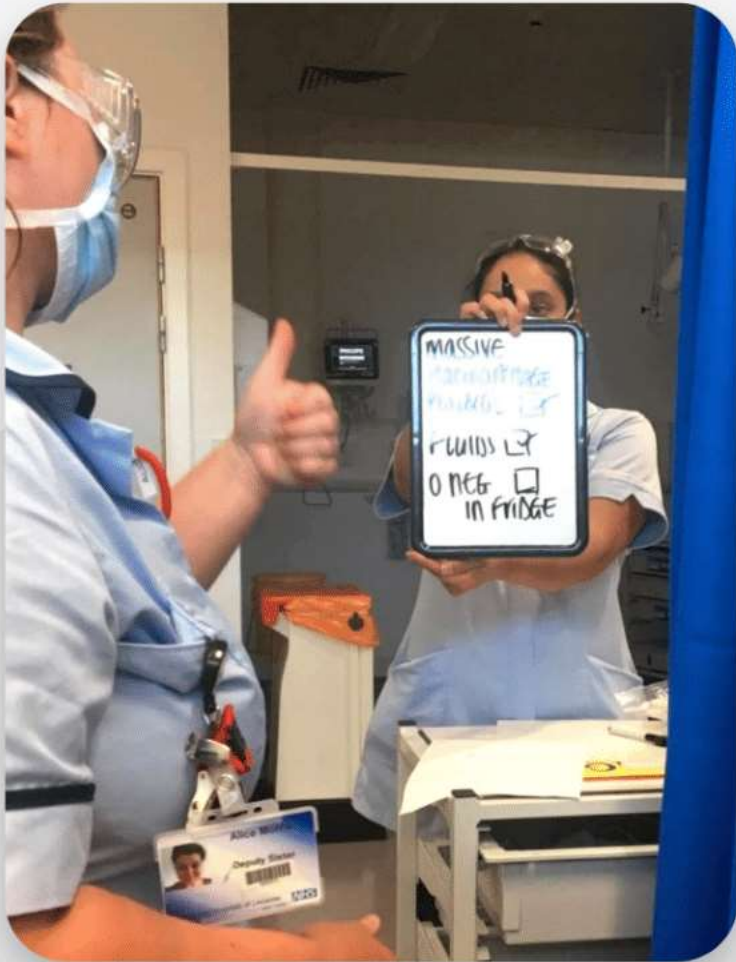


- ✓ Short + Pop-up!
- ✓ Surgical mask + goggles
- ✓ Colleagues, HCAs and students as the patient!



The 'Silent' Simulation

An exercise for learning how to communicate in AGP-level PPE



Source: <https://bit.ly/em3adultsvoicelessteamcommsdrill>

Keep it short and simple

<https://em3.org.uk> **#EM3**

Resus “drills”

- Exercise in decision-making & team-work
- Not focused on the skill itself
- 5 minutes
- Repetition to aid learning

Keep it short and simple

Example: Resus drills

Structure:

- ✓ Scenario
- ✓ Feedback
- ✓ Re-run scenario



Source: <https://em3.org.uk/foamed/15/2/2019/resus-drills>

Different ways of learning



Different ways of learning



Embrace different ways of learning



Podcasts



YouTube

moodle



zoom



Blackboard



TED

Ideas worth spreading

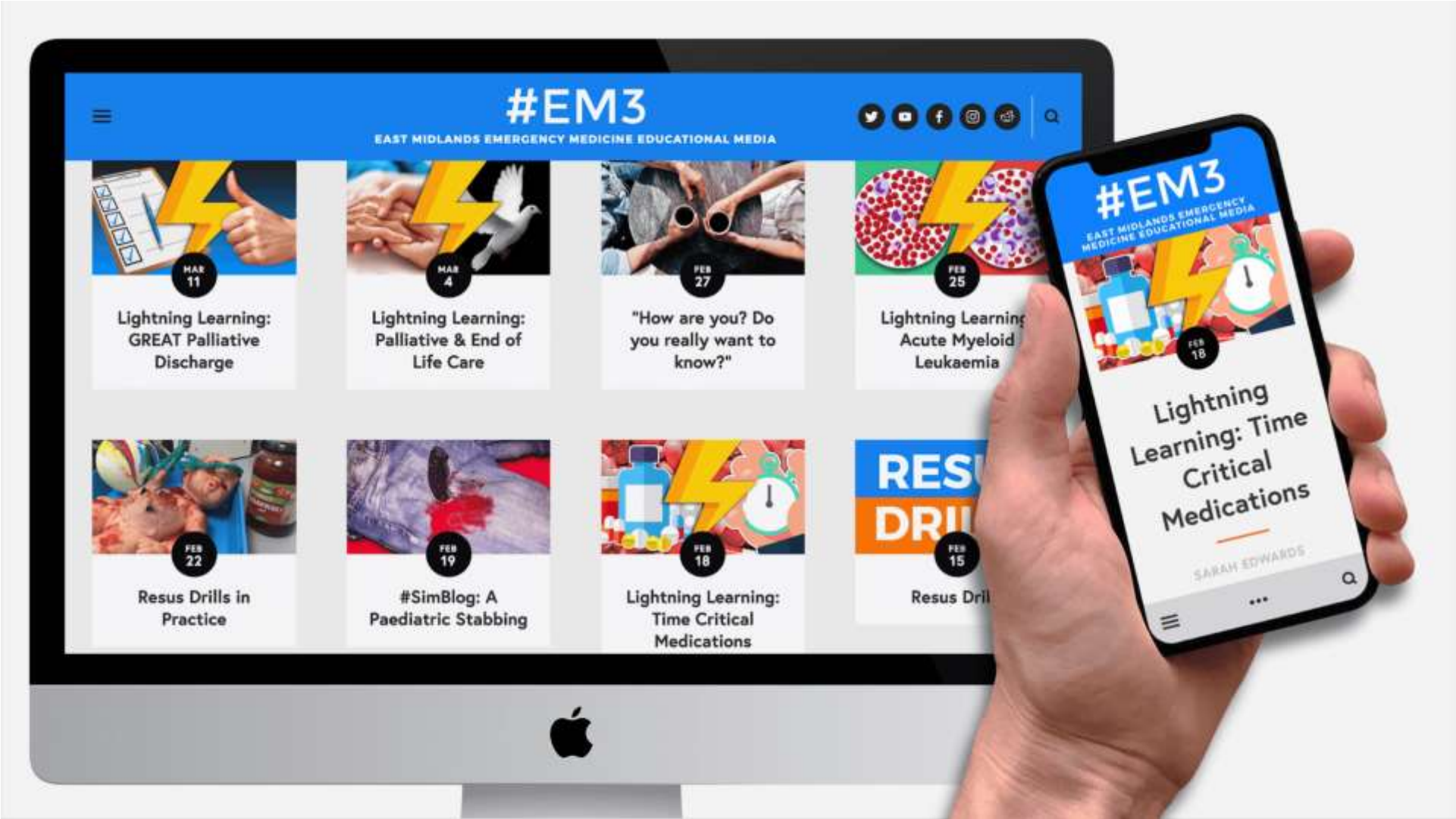
Trello



Online learning: **FOAMEd**

Free Online Access Medical Education

- Podcasts (audio)
 - Vodcasts (audio + video)
 - Blogs
 - Websites – examples:
 - RCEM Learning
 - StEmlyn's
 - EM3 **#EM3**
 - Life in the Fast Lane
 - Radiopedia
- Etc



Self-directed learning in the 'New Normal'



Listening to podcasts on
the way to work



Reading blogs at home in
front of the TV



Vodcast/pre-recorded webinars
to suit night owls or early birds



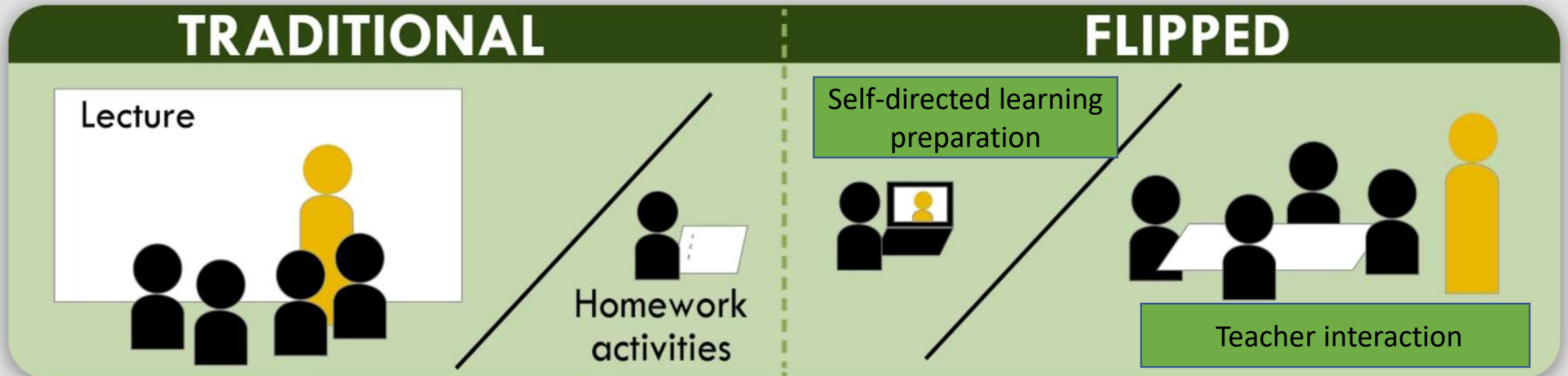
Live webinars for interaction
or assessment

The textbook is history?



Adopting the Flipped Classroom

- ✓ Face-to-face time is precious: orientation, explanation, motivation & concepts – from the expert
- ✓ Factual learning: before and afterwards



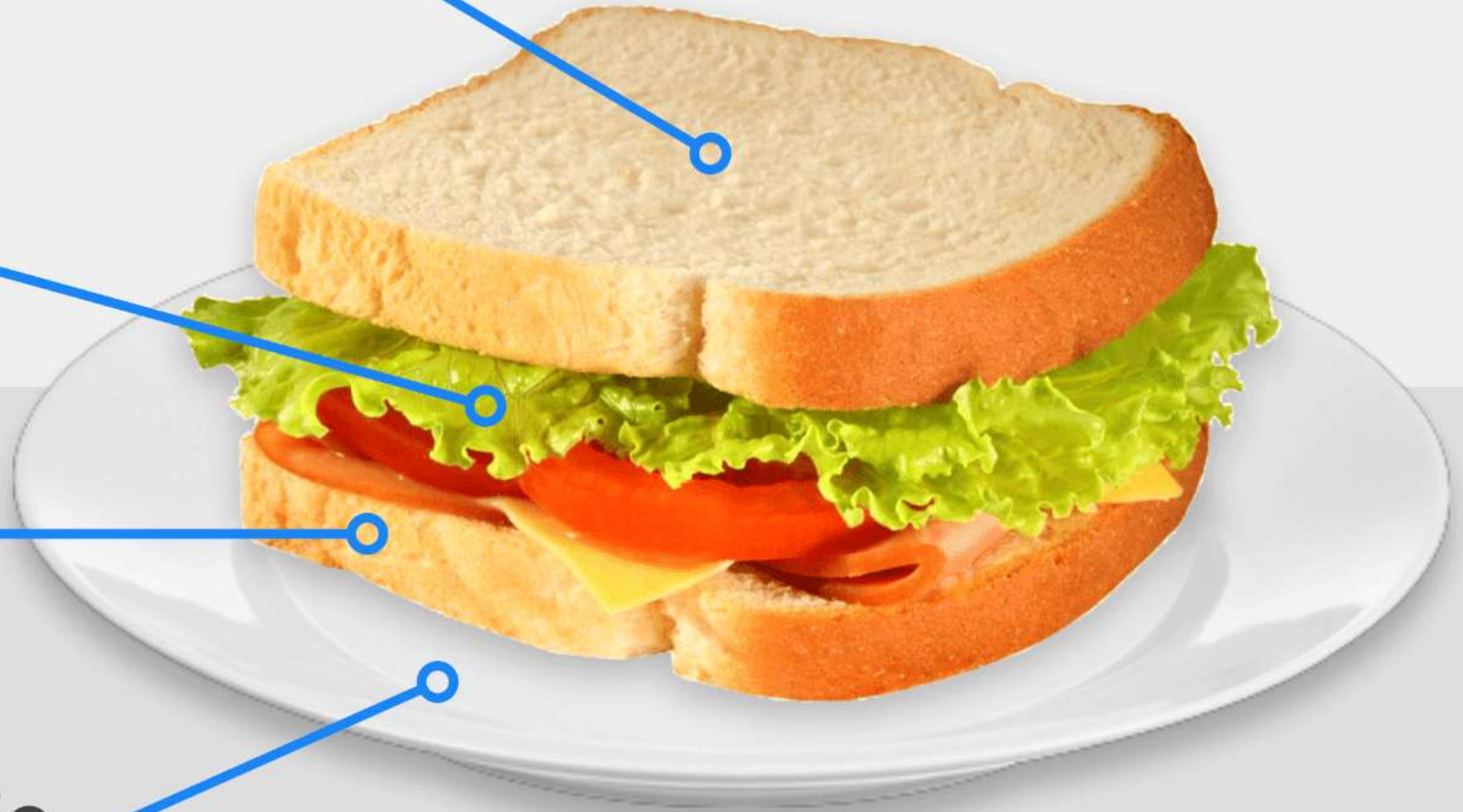
The Learning Sandwich

Preparation using FOAMed

Educator Q&A or
Sim interaction

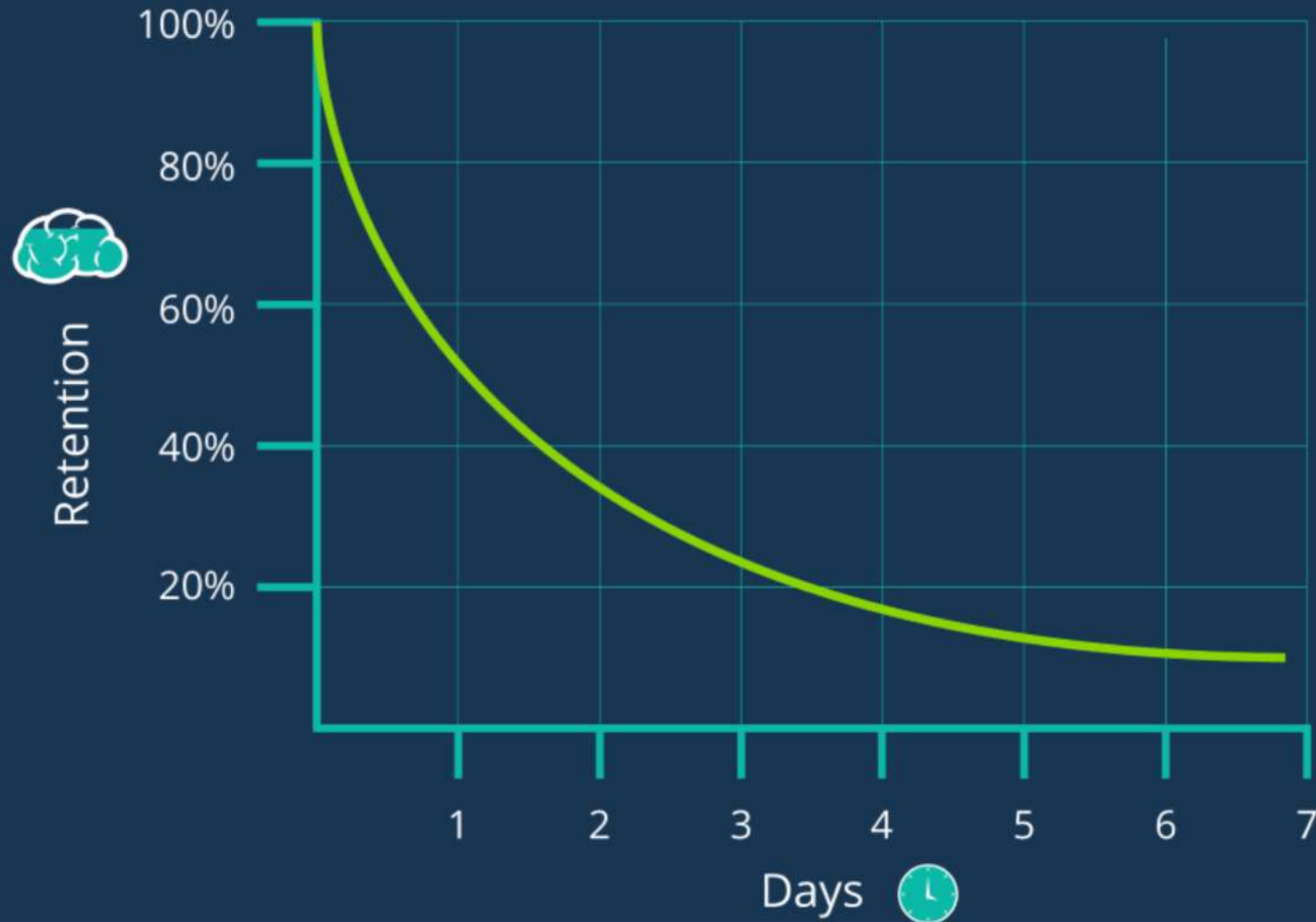
Prescription TTO

Entry into ePortfolio

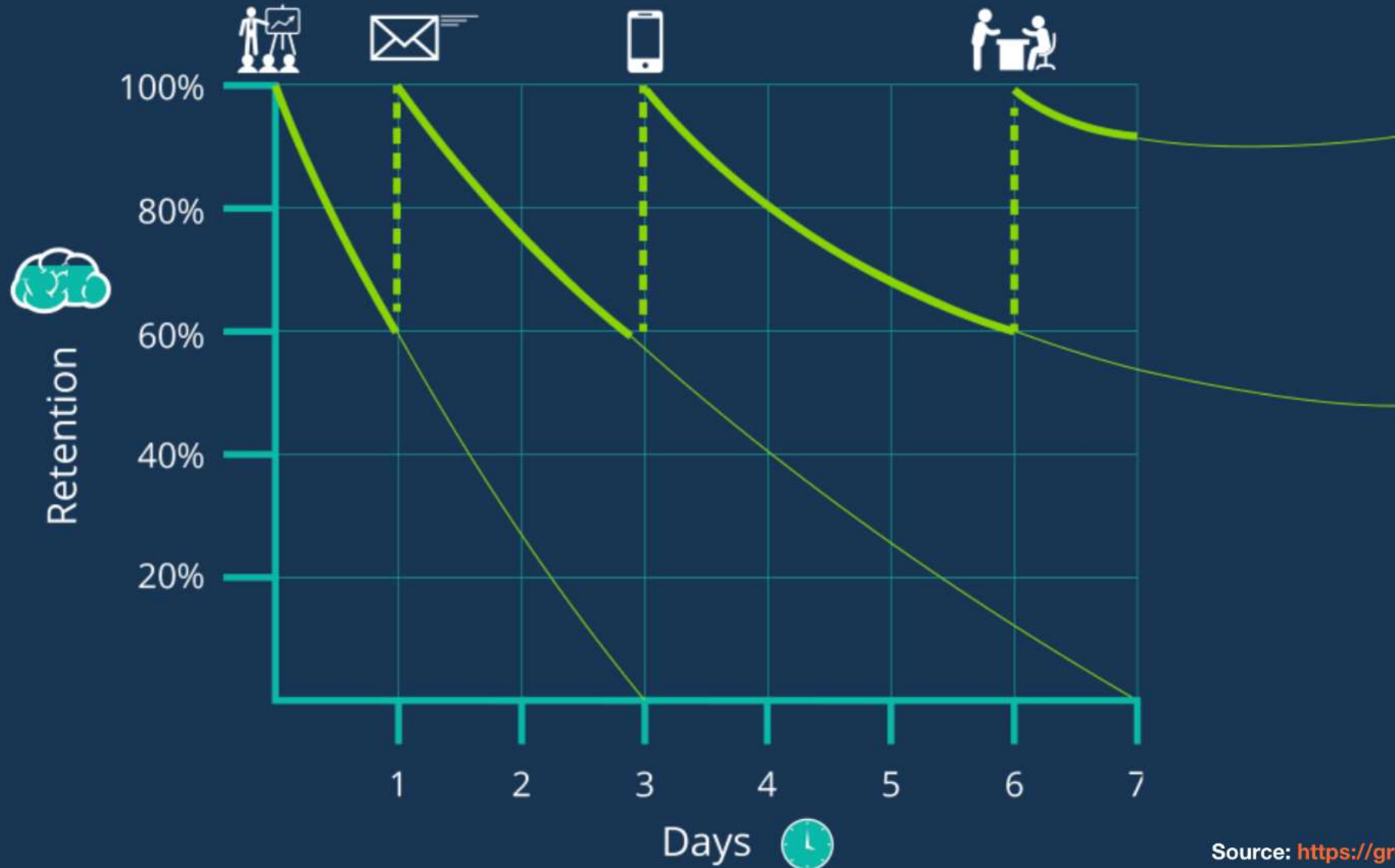


A more sophisticated sandwich

THE FORGETTING CURVE



The Answer: Spaced Repetition



The Sophisticated Learning Sandwich

Preparation

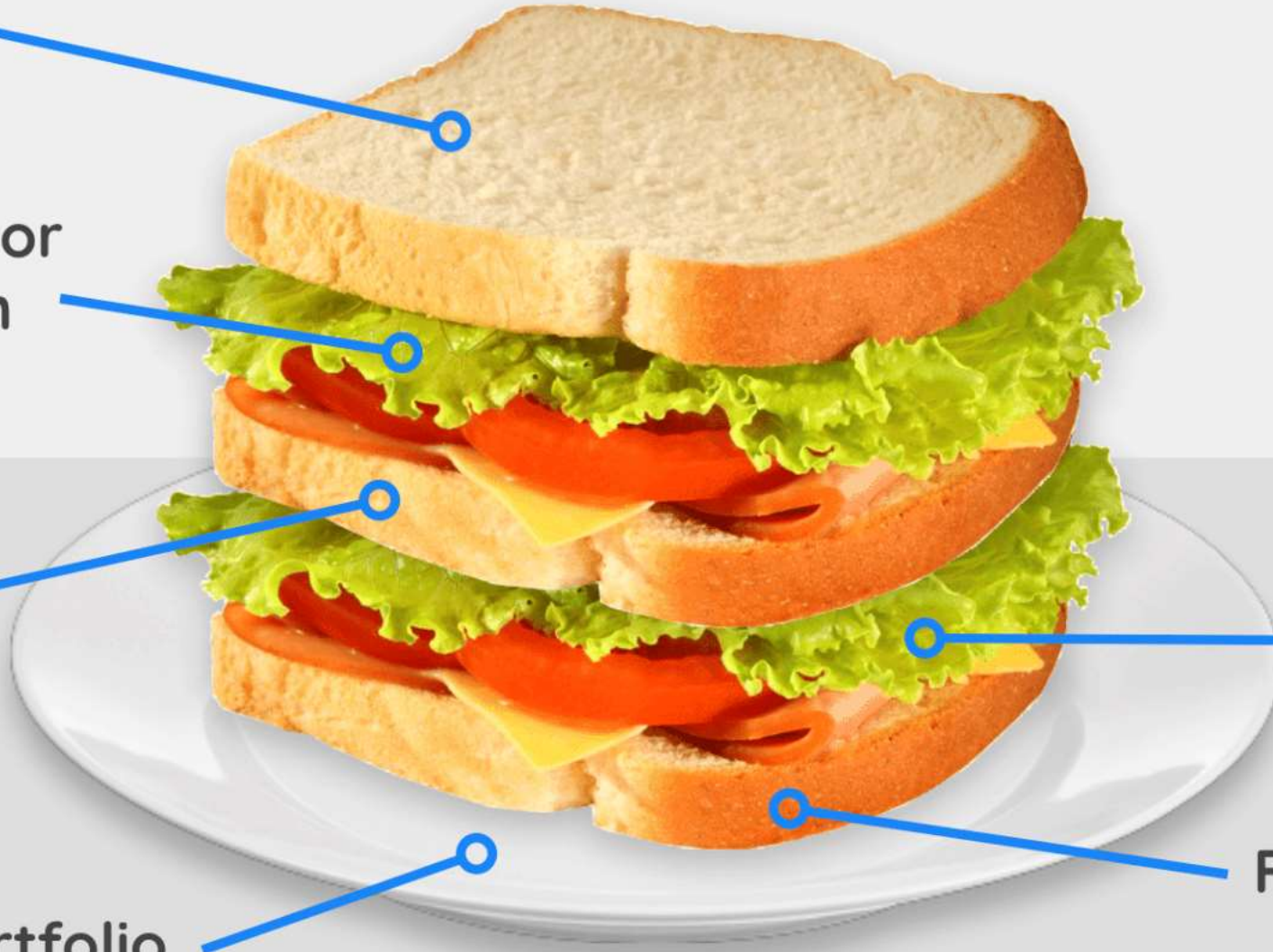
Educator Q&A or
Sim interaction

Prescription
TTO

Entry into ePortfolio

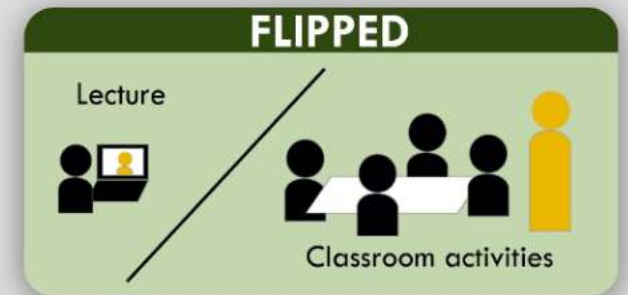
Feedback with
Qs or 2nd run
of Sim/Drill

Further learning
evolution



In summary...

- 1 Move from classroom teaching to more 'teachable moments'
- 2 Use international FOAMEd resources to save you time
- 3 Embrace different formats for different purposes/convenience
- 4 Adopt the Flipped Classroom model, e.g. the standard or club sandwich



Any
questions?



Dr Ffion Davies  @IFEMPresElect