Teacher, Teacher Can You Teach Me? Becoming Better Educators

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September 2017
Objectives

Let’s have some fun!
Look at teaching Infection Prevention and Control
Look at effective educational methods we can all use
Let’s have some fun!
What Don’t We Want To Do?

www.i-am-bored.com
Or...
Adult Education

Learning retention increases when immediate application follows instructions
I need a volunteer!
• And a mask....
Bloom’s Taxonomy

Cognitive Learning (Knowing/Head)
- Recall, application, analytical levels of knowledge

Affective Learning (Feeling/Heart)
- New attitudes, values, beliefs, and ways of feeling

Psychomotor Learning (Doing/Hands)
- Performance of new skills or new ways of performing
The Learning Stages
The Learning Stages

Awareness

• Learner perceives need to think, feel, or act differently
  – Why am I here?

Data Gathering

• Curiosity increased as the learner seeks to understand and explore learning need
Curious?
The Learning Stages

• Intellectual insight
  – Learner weighs advantages and disadvantages of the alternatives and conducts mental “trial or practice runs” (cognitive learning)
  – Analyzes Information
The Learning Stages

• Emotional insight
  – Practice new behavior in real situations; can be time of conflict, trying to get it to “feel right” (affective learning – new values, insights)
The Learning Stages

• Behavioral Change
  – New knowledge becomes a part of learner’s way of thinking, feeling, and behaving.

This?

Or This?
So?

Not sure, but needed to sound scientific!
- Appealing to the analytical!

We have to know our learners, sort of…
We have to appeal to them on an emotional level
We have to give them something they can use immediately
We have to involve them in the learning
WARNING!

Infection Prevention and Control Lectures can lead to:
- Coma
- Narcolepsy
- Uncontrolled boredom

OR
- Changes to practice to protect patients/clients and staff!
Jim’s Presentations

My terminology does not change that much based on audience

- Student Nurse Story

Try to give your groups examples they can relate to:

- Housekeeping and CDI
What Works for Me

Story Telling

• More and more research into using this as a teaching modality

• Sharing examples we have seen, heard about, stolen from!
  – EMS story…
Real Life…

How to communicate the significance of nosocomial infections on the healthcare system?
• Permission of Paul Webber from Webber Training
In Canada – Nosocomial Infections

Significant when we consider that in Canada you stand a 1.43% risk of infection per day of hospitalization

• After 1 week, 10% chance!

An estimated 250,000 infections per year
8,000 – 12,000 deaths per year
Meet: David Milne
David

A very kind person, one you got to know quickly. Long service pilot in the Canadian Air Force who understood risk and how to balance that with skill. Wife and two daughters who followed him from posting to posting.
An Obituary

...after a battle with hospital acquired infections...
...a series of hospital acquired infections set back his progress and ultimately caused his premature passing.
...urge healthcare workers everywhere to clean their hands before and after every patient contact.
In Canada

Costs to the healthcare system of 1.5 billion dollars annually
Costs to families… we can’t price!
Effect?

That is real
That is not a statistic
It is pretty heavy!
Cost

Treating a UTI - $70
Treating an MRSA blood stream infection - $27,000
Losing a patient to a preventable infection – immeasurable
Okay…Some Practical Hints

I have been in front of learners for over 28 years
I have been in front of audiences for over 47 years!
High School - 1974
University - 1976
Calgary 1983
Nelson BC -1986
Kingston 2006
Kingston 2008
Humour

• Must be careful:
  – We are not all funny!

• You don’t have to start with a joke!
  – But if you do...keep it non-offensive
Humour

- Use “light” pictures
- Routine Practices
  - Risk of transmission
How to Get Invited Back

Send in your presentation when they ask for it
• Or at least by the second request!

Provide objectives when asked

Fill out speaker requirement form
• If you need a lapel mike, make sure they have one!
• If you need sound, let them know well ahead!
Slide Layout Hints

Check what version of PowerPoint the organization would like

Use only the top two-thirds of your frames
  • Many rooms will have the screen too low
  • Bottom of screen should be 4’ from the floor

More to come!
Check your presentation

Measure the height of your screen in inches, stand back from your screen approximately 6x that height in feet (or 2x in meters)

Image from back of auditorium

- Watch bullets
  - Because they get too small to see
    - So don’t go here!

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Preparation

Know your audience
• And who might be in it…
  – Embarrassing Doc stories…

Know your room and podium
• Applies to smaller spaces also
• What do you have to do to see your slides?

Check Acoustics
• Know the computer, clicker, laser pointer
Preparation

Relax!
Breathe!
Warm up both body and voice!
  • Hum

Stay sober!
  • Hangovers are not a good way to get up for a presentation
  • Watch how much you talk the night before
Preparation

Hydrate
• Keep water available
• USE IT!

Lozenges
• If needed, keep small
  – Fisherman’s Friends
  – Hall’s
The Presentation

Be on time
Be prepared
If possible, attend previous presentations

Never start with an apology!
• Shows the audience you don’t care
• I can be flexible on this - Voice issues
Admit to being nervous!
PowerPoint®

Rule of 6
• 6 words per line
• 6 lines per slide
• A picture every 6 slides

Approximately one slide per minute
• Varies on presentation and story telling!

Use slides as a grounding
• I wander a bit!
PowerPoint©

- Not too busy!
PowerPoint© Animation

Take it easy!

Play a bit
  • But just a bit

Take a course
PowerPoint©

Careful of backgrounds
Careful of printing
• Use Black and White or Grey Scale choice
The Presentation

Have your wireless microphone attached so when you look at your screen, you are facing the mike.

Same issue with podium or fixed microphones, move your head!
The Presentation

Two Screens

- Use both randomly for pointer
- Use computer pointer
Presentations: What to do if:

You are boring?
• Oops, monotone?
Take a course in public speaking (Toastmasters)
Practice!

Try not to read all your PowerPoint slides (Rule of 6) or Speaker Notes
Presentations: What to do if:

You “blush”?

- Wear a red blouse, sweater or shirt (not all three!)
- Hides the blush, quite nicely
Presentations: What to do if:

You Sweat:

• Layer your clothing
• Tight undershirt
• Looser, formal shirt, blouse, etc.
• Jacket – if it does not make you hot
Presentations: What to do if:

You verbally stumble?

• Don’t draw attention to it!
• We all do it in normal conversation
• If you really screw up: shrug, blame it on the night before and keep going!
Presentations: What to do if:

You Shake?

• Hold podium for dear life!
• Use two hands to drink
• Balance laser pointer on a firm object!
Presentations: What to do if:

Your audiovisual fails?

• Have speaker notes or handouts to work from
• Make the best of it
• Always bring a copy of your presentation on a memory stick
• Remember “Elmo”
Presentations: What to do if:

Someone falls asleep

• Don’t worry about it
• We all have lives
• You can’t predict what someone did last night
• If it is college/university students – instructor may want to know!
Presentations: What to do if:

People leave?
Could have TB
• Tiny Bladder
An appointment
This Could Be A Problem

environmentalgeography.wordpress.com

csclv.nevada.edu
For Something Different

Don’t use a PowerPoint

• Go a cappella!

Start with, “I’m tired of my usual presentations…what do you want to talk about?

• Allow lots of questions
• What is bugging them
• LISTEN!
When all is said...

Use evaluations
  • Learn from them!
Ask for further ideas
Take all your stuff with you
  • Including water!
Be Inventive!

Bird Flu Casualties
Analogies

A comparison between two things, typically for the purpose of explanation or clarification

Dictionary.com
Resistance to Antibiotics

Naturally occurring (genetic)

Acquired:
  • Genetic mutation
  • Transfer of resistance from another bacterium (plasmid)

Are only effective on bacteria

Resistance to antibiotics does not correlate with resistance to disinfectants

(Rutala 1997, Weber 2006)
Antibiotics – Lock and Key
Antibiotic Resistance
Analogy for Antibiotics
The Family Tree

- Family
  - Cucurbitaceae
  - Genus
    - Last Name
    - Species
      - First Name
Genetic Mutations

Watermelon yum  Watermelon ESBL  Watermelon CRE
Summary

We have to meet the needs of our learners
We have to give them something they will use immediately
• SARS – during – good info
• SARS – after – useless info!
  – I had trouble doing “just in case” lectures!
Keep it light, relevant
Have fun!
I’m So Much Cleaner

Tune of I’m a Believer
I’m So Much Cleaner

My poor hands were sore and red from washing them
Seemed the soap we used just ate them up
Alcohol was out there
I just got some in
I needed something new to save my skin
I’m So Much Cleaner

And now I squirt my hands
And I’m so much cleaner
Not a bug, is left on my skin
Alcohol:
It made my skin soft, it did not rip off everyday
I’m So Much Cleaner

I assumed that everyone was washing them
Nurses, doctors and the other staff
Then we had the outbreak
In everyone it seems
MRSA haunted all my dreams
I’m So Much Cleaner

And now I squirt my hands
And I’m so much cleaner
Not a bug, is left on my skin
Alcohol:
It works much quicker, I don’t need to dicker with a sink
I’m So Much Cleaner

Alcohol was out there
I just got some in
I needed something new to save my skin
I’m So Much Cleaner

And now I squirt my hands
And I’m so much cleaner
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Alcohol:
It works much quicker, I don’t need to dicker with a sink
Questions?
References

APIC Text of Infection Control and Epidemiology Online
2017 Chapter 3
Jim Gauthier, Life Experience
• One Heck of a Ride!

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A guide to successful presentations
https://bcpsqc.ca/blog/knowledge/a-guide-to-successful-presentations/