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The Interprofessional Teaching Observation Program: A Faculty Development Workshop on Peer Feedback of Interprofessional Teaching

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Abstract

Introduction: Faculty development focused on interprofessional education (IPE) is essential to any IPE initiative aiming to produce a collaborative practice-ready workforce. Many faculty have not received IPE in their own training and struggle with interprofessional teaching. **Methods:** To train faculty to conduct a peer-teaching observation and provide feedback focused on interprofessional teaching, we created a 3-hour didactic and skills practice workshop. The didactic portion considered ways interprofessional teaching differed from uniprofessional teaching, discussed elements of effective feedback, and reviewed the critical steps of a peer-teaching observation. In the skills practice portion, participants watched videos of different teaching scenarios and role-played as a peer observer providing feedback to the instructor in the videos. Participants completed a pre/post self-assessment and workshop evaluation form. **Results:** Eighteen faculty from four professions (dentistry, medicine, nursing, and pharmacy) participated in the workshop from 2020 to 2021. On a 5-point scale (1 = *poor*, 5 = *excellent*), participants rated the overall workshop quality 4.9 and the likelihood of making a change in their teaching/professional practice 4.8. Workshop participants' self-reported ability to provide feedback to a peer on their interprofessional teaching improved after workshop participation (preworkshop $M = 2.9$, postworkshop $M = 3.8$, $p < .01$). **Discussion:** This IPE-focused faculty development workshop allows participants to practice skills and share their own interprofessional teaching insights and challenges. The workshop is adaptable for different professions and settings and for in-person or online implementation. It also can be integrated into an existing program or utilized as a stand-alone workshop.

Keywords

Peer Teaching, Faculty Development, Feedback, Interprofessional Education

Educational Objectives

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

1. Describe the elements of effective feedback.
2. Discuss the potential benefits and challenges of peer observation of interprofessional teaching.
3. Describe four critical steps of peer observation of teaching.
4. Observe an interprofessional teaching session and compose feedback for a peer instructor.
5. Discuss feedback effectively with a peer instructor.

Introduction

Interprofessional education (IPE) is a primary means of creating a collaborative practice-ready workforce, as underscored by multiple Institute of Medicine reports recommending the training of all health care workers in teamwork to increase health care safety and quality.¹ Accordingly, IPE is promoted by both government and private organizations, including the Health Resources and Services Administration, the Institute of Medicine, and the Joint Commission on Accreditation of Healthcare Organizations. Professional education accrediting bodies have also embraced IPE; for example, the Liaison Committee on Medical Education and the Accreditation Council for Graduate Medical Education have adopted standards that require preparing learners to function collaboratively in health care teams. Similar standards also apply for dentistry, nursing, pharmacy, and physical therapy, among other health professions.² In 2010, a collaborative of six national associations of health professions identified interprofessional competency domains as a means of providing a framework to move IPE

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forward. This framework was updated in 2016, partly to organize competencies under the single domain of interprofessional collaboration.^{3,4}

A cadre of trained faculty is essential to build capacity to meet the needs of emerging programs in response to accreditation, competency requirements, and social expectations. IPE-focused faculty development is therefore a critical part of growing and sustaining initiatives in interprofessional education and practice (IPE/P)—particularly since many faculty have received little, if any, IPE instruction themselves.⁵ Faculty have misconceptions about and self-reported low knowledge of IPE/P and, as a result, struggle with how to facilitate interprofessional groups of students.⁶⁻⁸ The directors of one faculty development program in which participants had experience in clinical teaching but not interprofessional teaching discovered that general facilitation skills did not translate to effective interprofessional facilitation.⁹ IPE-focused faculty development programs therefore have some distinctions from uniprofessional programs, as they highly emphasize roles and role modeling; a valuing of diversity, reflection, and group process; and knowledge, skills, and attitudes towards IPE.^{10,11} Reviews of these programs report scarce IPE-focused faculty development programs in the literature and call for more IPE teaching strategies and resources.¹¹

We have developed an interprofessional teaching observation program (iTOP) to help address this need. It is the first of its kind to our knowledge, as none of the published programs reviewed report a peer-teaching observation component.^{10,11} Faculty are increasingly open to peer observations of their teaching, with broad outcomes ranging from teachers' increased confidence and behavior change to culture change and promotion of an educator community.¹² In alignment with lessons learned from IPE-focused faculty development programs, iTOP aims to reinforce conceptual clarity of the principles of IPE/P through collaborative learning, role modeling, reflection, and peer mentoring.⁵ Participants in iTOP request a session in which a trained observer will observe their interprofessional teaching in real time and provide feedback. Here, we describe a workshop to train faculty to conduct a peer-teaching observation focused on interprofessional teaching, then discuss successes and challenges through formative feedback. Observer training is essential to ensure feedback effectiveness, as well as credibility and, hence, uptake of the feedback provided.¹² To date, there are no other IPE-focused peer observation–related faculty development resources in *MedEdPORTAL*.

Methods

Curricular Context

We created a 3-hour workshop to train faculty how to observe peer interprofessional teaching and effectively provide feedback. Faculty completing this workshop were qualified to serve as observers in our institution's iTOP program. Participants were recruited via electronic mailing lists of faculty who teach in our campus-wide interprofessional core curriculum, as well as through school-specific newsletters and electronic mailing lists. No prerequisite knowledge was required of workshop participants. Two facilitators experienced in IPE and faculty development cofacilitated each workshop. We conducted this workshop four times, roughly twice per year, from 2020 to 2021. We increased the workshop's length from 2 to 3 hours in response to participant feedback requesting more time for review and discussion of videos. In the context of the COVID-19 pandemic, we successfully transitioned the workshop to an online format. The workshop was coproduced by the University of California, San Francisco (UCSF) Center for Faculty Educators and the UCSF Program for Interprofessional Practice and Education (PIPE). PIPE, via five committees, implemented campus-wide curricula for learners, as well as several IPE-related faculty development programs: iTOP, an IPE teaching certificate workshop series, and just-in-time faculty development sessions immediately prior to our core curricular sessions.

Implementation

A facilitator guide provided detailed instructions for workshop implementation (Appendix A). The physical setup required audiovisual equipment to display PowerPoint slides and videos. If the workshop was given in person, tables would facilitate smaller group discussions but were not essential. In an online synchronous format, breakout rooms facilitated smaller group discussions. We posted all workshop materials on an institutional workshop dashboard and asked participants to bring their laptops to access these materials during the session.

The workshop time line is detailed in Appendix A. We began by displaying the PowerPoint slide deck (Appendix B) and offering introductions and a brief orientation to the workshop. Participants then completed a preworkshop self-assessment of their feedback skills on a 5-point Likert scale (1 = *poor*, 5 = *excellent*; Appendix C). We asked participants to privately reflect on a time when they had received feedback on their teaching: What made that experience useful or not? Was the feedback general or focused, with specific suggestions? How could the feedback have been more useful? We invited the group's input on the benefits, challenges, and outcomes of peer feedback on teaching. We

also considered ways in which interprofessional teaching was different from uniprofessional teaching and how diversity, equity, and inclusion intersected with interprofessional teaching. This didactic portion of the workshop concluded by reviewing the critical steps of a peer observation and of the iTOP program.

We then began the practice portion of the workshop. We had created six videos for this workshop: three simulated teaching scenarios—hospital ward, clinic, and classroom (Appendices D, F, and H)—and three companion videos (Appendices E, G, and I) of an observer discussing feedback with the instructor in each scenario. Appendix J provided examples of both positive and less desirable strategies in each video specific to interprofessional teaching. We asked participants to vote on which two scenarios they would like to view during the workshop, as there was time for only two in a 3-hour session. We briefly reviewed the interprofessional teaching observation form (Appendix K), which participants could use to structure and record their observations. We had developed this observation form based on a literature review and best-practice resources.¹²⁻¹⁵ Participants watched the first video as a large group while jotting down notes on their observation form. We then paired participants in a role-play activity: One played the instructor in the video, and the other played a peer observer who discussed feedback. When the role-play concluded, the pair debriefed the content and process of giving and receiving feedback. All pairs then reconvened as a large group, and we watched the teaching scenario’s companion video of an observer discussing feedback with the instructor. We reflected as a large group on the feedback video, including similarities and differences between that video and participants’ role-plays. Appendix J could be utilized as additional discussion points for reflection if needed. We repeated this process with a second simulated teaching scenario and its companion feedback video. We concluded the workshop by soliciting best practices from the group for interprofessional peer-teaching observations and aligning those with best practices in the literature.

Evaluation Strategy

Having already completed a preworkshop self-assessment of their feedback skills (Appendix C), participants went on to fill out a postworkshop self-assessment (Appendix L) and a workshop evaluation (Appendix M) at the session’s conclusion. Paired *t* tests assessed change in self-reported pre/post skill assessments. The workshop evaluation form was a standard form utilized for all faculty development activities provided through the UCSF Center for Faculty Educators. The evaluation asked participants to rate on a 5-point Likert scale (1 = *poor*, 5 = *excellent*) the workshop’s organization, clarity, usefulness, and quality of teaching and their own likelihood of making a change in teaching/professional

practice. Participants were also asked to provide narrative comments on how they intended to change their teaching practices as a result of the workshop, valuable aspects of the workshop, and suggestions for improvement. Utilizing a general inductive approach, all open-ended comments were analyzed by author Maria Wamsley to identify common themes, which were verified by a second author (Josette Rivera).

Results

Participant Characteristics and Satisfaction

Eighteen faculty from four professions—dentistry (*n* = 2), medicine (*n* = 7), nursing (*n* = 4), and pharmacy (*n* = 5)—participated in the iTOP trainings from 2020 to 2021. The initial, or pilot, run of the workshop occurred in person (*n* = 3), with subsequent workshops offered only online due to the COVID-19 pandemic (*n* = 15). Fourteen faculty participated in a 2-hour workshop, and four participated in a 3-hour version. Based on participant feedback from the 2-hour version, the workshop was lengthened to allow for use of the companion videos demonstrating the peer feedback session for each teaching scenario. The workshops were highly rated by participants, with the overall quality of the workshop rated as 4.9 and the likelihood of making a change in teaching/professional practice rated as 4.8 (see Table). There were no significant differences in participant ratings between the in-person and online synchronous workshops or between the 2-hour and 3-hour versions. Participants commented that the most valuable aspects of the workshop were the practice observing teaching and providing feedback (*n* = 10), the videos used in the workshop (*n* = 2), the interactions with and learning from other participants (*n* = 7), and the strategies and structure for giving feedback (*n* = 2). Several participants in the online workshops commented that having the workshop online enabled them to participate.

Participant Learning, Behavior, and Impact

Workshop participants’ self-reported ability to provide feedback to a peer on their interprofessional teaching improved after

Table. Interprofessional Teaching Observation Program Training Workshop Evaluation Results (*N* = 18)

Item ^a	<i>M</i>
Advance communication	4.9
Clarity of objectives	4.9
Session organization	4.9
Usefulness of materials (slides, handouts, etc.)	4.8
Quality of instructor teaching	5.0
Overall quality of session	4.9
Likelihood of making a change in teaching/professional practice	4.8

^aRated on a 5-point scale (1 = *poor*, 5 = *excellent*).

workshop participation (preworkshop $M = 2.9$, postworkshop $M = 3.8$, $p < .01$). Fifteen faculty who participated in the workshop agreed to be observers for iTOP, demonstrating their comfort in providing peer observation and feedback on interprofessional teaching after workshop participation. Seven faculty went on to observe and provide feedback to a total of 10 faculty as part of iTOP. Faculty who were observed and received feedback from trained workshop participants completed an online survey of the experience. All agreed or strongly agreed that they would recommend iTOP participation to a colleague, suggesting that the feedback they received from the trained observers was useful (M. Wamsley, MD, unpublished data, August 2021).

Discussion

We developed a workshop to train faculty to conduct a peer-teaching observation and provide feedback focused on interprofessional teaching. The highly engaging approaches of utilizing videos of different teaching scenarios and role-plays enabled participants to practice related skills. Ensuing discussions also allowed participants to share their own interprofessional teaching insights and challenges as they reflected together on the videos, fostering a shared sense of community. Participants highly rated their likelihood of changing their own teaching as a result of this workshop, and their pre/post self-assessed ability to provide feedback increased. All faculty who had been observed by workshop participants as part of the iTOP program would recommend an iTOP observation to colleagues. As this workshop is highly adaptable for different professions and settings, as well as for in-person or online implementation, it serves as a resource to address the well-established need for IPE-related faculty development.

Reflections and Lessons Learned

We have made several changes to the workshop since its first implementation. We initially ran a 2-hour workshop in recognition of busy faculty schedules; to accomplish, this we showed only one scenario's companion video of an observer discussing feedback with the instructor. Participants, however, commented both during the session and in their evaluations that they would like to watch the companion videos of both teaching scenarios. They also commented that a 3-hour workshop was justified to allow for both this and more time for discussion. We therefore increased the workshop length to 3 hours and have observed participants learning with and from each other when given more time to share their observations and personal teaching challenges. Due to the COVID-19

pandemic, we implemented the workshop virtually, utilizing breakout rooms for the role-plays, and participant evaluations were not significantly different from in-person workshop evaluations.

We here offer some guidance regarding the skills practice portion of the workshop. During the session, it is important to allow participants a choice of which two out of three teaching scenarios to watch, as they may teach solely, or have challenges mostly, in one type of scenario over another. Additionally, the observation form does not need to be completely filled out; it is simply a tool to help guide and structure observations and feedback.

Finally, although the companion video is intended to model how an experienced observer might provide effective feedback, we have noted that some participants do not always agree with how the observer gives feedback. Invite participants' feedback on the feedback, and inquire how they might approach giving feedback differently.

Limitations

This workshop requires facilitators with strong facilitation skills and some knowledge of the literature on peer feedback and interprofessional collaboration competencies. Also, the video scenario settings (classroom, outpatient clinic, and hospital ward) may not apply to faculty who teach in other settings. However, each video intends to capture common IPE teaching challenges that can occur in any setting. A limitation of the evaluation plan is that it relies on pre/post self-assessment of feedback skills and does not include a performance-based assessment of skill achievement. However, we have proxy performance-based assessments via survey feedback of faculty who were observed by workshop participants as part of the iTOP program that indicate the observer feedback was useful.

Future Directions

We intend to scale the iTOP program by strongly recommending that all new facilitators teaching our core IPE curriculum be observed by faculty trained by this workshop. Other national or global institutions could develop additional videos of other teaching scenarios that reflect geographic and/or cultural differences. Finally, if institutions cannot or do not wish to establish a local peer interprofessional teaching observation program such as iTOP, this workshop can be used as an IPE faculty development resource that stands alone or is integrated into an existing program.

Appendices

- A. Facilitator Guide and Workshop Time Line.docx
- B. iTOP Training Workshop Slides.pptx
- C. Preworkshop Self-Assessment.docx
- D. Classroom Scenario Video.mp4
- E. Classroom Feedback Video.mp4
- F. Hospital Ward Scenario Video.mp4
- G. Hospital Ward Feedback Video.mp4
- H. Clinic Scenario Video.mp4
- I. Clinic Feedback Video.mp4
- J. Video Examples of Interprofessional Teaching Points.docx
- K. Interprofessional Teaching Observation Form.docx
- L. Postworkshop Self-Assessment.docx
- M. Workshop Evaluation.docx

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

References

1. Mitchell P, Wynia M, Golden R, et al. *Core Principles & Values of Effective Team-Based Health Care*. Institute of Medicine; 2012. <https://doi.org/10.31478/201210c>
2. Rivera JA, Reeves S, Aronson L. The interprofessional team. In: Williams BA, Chang A, eds. *Current Diagnosis and Treatment: Geriatrics*. 2nd ed. McGraw Hill; 2014:19-23.
3. Interprofessional Education Collaborative Expert Panel. *Core Competencies for Interprofessional Collaborative Practice: Report of an Expert Panel*. Interprofessional Education Collaborative; 2011.
4. Interprofessional Education Collaborative. *Core Competencies for Interprofessional Collaborative Practice: 2016 Update*. Interprofessional Education Collaborative; 2016.
5. Hall LW, Zierler BK. Interprofessional Education and Practice Guide no. 1: developing faculty to effectively facilitate interprofessional education. *J Interprof Care*. 2015;29(1):3-7. <https://doi.org/10.3109/13561820.2014.937483>
6. Hinderer KA, Klima D, Truong HA, et al. Faculty perceptions, knowledge, and attitudes toward interprofessional education and practice. *J Allied Health*. 2016;45(1):e1-e4.
7. Chen AK, Rivera J, Rotter N, Green E, Kools S. Interprofessional education in the clinical setting: a qualitative look at the preceptor's perspective in training advanced practice nursing students. *Nurse Educ Pract*. 2016;21:29-36. <https://doi.org/10.1016/j.nepr.2016.09.006>
8. Hammick M, Freeth D, Koppel I, Reeves S, Barr H. A best evidence systematic review of interprofessional education: BEME Guide no. 9. *Med Teach*. 2007;29(8):735-751. <https://doi.org/10.1080/01421590701682576>
9. Egan-Lee E, Baker L, Tobin S, Hollenberg E, Dematteo D, Reeves S. Neophyte facilitator experiences of interprofessional education: implications for faculty development. *J Interprof Care*. 2011;25(5):333-338. <https://doi.org/10.3109/13561820.2011.562331>
10. Watkins KD. Faculty development to support interprofessional education in healthcare professions: a realist synthesis. *J Interprof Care*. 2016;30(6):695-701. <https://doi.org/10.1080/13561820.2016.1209466>
11. Ratka A, Zorek JA, Meyer SM. Overview of faculty development programs for interprofessional education. *Am J Pharm Educ*. 2017;81(5):96. <https://doi.org/10.5688/ajpe81596>
12. Newman LR, Roberts DH, Frankl SE. Twelve tips for providing feedback to peers about their teaching. *Med Teach*. 2019;41(10):1118-1123. <https://doi.org/10.1080/0142159X.2018.1521953>
13. Sargeant J, Hill T, Breau L. Development and testing of a scale to assess interprofessional education (IPE) facilitation skills. *J Contin Educ Health Prof*. 2010;30(2):126-131. <https://doi.org/10.1002/chp.20069>

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Reported as not applicable.

14. Howkins E, Bray J, eds. *Preparing for Interprofessional Teaching: Theory and Practice*. Radcliffe Publishing; 2008.

<https://nexusipe.org/engaging/learning-system/preceptors-nexus-toolkit>

15. 10 tips for interprofessional facilitation. In: Preceptors in the Nexus Toolkit, Facilitating Interprofessional Discussions: Best Practices module. National Center for Interprofessional Practice and Education. September 1, 2015. Accessed July 9, 2021.

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