



Original Publication

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Teaching Inpatient Bedside Presenter Empowerment Actions During an Interactive Workshop

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Abstract

Introduction: Medical students and interns are the principal communicators during inpatient bedside patient- and family-centered rounds. Excellent presenters are able to share information during rounds in a manner that is accurate, effective, and easy for all to understand. We previously identified the behaviors of excellent presenters and developed a term for them: presenter empowerment actions. Methods: To promote the use of presenter empowerment actions, an interactive workshop was created to teach them to medical students and interns. This educational summary contains information on how to facilitate a workshop to promote presenter empowerment actions, which includes both a didactic presentation and an interactive game. Results: Interns reported increases in confidence and knowledge of empowerment actions, as well as strong intent to incorporate presenter empowerment actions during inpatient rounds. Discussion: A workshop with an interactive game is an effective way to teach empowerment actions to learners. To reinforce presenter empowerment action use after the workshop, we recommend direct observation using the Suspected Observable Presenter Empowerment Action Checklist to provide formative feedback to the presenters.

Keywords

Patient- and Family-Centered Rounds, Bedside Rounds, Presenter Empowerment Actions

Educational Objectives

By the end of this session, learners will be able to:

- 1. Explain presenter empowerment actions (PEAs).
- 2. Identify specific PEAs used in clinical rounds vignettes.
- 3. Apply and practice using PEAS during a team-based role-play activity.

Introduction

Since their introduction in the early 2000s, bedside patient- and family-centered rounds (PFCR) have become the preferred method of rounding in pediatric settings.¹⁻⁴ Medical students and interns are the primary communicators during PFCR at many academic institutions.⁵ They often assume the role of the presenter during PFCR, sharing key elements of the history, exam, and results of diagnostic studies, as well as their assessment of and plan of care for the patient.⁶ PFCR experiences add a real-life dimension to presenters' training through the presence and involvement of the family. Trainees report that this rounding method, while challenging, provides meaningful educational benefits. Under the supervision of the senior resident and attending physician running the encounter, presenters practice an array of competencies, including synthesis of knowledge, clear and organized communication, and family education.⁴ Excellent presenters are able to share information during rounds in a manner that creates a shared understanding between all team members, including the family, thereby ensuring the delivery of effective patient- and family-centered care.⁷ With adequate support and education, presenters can meet the challenge of successfully communicating patient information to families and care teams on PFCR.

Two previous *MedEdPORTAL* workshops have aimed to teach presenters basic components of presentations during PFCR.^{8,9} However, behaviors that excellent presenters use during PFCR have not

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Appendices

- A. PEA Workshop Rounding Like a Kung Fu Panda.ppt
- B. PEA Rounding Card Template.docx
- C. PEA Workshop Game Show .ppt
- D. PEA Workshop Game Show Vignettes.docx

All appendices are peer reviewed as integral parts of the Original Publication.





been previously identified or taught. Therefore, we studied the behaviors that excellent presenters use to deliver information to families and developed the term *presenter empowerment actions* (PEAs) to represent specific behaviors that medical students and interns can perform to empower themselves and become excellent presenters during PFCR. Some examples of these include opening with a one-liner, having a confident vocal tone, making eye contact, interpreting data, generating an appropriate differential, making a commitment to the most likely diagnosis, and interacting with the family. A previous *MedEdPORTAL* publication described our work on the development and validation of PEAs and a PEA measurement tool, the Suspected Observable Presenter Empowerment Action Checklist (SO-PEACH).¹⁰

Previous work at our institution identified senior resident empowerment actions, 11 nurse empowerment actions, 12 and family empowerment actions, 13 The development of PEAs and the presenter workshop has added to our comprehensive program to improve the performance quality, attendance, and empowerment of all participants on PFCR. This program of instruction has been coordinated using a memorable overriding theme, mascots, and mnemonic devices to highlight the desired qualities of each participant on PFCR. We have included information about the martial arts theme chosen at our institution for the purpose of providing an example of one possible framework. The initial roles developed were those of the attending and senior resident. We have likened the role of the attending empowering senior residents to that of a ninja—a powerful and stealthy figure who can at times be invisible and other times is present to provide expertise and a safe environment.¹⁴ Using this framework, the senior resident is like the advanced and skilled trainee in martial arts who is learning to teach his/her colleagues while still refining his/her own practice—the Karate Kid.¹⁴ The Disney character Mulan was identified for the nursing role, as her compassion, skill in advocacy, and resourcefulness represented the desired nursing qualities. 15 The most recent addition to our framework has been the presenter role, which we have likened to that of DreamWorks Animations' Kung Fu Panda. 16 Initially, medical students and interns are novices at being presenters during PFCR, but through practicing the PEAs and dedication, they can become talented presenters, much as Kung Fu Panda was initially clumsy and uncoordinated but, after coaching and practice, became a skilled warrior.

The remainder of this educational summary report describes our workshop, "Rounding Like a Kung Fu Panda," a useful method for teaching students and interns the skills to become excellent presenters.

Methods

Format of Workshop to Teach Learners PEAs

A 2-hour workshop was created to help our new interns develop improved presentation skills during PFCR. The workshop contains a mixture of didactic information, small-group brainstorming sessions and discussions, and an interactive game with a mixed game show format teaching key concepts via questions, discussion, and role-plays. We recommend using our PEA workshop format as a guide, as there may be parts of the workshop that are not applicable to every institution.

The didactic portion of the workshop should be presented first, followed by the interactive game. The aim of the game is to teach interns empowerment actions to use on inpatient rounds and to increase confidence in using these actions by practicing what they have learned. To reinforce PEA use after the workshop, direct observation is recommended by using the SO-PEACH to provide formative feedback to the presenters.

Please see Appendix A to review the workshop given to the interns during intern orientation. During the workshop, we explain both the methodology used to establish PEAs and the martial arts theme of our PFCR program. Some parts of the workshop may not be applicable to all programs, and those parts can be omitted. There are presenter notes included within the presentation to further explain details as needed. The workshop includes discussion in small groups. The audience should be divided into three small groups before the beginning of the workshop. It is helpful for each small group to have a team name as





instructors can reference the team names throughout the workshop and use them during the workshop game. The demonstration of PEAs during the workshop, either by showing videos of presenters performing PEAs, if available, or by facilitators performing PEAs during an example rounding scenario, may be useful. During our most recent workshop, we showed a video of a presenter giving a synthesized assessment, and the facilitators did some improvising to demonstrate problem formulation. Access to the platform hosting our video is available on request. We created PEA reference cards (Appendix B) that can be distributed during the workshop to reinforce PEAs and can also be used during and after the game.

Learner Audience

The PEA workshop is designed for those presenting on PFCR. Institutions with providers who are knowledgeable about PFCR and wish to help trainees improve their presentations on PFCR may benefit most from this workshop. The content of the workshop is appropriate for trainees (third-year medical students through resident level). This workshop is also appropriate for nurse practitioners, physician assistants, or individuals with other roles who serve as presenters on PFCR. The facilitators of the workshop could be residency program directors, faculty members interested in PEAs, chief residents, or medical education specialists. We suggest two to three facilitators for the workshop who can also serve as judges during the interactive rounding game.

Definitions for the Group (Also Included in the Workshop)

Rounds patient encounter: an event where the medical team discusses the patient's medical course, develops a plan of care, and incorporates teaching.

Rounds: a group of sequential patient encounters for a panel of patients cared for by the ward team.

PFCR: a session where the patient and family are present with the care team members to discuss the patient's health. Families are encouraged to be active participants.

Ward team: a team of medical students, first-year residents, a senior resident, and an attending charged with the care of a panel of hospitalized patients.

Presenter: the primary storyteller on rounds who shares key elements of the history, exam, and results of diagnostic studies, as well as the beginning of the assessment of and plan of care for the patient. Oftentimes, on traditional ward teams with many levels of learners, this is a medical student or intern. However, in other settings, it could be an upper-level resident, nurse practitioner, physician assistant, fellow, or attending. For our work, we have focused on medical student and intern presenters on ward teams.

Senior resident: an upper-level resident with supervisory responsibilities for a group of medical students and first-year residents (interns).

Attending: the physician with supervisory responsibilities for a group of medical students, interns, and the senior resident.

Instructions for PEA Game

Please see Appendix C, the PEA Workshop Game Show, to review the interactive game for presenters. The PEA Workshop Game Show is a competitive rounding activity in game show format. We recommend having two to three facilitators who also serve as judges. These hosts should be faculty or chief residents, and if the game is played as part of a workshop on PEAs, it would be natural for the workshop facilitators to serve as judges.

We recommend that the large group, if not already divided into small groups, be split into three teams, with each having a team name. We recommend reinforcing the idea that all the team members must participate in the game.





Instructions are included in the PEA Workshop Game Show slides and below.

Overview: The PEA Workshop Game Show is a competitive rounding game built for three teams of at least four to five people each, with the maximum being 10 people per team to ensure everyone can participate. The game usually takes approximately 45 minutes. Each team receives four questions with one to two brief role-playing scenarios and a final round after regular play. The game is similar to Jeopardy but differs in that teams do not race to answer the same question; rather, each team has a separate set of questions to answer. This game format ensures all participants receive an equal amount of experience and practice during the game. Teams should take turns answering questions and can pick the order in which they would like to complete them. Questions have increasing point values that correlate with their difficulty.

The play: For facilitators—to operate the Microsoft slides, the Board (slide 6, Appendix C) should be the home-base slide. When a team selects the point value it would like to answer (i.e., the team indicates that it would like to answer the question worth 100 points), the facilitator clicks on that point value to go to the slide. For slides containing questions, the question appears after another click, and then, a further click is needed for the answer. For slides containing scenarios, the task is in text on the slide. To return to the Board (slide 6, Appendix C), facilitators should click in the lower right-hand corner. This process is repeated until each question is answered. After all questions with points are completed, the facilitator clicks on the text reading Final Round at the base of the Board.

Role-playing questions: Scripts for role-playing scenarios serve only as a guide for performance. Scenarios should not be read word for word but instead should be adapted as the team sees fit. Handouts should be provided for role-playing scenarios after the team picks a question requiring role-playing.

Non-role-playing questions: A representative from the team should provide the answer in the form of a question.

Winning: There is a final round requiring high-level PEA demonstration at the end of regular play. Teams may wager a percentage of their current score that they could earn if they win the final round. They could also lose the same number of points they wager if they are unsuccessful during the final round. Example: If a team has 600 points going into the final round, it can wager up to 600 points. If the team is successful, it will earn 600 more points, for a total score of 1,200. However, if the team is unsuccessful during the final round and has wagered its total score, its final score will be 0. The team with the most points at the end of the final round is the winner.

Judging: Role-playing scenarios are judged by the facilitators. The judges determine the point amount awarded for role-playing scenarios, with the range being from 0 points to the point value of the question, based on strength of the performance. Example: If a question is worth 200 points, the range is 0-200. For questions without role-playing, the team receives the full point value for a correct answer, and no points are given for an incorrect answer.

For each vignette, a contestant copy and a judging copy are included. Please see Appendix D for sample presenter workshop vignettes. A judging copy is meant to be for the judges and includes the key elements for judging performance for each scenario.

Vignette names: Some of the vignette names provide clues to the final answer. For example, the final round is named The Case of RR, as the case describes a boy who has Rocky Mountain spotted fever, a tick-borne illness caused by *Rickettsia rickettsii*.

Results

We have incorporated the 2-hour workshop on PEAs into our intern orientation since June 2012. During the workshop, we first provide a background for the importance of PEAs, and then participants are able to identify and practice PEAs using the 4S Rounding Like a Kung Fu Panda format. Interns receive PEA





rounding cards for use on the wards. Overall, the workshops have been well received by our interns. Evaluation results from our most recent survey during the June 2016 intern orientation are included (see the Table).

Table. Intern Evaluation of 2016 PEA Workshop (*N* = 24)

Statement	<i>M</i> ^a
I learned new ways for intern empowerment on inpatient rounds.	4.54
I feel more confident that I will be able to empower myself on inpatient rounds.	4.45
I intend to use PEAs in my practice.	4.75
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Abbreviation: PEA, presenter empowerment action.

^aScale: 1 = Highly Disagree, 3 = Neutral, 5 = Strongly Agree.

In summary, the interns reported learning basic knowledge on empowerment, increased confidence, and the intent to incorporate PEAs.

Some selected comments from the 2016 evaluations show the workshop has been well received:

- "Enjoyed the interactive game to emphasize points made during the presentation."
- · "Great way to present the material in an interactive way!"
- "The interactive format was really helpful!"

There have been some suggestions for additional improvement, including the following:

- "I liked the videos/examples—maybe more of those."
- "Include a 'day in the life of an intern on rounds' slide so interns understand timing and structure."

Discussion

We have created a workshop to teach medical students and interns PEAs. The content of the presenter workshop has been relatively unchanged since our first intern workshop in 2012. The workshop has been well received by interns, and the majority of workshop participants felt more confident that they would be able to empower themselves on inpatient bedside rounds after completing the workshop.

While the workshop content has remained the same, we have modified the game to make it most useful for medical students and interns with little or no previous experience with PFCR as this is a limitation to the current version of the workshop. We have found that interns require much guidance on how to present during PFCR. So, we have provided the medical information in the vignettes to minimize any medical knowledge needed, thereby allowing participants to focus on the presenter behaviors. We have also found that the vignettes should be brief to maximize playing time. However, some vignettes were created to be lengthy, with the objective being to rapidly synthesize information, much as interns must do when caring for patients on the wards.

Although the workshop has been generally well received, we would like to incorporate more videos of presenters performing PEAs to provide real-time examples at our institution, as we believe demonstration would be powerful for incoming interns who may have little familiarity with PFCR. We plan to create a "day in the life of an intern on rounds" slide to help interns understand the timing and structure of how rounds fit into their day on the wards. Some incoming interns are likely more concerned about being at the correct place at the correct time and may not initially be focused on perfecting the PEAs during PFCR. We believe interns may be more open to learning about the PEAs if we briefly discuss rounding logistics at our institution before describing the PEAs and plan to incorporate a general overview of the presenter role during PFCR into our next workshop.

To reinforce PEA use after the workshop, we recommend direct observation using the SO-PEACH and providing formative feedback to the presenters. 10,17,18 We have found that presenters appreciate the feedback from direct observation as many novice presenters strive to improve their performance. Direct





observation and feedback also remind them to use PEAs and show the program's commitment to PEAs during PFCR.

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Prior Presentations

Vepraskas S, Lauck S, Hadjiev J, et al. Validity of patient- and family-centered rounds tool in rating presenter empowerment actions of medical students and interns. Poster presented at: Pediatric Hospital Medicine Conference; July 20-23, 2017; Nashville, TN.

Ethical Approval

The Medical College of Wisconsin's Institutional Review Board approved this study.

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