

Centre for Medical Education  
Institute of Health Sciences Education

# Learning from experience: a fresh look at an old idea

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# How do you see learning?

Sfard's metaphor (1998)

Learning-as-acquisition



Learning-as-participation



# Old idea

Dewey (1938)

Kolb's (1975)

Learning Cycle...

Significant model

Coffield (2000)

Authenticity



# Fresh look...

Work-based learning – socio-cultural theories

How context influences learning??

Quality?

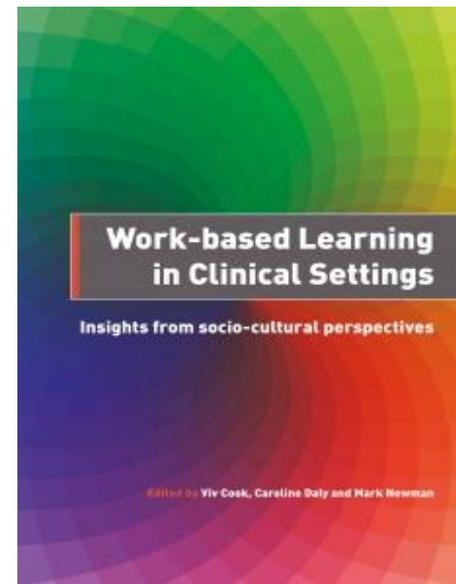
“Establishing and maintaining an effective environment for learning”

Domain 2 London Deanery Professional Development Framework

# My work-based learning

Researching Clinical  
Learning and Practice  
network

CETL Work-based Learning  
for Education  
Professionals  
Institute of Education  
University of London



# Thinking about the clinical firm



## Community of Practice

(Lave and Wenger, 1991)

We cannot learn without belonging...

Site – outpatient clinics

integration, 'talk'

(Morris, 2012)

London Deanery e-module – practical guidance

invitational qualities

making learning opportunities explicit

thinking aloud



Activity Theory

Communications Skills

Medical school to ward

Problems of **transfer** and dissonance

*“that when they took a patient-centred approach in their relationships with patients, their senior colleagues communicated to them that they were working too slowly”*

(Brown, Acad Med, 2010)

Developmental transfer

# Semiotics – meaning making

(Bezemer et al., 2011, 2012)



Site: Operating theatre

Multi-modal environment

Speech, gesture, gaze, imitation

Greater awareness and recognition of learning

Embodiment

# Thinking about the learning of faculty

How does context affect the learning of faculty?

What and how are colleagues learning about teaching through their everyday experience?

Do some sites afford more opportunities?

Agenda?

*“faculty development can occur in a variety of contexts and settings, and often begins with informal learning in the workplace*

...Steinert (2010)

# Eraut



## Research tool

8 domains

Task Performance, Role Performance,  
Personal Development, Academic Knowledge and Skills  
Teamwork, Decision making and Problem solving, Judgement  
Awareness and Understanding

53 workplace learning trajectories (2005)

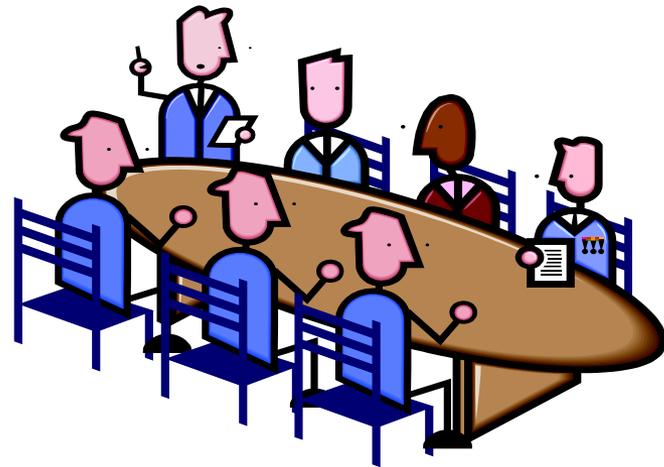
Tasks we are allocated

Challenge, expectation,  
feedback, make sense



People we encounter

Collaborate with, observe,  
ask Qs, reflect



# Research Design

- Novice teachers < 3 years experience

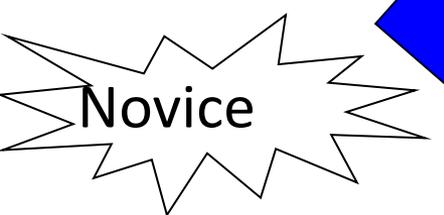
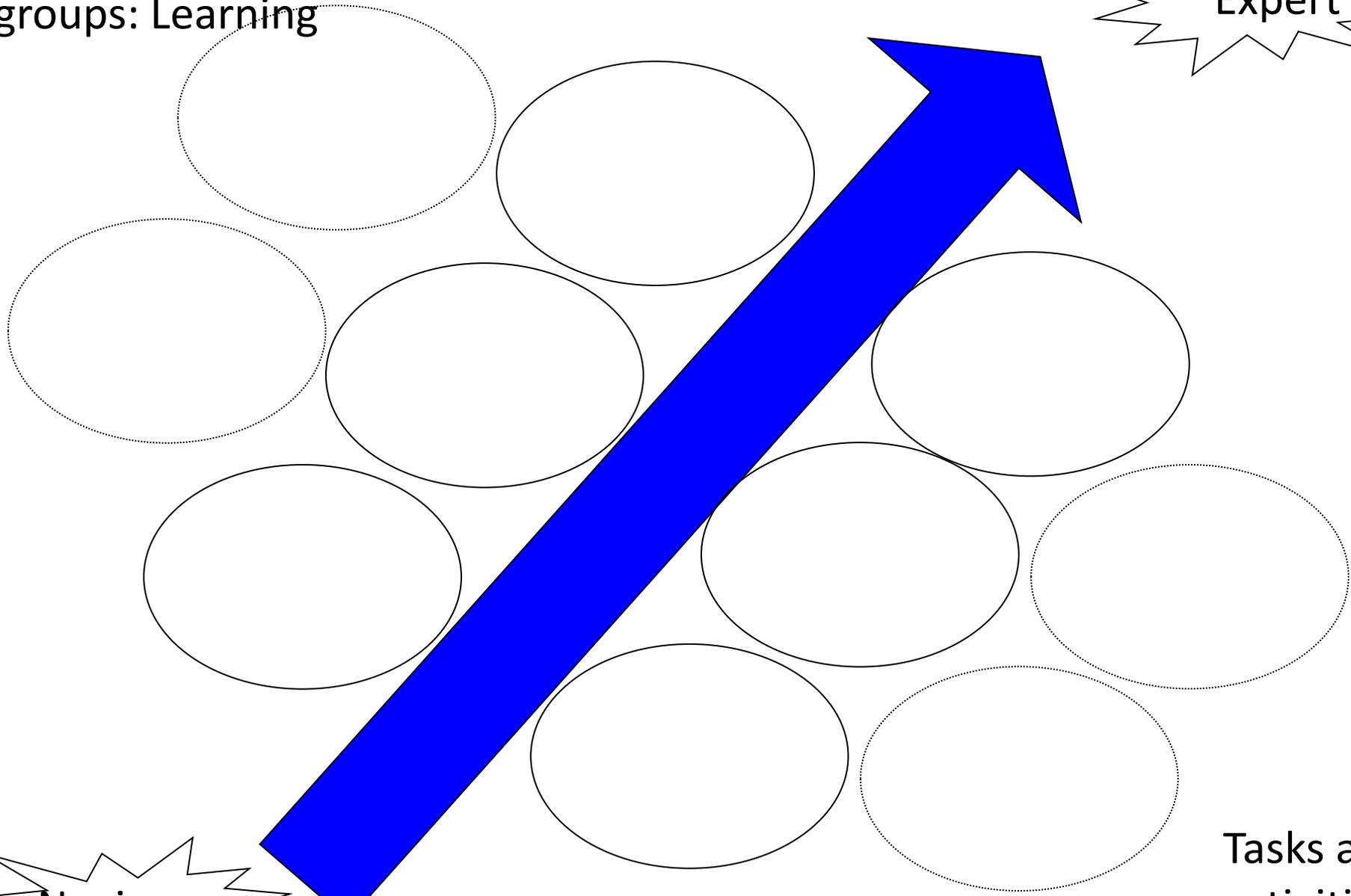
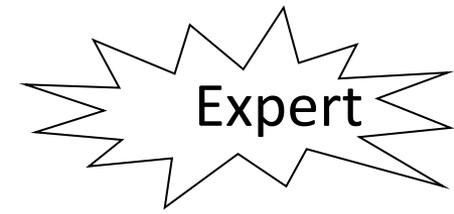
12 staff

Medical School, Hospitals, General Practice  
[Family Doctors]

(Lecturers/researchers, FY docs, GP tutors)

- In-depth, semi-structured interviews
- Interviewed twice over 4 months
- Tacitness - map of their workplace

People and groups: Learning



Tasks and activities:  
Learning

# Final Analysis

Thematically analysed all data from interviews and maps – ‘what’ and ‘how’

Eraut’s (2004) typology of ‘what’ is learnt

14 key themes

# Learning through work activity

(adapted from: Cook V Med Teacher, 39(12) 2009)

## Task Performance

- Getting the level right
- Questioning techniques

## Role Performance

- Versatility and Spontaneity
- The 'Art' of the good teacher

## Personal Development

- Developing confidence
- Disposition to keep updated

# Confidence

*“How can I leave? (laughs) Can I invent an emergency or something...really, really nervous and my heart would be almost pounding out of my chest and I did, I could feel my face reddening and it was obvious that I was nervous...” Int 1 Lect*

*“Pushing through that was great”...Int 1 Lect*

*(from Cook V Med Teacher 31(12) 2009)*

*“I mean you’re always worried that somebody is going to come up with a killer question ...certainly I’ve got more confident, just you’ve had some tough audiences” Int 3 Lect*

# How...

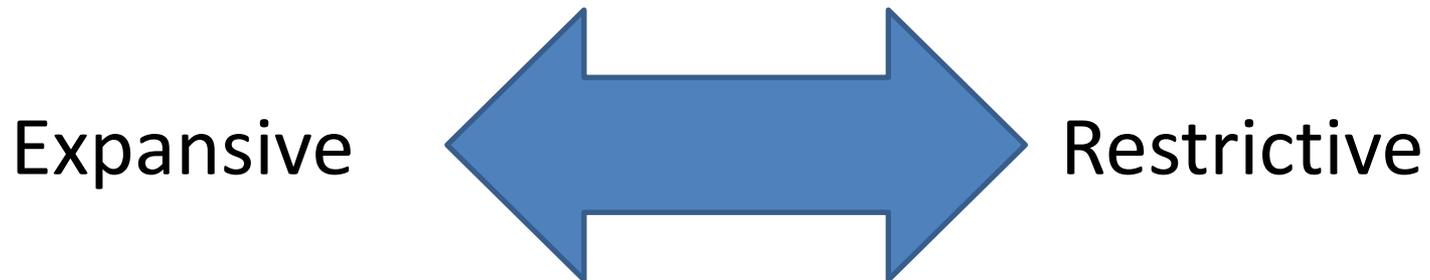
*Observing...skilful questioning  
technical slickness  
bringing 'subjects to life'  
poor exemplars*

*They senior doctors feel they have to do it  
(teaching)...they're not really getting anything out  
of it and the student's just kind of sitting there  
hearing about it" (Case 5: Int 5b)*

# Expansive and Restrictive Framework

**Evans et al (2006)**

Working environments can be ....



# Some indicators of difference

GPs and Hospital Doctors – feedback, co-tutoring,  
teaching

Less expansive environments

*less participation-less challenge*

*“Most of the time I would like to do more teaching but it is difficult – you need to put your self forward much more to get teaching” Int 11b GP*

# Follow up study

**Cook V.** (2009 ) 'Mapping the work-based learning of novice teachers: charting some rich terrain', *Medical Teacher*. 31 (12), e608-e614

**British Medical Journal BMJ *on-line Learning***  
questionnaire

Oct 2010-April 2011

42 responses

Compare opportunities for workplace learning  
across clinical settings

# How would you describe your opportunities to engage in each of the following activities?

	Insufficient opportunities.....
71.1%	Be observed teaching
67.6%	Observe others teaching
67.6%	Engage in activities beyond teaching such as assessment or curriculum development
66.7%	Co-tutor
44.7%	Practise teaching

# Maximising work-based learning

- Have the level of teaching skills and prior experience been identified and appropriate developmental activities matched and planned?
- Is current teaching experience sufficiently consistent and varied to allow for development?
- Are teaching tasks appropriately challenging so that they extend existing expertise?
- Are opportunities maximised for co-tutoring, observation of and being observed by experienced colleagues?
- Is feedback on teaching performance being provided?
- Are opportunities available for external networking e.g. attending teaching conferences

# Community of Practice...

- “if you are able to immerse yourself in a group, it gives you so much...its being able to look at things critically with **education glasses** on..the same way you would look at a patient with, you know, **diagnosis glasses** on ...its a different approach, a different way of looking at things...”

Steinert (2010)

# A few final thoughts...

At a juncture:  
Learning through experience



Unsettling

Broader and deeper understanding

Gives new ideas for enhancing learning

Recontextualisation

Affordances

**Thank you!**

# References

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**Websites:**

CETL in work-based learning

<http://www.wlecentre.ac.uk>

London Deanery e-module on facilitating work-based learning

<http://www.faculty.londondeanery.ac.uk/e-learning/facilitating-learning-in-the-workplace>

**Book:**

Cook V, Daly C Newman M (eds) (2012) Work-based learning in clinical settings: insights from socio-cultural perspectives

See Chapters 1, 2, 5 7

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