

Assessment Tool Kit

## **Faculty Education Program—Test questions**

Teaching methods and techniques

## Competency 1: Give a lecture

### Question 1

<b>Question ID</b>	AOF_FEP_C01_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 1</b>	Give a lecture		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: The program is running long and the course chair asks you to cut 10 minutes from your 30-minute lecture.

Which is the best place to cut your lecture?

Response options	Res.
a) The conclusion.	
b) The introduction.	
<b>c) The body.</b>	
d) The ARS questions.	
Correct: C	

<b>Rationale</b>	Start your lecture with information that grabs the audience's attention. If this is not done in the first few minutes, you may completely lose their attention. Kong and Hadfield-Law suggest using an interesting quote or compelling slide showing a clinical case. The conclusion of the course is your final, best argument. Learners are most likely to remember how you ended your talk. The ARS provides interaction and motivation. If it is planned, it is tricky to eliminate without lowering the impact. Although the main body is important, it is the best choice here.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 79–80.

## Competency 1: Give a lecture

### Question 2

<b>Question ID</b>	AOF_FEP_C01_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 1</b>	Give a lecture		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You have been informed by the course chair and the precourse assessment data of the low learning motivation of those attending your lecture. You know they are more senior than is usually the case for this course and this lecture.

How would you compensate for this lack of motivation?

Response options	Res.
<b>a) Insert questions for the learners and case examples into the lecture.</b>	
b) Focus on the introduction to capture their attention.	
c) Use ARS to show the learners the importance of this topic.	
d) Show the learners the results of the precourse assessment.	
Correct: A	

<b>Rationale</b>	The best reasons for inserting questions into a lecture are to assist the lecturer in determining whether learners are focused and whether they already know the information you are about to present. De Boer and Green also suggest—relate questions to the main objectives of the talk; use questions when knowledge is critical to proceed with new content; allow learners to discover what they do not know; and insert questions to keep their attention.
<b>Reference</b>	<b>de Boer PG, Green JS</b> (2005) AO education—introduction. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 5.

## Competency 1: Give a lecture

### Question 3

<b>Question ID</b>	AOF_FEP_C01_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 1</b>	Give a lecture		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are asked to be responsible for a educational session related to the diagnosis and treatment of a common complication of treatment. The session will involve a lecture, a discussion section, and a simulation or other practical exercise. The course chairperson wants to know which order makes sense. The course is an advanced course and the precourse needs assessment shows that the learners are not interested in this topic. However, evidence suggests that this is because of their poor understanding of the problem.

In the proper sequence of methods, the lecture will occur.

<b>Response options</b>	<b>Res.</b>
a) First, in order to prepare learners at the same level.	
b) Second, after other activities, to have a larger impact on their attitudes rather than their knowledge.	
<b>c) At the end, to serve as a summary of key points from discussion and practical learning experiences.</b>	
d) Not at all, since they already know the facts.	
Correct: C	

<b>Rationale</b>	In this case the precourse needs assessments show that the participants are not interested in the topic because they think they know all about it. Testing their knowledge shows this to be incorrect. The first task of the educator is to get the participants to understand their own lack of knowledge (gap). This could be done by showing a badly treated case at the start of a lecture but would be best done in a discussion group format where different levels of knowledge and understanding can be explored. Putting the lecture at the end when all participants appreciate the importance of the lectures content overcomes the problem of lack of motivation and in addition can reinforcing the messages learned from the practical and discussion sections of the teaching. As Khong and Hadfield-Law point out, the lecture is best used to offer information to learners and not to change attitudes or improve clinical practices.
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<b>Reference</b>	<b>Khong K, Hadfield-Law L (2005) How to give a lecture.</b> <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning.</i> Stuttgart New York: Thieme, 78.
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## Competency 1: Give a lecture

### Question 4

<b>Question ID</b>	AOF_FEP_C01_Q04_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 1</b>	Give a lecture		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are giving a lecture to learners who are not familiar with the classification system used in your specialty area, yet they are experienced surgeons. Your lecture will involve a set of eight power point slides around cases. According to your plan, each will involve different types of injury and will be delivered as if they were a question and answer sessions involving ARS.

How would you maximize the effects of your slides?

Response options	Res.
a) Add animations not only to objects and words but also between slides to increase attention.	
b) Add color and animation to focus the learner on key points.	
c) Add humorous answers in the slides.	
<b>d) Use no animation and use simple black or white letters only.</b>	
Correct: D	

<b>Rationale</b>	According to Khong and Hadfield-Law, although it is always tempting to put more information into talks, it is always more effective to restrict yourself to the information that is most relevant to your main message. They also suggest using short words and short sentences and use the lecture to take the learner behind the numbers. More detailed information is provided in a handout.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 79–80.

## Competency 2: Lead a discussion group

### Question 1

<b>Question ID</b>	AOF_FEP_C02_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 2</b>	Lead a discussion group		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are asked to lead a discussion group for a Principles course in your specialty area. The audience is not very experienced; most are in their first year of residency. They are interested in the topic, but as recent medical graduates they are more familiar with lectures than discussion as a way of learning.

Knowing the topic importance and the participants' inexperience, how would you handle this situation?

<b>Response options</b>	<b>Res.</b>
a) Direct the group discussion and provide more answers yourself.	
<b>b) Plan to cover fewer topics as it will take more time for the group to learn how to discuss.</b>	
c) Organize more visuals, such as slides, to help them locate themselves in the scheme.	
d) Provide more answers to the questions about the cases from your experience.	
Correct: B	

<b>Rationale</b>	Simmermacher and Kues state that in an inexperienced small group the leader has to direct the discussion between and among the learners and with the faculty. This process assures that the learners will be involved in the discussion and that the content of the discussion focuses on the application of concepts to specific cases. The authors also note that this will take more time; therefore, it is vital to restrict the content of the discussion to the most important concepts.
<b>Reference</b>	<b>Simmermacher RKJ, Kues JR (2005) How to run a discussion group.</b> Green JS, de Boer PG (eds), <i>AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 37.

## Competency 2: Lead a discussion group

### Question 2

<b>Question ID</b>	AOF_FEP_C02_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 2</b>	Lead a discussion group		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are asked to lead a discussion group in a Principles course in your specialty. The audience is not very experienced; most are in their first year of residency. They are interested in the topic, but as recent medical graduates they are more familiar with lectures than discussion as a way of learning.

How would you make use of your experience to deal with this problem?

Response options	Res.
a) In the introduction, explain what the difference between a small group discussion and a lecture is	
b) In the conclusions, establish how you have integrated this into your practice.	
c) During their questions, maintain you role as expert and leader of the discussion.	
<b>d) Contribute as little as possible to encourage more contributions from them.</b>	
Correct: D	

<b>Rationale</b>	Using this approach can often hinder learner discussion and comprehension. Simmermacher and Kues suggest that faculty refrain from using other dogmatic statements based solely on their own experience. The primary function of the faculty is to facilitate learner discussion in the small group.
<b>Reference</b>	<b>Simmermacher RKJ, Kues JR</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning.</i> Stuttgart New York: Thieme, 37.



## Competency 2: Lead a discussion group

### Question 3

<b>Question ID</b>	AOF_FEP_C02_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 1</b>	Lead a discussion group		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: As a first-time faculty at a Principles level course in your specialty area you are asked to oversee a discussion group with a senior surgeon from another country who is not familiar with the discussion group teaching format.

What is your most important priority?

Response options	Res.
a) Ensure a good summary of the discussion.	
b) Ensure your senior colleague does not dominate the discussion.	
c) Ensure all participants contribute.	
d) Ensure a horseshoe-seating arrangement of the room.	
Correct: A	

<b>Rationale</b>	Simmermacher and Kues point out that all the above objectives will contribute to successful facilitation of a discussion group. Ensuring that a senior faculty member does not dominate the discussion is important. Possible solutions include agreeing an expert role for your fellow faculty member. Involving everyone is also important; however, be aware that in international courses learners even though they are able to listen constructively might have difficulties to contribute due to language barriers. The room layout is also important; but as with all teaching modalities ensuring that clear take-home messages are given is by far the most likely way to ensure knowledge transference as a result of the educational experience.
<b>Reference</b>	<b>Simmermacher RKJ, Kues JR</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme.

## Competency 2: Lead a discussion group

### Question 4

Question ID	AOF_FEP_C02_Q04_pre	Status (Date)	August, 2014
Competency 1	Lead a discussion group		
Ave. Score			
Faculty comments			

Question: You are overseeing a discussion group on a series of complex injuries that rarely occurs at an advanced level course in your country. The participants are senior residents. The most junior member of your group tries to dominate the discussion and claims to have extensive experience of complex procedures, which is impossible given his career history. The group is starting to get restless and annoyed with their fellow participant.

How would you deal with the situation?

Response options	Res.
a) Expose his ignorance to the group by questioning him on specific difficult topics.	
b) Allow/encourage the group to gang up on him to ensure his silence.	
<b>c) Make him sit immediately to the left of you</b>	
d) Get him transferred to another discussion group.	
Correct: C	

Rationale	Simmermacher and Kues suggest various options for dealing with a participant who attempts to dominate a group discussion. Placing the participant immediately to your left ensures that he has no eye contact with you as discussion group leader. The person in that position is the one least likely to participate in the discussion. Attempting to humiliate him/her in front of the group by direct questioning will damage the trust that the group has in the freedom of open discussion; this strategy is to be resisted at all costs. Similarly, allowing the group dynamic to isolate the participant risks getting others focusing more on their troublesome colleague than the material under discussion. Transferring the participant to another group will shift the problem to another faculty member and he/she is likely to feel more isolated, insecure, and difficult.
Reference	<b>Simmermacher RKJ, Kues JR (2005) How to run a discussion group.</b> Green JS, de Boer PG (eds), <i>AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 37.

## Competency 3: Instruct at a table with practical exercises

### Question 1

<b>Question ID</b>	AOF_FEP_C03_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 3</b>	Instruct at a table with practical exercises		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are asked to help a new faculty member be a successful table instructor. When asked the functions of a table instructor, the new faculty member describes them with the following statements.

With which of the statements bellow is he/she likely to fail?

Response options	Res.
a) It is important to allow learners to interact with one another.	
b) It is important to control learners in a way that makes them focus on the instructions.	
<b>c) It is important to limit feedback from anyone but the table instructor.</b>	
d) It is important to coach in a timely manner when mistakes are made.	
Correct: C	

<b>Rationale</b>	Although teaching and demonstrating to learners how to use the equipment are important, Harris and Fox argue that the most important role that table instructors have is to combine a demonstration with practice and feedback for the learner. These three techniques, when used together, will assist in allowing learners to better store and recall information when they return to their practice setting. Feedback from peers can be an important part of the interaction and should be viewed as a valuable part of the experience
<b>Reference</b>	<b>Harris I, Fox, RD (2005) How to run a discussion group.</b> Green JS, de Boer PG (eds), <i>AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 65.

## Competency 3: Instruct at a table with practical exercises

### Question 2

<b>Question ID</b>	AOF_FEP_C03_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 3</b>	Instruct at a table with practical exercises		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are an international faculty on an Advanced course acting as a table instructor. The practical exercise uses an implant that is no longer used in your hospital.

How would you approach the situation?

Response options	Res.
a) At the end of the session, gather your group together and tell them why you no longer use this implant.	
b) Decline to take part in the practical session.	
<b>c) Discuss and agree with the course chairperson at the precourse how to handle this issue.</b>	
d) Invite questions from the group as to the pros and cons of the technique being discussed.	
Correct: C	

<b>Rationale</b>	Teaching and demonstrating to a learner how to use equipment is vital. It is indeed one of the hallmarks of AO Education. It may be tempting to display your knowledge by demonstrating alternative techniques that you use. Although the intention may be to increase the participants' knowledge, it could interfere with the primary knowledge and skills the session is designed to foster. Actually, one of the most important functions of a well-planned precourse is to decide which technique to teach.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 71.

## Competency 3: Instruct at a table with practical exercises

### Question 3

Question ID	AOF_FEP_C03_Q03_post	Status (Date)	August, 2014
Competency 3	Instruct at a table with practical exercises		
Ave. Score			
Faculty comments			

Question:	<p>You are a regional faculty and a table instructor on a course held in a developing country. None of the participants and few of the faculty are familiar with the implant to be used in the practical exercise. The session is overrunning and is to be followed by a lunch break. Your group is struggling with the practical skills.</p> <p>How would you manage the situation?</p>
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Response options	Res.
a) Tell the participants that those who want finish the practical can stay and the others should go for lunch.	
<b>b) Stop your group working and assemble them for question and answer/feedback session.</b>	
c) Ask the practical director to extend the session over the lunch break.	
d) Allow the best participant to demonstrate the overall procedure and moderate questions.	
Correct: B	

Rationale	<p>Harris and Fox argue that the most important role of the table instructor is to combine a demonstration with practice and feedback for the learner. In the vignette discussed, the practical is failing due to a lack of planning. By cutting the session short and going off for lunch the learning objectives are not achieved since there will be no time for conclusions. Extending the time will be unpopular and the course participants will merely have to extend what is already an unsatisfactory learning experience. The best solution therefore is to interact with the participants to discover their major learning needs. It should be possible to achieve limited learning outcomes over a small number of key points, which is certainly much better than a lack of understanding about any of the issues. Note, this challenging situation can be prevented by adequate planning at the precourse stage.</p>
Reference	<p><b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 71–73.</p>

## Competency 3: Instruct at a table with practical exercises

### Question 4

<b>Question ID</b>	AOF_FEP_C03_Q04_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 3</b>	Instruct at a table with practical exercises		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You notice that one pair of the course participants at the practical table appears to have very low skill levels. They seem unfamiliar with the implants and instruments that are being used and furthermore demonstrate poor techniques. While carrying out the practical exercise you notice they are about to drill a hole using the incorrect drill size.

How and when would you intervene to correct this error?

<b>Response options</b>	<b>Res.</b>
a) Let them proceed and discover for themselves the error.	
b) Stop them and tell them to use the correct drill.	
<b>c) Stop them and ask them why they are using the this drill size</b>	
d) Let them proceed and then use the completed model to demonstrate to the entire group how not to do the procedure.	
Correct: C	

<b>Rationale</b>	Schön (1987) encourages teachers to act as coaches, encouraging learners to gain experience while being prepared to direct their reflective process as they watch. Harris and Fox state that one must avoid the temptation to step in too fast and do the exercise for them or to quickly tell them the correct way and then move on. It can be very helpful for the course participants to discover their own mistakes and therefore allowing them to continue to discover their own mistakes is a valid option; although subsequently taking their model and humiliating them is clearly not a sensible choice. Allowing them to continue has one major drawback. It means that the rest of the practical will be almost impossible for them to achieve. In this case the best option is to stop them using an open question to get them to reflect on their own practice.( ie, tell me why are you using this drill bit ). Telling them what to do is less likely to produce good learning outcomes than allowing them to work through the problems themselves.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 70.

Assessment Tool Kit

## **Faculty Education Program—Test questions**

Working with learners

## Competency 6: Motivate learners

### Question 1

<b>Question ID</b>	AOF_FEP_C06_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 6</b>	Motivate learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are responsible for leading a discussion on a standard fixation technique used in your specialty area. You know from the self-assessment report that most of the learners believe that they do not need to know this and are therefore not motivated to learn.

Which of the following factors is most likely to explain low motivation in this case?

Response options	Res.
a) Low scores on the multiple choice questions.	
b) Poor understanding of questions and cases.	
<b>c) Low perceived value of this area of surgical ability.</b>	
d) Inaccurate test results.	
Correct: C	

<b>Rationale</b>	Assessing motivation from self-assessment can be estimated by the difference of where a student thinks he or she is in terms of a competency area and where the student believes he or she ought to be. Low motivation results from underestimating the value of some area of practice or from overestimating one's skills and knowledge of that area. In this case the best answer is "Low value of this area of surgical ability", but low motivation can also come from overestimating one's ability
<b>Reference</b>	<p><b>Harris I, Fox, RD</b> (2005) How to be a table instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 68.</p> <p><b>Simmermacher RKJ, Kues JR</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 36.</p>



## Competency 6: Motivate learners

### Question 2

<b>Question ID</b>	AOF_FEP_C06_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 6</b>	Motivate learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You are asked to suggest what kind of teaching technique would increase the motivation of learners who think they are better than they actually are. Regardless of whether you are a lecturer, table instructor or discussion group leader, before this group of learners can be successfully trained they must be reminded of what they do not know.

How would you effectively encourage learning?

Response options	Res.
a) Incorporate cases that will be difficult for them to solve.	
b) Focus on research that shows best practices.	
c) Demonstrate your own expertise so they can understand best practices.	
d) Inspire them with personal stories of how to succeed in this area of practice.	
Correct: A	

<b>Rationale</b>	There is an important connection between motivation and learning—the unease that is caused by learning what you do not know actually serves as a prime motivator in the learning process. As Harris and Fox suggest, a key responsibility you have is to assist learners in understanding the discrepancy between what is and what ought to be. Usually their discomfort from complex cases will create a drive to learn more.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 68.

## Competency 6: Motivate learners

### Question 3

Question ID	AOF_FEP_C06_Q03_post	Status (Date)	August, 2014
Competency 6	Motivate learners		
Ave. Score			
Faculty comments			

Question:	<p>Your lecture will be at the beginning of a module on the treatment of a complex disorder within your specialty area in an Advanced course. Health care statistics indicate that one could achieve a 26% improvement in all orthopaedic surgeries by using preoperative checklists. You have to motivate the learners to make use of these checklists. Subsequent sessions will teach how to use them.</p> <p>Which technique has the highest chance of encouraging these experienced learners to adopt checklists?</p>
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Response options	Res.
a) Using powerful gestures and body language.	
<b>b) Showing failed cases and relating them to parts of the checklist.</b>	
c) Using evidence from the literature to prove advantages of checklists.	
d) Showing successful cases from your own experience.	
Correct: B	

Rationale	It is important to motivate all participants for further learning. Your lecture should confirm that you are eager for them to learn the information that you and the other instructors are going to present. Lectures that allow learners to reflect and self-assess are most inspiring because they allow them to see examples of consequences of mistakes they could have made in the past or may make in the future.
Reference	<p><b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 77.</p> <p><b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 68.</p>

## Competency 6: Motivate learners

### Question 4

Question ID	AOF_FEP_C06_Q04_pre	Status (Date)	August, 2014
Competency 6	Motivate learners		
Ave. Score			
Faculty comments			

Question:	<p>You are asked to give a lecture on a classification system used in your specialty area in a Principles level course. The discussion group session that follows shortly after the lecture will feature cases in which the participants are asked to classify individual fractures. The precourse self-assessment reveals that most learners have no interest to learn about this classification because they believe it is not essential to their daily practice.</p> <p>How would you convince them that the classification could be a useful in their practice?</p>
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Response options	Res.
a) Begin your lecture with a case that demonstrates how easy it is to apply the classification.	
<b>b) Begin your lecture by presenting a case with bad outcomes because of misclassification.</b>	
c) Begin your lecture by explaining that classification is a boring topic but we do need to understand it to progress with the course.	
d) Begin your lecture by telling participants you know they find the subject dull but you will do your best to make it meaningful.	
Correct: B	

Rationale	<p>Motivation is defined by Fox as the difference between where course participants wish to be and where they think they are in terms of their surgical practice. In this case course participants are unmotivated because they do not feel classification of injuries is important to them. Unless they are shown that this subject is valuable to them, they are unlikely to seriously engage with the lecture. It follows then that the lecture should begin by getting their attention and trying to persuade them that classification is important. All the potential answers go somewhat in this direction but only answer "b" gives them a solid reason for listening to the lecture.</p>
Reference	<p><b>Fox RD, Miner C</b> (1999) Motivation and the Facilitation of Change, Learning, and Participation in Educational Programs for Health Professionals. <i>J Contin Educ Health Prof</i>, 19(3):132.</p>

## Competency 7: Encourage interaction with and among learners

### Question 1

<b>Question ID</b>	AOF_FEP_C07_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 7</b>	Encourage interaction with and among learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: At a practical exercise, one of your fellow table instructors asserts that too much chatting among participants interferes with concentration on the procedure.  
What is your view?

Response options	Res.
a) He is right but it makes the participants more likely to feel positively about the experience.	
<b>b) He is incorrect because interaction with others helps make the experience more meaningful and easier to remember.</b>	
c) He is right and the interactions should be limited to those between teachers and learners.	
d) He is incorrect because interaction increases the commitment to AO.	
Correct: B	

<b>Rationale</b>	Interaction is an opportunity to seek different ways of thinking about new learning and new skills. Interaction with peers makes this exchange of ideas safer and allows for more open self-evaluation. This is critical to memory and application; Harris and Fox affirm that interaction allows for a self-assessment of knowledge and skills to guide future self-directed learning efforts.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 65

## Competency 7: Encourage interaction with and among learners

### Question 2

<b>Question ID</b>	AOF_FEP_C07_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 7</b>	Encourage interaction with and among learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question:	<p>You are planning your work as a table instructor and running under a slightly compressed time frame. You have to decide the right place to cut the session if time runs short.</p> <p>Considering the impact on learning, which part of the session would you cut if time runs out?</p>
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Response options	Res.
a) Huddling up for group discussion.	
<b>b) Time for working on attaching the plate and screws.</b>	
c) The question and answer session at the end.	
d) The review of the schedule of activities for the session.	
Correct: B	

<b>Rationale</b>	Interaction among learners and between learners and table instructors is vital in facilitating learning. In addition to allowing learners to evaluate their own performance and get emotional support during the learning process, Harris and Fox note that the interaction permits a self-assessment of knowledge and skills to guide future self-directed learning efforts. All but answer "d" are interactive sessions, each with a different educational purpose.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 71.

## Competency 7: Encourage interaction with and among learners

### Question 3

<b>Question ID</b>	AOF_FEP_C07_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 5</b>	Encourage interaction with and among learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question: You enter the room where the lab will be held and find a group of individuals debating the role of soft tissue in the exercise they are about to perform.

What would be your reaction?

Response options	Res.
a) Allow it to continue and observe from the sideline, hoping it will foster motivation and interaction.	
b) You should interrupt and take charge so you may direct the group to the correct answer.	
c) You should interrupt the debate because it may delay important parts of the session.	
d) You should allow it to continue but insert your opinion and establish control and leadership.	
Correct: A	

<b>Rationale</b>	If you assemble your group before the practical starts or at the first coffee break just to meet each other in another setting that encourages social activity, it can remove obstacles including insecurities and language barriers, which can facilitate the group discussion. When you find that they have gathered and are vigorously discussing the topic, this is more important to their learning than your leadership. Your authority will, most likely, never be challenged in this sort of situation.
<b>Reference</b>	

## Competency 7: Encourage interaction with and among learners

### Question 4

<b>Question ID</b>	AOF_FEP_C07_Q04_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 7</b>	Encourage interaction with and among learners		
<b>Ave. Score</b>			
<b>Faculty comments</b>			

Question:	<p>During a discussion session, one of the learners becomes argumentative and dominant. The others seem confused and embarrassed. You believe it is time to intervene.</p> <p>How would you handle the situation?</p>
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Response options	Res.
a) Ask the learner to step outside and tell him/her to stop the aggressive behavior.	
b) Give it more time and hope that a positive outcome will emerge from the discussion.	
<b>c) Express sympathy for the dominant learner in terms of his/her feelings about the issue and invite others to comment on the real issue.</b>	
d) Openly display your advanced knowledge of the evidence and end the debate.	
Correct: C	

<b>Rationale</b>	As Khong and Hadfield-Law point out, trying to understand a hostile or difficult learner who disagrees with your message is an effective approach to minimizing negative consequences of a possible confrontation in front of other faculty and learners. They argue that accepting others without judgment is essential to learning and change. Even as the expert lecturer you need to be aware of your mentoring role with your colleagues.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 65..

## Competency 8: Give appropriate feedback about performance

### Question 1

<b>Question ID</b>	AOF_FEP_C08_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 8</b>	Give appropriate feedback about performance		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are a table instructor on an AO course in your specialty area taking place in a country that has only recently been exposed to AO techniques. During the first practical you note that the course participants are highly skilled but cut corners. They do not use drills with protection sleeves and they always power tap. They are happy and unaware of any problems. They are delighted that they are doing things so rapidly. You decide to start a conversation.

What would you say to get started?

Response options	Res.
a) Never use a power tap because it may create severe soft-tissue damage.	
b) Why are you in such a hurry?	
c) Why don't you use a tap sleeve?	
<b>d) How did you first learn to start using these instruments?</b>	
Correct: D	

<b>Rationale</b>	Harris and Fox state that the feedback interaction you foster at the table could correct misperceptions and cause the unmotivated to become motivated to learn. In the scenario presented, the course participants are unaware that any problems exist and it is likely their behavior is considered normal in their practice environment. Direct orders—suggestions and direct questioning—may produce minimal improvement but open questions, such as answer (d), are more likely to start a conversation which will allow you, the table instructor, to understand the motivation of the course participants in their current behavior. This in turn will give you cues as to how to inspire them to change.
<b>Reference</b>	<b>Harris I, Fox, RD</b> (2005) How to be a Table Instructor. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 66



## Competency 8: Give appropriate feedback about performance

### Question 2

Question ID	AOF_FEP_C08_Q02_post	Status (Date)	August, 2014
Competency 8	Give appropriate feedback about performance		
Ave. Score			
Faculty group			

Question:	<p>You are a senior faculty member in a Principles course in your own country. You discover that one of your former trainees has now joined the faculty. At the precourse, he says that he is extremely nervous and asks you to review his presentation and give him feedback. During the presentation rehearsal, you find it too long, too complex, and with too many slides.</p> <p>What would you first say to him in order to give constructive feedback?</p>
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Response options	Res.
a) What exactly was the message that you were trying to convey?	
b) Tell me how you think you might improve the overall presentation?	
c) Exactly how long is this lecture meant to last?	
<b>d) Which parts of the presentation do you think went well?</b>	
Correct: D	

Rationale	<p>Giving feedback could be a stressful experience for both parties involved. The faculty member is apprehensive and naturally focuses on things that went wrong. The coach is keen to see things corrected without overly alarming or upsetting the faculty member. As with all feedback, open questions are more effective than closed questions, and usually it is better to begin with positive aspects of the presentation than the negative ones. Experienced facilitators are only too aware that faculty inherently focus on their faults, and in doing so can overlook what is of value in an individual presentation. It is rare that a presentation is so bad that a positive feedback is impossible. In general, therefore, concentrate first on the positive aspects of a presentation.</p>
Reference	<p>(Pendleton D, Schofield T, Tate P, Havelock P. The New Consultation. Oxford University, 2004.)</p>

## Competency 8: Give appropriate feedback about performance

### Question 3

<b>Question ID</b>	AOF_FEP_C08_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 8</b>	Give appropriate feedback about performance		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are a regional faculty member on a Principles course. It is only the second Principles course to be held in this country. At the faculty meeting concluding the first day, you are asked for feedback on the day's development. The main hurdle you noticed was a prolonged opening ceremony. Local dignitaries gave lengthy speeches. This disrupted the entire program; consequently, the question and answer sessions were deleted.

At the end-of-day faculty meeting, how would you react?

Response options	Res.
a) Do not mention the problem because clearly the opening ceremony was politically important to many senior faculty members.	
b) Give a short lecture on the value of interactivity in the course, mentioning the cancellation of question and answer session.	
c) Directly address the problem and ask how it might be avoided in the future.	
<b>d) During the discussion, relate an anecdote from your own experiences dealing with a similar case in a different course.</b>	
Correct: D	

<b>Rationale</b>	The purpose of feedback is to improve future performance. With constructive feedback we learn, compare what we do to some standard and learn to improve. In the vignette presented, the opening ceremony severely disrupted the course and although ignoring it might be comfortable, it is not being responsible to do so. Confronting the issue head on may create hostility with the audience, thus making it less likely that your message will be well received. Relating an anecdote based on your own experience is less likely to alienate the audience and can also initiate a discussion how to avoid or amend similar situations.
<b>Reference</b>	

## Competency 8: Give appropriate feedback about performance

### Question 4

Question ID	AOF_FEP_C08_Q04_pre	Status (Date)	August, 2014
Competency 8	Give appropriate feedback about performance		
Ave. Score			
Faculty group			

Question: You are in your own country's Principles course and for the first time you will chair the event. In an effort to be innovative, you have recruited some new faculty members including one local surgeon who is an acknowledged international expert in his field. Earlier he had informed you that his busy work schedule prevents him to participate in an AO faculty development event. At the course his presentation is too long, contains too many slides, and the level is inappropriate for the participants. Moreover, he speaks too quickly, never maintains eye contact, and seems unenthusiastic. At the coffee break following his lecture, he asks for your input.

How would you be most helpful?

Response options	Res.
a) Forget feedback but ensure that you do not invite him to another course.	
<b>b) Immediately take him somewhere private and conduct a systematic feedback session.</b>	
c) Tell him that things went well but you would like to discuss some points with him at the end of the course.	
d) Say things went well; later engage him in a conversation after he has had a few drinks at the faculty dinner.	
Correct: B	

Rationale	There are many ways for giving constructive feedback. It should be balanced, as objective as you can make it, and as subjective as you need to make it. Feedback is most effective if given soon after a teaching episode. As a result giving feedback immediately is the best option. Delaying feedback means that both sides are more remote from the event and accuracy may therefore suffer. Informal feedback, such as at the faculty dinner, can be effective but imparting it in such an environment may devalue the process as well as interfering with the enjoyment of the dinner. However, failure to give feedback merely ensures that poor elements of a presentation would go uncorrected to the detriment of learners and the patients that they serve.
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Assessment Tool Kit

## **Faculty Education Program—Test questions**

Using assessments and outcomes related  
information

## Competency 9: Use information about learners, their needs and cultural context in the educational process

### Question 1

Question ID	AOF_FEP_C09_Q01_pre	Status (Date)	August, 2014
Competency 9	Use information about learners, their needs and cultural context in the educational process		
Ave. Score			
Faculty group			

Question: You are engaged in planning and conducting an educational session and want to include information from the self-assessment about the perceived and real needs of the participants.

How would you implement your idea?

Response options	Res.
a) Compile individual results from the self-assessment and send them privately to each participant.	
<b>b) Share information from the assessment report about gaps in the group.</b>	
c) Take aside the learner you are concerned about and privately discuss his/her individual results.	
d) In a small group discussion ask learners how they think they performed on the test.	
Correct: B	

Rationale	Mazmanian and Davis affirm that it is the process of resolving one's perceptions with realistic feedback that generates participation and interaction as well as reflection. Schön describes the energizing effects of surprises on professional's performance. This energy is not released if there are no opportunities for reflection or self-comparison with objective measures of performance. Moreover, the teachable moment for many adult learners is when they discover that they need to change something in their knowledge, skill, or performance.
Reference	<b>Mazmanian PE, Davis DA</b> (2002) Continuing medical education and the physician as a learner: guide to the evidence. <i>JAMA</i> ; 288(9):1057–1060. <b>Schön DA</b> (1990) <i>Educating the Reflective Practitioner: Toward a New Design for Teaching and Learning in the Professions</i> . San Francisco: Jossey-Bass Publishers

## Competency 9: Use information about learners, their needs and cultural context in the educational process

### Question 2

<b>Question ID</b>	AOF_FEP_C09_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 9</b>	Use information about learners, their needs and cultural context in the educational process		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question:	<p>You are lecturing to a senior audience with extensive experience on the topic. They believe they are better at this than is evident from the assessment results. In other words they are unaware of their needs.</p> <p>What is the best strategy to help them realize their real needs?</p>
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Response options	Res.
a) Increase the use of technical language to confirm your mastery of the concepts and practices.	
b) Introduce some of your case experiences to show your competence and gain their confidence.	
<b>c) Use case failures to make them reflect on their own experience.</b>	
d) Use ARS questions to draw continuous feedback on your lecture.	
Correct: C	

<b>Rationale</b>	Always consider what level of learner your learners are. If they are beginners, your lecture should not contain jargon without explaining the meaning. If your listeners are at a novice level, your content should be on the same level. Keep in mind that your lecture should not be a time for you to exhibit your proficiency. Your best choice is to introduce complex cases to make them reflect on their experience.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 78.

## Competency 9: Use information about learners, their needs and cultural context in the educational process

### Question 3

<b>Question ID</b>	AOF_FEP_C09_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 9</b>	Use information about learners, their needs and cultural context in the educational process		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question:	<p>You are assigned to lead a small group discussion in an international course. Your group includes surgeons from Germany, India, and Japan. All are in training and most in the first year of residency.</p> <p>How would you plan your session cases?</p>
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Response options	Res.
a) Lengthen your time devoted to giving instructions to the group about the cases.	
b) Use what you can of the learners' languages in your introductions.	
c) Use English only, but repeat your messages in different ways to reflect the participant's English skills.	
<b>d) Use short English phrases on slides along with graphics, just as you would for any group of surgeons.</b>	
Correct: D	

<b>Rationale</b>	The longer sets of content presented in a lecture have proven to be the least advantageous for course participants. They remember more when the material is presented in smaller chunks than larger ones. The purpose of chunking is to improve retention by providing information in a form that can be processed quickly. Also, because most surgeons learn to read English in their training, graphics along with familiar English terms are most likely to be understood.
<b>Reference</b>	<b>de Boer PG, Casebeer L</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 56

## Competency 9: Use information about learners, their needs and cultural context in the educational process

### Question 4

Question ID	AOF_FEP_C09_Q04_pre	Status (Date)	August, 2014
Competency 9	Use information about learners, their needs and cultural context in the educational process		
Ave. Score			
Faculty group			

Question:	<p>You are an international faculty member at an AO course in a developing country. Your topic covers the decrease of poor local outcomes from trauma caused by high-energy accidents.</p> <p>What is the best strategy for success in this situation?</p>
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Response options	Res.
a) Show how the methods and techniques work in your emergency room.	
b) Bring equipment from home so they can see this as you speak.	
c) Describe alternatives and relate new to older techniques for working on such cases.	
<b>d) Ask the organizers and the local faculty how these cases are currently managed.</b>	
Correct: D	

Rationale	<p>Khong and Hadfield-Law suggest that the most effective method is a balanced approach comprising descriptions of the new technology and other approaches not dependent on the new devices and approaches. Work setting varies significantly among countries, so alternatives help learners to adapt new ways of practicing in their workplace. However, the right answer is to know what they do now and adjust accordingly.</p>
Reference	<p><b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i>. Stuttgart New York: Thieme, 79. 92</p>



## Competency 10: Work with outcomes in teaching strategies

### Question 1

Question ID	AOF_FEP_C10_Q01_pre	Status (Date)	August, 2014
Competency 10	Work with outcomes in teaching strategies		
Ave. Score			
Faculty group			

Question: As a faculty member, you are given the task of organizing the teaching on the treatment of fractures with severe associated soft-tissue injuries. Previous postcourse evaluations have shown that many courses lead to poor learning outcomes for this competency. The main areas of concern are the apparent lack of knowledge on the initial management of such injuries and the advantages and disadvantages of early internal fixation.

How would you rectify this knowledge gap?

Response options	Res.
a) Repeat last year's course program.	
b) Decide on a single state-of-the art lecture to be given by an international expert who would be encouraged to discuss new and controversial areas.	
c) Give the lecture on fractures with severe associated soft-tissue injuries yourself and ensure that initial management and the advantages and disadvantages of early internal fixation are fully discussed.	
<b>d) Ensure that the lecturer, the practical session director, and the group discussion leaders coordinate their teachings to cover the anticipated knowledge gaps.</b>	
Correct: D	

Rationale	If you don't know where you are going how can you expect to get there? This sentence describes the importance of outcomes when deciding on teaching strategies. The amount of material that can be presented on any competency at an AO course is always greater than the time available. Therefore, Moore and Green point out that it is critical that all faculty members have clear outcome goals. Previous evaluation data can be helpful to define these goals. Faculty members need to be aware that successful outcomes can best be achieved by combining different teaching methods and producing a blended learning experience.
Reference	<b>Moore DE Jr, Green JS, Gallis HA</b> (2009) Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. <i>J Contin Educ Health Prof</i> , 29(1):1–15.

## Competency 10: Work with outcomes in teaching strategies

### Question 2

<b>Question ID</b>	AOF_FEP_C10_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 10</b>	Work with outcomes in teaching strategies		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are assigned as international faculty to a Principles course in a country which only just started to have AO activities. You receive a request from the local course chairperson to give a 45-minute presentation on a subject of your choice. The lecture is to take place just before the course dinner.

How would you effectively hold the attention of the participants?

Response options	Res.
a) Collect some humorous anecdotes and string them together to create an effective learning climate.	
b) Prepare a state-of-the art lecture on your chosen field of expertise.	
<b>c) Ask the course chairperson about the purpose of the presentation.</b>	
d) Use the lecture to introduce new research findings associated with a surgical innovation.	
Correct: C	

<b>Rationale</b>	All these possibilities maybe what the course chairperson and the course participants want and expect from you. However, unless you find out what the intended outcomes of the talk are you may well fail in your task. Most presentations at AO courses have relatively clearly defined learning outcomes and visiting international faculty members are often given this type of assignment. It may be that the audience would be amused and entertained by a set of anecdotes but in the end be disappointed if they wanted in fact to hear about your field of expertise.
<b>Reference</b>	<b>Moore DE Jr, Green JS, Gallis HA</b> (2009) Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. <i>J Contin Educ Health Prof</i> ; 29(1):1–15.

## Competency 10: Work with outcomes in teaching strategies

### Question 3

<b>Question ID</b>	AOF_FEP_C10_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 10</b>	Work with outcomes in teaching strategies		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are acting as regional faculty in a local Advanced course. You are given the task of running a practical exercise which will use the latest implant technology. At the precourse you discover that this technology has not yet been introduced into that country and the implants to be used in the practical are currently not available.

What would you do?

Response options	Res.
a) Insist that the practical be withdrawn and replaced by a discussion group on how these fractures are managed locally.	
b) Run the practical normally but focus on the teaching video.	
c) Decide on four key learning points and chunk the video to focus merely on these.	
<b>d) Run the practical using the model with K-wires and locally available plates.</b>	
Correct: D	

<b>Rationale</b>	Cancelling the practical makes sense in terms of immediate patient care but in doing so you will lose the opportunity to teach surgeons about techniques that may be available to them as a later time. Cancelling the practical also means that the opportunity to teach principles based on these implants is lost. Ignoring the situation and running the practical as you would in a regular course is also not logical since the basic-skill levels of participants would be much lower than in a better-resourced country. Deciding on limited outcomes in this situation is the most likely way to achieve some learning that will be useful to the participants and the patients that they treat.
<b>Reference</b>	

## Competency 10: Work with outcomes in teaching strategies

### Question 4

<b>Question ID</b>	AOF_FEP_C10_Q04_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 10</b>	Work with outcomes in teaching strategies		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: As an experienced faculty member, you are asked to lecture on the treatment of a common injury in your specialty area at a local Advanced ORP course.

How would you prepare your presentation?

Response options	Res.
a) Revise the lecture you gave at the surgeons' course recently and use it as your educational material.	
b) Use the AO ORP book and base your presentation on its content.	
<b>c) Ask ORPs at your local hospital what their current knowledge gaps are in the management of these cases.</b>	
d) Ask the AO ORP staff to send you a presentation previously given on the course.	
Correct: C	

<b>Rationale</b>	Lecturing to an unfamiliar group is difficult, which most commonly occurs within the AO when surgeons are invited to lecture in ORP courses. Moore et al. confirm that in such situations it is even more critical to have clear outcomes when preparing presentations. Information can be gathered from all the above sources but you are most likely to define realistic and clear outcomes when talking with people who encounter these problems in their day-to-day practice. Discussing the outcomes with the course chairperson may help to ensure that your conclusions are valid.
<b>Reference</b>	<b>Moore DE Jr, Green JS, Gallis HA</b> (2009) Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. <i>J Contin Educ Health Prof</i> ; 29(1):1–15.

## Competency 11: Reasonable expectations of a teaching learning session

### Question 1

<b>Question ID</b>	AOF_FEP_C11_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 11</b>	Reasonable expectations of a teaching learning session		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question:	<p>You are allocated 40 minutes for a lecture and plan to invite questions from the audience during the presentation. You need to anticipate how much time to allocate for questions and answers during your lecture.</p> <p>How would you calculate the time needed for questions and answers?</p>
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Response options	Res.
a) Allow 25–50% more time than you had planned in rehearsal to compensate for learners' questions during your actual talk.	
b) Allow 10% more time than you had planned in rehearsal to compensate for learners' questions during your actual talk.	
c) Allow 5 minutes more than you had planned in rehearsal to compensate for learners' questions during your actual talk.	
d) Provide short 3-minute breaks at key points for questions.	
Correct: A	

<b>Rationale</b>	It takes 25-50% more time to give a lecture to actual learners compared with a rehearsal with no learners present. According to Khong and Hadfield-Law, it is helpful to know in advance what you might have to cut if your allocated time runs short. Labeling your content as must-know or nice-to-know can help with this process.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 87.

## Competency 11: Reasonable expectations of a teaching learning session

### Question 2

<b>Question ID</b>	AOF_FEP_C11_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 11</b>	Reasonable expectations of a teaching learning session		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are facilitating the first discussion group on a Principles course in your own country. The course participants are more junior than you usually meet and it becomes clear that they are struggling with the concepts of classification. Eight cases have been prepared for the discussion group session.

How would you present the cases so that participants are best informed?

Response options	Res.
a) Try to get through all eight cases to ensure the broadest possible educational input.	
<b>b) Let participants work through the cases at a speed compatible with their experience.</b>	
c) Attempt to speed things up by giving a short 10-minute lecture to clarify points missed in the original lecture.	
d) Suggest to the group that you continue on through the lunch break.	
Correct: B	

<b>Rationale</b>	The first discussion group of any course is challenging with regard to timing. Introductions and familiarity with how groups work take some time. The level of knowledge and expectations of a group cannot always be predicted. Having an eight-case agenda is therefore an unrealistic expectation for the session. In general participants want to see as many cases as possible in discussion groups; yet in this situation, clearly the only sensible option is to reduce the number of cases and let the speed of the group be dictated by their progress.
<b>Reference</b>	<b>Simmermacher RKJ, Kues JR (2005)</b> How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme.

## Competency 11: Reasonable expectations of a teaching learning session

### Question 3

<b>Question ID</b>	AOF_FEP_C11_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 11</b>	Reasonable expectations of a teaching learning session		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are asked to organize a teaching session on an extremely complex injury that occurs in your specialty area. In the course you are scheduled for a 1-hour lecture and a 1.5-hour practical exercise

What is the most efficient way to ensure that all assigned parts are covered in the 1 hour lecture?

Response options	Res.
a) Decide on two 30 -minute lectures on emergency management and definitive management of the injury	
<b>b) Decide on a 30-minute lecture on the emergency management of the injury and a 30-minute interactive case discussion</b>	
c) Invite the international guest speaker to give a 1-hour lecture on evolving techniques in surgery of the injury	
d) Decide on a 20-minute lecture on the classification of the injury, a 20-minute lecture on the anatomy of the injury, and a 20-minute lecture on the surgical approaches required to treat the injury	
Correct: B	

<b>Rationale</b>	It is critical to set reasonable expectations for a teaching session. Complex injuries cannot be taught in a 1-hour session, and indeed many will argue that some subjects are so complex that a fellowship-type experience is necessary to truly understand the issues. Not including this topic within an Advanced course makes sense, but if it is to be included then it is vital to understand, preferably through a needs assessment, what the participants require and restrict teaching to those topics.
<b>Reference</b>	

## Competency 11: Reasonable expectations of a teaching learning session

### Question 4

<b>Question ID</b>	AOF_FEP_C11_Q04_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 11</b>	Reasonable expectations of a teaching learning session		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You are a regional faculty at a local Advanced course. You find that all practical exercises have been allocated exactly 1 hour. The timing has been chosen by the chairperson on request of the technical staff and related to the time required between exercises to prepare the room.

How would you work within this time frame?

Response options	Res.
a) Negotiate with the technical team and course chairperson to make changes based on the complexity of the exercise.	
b) Accept the situation as it is since trying to change it would be very difficult.	
c) Suggest to carry out only parts of the practicals, which are likely to overrun .	
d) Suggest using some of the question and answer time to extend the length of the practicals.	
Correct: A	

<b>Rationale</b>	Practical exercises in AO courses are of differing degrees of complexity, and require different timings to allow course participants to complete them. Giving a standard time slot to each practical makes for easier course scheduling, but inevitably results in some exercises being too rushed and others having too much time. Participants should have sufficient time to complete the exercise. Even though you might make yourself unpopular with the technical team, option "a" is the wisest.
<b>Reference</b>	Moore DE Jr, Green JS, Gallis HA (2009) Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. J Contin Educ Health Prof; 29(1):1–15.



## Competency 12: Evaluate improvement of own teaching performance

### Question 1

<b>Question ID</b>	AOF_FEP_C12_Q01_pre	<b>Status (Date)</b>	August, 2014
<b>Competency 12</b>	Evaluate improvement of teaching performance		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You have just returned from lecturing at the AO Courses in Davos. In January, you receive a report from the ARS evaluation of your presentation. Your subject was classification. You received the following marks - Relevance to practice score = 3.91, Performance score = 3.93 (The course average scores were 4.03 for relevance to practice and 4.00 for faculty performance. The average for all 10 courses was 3.94 for relevance to practice and 3.89 for faculty performance)

What is the appropriate conclusion to come to?

Response options	Res.
a) Because my performance score was below the course average, I think I probably have a problem with my teaching abilities.	
b) Because my performance score was slightly better than my relevance score, I probably did a good job in performance.	
c) Because the subject of classification is not very popular, it was likely that I would get those scores.	
<b>d) The ARS data do not give me much helpful information in assessing my own performance.</b>	
Correct: D	

<b>Rationale</b>	<p>The ARS system asks course participants to rate individual performances on two criteria scales—relevance to practice and effectiveness on presentation. Although the two scales should be independent most participants give identical scores on the two scales. Presentations that are not thought to be relevant will be thought to be poorly carried out. Poorly carried out performances will be rated as not relevant. A large difference between the two scores either positive or negative does reflect a measure of the effectiveness of the performance. In the figures selected, no meaningful conclusions can be drawn as to the effectiveness of the presentation.</p> <p>To get more valuable information on your performance ask your chair, peer faculty members, or a coach for personal feedback.</p>
<b>Reference</b>	Pendelton (1984)

## Competency 12: Evaluate improvement of own teaching performance

### Question 2

<b>Question ID</b>	AOF_FEP_C12_Q02_post	<b>Status (Date)</b>	August, 2014
<b>Competency 12</b>	Evaluate improvement of teaching performance		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: It is your first time at a regional course and you want to do the best you possibly can. You have attended the faculty education program and know the basics of effective teaching. After your course you want to know how well you have done.

What is the best information that can be given to you?

Response options	Res.
a) The ARS participant data with particular reference to how well you scored compared to other faculty members.	
b) Good learning outcomes on the subject you presented as measured by the commitment-to-change instrument.	
c) Personal, individual, informal feedback from the course participants during the coffee break.	
<b>d) Formal feedback from a fellow faculty member using objective criteria.</b>	
Correct: D	

<b>Rationale</b>	Although the ARS data does give limited information about faculty performance, the significance of the data is largely confined to the extremes of measurement, i.e., very good and very bad. Although an individual presentation can contribute to a good learning outcome as measured by the commitment-to-change instrument, it is rare that a single presentation is the only input to a given competency. The only sound method to assess faculty performance of the four choices given is formal feedback from the coach using objective criteria. Even this is not as good as the ideal evaluation—successful change in the participant's medical practice.
<b>Reference</b>	

## Competency 12: Evaluate improvement of own teaching performance

### Question 3

<b>Question ID</b>	AOF_FEP_C12_Q03_post	<b>Status (Date)</b>	August, 2014
<b>Competency 12</b>	Evaluate improvement of teaching performance		
<b>Ave. Score</b>			
<b>Faculty group</b>			

Question: You were sent some ARS data after teaching at an AO course. The ARS assessment shows you are middle of the road. You are concerned that you might not be able to interact with the audience as effectively as other more highly rated speakers do. You understand that the only thing that really matters is whether you can get your message across to improve practice. Still you feel that you need to take measures to improve your teaching skills.

What is your best source of help?

Response options	Res.
a) The "Faculty Teaching Package" on the AO website (Faculty Center of your Clinical Division).	
b) Attending a course on good public speaking	
c) Rehearsing your presentations in the mirror, and stopwatch to ensure accurate timing.	
d) Taking refresher course in PowerPoint and Photoshop.	
Correct: A	

<b>Rationale</b>	Rehearsal in front of the mirror will certainly improve confidence and timing. Attending a course on public speaking will certainly boost confidence, and the audience is more likely to warm to you. Brightening up your presentations with sparkling audio visual aids will add to their appeal. However, the key message is whether or not you can interact with the course participants. The Faculty Teaching Package and the online modules give you tips and tricks how to interact with your audience.
<b>Reference</b>	<b>Khong K, Hadfield-Law L</b> (2005) How to give a lecture. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme.

## Competency 12: Evaluate improvement of own teaching performance

### Question 4

Question ID	AOF_FEP_C12_Q04_pre	Status (Date)	August, 2014
Competency 12	Evaluate improvement of teaching performance		
Ave. Score			
Faculty group			

Question: You are an experienced faculty member with over a decade of teaching experience. Although you still feel very motivated to teach at AO courses, you find the facilitation of discussion groups increasingly difficult. You tend to interrupt the discussion, and want to express your own correct viewpoints when you see the discussion going off in the wrong direction. You decide to talk to your chairperson.

What is the best solution for your issue?

Response options	Res.
a) Accept the discussion groups are just not your favorite item and ask not to be assigned to discussions anymore.	
b) Ask to be assigned the role of a rapporteur or summarizer within the discussion group.	
<b>c) Ask to be assigned the role of an expert within the group.</b>	
d) Continue as before.	
Correct: C	

Rationale	Discussion groups are a very effective way of changing physician practice. The key to their success seems to be interactivity. Not all participants, however, benefit from discussion groups. Some participants prefer to listen rather than interact. Similarly, some surgeons who are used to making decisions rapidly on a limited set of information, struggle to facilitate group discussion. Although some individuals may opt to drop out of the discussion group work, this means that their knowledge is lost for the group. The most suitable role would be that of an expert. The expert is only allowed to speak when the facilitator cues him in and his sole role is to give his own opinion.
Reference	<b>Simmermacher RKJ, Kues JR</b> (2005) How to run a discussion group. <i>Green JS, de Boer PG (eds), AO Principles of Teaching and Learning</i> . Stuttgart New York: Thieme, 35.