



DOC16/15107

# Health Education and Training Institute

#### Connected Teaching and Learning Webinars Series II 2016 - 2017 Learning Styles Maureen Winn



# **Target audience**



- Clinical Nurse / Clinical Midwifery educators
- Educators updating facilitation techniques
- Educators networking
  - seeking support from HETI
  - Support from colleagues
- Experienced educators checking in



## **Our Webinars to date**



Blended learning	<ul> <li>The flipped class room</li> </ul>
Scaffolded learning	<ul> <li>Engaging the learner</li> </ul>
Simple effective instruction	<ul> <li>Assessing clinicians</li> </ul>

## **Review at:**

http://www.heti.nsw.gov.au/Nursing-and-Midwifery/Webinars/

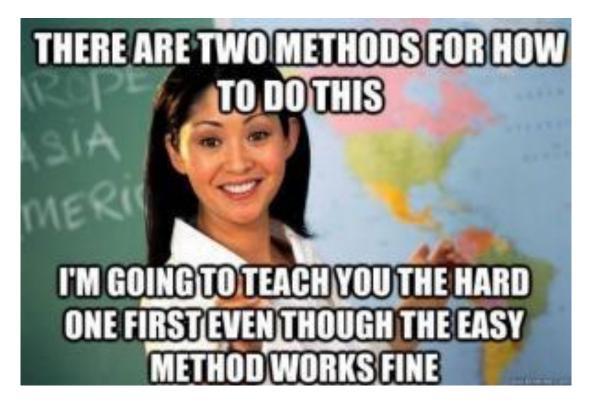
#### Underpinned by 'Empowering the Educator' (HETI) and now...



## How we learn



• Ever experienced this?





# **Key Learning Outcomes**



**Participants in the webinar will:** 

- Identify a number of learning styles/preferences
- Test their own learning preference
- Reflect on how this alters their own learning
- Identify ways to include learning style preferences
- Identify ways to help learning regardless of learning styles



# Is there a learning style?

http://www.education.vic.gov.au/documents/childhood/professionals/support/egsls.pdf



TRAINING INSTITUT

- Hippocrates
  - Sanguine (happy) Orange
  - Choleric (bit angry) Green
  - Phlegmatic (stable) Blue
  - Melancholy (introspective)Gold
- Jung: behaviour is a pattern
- Keirsey / Lowry: Colour



## **Popular concepts**

- Kolb's experiential learning
- Briggs-Myer personality
  - Is anyone trained?
  - Were you intrigued to dig deeper?
- VAK (Visual Auditory Kinetic)

ACTION: Person next to you (or you) Think about a recent 'lesson' How were these approaches used?



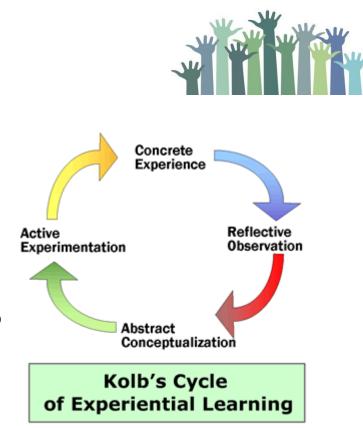


image by Karin Kirk



 <u>Discovering our personality styles through</u> <u>True Colors</u>

Paper

 <u>Understanding the learning personalities of</u> <u>successful online students</u>

• So, why are there so many iterations?



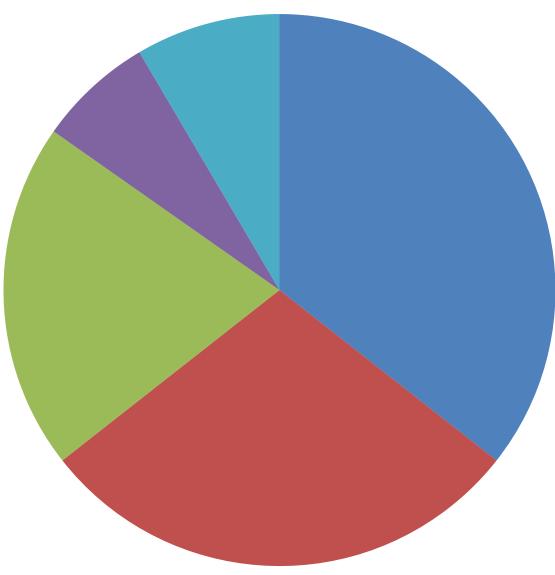
## **Generational Learners**



- Vets (1925 1945)
  - cooperative, respectful, classroom approach, tech with support
- Baby Boomers (1946 1964)
  - Is the info' useful? partner in learning, teamwork, discussion, life-learning (self-made)
- Gen X (1965 1981)
  - Change is OK, hands-on, role-play, tables, graphics
- Gen Y (1982 2000)
  - Flexible, creative, doing, immediate feedback
- Millenials (2001 2020)
  - ?







You said.....

Facilitator

- Physical
- Pictures
- Journal
- Abstain



**Imagine a learning session** 



#### **Stand alone techniques**

- Speaking to you (Anyone, Anyone?)
- Smartboard writing copy
- Small group discussion
- Demonstration







- <u>TEDx Learning styles and critical self-reflection</u>
- NEWS ABC <u>'Students are not hard-wired to</u>

*learn in different ways* 6 Sep 2016

<u>The Myth of Learning Styles</u>



## **Evidence Base**



#### Study

- 89 medical residents and students in 2 schools
- Complementary Medicine module, 2 approaches:
   active vs reflective questions
- Factorial, randomised, controlled, cross-over, post-test only trial
- Matched/Mismatched to question style
- No difference in scores
- Cognitive + Learning styles had no effect on learning outcomes

(Cook, Gelula, Dupras, Schwartz 2007)







 We can explore 4 key ways to engage with learners

• But not just yet .....



#### Time for a



...

the Poll questions!

and a



and to





## **Chat Box Questions**



- 1. I have attended 'Connected Teaching and Learning' Webinars
  - a. Only once
  - b. Two or more times
  - c. I have reviewed previous webinars at the HETI Nursing & Midwifery team webpage
  - d. I have downloaded the PowerPoint presentations from the webpage
- 2. When I registered to attend this event, I used the supplied link to review my own learning style
  - Yes / No / I didn't register I am participating in a group.
- 3. My current concept of 'learning styles' is
  - a. It's important to identify learning styles preferences before the session occurs
  - b. I mainly do a 'hands on' approach
  - c. My main technique is a lecture format as it addresses content need
  - d. I try to flip the classroom, so as the session can include verbal and kinetic techniques
  - e. I include different techniques when teaching but it is generalised not specific to learning styles
- 4. Based on this presentation to time, I would in the future
  - a. Continue to do what I usually do it works
  - b. Meet with learners to identify learning style, content need and outcome required
  - c. Get learners to change my session, to meet their own learning styles then share with similar learners
  - d. Only change when there are identified patient care issues in the ward/unit/community area





- For those who use MULTIPLE TECHNIQUES
- For those who mix-it up a bit
- For those who rely on their passion for the subject

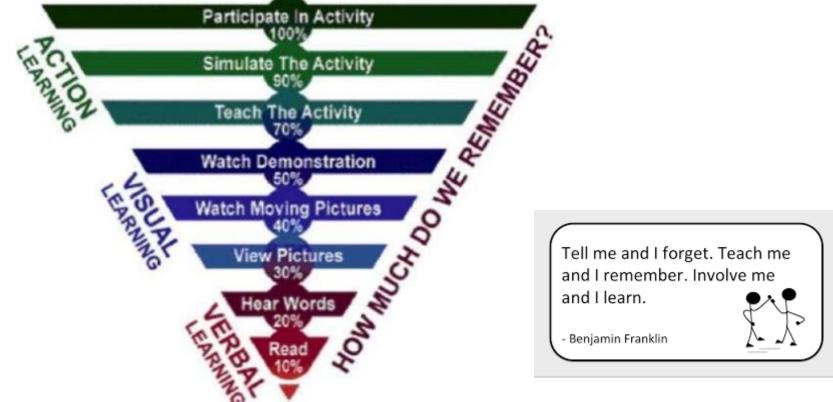
# • Well Done!





## Guide on the Side approach

#### HOW DO WE LEARN?



http://elta.pk/index.php?option=com\_content&view=article&id=104&Itemid=219



# Is it scaffolded?



- → Active participation
- → Able to create their own learning (no hand holding)
- → Meaning is made from the experience (guide on side)
- → Use:
  - Behaviour
  - Reflection
  - **Review**
  - Discussion
  - Amalgamation

- + Mature
- + Self-confident
- + Autonomous
- + Self-directed
- + Close-minded
- + Won't change

Maturing Over-confident Dependent Needs direction Will copy a 'leader' 'Evidence-based mantra'



## 4 new ways to engage



- You logged in to a facilitation webinar
- Checked out how you learnt
- Re-thought ideas an learning styles
- Didn't change your approach

#### OR

- First three from above
- AND
- Discovered 4 (or more) new ways to engage

## Which would work better for you?





## 1. Headline

- a promise
- how will it benefit them?

### 2. Hooks:

- Demonstrate the pain of not knowing
  - How does NOT knowing the content ultimately hurt their (concept of) success



# 3. Preview Strategy



- A taste of what is involved
- Grabs attention
- Anticipation
- Like the movie trailer



# 4. VAK it

- Visual
- Auditory
- Kinetic

 NOT from the facilitator - from the LEARNER





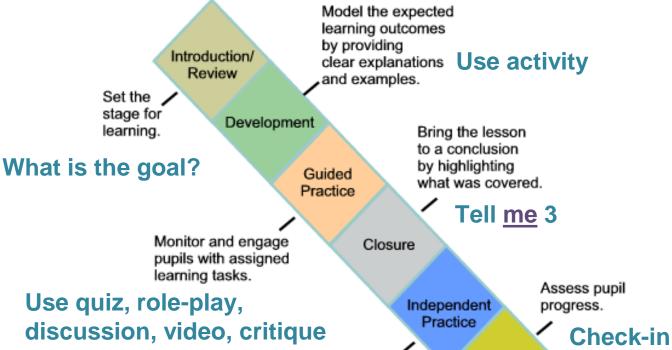
## **Simple Effective Instruction**

#### **Direct Instruction**

Article, critique,

TRAINING INSTITUTE

summary, group work



Provide learning

tasks that are

independent of

teacher assistance.

#### Step 1 Have fun

Step 2 Ask (engage) a motivating question 'what's wrong with this picture?'

#### Step 3

Let the learner lead: ASK and EMPOWER

#### Step 4

Use a range of blended learning techniques with a scaffolded approach

Test

Reward

Evaluation

How does this fit with assessment?

## socrative.com



- Create quizzes
- Group work
- 'Space Race'
- 'Competitive' "Exit Ticket"



## **BYOD - with care**



- Find a YouTube
- Rate it
- Explore it
- Change it
- Film it





## A resource to peruse...

<u>http://www.teindia.nic.in/files/teacher\_trg\_module/8\_creative\_facilitation\_techniques.</u>
 <u>pdf</u>





## **Social Media Journal Club**

- Ferguson UTS 18 Oct 2016
- Re-invigorating Journal Club
- Change from traditional to Social Media approach
- Twitter comments
- LinkedIn



They have done the reading: Yippee



- Is it essential?
- Demonstrate why its necessary:
  - most important point the author makes is...
- Turn in a Question
  - one question facilitator has to answer re the reading
- Students to identify what requires explanation
- In-class activities to BUILD UPON (not re-hash)



# MOTIVATION



- 1. ASK what do you need / want in relation to this assessment?
- 2. Make learning useful, relevant, immediate

3. Use

problem-solving mind maps case studies (stories) practice-runs thought bubbles test - quiz, practical

- 4. Learners finish with a meaningful summation/message
- 5. 80/20 rule: concentrate on the willing; you are not Houdini



## **Time to share!**



- Who has used something different / new recently?
- Did it work?
- Did it require practice?
- Would you recommend it?



## **Feed forward**

- Prep for next session
- Use 'anticipation'
- Ask re gaps, needs, goals
- Feed forward is NOW
- Feed forward is positive
- Learner gets a say
- Facilitator is the support





http://www.metasysteme-coaching.eu/pdfexport.php?nid=1445New Marshall Goldsmith – Feed Forward





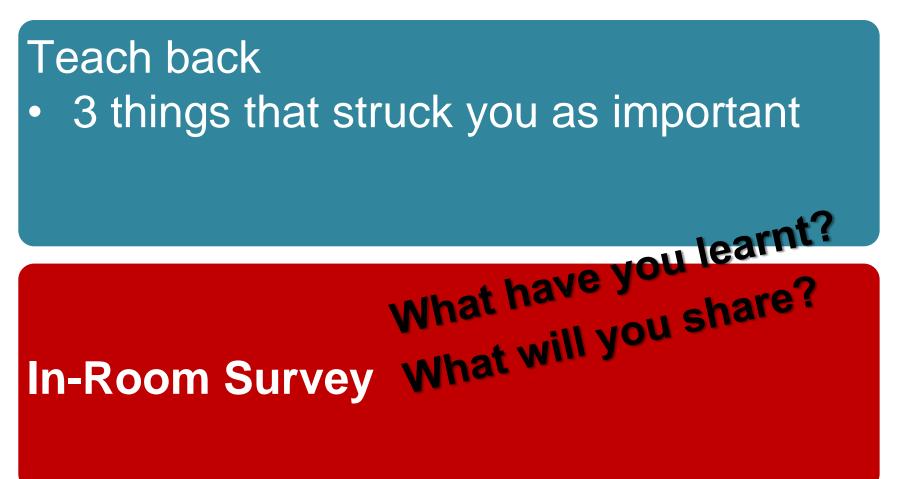
FF:

# What is one thing you need to know about 'leadership' and the role of the CNE/CME?



So, what has resonated with you today?









# 30 November 2016 Leadership in Action a panel discussion with <u>Q</u> and <u>A</u> OPEN TO ALL

# Please *complete the survey* to receive your *Certificate* of Participation



