BEYOND HANDS-ON AND HANDS-OFF:
A MODEL OF SUPERVISORY APPROACHES ON THE INPATIENT WARD

Andrea Gingerich, NMP
Vijay Daniels, UAlberta
Laura Farrell, IMP
Sharla Rae Olson, NMP
Rose Hatala, UBC
Studying clinical supervision

Gingerich A, Daniels V, Farrell L, Olsen SR, Kennedy T, Hatala R.

Beyond hands-on and hands-off: Supervisory approaches and entrustment on the inpatient ward.

No COIs

Fund by UBC Distributed Medical Education Grant
Definition of “Entrust”

‘assign the responsibility for doing something to (someone)’

- Put (something) into someone’s care or protection.

https://en.oxforddictionaries.com/definition/entrust
Model of trust formation

Hauer et al, Med Educ, 2015
Research Question

What is influencing clinical supervisors’ entrustment, in the moment, on internal medicine Clinical Teaching Units (CTUs)?
Methods

• Constructivist grounded theory approach
  • explicit theory-building

• Theoretical sampling
  • Iterative data collection and analysis
  • tertiary care and distributed sites
  • embody variety of ‘typical’ supervisors
  • 23 clinical faculty (28 interviews)
“..as part of supervision I sort of have to draw that line between what I’m going to allow a resident or student to do versus what I think I should be doing. I also see my role as a supervisor—though probably even more so as a teacher…” (S11)
Results

hands on

hands off

Attention
Security Equipment In Use

YOU ARE BEING WATCHED
This area under 24 hour live/recorded video surveillance
Results

hands on

hands off
Results

- Patient care
- Trainees’ learning
Results

shared responsibility for ward

personal responsibility for ward
Approaches to Supervision Model

- Personal responsibility for ward
- Trainees' learning
- Patient care
- Shared responsibility for ward
Approaches to Supervision Model

- micromanaging
- personal responsibility for ward
- patient care
- shared responsibility for ward
- trainees’ learning
Approaches to Supervision Model

- Personal responsibility for ward
- Scaffolding learning
- Patient care
- Shared responsibility for ward
- Trainees' learning
Approaches to Supervision Model

- Personal responsibility for ward
- Trainees’ learning
- Patient care
- Shared responsibility for ward
- Pearls of wisdom
Approaches to Supervision Model

- Personal responsibility for ward
- Patient care
- Trainees’ learning
- Shared responsibility for ward
- Divide and conquer
Clinical teaching focus

- Care of the patient: prioritised
- ‘Divide and conquer’ ward efficiency
- Learning guidance: prioritised
- ‘Pearls of wisdom’ learner autonomy
Discussion

May inform supervision:

• reflect on ‘typical’ stance
  • their assumptions, foci and priorities
• recognize when change in supervision approach
Discussion

May inform assessment design:

- Trust ≠ Entrust
- Challenges with current entrustment scales
- Incorporate “behind the scenes” activities as part of entrustment scales?