



Coaching 101

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Objectives

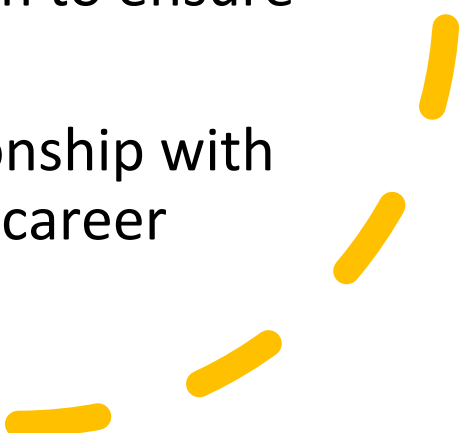
- describe the key components of the CBME coaching model
- recognise the utility of coaching principles in multiple educational roles
- integrate mentoring principles into concrete expectations of coaches in the University of Toronto Psychiatry PGME program
- identify resources to support you in your coaching role with residents

Coaching in the General Psychiatry Residency Program at U of T



Coaching in the General Psychiatry Residency Program at U of T

Goal: To help a resident become a competent clinician who is a self-directed, lifelong learner

- Longitudinal relationship; **“coaching over time”** from PGY1 to PGY5
 - Non-evaluative position; do not assess residents as a supervisor would
 - Supportive, encouraging and facilitative of improved clinical performance
 - Help the resident create a learning plan to ensure they succeed in their training
 - May also develop a mentorship relationship with residents to help provide guidance on career planning and wellness
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Coaches and the PCS



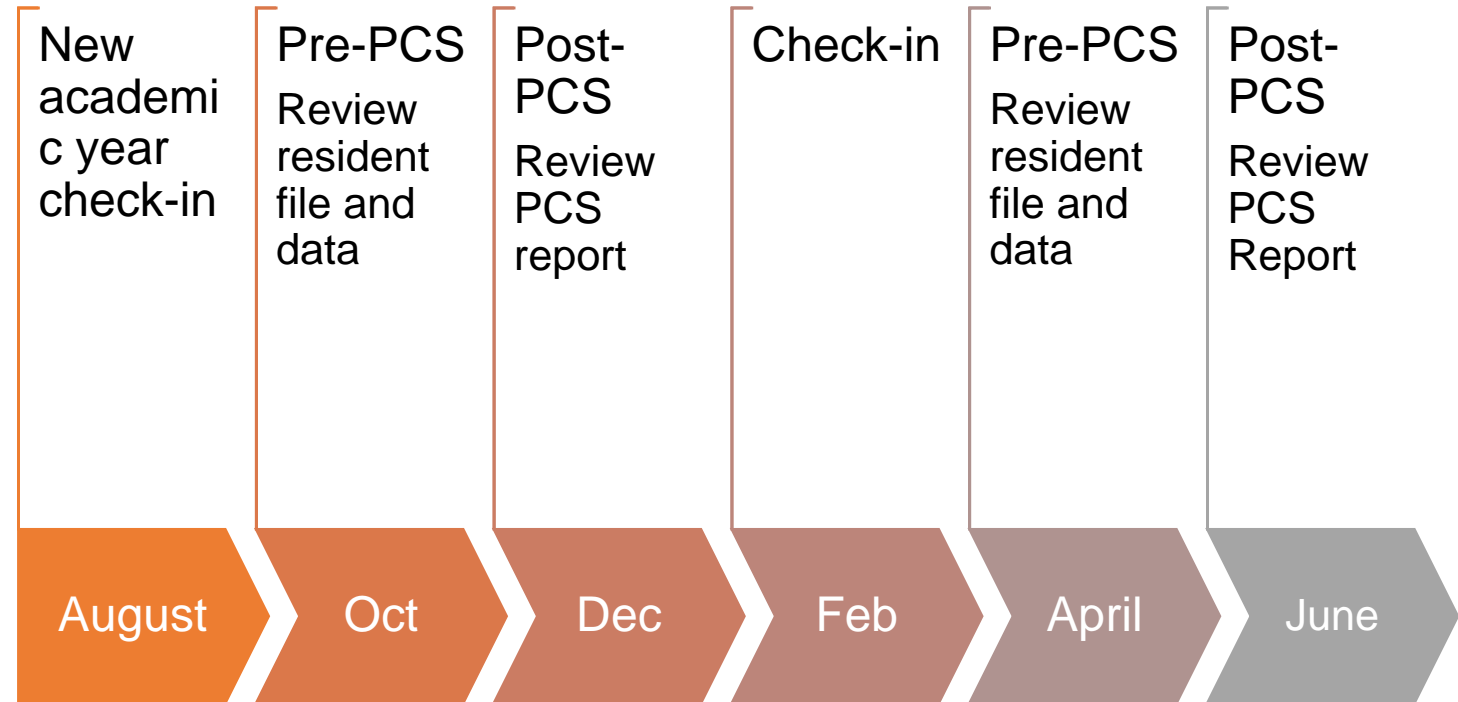
All coaches sit on the Psychiatry Competence Subcommittee (PCS)

Coaches

- Sit on the PCS meeting for their coachee's cohort
- Primary reviewer for 4-5 resident files
- Do not review their coachee's file for PCS
- Do not vote on their coachee's progression and promotion
- Advocate for their coachee
- Gain an in-depth understanding of what is needed for residents at that stage to progress and be promoted

Meeting Frequency

- Coaches and coachees generally meet every 2 months
- Frequency can be adjusted depending on the coachee's needs



Tasks and Responsibilities

- Encourage residents to be proactive in seeking direct observation by staff/residents/healthcare practitioners and receiving feedback to inform learning goals
- Review resident assessment data (e.g. ITAR/ITERS, OSCEs, exam results, EPAs, STACERs, presentations)
- Help residents to:
 - Reflect on clinical experiences and assessment data to inform learning needs
 - Develop learning plans to address these needs
 - Identify areas in which they are not receiving adequate direct observation and/or feedback and encourage them to seek this out
- Communicate with a coachee's supervisor as needed (feeding forward)
- Attend Resident Assessment and Support Committee (RASC) meetings as needed for their coachee

Coaching Session Checklist

https://www.psychiatry.utoronto.ca/sites/default/files/coaching_session_checklist_final_2021-2022.pdf

- Overall wellness check
- Rotation Plans/Rotation-Specific Educational Objectives
- Entrustable Professional Activities
- Rotation evaluation
- STACERs
- Grand Rounds
- PGCorEd Modules
- COPE
- Psychotherapy requirements
- Mentorship/Scholarship/Navigating Residency

The Bigger Picture

The Context of Coaching in Competency Based Education

Van Melle's Core Components of CBME

1. Outcomes competency framework
2. Sequenced progression of competence
3. Tailored learning experiences
4. Competency-focused instruction
5. Programmatic assessment

What is the PURPOSE of Residency Education?





Figure 2. Spectrum of skills acquisition (Dreyfus & Dreyfus 1980).

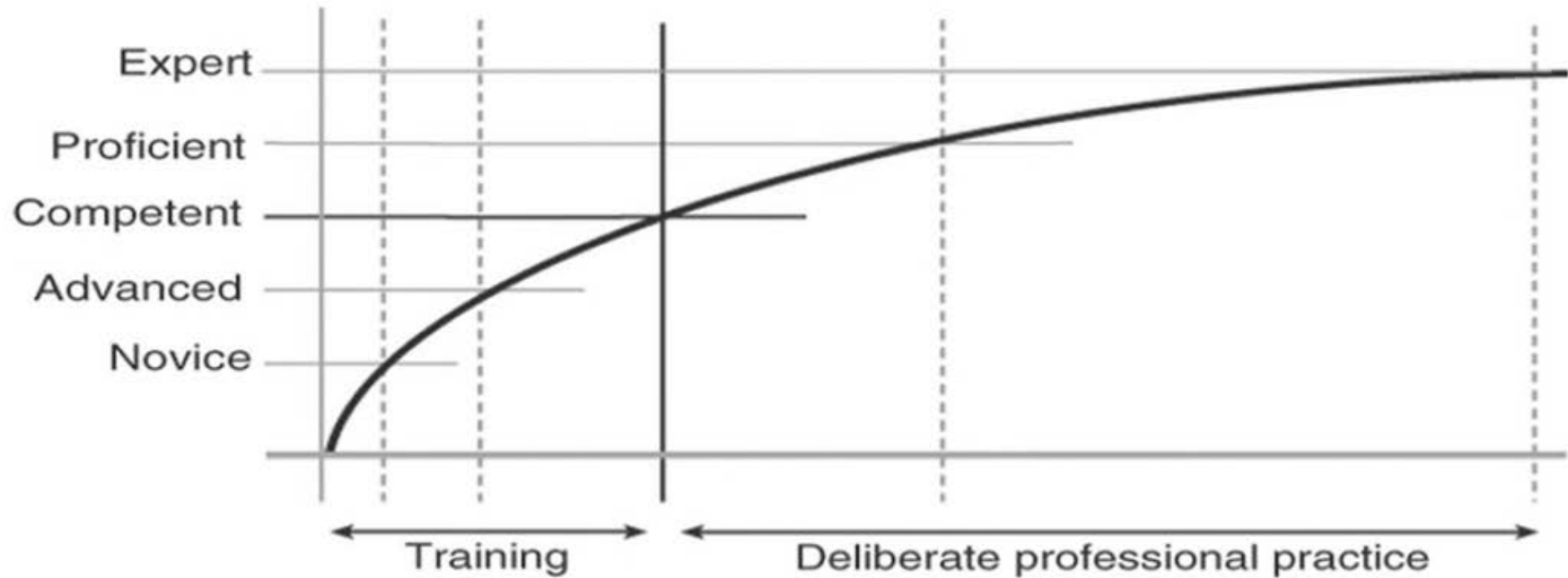


Figure 3. General curve of skills acquisition reproduced from ten Cate (2010).

Coaching

“... can help learners reflect on where their performance stands and how to improve.”

- Deiorio, N., 2016



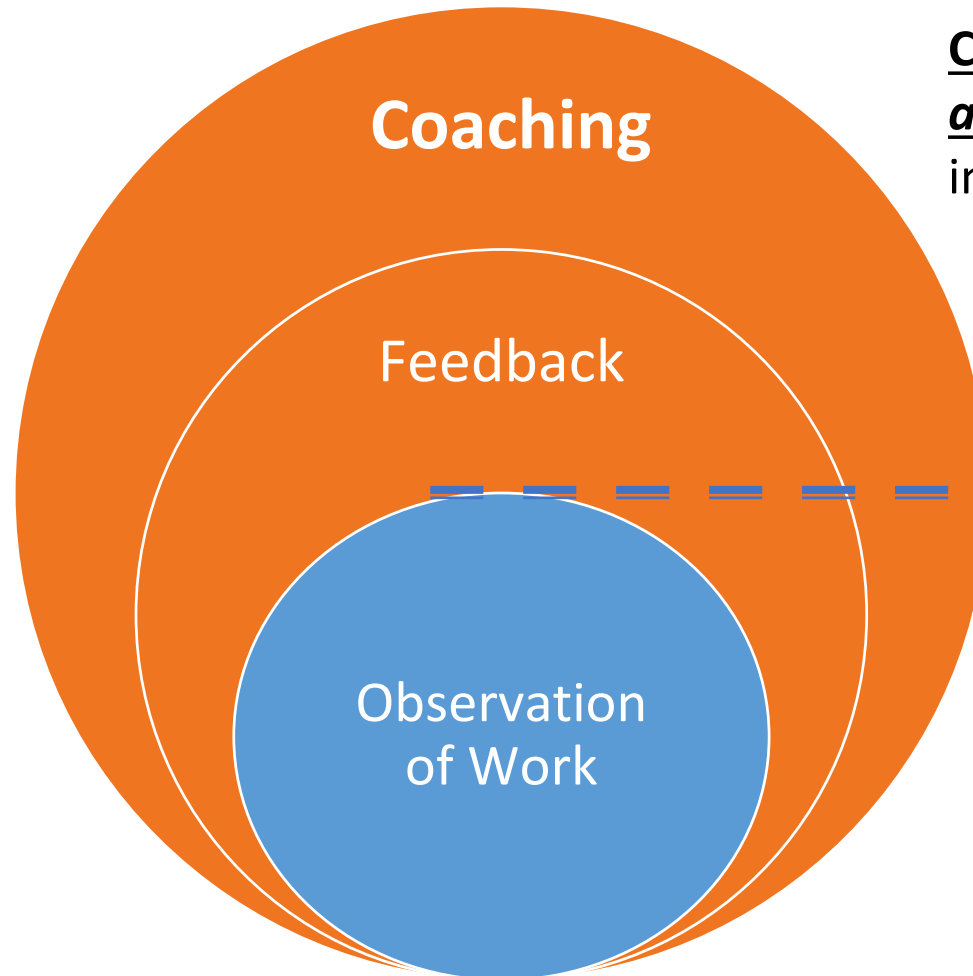
A coach's priority is to promote improvement



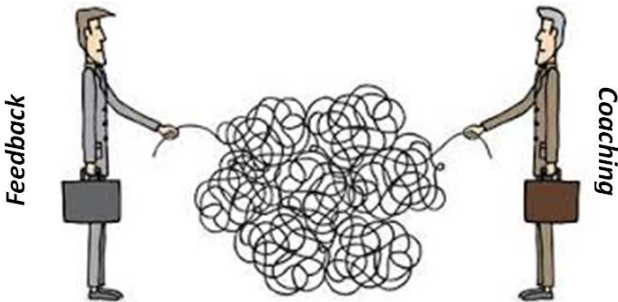
Feedback and Coaching

Feedback = **information** about what was observed compared to an expected standard

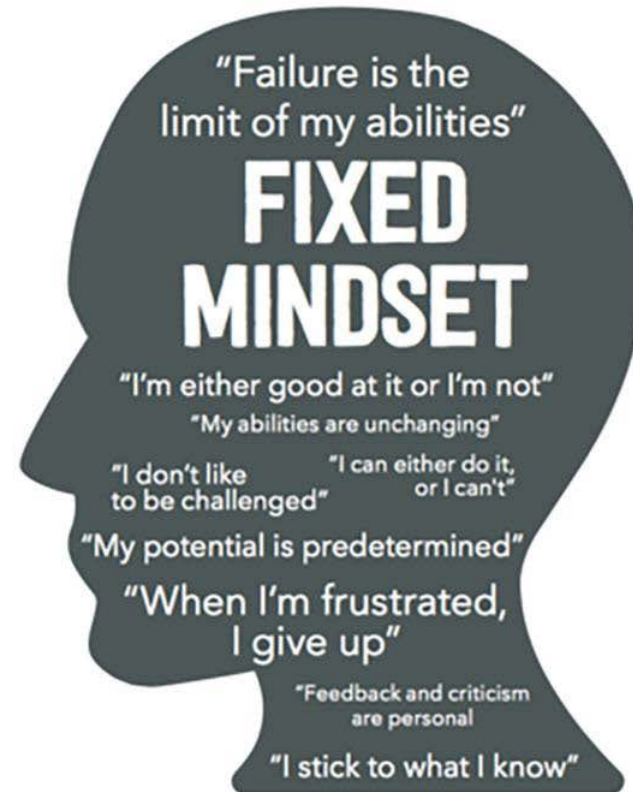
Coaching = feedback + **actionable steps** for improvement



Observer makes determination of quality of observed task



Fixed to Growth Mindsets



GROWTH MINDSET

KEY INGREDIENTS TO GROWTH

SKILLS ARE BUILT
YOU CAN LEARN
AND GROW

THE PROCESS
GETTING BETTER

USEFUL - LEADS
TO GROWTH

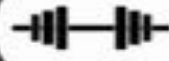
EMBRACE &
PERSEVERE - FRAME
AS AN OPPORTUNITY

USE THEM TO
LEARN

APPRECIATE &
USE IT

BELIEFS

FOCUS



SKILLS ARE BORN
YOU CAN'T LEARN
AND GROW

PERFORMANCE
OUTCOMES
NOT LOOKING BAD

NOT NECESSARY
NOT USEFUL

BACK DOWN &
AVOID - FRAME AS
A THREAT

HATE THEM
GET DISCOURAGED
AVOID THEM

NOT HELPFUL
GET DEFENSIVE
TAKE IT PERSONAL

FIXED MINDSET

CBD Coaching Model

CBD Coaching Model



Facilitating learning and development of a residents' competence

Contributors

Special thanks to the following individuals who contributed to the development of this module:

- Denyse Richardson, MD, MEd, FRCPC
- Carol Aschenbrenner, MD; Executive Coach
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- Marissa Bonyun, MD, MEd
- Rose Hatala, MD, MSc, FRCPC
- Shelley Ross, PhD
- Joan Sargeant, MEd, PhD
- Shirley Schipper, MD, CCFP, FCFP
- Chris Watling MD, MEd, PhD, FRCP(C)

Coaching in the Moment is...

- workplace-based, occurs in a clinical environment
- key instructional component of Workplace Based Learning
- part of normal learning activities
- timely and efficient
- low stakes and frequent
- guidance for improvement

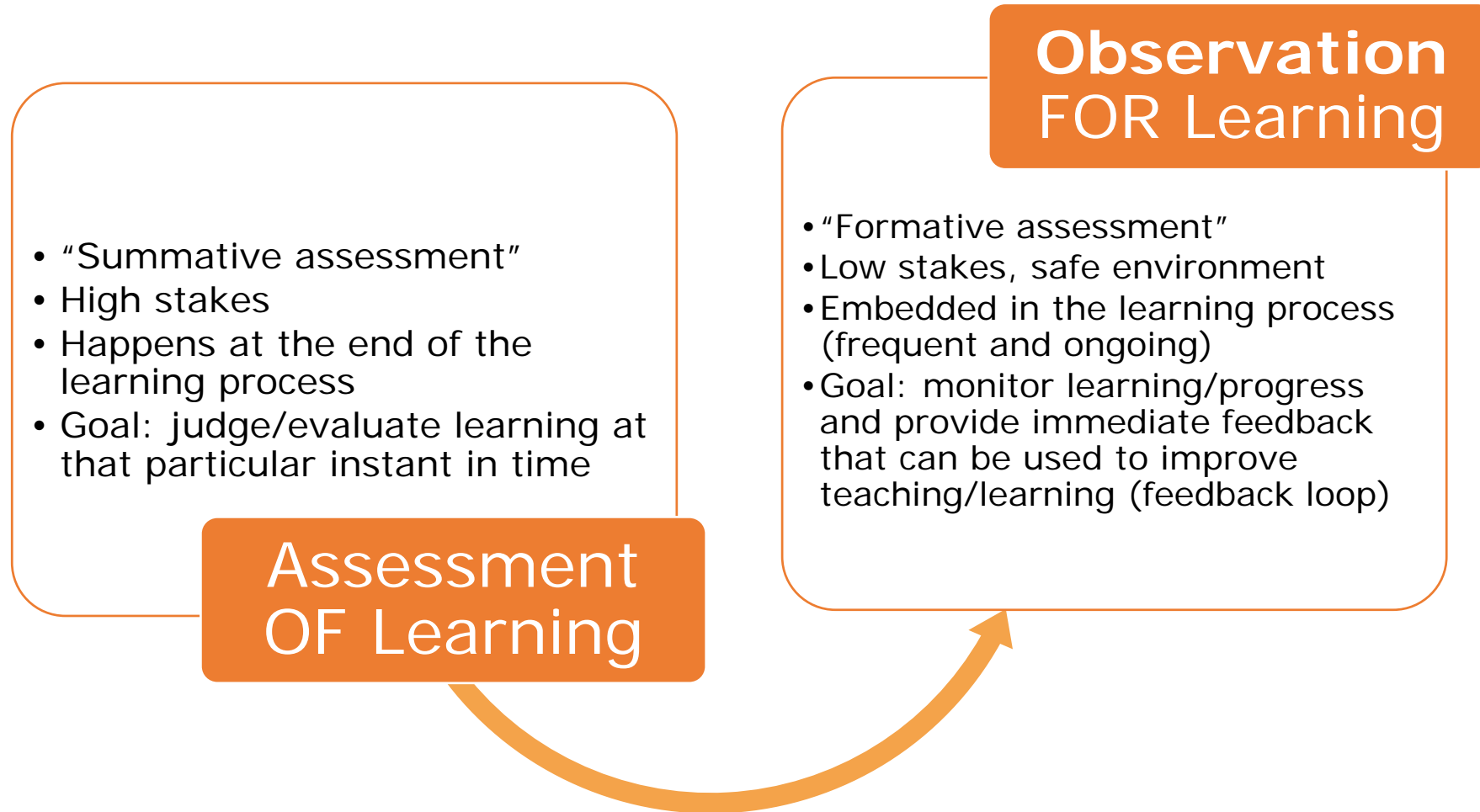


Multiple Observations



Caverzagie and Lobst

Paradigm Shift for CBE - Assessors to Learning Coaches



Coaching Over Time

- An educational partnership/alliance
- A **longitudinal** relationship between clinician and learner
- 2 Goals: a) performance progression over time
b) self regulated learning skill development



Coaching Defined

	Mentoring	Coaching	Teaching
Focus	Individual	Individual	Individual or Group
Goal	Advice and Guidance	Performance Enhancement	Knowledge Acquisition
Timing	Over time	In the Moment or Over time	In the Moment or Over time
Approach	Conversational	Collaborative	Directive

SUPERVISING, SPONSORING

Launer, 2014; Lovell, 2017

Case example

Your CBD Foundations Stage (PGY-2) resident has been challenged with completing EPA's (30% of requirement) STACERS (none so far) throughout the academic year and it is now February.

You are either their current primary supervisor or their coach.

What approach would you take as their current primary supervisor/coach?

What approach would you take as their "coach"?

Two roles for coaching in CBME

Supervisor as “*coach*”
Coach as “*coach*”

Roles of coach as “coach”

create a trusting supportive relationship
enable learning
reminders for meeting training requirements
wellness checks
enable networking
foster scholarship development
coach the resident to coach the supervisor

Coaching Checklist



Check out the coaching checklist sent out on 23/7/21

10 tips for coaching residents

At the beginning of a rotation, create a learning contract together

What is a learning contract?

An individual student negotiating with and entering into an informal agreement with, a supervisor to pursue a short or long term goals to achieve competencies

A means of establishing a mutual understanding between a student and the supervisor

A method of balancing the requirements of a curriculum with individualized learning and student autonomy

10 tips for coaching residents

#2 Review the rotation plan or rotation-specific educational objectives for their each rotation

10 tips for coaching residents

#3 How are you going to set up the opportunities for “coaching in the moment” and “coaching over time” during the rotation?

10 tips for coaching residents

#4 What has been the most effective methods for receiving feedback in the resident's experience? Is there an opportunity to share this with their supervisor?

10 tips for coaching residents

#5 Are you keeping track of all the requirements for each rotation?

- a. 1 EPA/week (1 q 2 weeks of LAE)
- b. Stacers (PGY-2- PGY-4)
- c. Grand Rounds
- d. PGCorEd Modules (PGY1-2 only)
- e. Psychotherapy requirements (PGY-2-PGY-5)
- f. COPE exam and results
- g. Are their ITERS/ITARs to be reviewed?

10 tips for coaching residents

#6. Are their areas for development that you can assist with (directly or through coaching the resident to coach their supervisor?)

10 tips for coaching residents

#7 How can you help the resident with networking for further learning, scholarship and teaching?

10 tips for coaching residents

#8 Coaching for life balance



10 tips for coaching residents

#9 Can you help the resident trouble-shoot?

- a. supervisors who don't complete EPA evaluations
- b. supervisors who are are not providing timely feedback
- c. advocacy issues re. personal circumstances
- d. working with their supervisors

10 tips for coaching residents

#10 Career advice and related networking

Case example

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Resources

<https://www.royalcollege.ca/rcsite/cbd/implementation/wbas/coaching-and-cbd-e>

https://www.psychiatry.utoronto.ca/sites/default/files/coaching_session_checklist_final_2021-2022.pdf

Summary

1. Coaching is for performance improvement
2. Embraces a Growth Mindset
3. Requires an Educational Relationship
4. Promotes resident autonomy - the driver of their learning
5. Focuses on the individual resident
6. Residents can be coached on how to coach their supervisors to coach them

Coaching to Competence Modules

http://www.royalcollege.ca/rcsite/cbd/cbd-online-training-e



Coaching to Competen

BEGIN

The Situation:

Stephanie is a resident who is joining you for the first time today.

You'll have some choices to make. If you are effective in coaching Stephanie's growth mindset, the meter will move toward the green end.

You can review this activity as long as you remain confidential and no one else can see you!

Good luck!



What is RX-OCR?

RX-OCR is part of the [CBD Coaching Model](#) and outlines a step-by-step process for clinicians to follow to coach residents:

1. Establish educational **R**apport between the resident and the clinician (an educational alliance or partnership).
2. Set **eX**pectations for an encounter (discuss learning goals).
3. **O**bserve the resident (directly or indirectly).
4. **C**oach the resident for the purpose of improvement of that work ("coaching feedback").
5. **R**ecord a summary of the encounter.

This module is designed to help you practice applying the RX-OCR



Home

Select an activity below to get started. You can complete the activities in any order, but we recommend you start with **Activity 1** for a complete overview of the [RX-OCR](#) process. Activities 2 through 5 offer a deeper dive into each of the elements of the RX-OCR process.



Activity 1: "RX-OCR"



Activity 2: "RX" Coming soon!



Activity 3: "O"



Activity 4: "C" Coming soon!



Activity 5: "R"