

Faculty Support—eLearning

Module 4

Facilitating small group discussions

What you need to know to succeed in AO's
online course for Faculty.



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For best use...

The "Facilitating small group discussions" module consists of:

Booklet:

Designed to provide a practical guide to the principles of facilitating group discussions.

Online component:

- Interactive video exercises
- Knowledge check
- Summary

Learning outcomes

After completion of this module, you should be able to:

- Explain the role of discussion in learning and in AO courses
- Identify the characteristics of a discussion session
- Define the role of the discussion facilitator
- Formulate a structure for planning and facilitating a discussion
- Select and present case studies
- Set up the environment
- Identify a variety of techniques to stimulate discussion
- Describe how to handle participants who over or under contribute
- Identify and clarify key learning points through the discussion
- Summarize learning to close a discussion

There are five modules that compliment each other. Together they give a thorough overview of the most relevant aspects of teaching.

Module 1: How people learn

Module 2: Giving a lecture

Module 3: Running a practical exercise

Module 4: Facilitating small group discussions

Module 5: Moderating and debating

Crosslinks:



Booklet
refers from online exercise to booklet



Action plan



Knowledge check



Online exercise



Summary

Discussion as a learning tool



“The aim of argument, or of discussion, should not be victory, but progress.”

Joseph Joubert;
(1754–1824)
French writer



Two key points:

1. Effective discussion groups are critical for completing the learning experience in AO courses
2. Evidence based case discussions help test/clarify new knowledge and develop different attitudes

Discussing clinical cases is an important part of sharing and reinforcing knowledge and expertise within AO courses.

A group discussion can be defined *as the controlled exchange of knowledge, ideas, and opinions on a particular subject.*

An effective discussion session:

- The arguments are supported by evidence and proven criteria
- Actively involves course participants
- Enhances understanding and knowledge
- Can be effective in changing attitudes
- Works well with a small number of participants
- Requires a skilled discussion facilitator

An ineffective discussion session is:

- A lecture by the facilitator
- An unplanned exchange of ideas

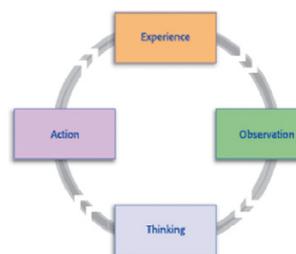
Educational benefits

It is surprising how talking aloud can clarify your experience—many people discuss the day’s events when they get home and this is a great aid to learning and memory.

Discussion groups allow participants to use a range of skills that help embed and apply new knowledge and understanding. These include thinking, reasoning, explaining, and problem solving.

Reflection and the learning cycle

Do you remember the learning cycle that we discussed in module 1 (How people learn)?



Sharing opinions with a group in a structured discussion is a great method for participants to increase their understanding by reflecting on their experiences—this is a critical factor in the “Observation” stage of the learning cycle.

Successful application of new skills

To reach course goals or outcomes AO courses are designed to use each of the three learning domains. Discussion groups form a vital part of this structure:

- Cognitive (knowing)—supported by lectures and discussion groups
- Psychomotor (skills, doing)—supported by practical sessions
- Affective (attitude, feeling)—supported by discussion groups

Discussion is particularly powerful in helping learners verbalize and internalize new knowledge and concepts.

Planning a group discussion

PLAN:

Task list—what needs to be done?

DO:

Investigate options and alternatives

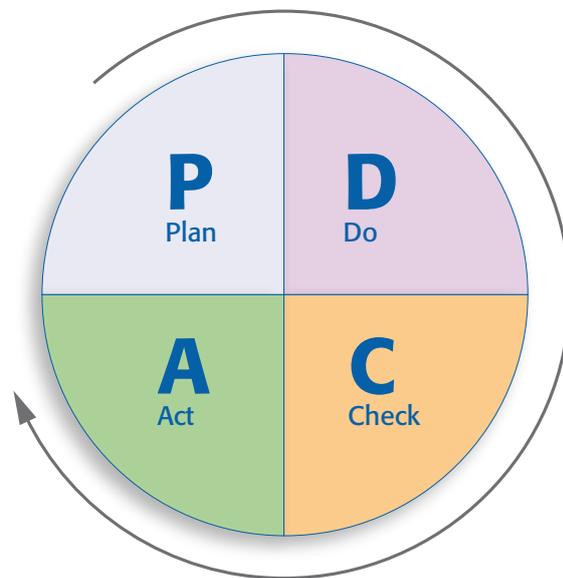
CHECK:

Decide which options will work best

ACTION:

Implement your planning decisions

The PDCA Cycle: originally developed by pioneering statistician Walter Shewhart, in the Bell Laboratories in the US during the 1930s.



Discussion sessions may appear to be spontaneous and informal but a great deal of organization and preparation are essential to achieve session objectives.

Establishing the group size

The ideal number of participants is between six and twelve. A small number means that all participants have a chance to contribute to the discussion and learners are more likely to ask questions if they are in a small group.

Setting learning outcomes

In AO courses, discussion groups need to achieve two key goals:

1. Help participants develop a stronger sense of understanding for the diagnosis and treatment techniques covered by the course.
2. Help participants apply theories presented during the lectures and practicals to real clinical cases.

Use the guidelines provided in module 1 (How people learn, page 11) to set appropriate learning outcomes for each discussion session, making sure that the two goals outlined above will be achieved.

For example:

At the end of the discussion session, participants will be able to assess which types of cases would require closed reduction and internal fixation.

Selecting and preparing cases

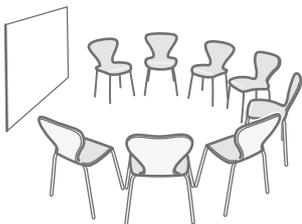
Once you have set the learning outcomes, carefully select four to six cases that are both relevant to the subjects covered in the lectures/practicals of the course and that will provide the depth and challenge for participants to achieve the learning outcomes.

In a 45–60 minute discussion session, plan to discuss three cases (each for around 15 minutes), but have the remaining cases available as backup. Prepare a brief presentation for each case to introduce background information and to outline questions/issues to be discussed.

Setting up the environment

You now know what you want to achieve—so don't let avoidable problems with your room or venue spoil it!

- Will the room accommodate the maximum number of participants comfortably?
- Are the seats placed correctly (circle or horseshoe)?
- Is the temperature right?
- Can the lighting be adjusted when showing x-rays or slides?
- Do you have all of the equipment you need? Does it all work? (Computer with the correct software; projector; x-ray box; flipchart, pens, and a role of tape.)



Remember this...

Seating tip:

- Arrange seating in a rectangular, circular, or horseshoe formation.
- Make sure that:
 - Everyone can see each other
 - Everyone can see the visual aids
 - The facilitators can easily use the equipment and are well placed to lead the discussion



The role of the discussion facilitator



Ideally each discussion session should have two facilitators. This means that one can facilitate a part of the session while the other plays a supportive role—operating equipment, distributing handouts, or an additional expert opinion.

Preparation

To avoid problems during a discussion group, facilitators need to be prepared:

- Know the key learning outcomes that need to be achieved
- Be very familiar with all of the cases that will be discussed
 - Are there any controversial issues?
 - Which of these might be beneficial to discuss (or not)?
- Have a clear structure to the session using the *Set-Dialogue-Closure* format
- Consider what approaches and facilitation skills are required to engage participants and promote discussion

Setting the scene

At the start of a discussion session it is important that participants know:

- The learning outcomes of the session
- How the session will be run
- What is expected of them

Get participants involved from the very start: Ask each participant to introduce him/herself (or to introduce someone else); brainstorm the “ground rules” for a good discussion.

Golden rules for discussion:

- G** Get involved!
- O** One person speaks at a time
- L** Listen respectfully to others
- D** Disagree with the idea—not the person
- E** Every contribution should be taken seriously
- N** Never interrupt others

Using cases

The use of real cases is a very powerful learning tool. For each case in the session the facilitator will need to start the discussion by presenting essential information:

- A description of the patient/case history
- The circumstances of the injury
- X-rays and other supporting evidence
- Initial questions that might be needed to get the discussion started

Make sure that participants are aware how long the case will be discussed (eg, 15 minutes) and that when the time is up the facilitator will summarize the main points.

Facilitation skills

The skill of the facilitator to promote discussion and keep the session focused is a key to success—see the following sections.

Closing the session

- Summarize main points and positive aspects of the discussion
- Thank the participants for their involvement
- If you enjoyed the discussion, you should say so!



“Only when we have something to value, will we have something to evaluate and we cannot value something that we cannot share, exchange and examine.”

Lee Shulman;
Educational psychologist

Remember this...

The facilitator role:

- Start and end session
- Keep to time
- Keep discussion focused
- Keep discussion moving
- Check understanding
- Summarize when needed and look for areas of agreement
- Record key learning points and use when closing the session

Promoting discussion and participation



“You can tell whether a man is clever by his answers. You can tell whether a man is wise by his questions.”

Naguib Mahfouz;
(1911–2006)

Egyptian novelist and
1988 Nobel Prize winner



Remember this...

Don't be afraid of silence!

It is rarely maintained in a group for longer than a minute, but can be productive to allow thinking time. It is better that the group does not become reliant on the facilitator to jump in each time nobody is speaking.



The skills required by any discussion facilitator are:

- Skillful use of questions
- Constructive listening
- Coordination of the group's efforts, eg, by summaries

Knowing the names of all of the participants is also important so that individuals can be brought into the discussion directly.

“Paul, do you have anything to add?”

Questioning skills

To promote early participation a facilitator may ask a question to the whole group so that everyone answers (through raised hands or colored cards).

“How many of you would use technique A? How many technique B?”

Using this kind of vote can also provide a lead into discussion by asking one or more participants to explain their choice.

At the start of each new case, it is also useful to prepare two or three succinct questions in order to help focus and kick off the discussion.

Closed questions

- Usually require a short, specific answer
- Not good for promoting discussion
- Are good for refining and clarifying what was meant or understood

“Are you saying that you think technique A is better?”

“Is that point clear?”

“Am I talking too fast?”

Open questions

- Can usually have a range of possible answers
- Allow exploration of thoughts and opinions
- Good for promoting discussion

“What were the benefits when you tried this technique?”; “How would you treat this injury?”

Redirecting

As participants offer their views, the facilitator can enhance discussion by encouraging group members to respond to each other by redirecting:

“How have the rest of you dealt with this issue in your practice?”

“Would anyone like to comment on what Paul has said?”

“Is there anyone else who agrees?”

Active encouragement

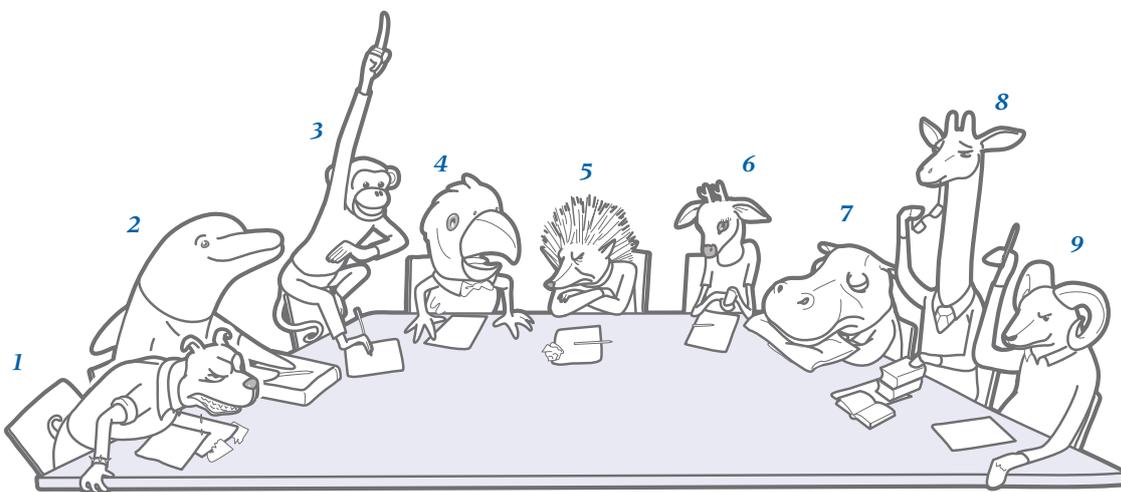
Nonverbal cues such as eye-contact, nodding, and facial expressions can also be used to encourage a participant to contribute or to expand on a point.

Summarizing

From time to time it will be necessary to summarize or clarify the topic of discussion to keep the conversation moving. It is also important to respond and summarize when:

- A clear breakthrough in learning has occurred
- A key learning point is discussed
- An important piece of expert opinion/practical evidence is explored

Managing the discussion session



“Trust yourself. You know more than you think you do.”

Benjamin Spock;
(1903–1998)
American pediatrician

The facilitator’s job during the discussion will be to maintain the flow, keep the atmosphere respectful and pleasant, keep the group “on task”, and to handle possible conflicts that may arise.

Resistance of participants to effective discussion may reflect a number of reasons:

- Unfamiliarity
- Fear of criticism
- Language barriers
- Shyness

If the facilitator is able to recognize these reasons he/she can alter the approach and style, and accommodate the different participants in the group.

Tips for handling different personality types:

- 1. The argumentative type** Don’t get involved in quarrels. Stop them monopolizing.
- 2. The positive type** Can be a great help—use them.
- 3. The know-all type** Bring in other members of the group to comment on their contributions.
- 4. The chatter box type** Acknowledge what they have said then ask other participants to comment.
- 5. The uncooperative type** Recognize and ask about their knowledge and experience.
- 6. The shy type** Ask them easy questions. Increase selfconfidence. Give credit where possible.
- 7. The uninterested type** Ask them what

they would like to get out of the session or case.

- 8. The intellectual type** Can be great at explaining complex issues.
- 9. The persistent questioner** Pass their questions back to the group.

Also make use of the “golden ground rules” that were set at the start of the session.

Different cultures and languages

Learners appreciate help when they are experiencing problems due to language skills or cultural barriers to learning.

- Slow the pace and repeat or rephrase questions/answers if necessary
- Summarize key points regularly
- Check for understanding

Co-facilitator roles

Agree in advance which cases each facilitator will lead.

Time keeping

Start and end on time! This will often mean drawing one case to an end so that the next can start on time. Make sure that enough time is left for a proper session closure. This is a key learning part of the session (so make it memorable!).

After the session

Facilitation is a skill that can be developed over time. After the session, always review what went well and what you would do differently next time.



Remember this...

After the session, ask yourself these two key questions:

1. What went well?
2. What could be improved next time?

Hint:

Do you feel there was enough...

- participation?
- real discussion?
- thinking time?
- open questions?
- time?
- summarized learning points?

Self-assessment



**“The only source
of knowledge is
experience.”**

Albert Einstein;
(1879–1955)

German-born theoretical
physicist and winner of
the 1921 Nobel Prize



To help faculty develop the skill of self-assessment in an AO course context, ask yourself the following questions to pinpoint the strengths and weaknesses of a discussion session. Assign 1 point for an answer of “yes”, 0 points for an answer of “no”. A score of 17–20 is outstanding, 13–16 is good, 9–12 is satisfactory, 5–8 is adequate, and 1–4 is poor.

1. Learning outcomes were defined and necessary preparations for the session were properly handled
2. The session started on time
3. All members participated in the discussion
4. Questions were well planned, properly asked, and provoked discussion
5. Discussion seemed to be spontaneous and not forced
6. Discussion was progressive, kept on the topic, and was directed toward the attainment of the objectives
7. I avoided lecturing or domineering
8. An attempt was made to get members to recognize and respect the opinions of others
9. I did not take sides in any discussion
10. I refrained from answering questions, referring them back to the group
11. I avoided putting forward my own opinions and ideas
12. Rephrasing was used only when necessary with the simplest words possible and was brief
13. Control over the group was maintained at all times
14. Frequent summaries of the discussion were made to crystallize group thinking
15. A blackboard or chart sheet was used effectively
16. All essential topics or phases of the outline were covered
17. Interest was maintained throughout the session
18. The group left with something to think about
19. A final summary was made with the help of the group or the facilitator
20. The discussion session closed on time

AO Foundation vision and mission

Our vision is excellence in the surgical management of trauma and disorders of the musculoskeletal system. Our mission is to foster and expand our network of health care professionals in education, research, development and clinical investigation to achieve more effective patient care worldwide.



“He who knows others is wise.
He who knows himself is enlightened.”

Laozi;
(6th century BC)
Taoist philosopher of ancient
China