

Example from Academy of Medical Educators, (British Rubric)

http://www.medicaleducators.org/write/MediaManager/AOME_Professional_Standards_2014.pdf

Designing and planning learning

This domain outlines the expected standards for medical educators involved in educational design and learning development processes. Applicants must demonstrate and referees must corroborate these capabilities.

Element	Standard Level 1
Learning and teaching principles	<p>1.1.1 Shows how the principles of learning and teaching are incorporated into educational developments</p> <p>1.1.2 Is aware of different ways of learning and teaching</p>
Learning needs	1.1.3 Shows how the needs of learners are considered
Learning outcomes	1.1.4 Is aware of the need to define what is to be learned
Learning and teaching methods and resources	1.1.5 Is aware of a range of learning methods, experiences and resources and how they may be used effectively
Evaluation of educational interventions	1.1.6 Responds appropriately to feedback and evaluation of educational interventions

Standard Level 2	Standard Level 3
<p>1.2.1 Applies learning and teaching principles in the design of a course, unit, module or subject area</p> <p>1.2.2 Matches course design to support different ways of learning and teaching</p>	1.3.1 Applies learning and teaching principles in the design of a curriculum for a whole course or degree programme
1.2.3 Gathers and interprets basic information on the needs of learners	1.3.2 Conducts complex learning needs analyses including those of learners, groups, professions or healthcare systems
1.2.4 Constructs appropriate learning outcomes that can be measured or judged	1.3.3 Defines learning outcomes within theoretical frameworks
<p>1.2.5 Matches learning methods, experiences and resources to intended outcomes</p> <p>1.2.6 Develops learning resources for planned courses</p>	1.3.4 Is adaptive and effective in securing resources and dealing with constraints
1.2.7 Evaluates and improves educational interventions	1.3.5 Conducts, interprets, acts on and disseminates evaluations of learning programmes

Example from Gorlitz et al (German Rubric)

GMS Z Med Ausbild. 2015; 32(2): Doc23. doi: [10.3205/zma000965](https://doi.org/10.3205/zma000965)

Competence Field	Competence Component	Competence Field	Competence Component
	<i>Competent medical educators...</i>	<i>Competent medical educators realize these competence components by..</i>	
Educational action in medicine ¹ <i>¹The necessary medical expertise is a precondition</i>	... are able to select appropriate subjects for instruction	... considering typical challenges and barriers for comprehension within their teaching domain and by targeting and tackling these with appropriate methods ... by boiling down the teaching content to what is necessary for understanding without simplifying unacceptably ... guiding students to adequately prioritize and apply the necessary knowledge and skills for health care in a target-oriented manner	<ul style="list-style-type: none"> selecting subjects with regard to relevance, frequency, urgency and exemplarity e.g. indicating contraindications
	... are able to design conducive teaching and learning processes with regard to methodological and educational issues	... highlighting the relevance of the subject-specific content with regard to the interdisciplinary context of medicine ... considering evidence from learning psychology and physiology ... analysing and creating learning processes adequately with regard to the surrounding conditions and by applying suitable methods and media	<ul style="list-style-type: none"> considering the age-group of students e.g. exam nerves or alcoholic intoxication during a party e.g. Guilbert's 5-points or SMART criteria for writing learning objectives Planning teaching by use of the Sandwich principle or the AVIVA model using social structures e.g. buzz groups or aquarium
	... adequately assess and evaluate the learning progress of their students with regard to knowledge, skills and attitudes	... using different assessment methods according to the situation ... aligning assessments with the curriculum by means of blueprints	<ul style="list-style-type: none"> selecting assessment methods by means of Miller's pyramid or Bloom's taxonomy e.g. OSCE for assessment of skills to draft outcome expectancies
	... challenge students with demands that meet their previous knowledge and skills	... considering the general as well as the specific learning outcomes of the curriculum ... not demanding competencies from the students that are actual part of residency or PGME curricula	<ul style="list-style-type: none"> e.g. not asking students to interpret a pacemaker ECG or letting students place a central line independently aligning the learning outcomes of one's own educational interventions with the defined outcomes of the curriculum

Example from *Fundamental Teaching Activities* (Canadian Rubric)

http://www.cfpc.ca/uploadedFiles/Education/PDFs/FTA_GUIDE_TM_ENG_Apr15_REV.pdf

Domain: CLINICAL PRECEPTOR		<i>Applies basic educational principles to each teaching activity</i>	<i>Applies basic and advanced educational principles to each teaching activity</i>	<i>Demonstrates leadership and scholarship in teaching activities</i>
Task I: Clinical Coach – A clinical supervisor in day-to-day practice, employing clinical work for opportunistic teaching and learning				
Helps learning through reflection in action	Explicitly embodies the roles, attitudes, and competencies of a family physician in clinical work	<ul style="list-style-type: none"> ▲ Verbalizes clinical reasoning processes for learners (including challenges, reactions, and ethical dilemmas) ▲ Displays enthusiasm for family medicine patient care ▲ Provides a safe learning environment for patients and learners 	<ul style="list-style-type: none"> ▲ Utilizes appropriate educational framework to explicitly articulate decisions and actions ▲ Expresses family medicine values and principles within day-to-day clinical practice 	<ul style="list-style-type: none"> ▲ Supports other faculty to be aware of their positions as role models and to enhance their role-modeling skills
	Promotes and stimulates clinical reasoning and problem solving	<ul style="list-style-type: none"> ▲ Uses specific strategies to facilitate/ assess clinical reasoning ▲ Adapts to learner's reasoning process ▲ Guides learner in the refinement of clinical reasoning 	<ul style="list-style-type: none"> ▲ Discusses clinical reasoning processes with learners who are at different levels ▲ Provides opportunity for learner to discuss and reflect on his or her own work 	<ul style="list-style-type: none"> ▲ Makes educational strategies explicit and guides other teachers to reflect on and use them



Fundamental Teaching Activities (FTA) Taxonomy

Example from Srinivasan et al. (US?)

Acad Med. 2011;86:1211–1220. doi: 10.1097/ACM.0b013e31822c5b9a

Faculty

Table 1
Six Core Teaching Competencies for Medical Educators

Content area	Area description: Competent medical educators . . .	Core teaching competencies (adapted from Accreditation Council for Graduate Medical Education clinical competencies): Competent medical educators . . .
Medical (or content) knowledge	Teach content and assess each learner's abilities within their field of expertise.	<ul style="list-style-type: none"> • Challenge and facilitate learners in practicing high quality, compassionate patient care within their field of expertise. <ul style="list-style-type: none"> —Teach learners to apply the established and evolving knowledge needed for the effective care of patients. —Teach learners to prioritize and multi-task patient care issues, including recognition of critical patient care issues. —Provide resources for additional skills development for learners. • Assess learner progress in acquiring knowledge, skills, and attitudes. • Provide learners with graduated responsibility based on their abilities.
Learner centeredness	Demonstrate a commitment both to learners' success and well-being and to helping learners grow into their professional roles.	<ul style="list-style-type: none"> • Demonstrate respect for each learner. <ul style="list-style-type: none"> —Explicitly value each learner's contributions to the teaching/learning environment. —Demonstrate sensitivity and responsiveness to each learner as an individual, including respecting privacy, autonomy, and professional boundaries. —Demonstrate sensitivity and responsiveness to learner diversity, including ability, disability, gender, age, culture, ethnicity, and sexual orientation. • Invest in each learner's growth and skill development. <ul style="list-style-type: none"> —Are aware of competing demands on learners and learners' personal/professional issues, which might affect their growth. —Elicit each learner's barriers to learning and work to overcome them. —Recognize learners in distress and provide appropriate resources within the educational structure to assist. • Create a learning climate in which learning is facilitated. <ul style="list-style-type: none"> —Stimulate the best in each learner, while minimizing unwanted behaviors. —Create an open atmosphere that facilitates dialogue about different approaches to clinical issues. —Create an open atmosphere which facilitates dialogue about personal/professional issues that affect professional development.
Interpersonal and communication skills	Flexibly tailor teaching and communication styles to facilitate learning.	<ul style="list-style-type: none"> • Communicate expectations, goals, and information in ways that stimulate and engage learners. • Tailor communication and educational strategies to optimize learning, based on the learning context and learners' needs. • Determine each learner's prior knowledge and skills through direct observation or questions. • Provide specific feedback to each learner to help the learner improve. • Are open to alternative approaches to problems and issues. • Problem-solve in a social context. • Facilitate dialogue and understanding during times of professional conflict.
Professionalism and role modeling	Demonstrate best educational and content-related practices, and role model those behaviors for learners.	<ul style="list-style-type: none"> • Inspire learners to excellence in their field of expertise through modeling professional behaviors. • Adhere to ethical principles in teaching, demonstrating compassion and integrity. • Model professional practice standards in their field of expertise. • Keep up-to-date on educational practices and resources within their field of expertise. • Remain accountable for their actions and follow-through on agreed upon activities in a timely fashion.
Practice-based reflection and improvement	Demonstrate continuous self-assessment and lifelong learning to improve their effectiveness and capacity as educators.	<ul style="list-style-type: none"> • Reflect upon education practices routinely. <ul style="list-style-type: none"> —Are mindful during and after educational interactions. —Actively seek input and feedback about the quality and effectiveness of their own teaching from multiple sources, including learners. —Utilize feedback and self-assessment to identify teaching strengths and weaknesses. —Modify teaching techniques and approaches to improve current educational practice. • Develop personal educational goals based on self-assessment and implement a plan to achieve those goals. • Seek faculty development opportunities to improve educational practice.

(Continues)