**PEER OBSERVATION OF SMALL GROUP FACILITATION**

Small group learning occurs in a variety of formats throughout medical education: problem-based learning (PBL) tutorials, conferences, advisory groups, laboratories, and team-based learning. In general, small group teaching provides an opportunity for active learning, especially through discussion or hands-on experiences. While tasks, and even group size, vary among groups, students have an opportunity to ask questions, teach one another, explore a range of ideas, pose hypotheses, express their opinions, get to know their faculty as well as one another, and partner with others to set the learning agenda. At the same time, faculty have an opportunity to observe what their students know, get to know their students as people and future colleagues, tailor their lessons to each group’s needs and interests, and feel the excitement of new perspectives with each new group.

Nonetheless, small group teaching is challenging. A facilitator must juggle both learning objectives and group dynamics. So, while assuring that every student has an opportunity to participate and to be heard, s/he must also listen carefully to be sure students are fully understanding and learning new material. S/he must listen for the proper use of vocabulary (the language of the science of medicine) as well as critical thinking at every stage of learning – from intake of new information to application of knowledge to problem solving, hypothesis generation and creativity. This entails a proper balance of speaking and listening.

Furthermore, there are common problems that occur in any task-oriented small group: uneven participation (dominating by some, hanging back by others), tensions and struggles when the task is difficult; competitiveness for external validation; lack of preparation prior to meeting; lack of focus; excessive social interchange; etc.

When observing small group teaching, there is much to see and to comment upon. Therefore, it is useful to observe more than once and to use the first session to gain a general impression of how the group is working. If you have only one opportunity to observe, identify a focus for your observation in collaboration with the facilitator as s/he may have an idea of an existing problem amongst group members or may be struggling with some specific aspect of her/his own facilitation skills. Do not anticipate that everything that could happen will happen, or that you’ll be able to catch everything that is said or done. Given that change in teaching behaviors occurs slowly over time, providing honest, constructive and detailed feedback focused on one or two teaching strategies based on your first-hand observations is likely to be most useful to the facilitator

**Small Group Facilitation Observation Guide**

**Part 1. Environment and Interaction**

 **O=observed, NO=not observed**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group Facilitation Strategies** | **O** | **NO** | **Specific Examples/Comments** |
| *Fosters a safe learning environment:*Knows the studentsEncourages learner-to-learner interaction* social
* task-oriented

Listens attentivelyResponds respectfullyEngages all levels of learnersAssures that all students participateAddresses problems of group dynamics  when they occurProvides feedback to the groupAsks group for feedback on facilitation |  |  |  |

**Part 2. Higher Order Cognitive Strategies**

 **O=observed, NO=not observed**

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| --- | --- | --- | --- |
| **Group Facilitation Strategies** | **O** | **NO** | **Specific Examples/Comments** |
| *Assures in-depth, critical thinking and idea development that moves from lower to higher order cognitive skills (i.e., from information sharing to hypothesis generation, problem solving, & synthesis):*Asks open-ended questionsGives students enough time to respond Probes students’ reasoning (e.g., asks  why? suppose? what if?)Urges students to use multiple strategies to explore different aspects of the issues  (e.g., draw concept maps; draw  diagrams on the board; look up images or research via the web; manipulate or  create 3-D models)Urges all students to share their own  perspectives, theories, experiences |  |  |  |

**Part 3. Summary & Resolution to Assure Learning Basic Concepts**

 **O=observed, NO=not observed**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group Facilitation Strategies** | **O** | **NO** | **Specific Examples/Comments** |
| **Group management** |
| *Guides students toward goals and objectives:* Monitors students’ learning needs Checks students’ understanding Keeps the discussion on track |  |  |  |
| **Task performance**  |
| *Communicates expectations that students will:*Prepare for session (e.g., by reading, organizing material and/or working together)Share new information with the group Explain ideas clearly orally or on boardProvide evidence to support ideasRespect opposing opinions |  |  |  |
| *Provides information when appropriate:*Provides information gathered between classesIntegrates issues of clinical relevanceProvides relevant facts, definitions, evidence, readings  |  |  |  |
| **Resolution** |
| *Assures that a summary occurs:*Summarizes him/herselfAsks a student to summarize*Assures that the summary includes:*Take home pointsA learning agendaDistribution of labor among students *Encourages reflection:*Seeks feedback on the session Provides feedback on the sessionResolves problems in group dynamics |  |  |  |

**Small Group Facilitation Videotape**

Jeremy B. Richards, MD

Group Facilitator

Harvard Medical School Year II Students

Melissa Bellomy

Jonathan Lee

Daniel Martin

Afamefuna Nduaguba

Carolina Veronese

**A note to viewers:**

Students appearing in this video completed Year I at Harvard Medical School. Some roles they play (e.g., a quiet student) do not represent their own classroom behavior, but instead provide an opportunity for the facilitator to demonstrate teaching strategies. We are grateful to the students for their time and willingness to produce a video to train faculty to facilitate small groups. We are also grateful to Dr. Richards for his contribution to this project.

Dr. Richards and the medical students provided explicit, written consent for use of this video for educational purposes.

**Prelude to observation:**

You will observe several brief segments of a one-hour small group discussion in which rising Year II medical students explore topics of interest and review their knowledge of basic pathophysiology as they read the case of a man with weight loss. The case provides an opportunity for integrative thinking. The segments are taken from the beginning, middle and end of the discussion, and are followed by two feedback conversations, one between the facilitator and one student and the second between the facilitator and his coach.

We have provided an observation guide for each section of the video, as well as queries you may choose to ponder after your observation. Last, we have listed suggested strategies and responses HMS faculty offered during a workshop on small group facilitation.

**Part 1. Environment and Interaction**

**Small Group Facilitation Observation Guide**

 **O=observed, NO=not observed**

|  |  |  |  |
| --- | --- | --- | --- |
| **Group Facilitation Strategies** | **O** | **NO** | **Specific Examples/Comments** |
| *Fosters a safe learning environment:*Knows the studentsEncourages learner-to-learner interaction* social
* task-oriented

Listens attentivelyResponds respectfullyEngages all levels of learnersAssures that all students participateAddresses problems of group dynamics  when they occurProvides feedback to the groupAsks group for feedback on facilitation |  |  |  |

**Questions to guide discussion:**

1. How does this group feel to you? What do your impressions tell you about the learning environment?
2. How do you feel about the facilitator’s silence while the students brainstorm? What does this tell you about your own teaching style?
3. What did the facilitator do to assure inclusion of all 5 students in the discussion? What would you do?
4. Was the brainstorming worthwhile? Why?
5. What would you do differently?

**Colleagues’ responses to strategies modeled in the video:**

1. Body language can be used as a means of facilitating the group non-verbally. Note how Dr. Richards sweeps his arms wide, looking around the group, to draw in all members.
2. Careful listening while students explore ideas and interact with one another in the beginning of a discussion sets a positive tone, gives everyone a voice, and establishes a focus or agenda for the discussion.
3. A tutor’s early summary of points made during brainstorming honors each student’s contribution and reorganizes the group.