



University of California  
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# Giving Learners Room to Grow: How to Foster Autonomy While Providing Supervision

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#UCSFMedEd21

# Disclosures

- None

# Learning Objectives

At the end of this workshop, you will be able to

- Identify educational benefits to fostering learner autonomy while offering supervision
- List challenges to maintaining an optimal balance between autonomy and supervision.
- Apply strategies to promote autonomy while maintaining supervision to various common patient care scenarios in the clinical learning environment.

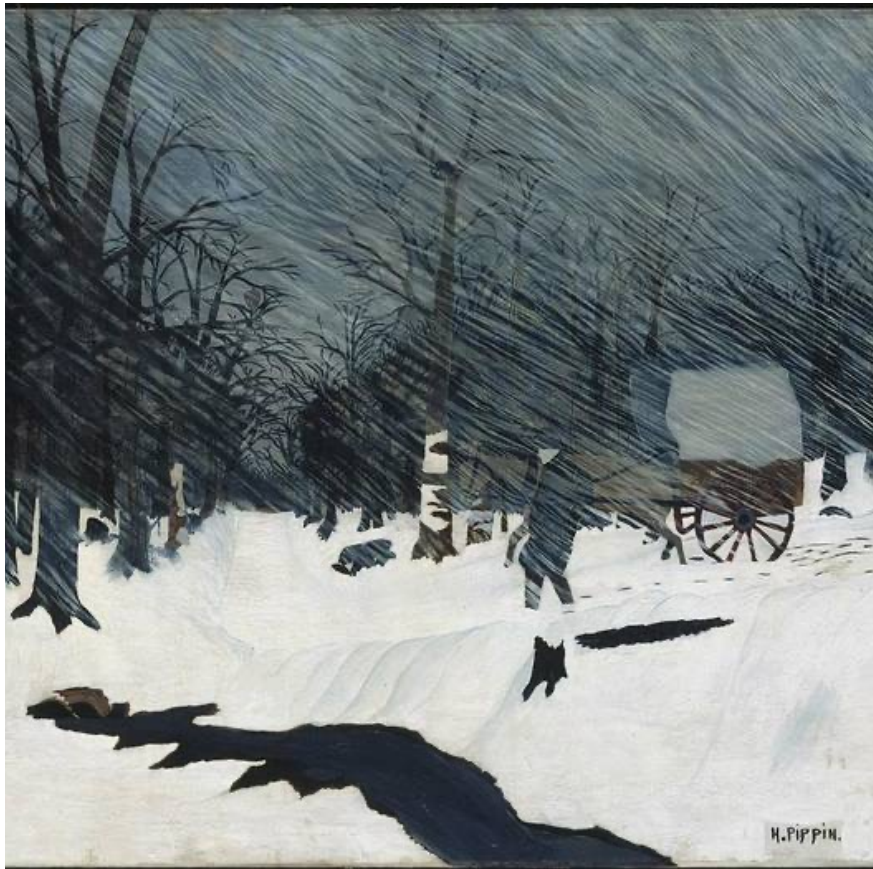
# Outline

- Introductions (10 minutes)
- Background (10 minutes)
- Small group scenario assessment (20 minutes)
- Large group discussion (30 minutes)
- Wrap up (15 minutes)

What is difficult about maintaining a balance between autonomy and supervision?

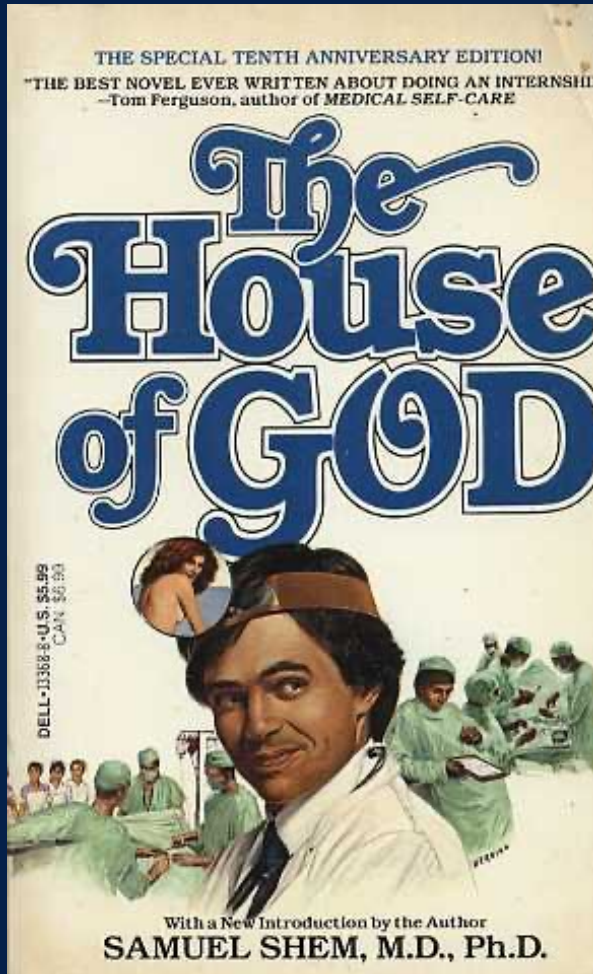
# Supervision in past centuries

## Apprenticeship



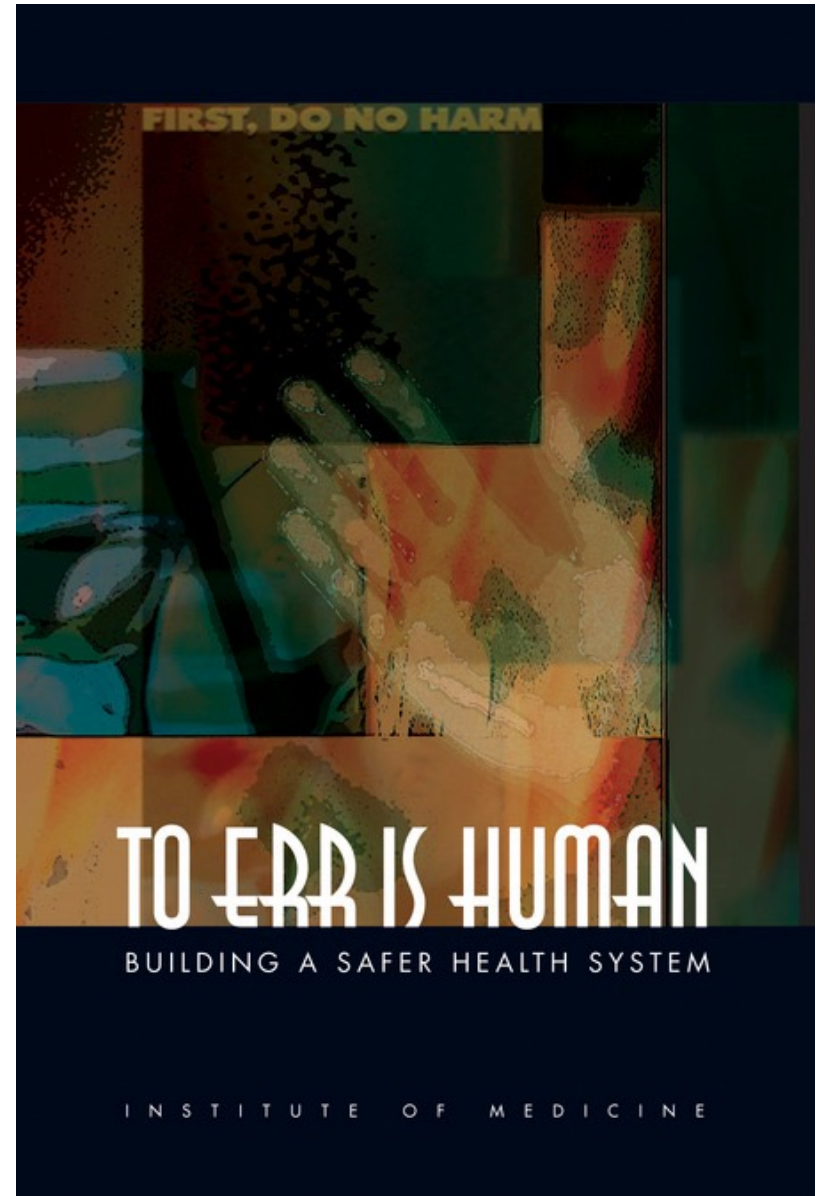
# Supervision in past decades

Separated by space



# Supervision today

- Patient safety concerns
- Attending physicians increasingly expected to be physically present and involved in all aspects of patient care



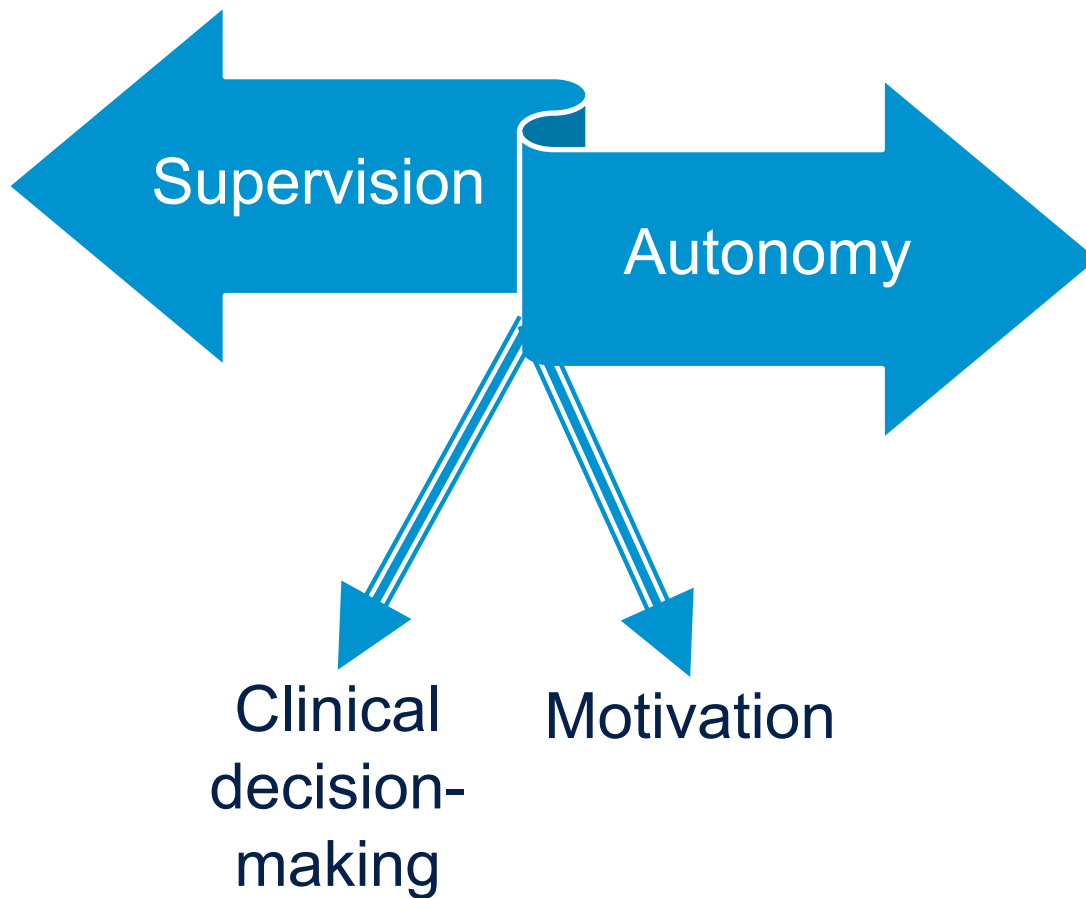


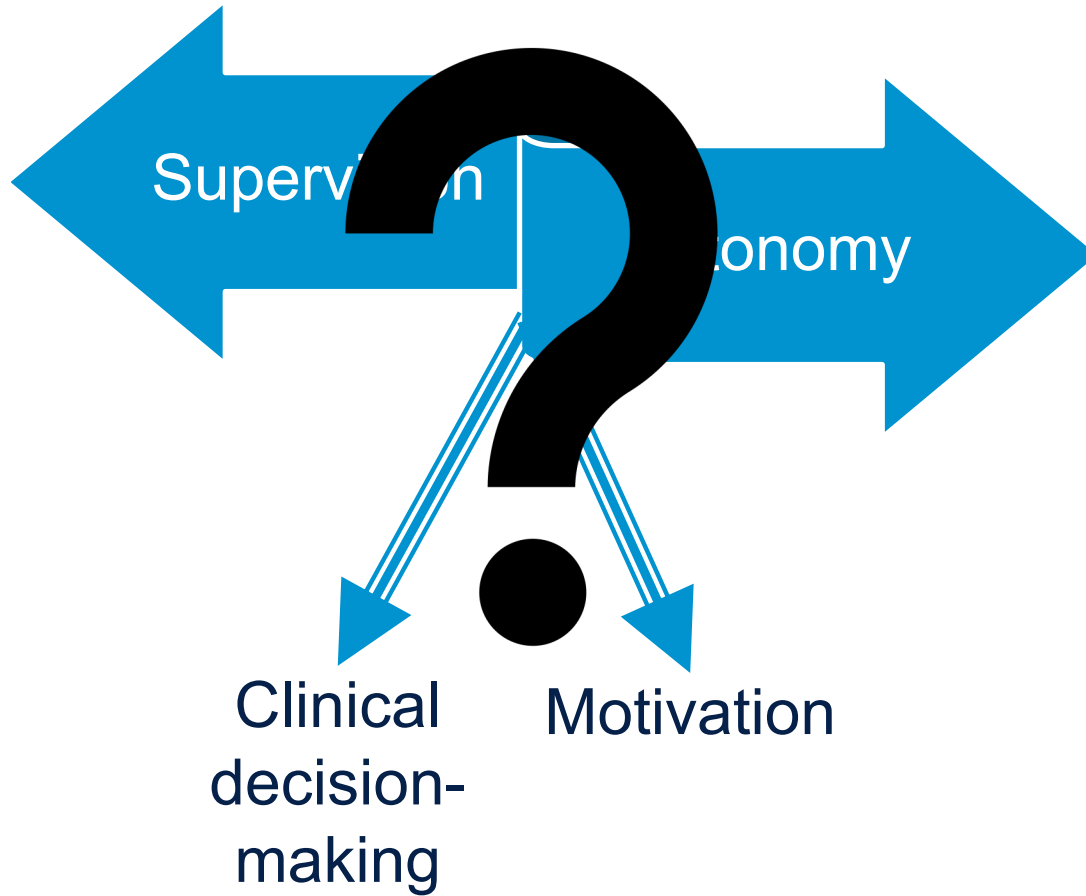
# Recent Literature



- Increased supervision of residents → negative impact on opportunities for trainees' independent decision-making and engagement in patient care
  - Self determination theory
    - Autonomy drives intrinsic motivation
- Graded autonomy is essential for trainees' development into practicing physicians
  - EPAs
- “Autonomy support”
  - Backstage oversight

What does autonomy in medical training mean to you?





# Small Groups

# Large Group Discussion

#1 A 46 yo patient is admitted with pneumonia and reports worsening dyspnea to you (the attending) only when you are rounding solo. How do you proceed?

# Large Group Discussion

#2 A 72 yo patient with malignant ascites requests a therapeutic paracentesis from the resident, who feels relatively confident in their ability to do this procedure without supervision. How do you proceed?

# Large Group Discussion

#3 You are precepting in clinic in May, and an 83 yo patient presents with dysuria and has a systolic blood pressure in the 80s. A senior resident has seen the patient and notifies you of their clinical status. What is your role in triaging this patient?



# Large Group Discussion

#4 The family of a 68 yo patient with advanced pancreatic cancer requests a meeting to discuss goals of care. Of all the team members, the intern has the closest relationship with the family. How would you suggest navigating the family meeting?

# Large Group Discussion

#5 An 8 mo with RSV bronchiolitis gets admitted to the floor on HFNC. Labs and CXR had been obtained in the ED and were equivocal in suggesting a superimposed bacterial pneumonia. The resident states that antibiotics should be started on family-centered rounds. How do you proceed?

# Take Aways

# References

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# Thank You

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