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Teach the Teacher in Teaching (TTT) in Healthcare Residency
A Brazilian Experience in the Unified Health System (SUS)

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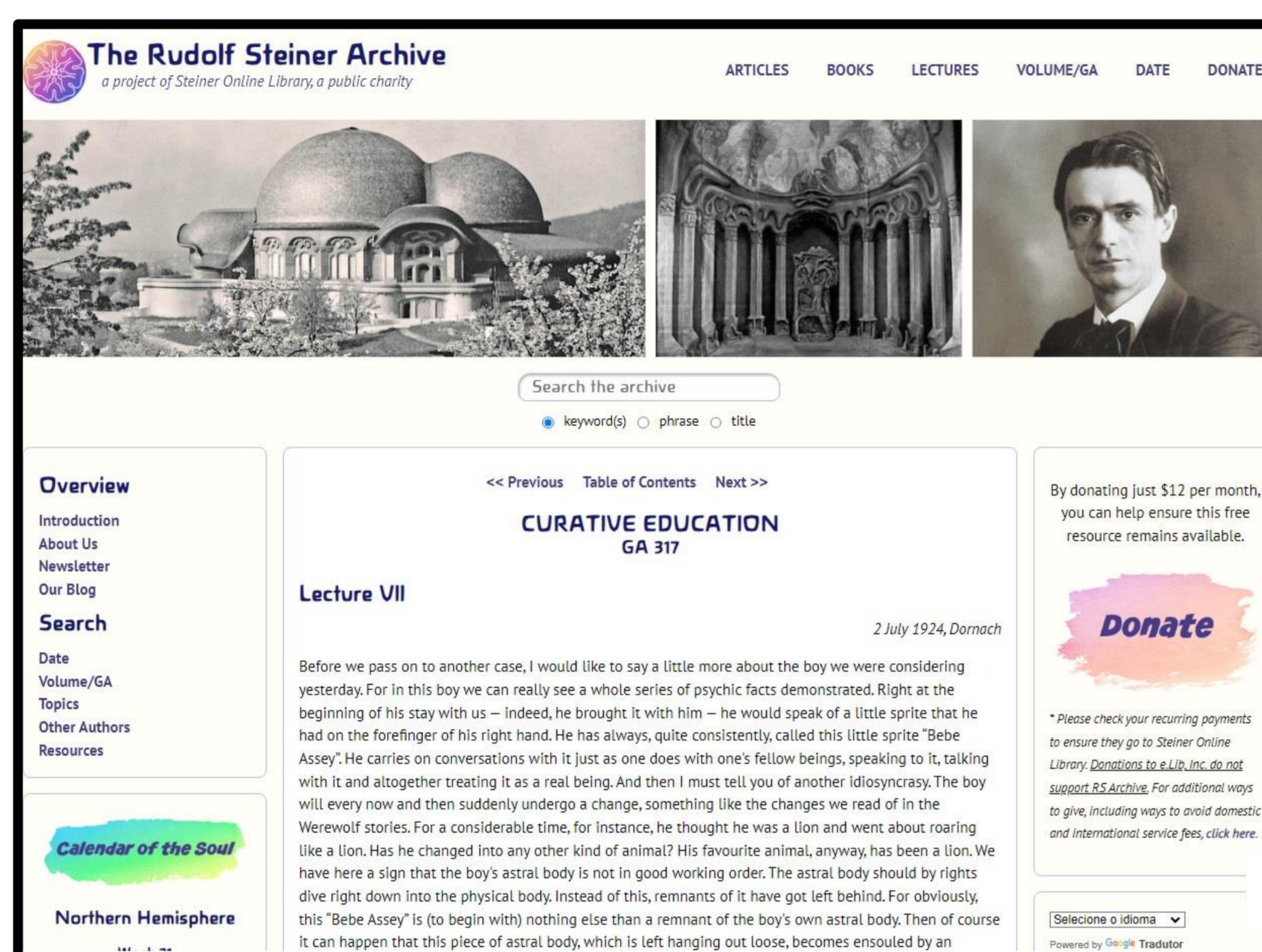[5]Specialization in Health Residency Preceptorship, Faculdade Moinhos de Vento, Porto Alegre, Brazil
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Background and Question

From the anthroposophic educational concept of Rudolf Steiner [1], we developed a training algorithm for our medical residents, considering the multi-professional and interdisciplinary healthcare environment, in the Brazilian Unified Health System (SUS), resorting to a spiral of different educational stages, in the context of the Constructivist Spiral (CS). The training plan considers the physician and healthcare resident as a focus of a cooperative conducted learning using tools of imagination (comprehension of the clinical image) forming a healthcare community supporting the development from inspiration to intuition in the spiritual pathway of healing. Teach the teacher in teaching (TTT) is a challenge to be embraced for all healthcare professionals, being improved by the Integrated Curriculum for Anthroposophic Medicine (ICURAM) [2,3].

Lecture 317 by Rudolf Steiner. Curative education, applied in our work [1].

Materials and Methods

The trained group was composed by 13 members, preceptors and coordinators of the Medical Residency of the Jundiaí Medical School [4]. The members are medical doctors, phono audiologists, neuropsychologists, nurses, aged from 30 to 70 years, with different formations (specialization, master degree, Ph.D. and full professor). Furthermore, there is an interchange with a nuclear medicine physicist, coordinator of the residence of University of Campinas. The effective training of the preceptors and coordination staff was structured to standardize the context of residents training within a holistic and interdisciplinary perspective, building on these students skills and abilities in health care in its entirety and with a focus on patient safety resorting to a spiral of different educational stages, in the context of the CS [3,4,5,6].

In June 2023, I received prompt approval from the Residency Program coordination to carry out the PAP at our college. The learning approach consists in theoretical activities, medical simulation realistics tasks, activities of evaluation of the teaching method by the staff of preceptors and coordinators, experiencing the resident's role in person-centered healthcare, considering the technical and personal updates. As teaching resources, we use the FMJ campuses with classrooms, data show, surgical skills laboratories, realistic medical simulation laboratories, as well as the following care infrastructure: University Hospital of FMJ, Hospital Regional de Jundiaí, Hospital São Vicente de Paula de Jundiaí, FMJ Specialties Outpatient Clinic, ATEAL – Therapeutic Association of Auditory Stimulation and Language of Jundiaí, Death Verification Service – Fresh Corpse Surgery – USP.

Representation of the educational costrutivist spiral.

Representation of the integration mind-body, and spirit explored in the principles of theanthroposophic education

Results

Based on the studies of the CS and anthroposophic educational concept, the algorithm purposed consists in A Systematize the preceptors approach movements in relation to the residency training routine, identifying problems, formulating interactions, elaborating questions, building new meanings, and evaluating processes and products, within the CS teaching method [3,4,5]. B-Expand the pedagogy of the staff of preceptors and coordination, through CS and anthroposophic educational concepts, so that the training of residents can be enriched in instances of diagnosis, clinical, and surgical treatment of diseases and emergencies in otorhinolaryngology, skull base, and neurosurgery, in addition to forms of action regarding its prevention and chronifications [3,4,5,6]. The TTT of the anthroposophic educational approach was valuable in the medical educational steps that consisted in: - Identify the problem: this identification is subordinated to the previous knowledge, perceptions, feelings, and values of the residents, and not of the staff of preceptors; -Formulate explanations: provide the preceptor with conditions to elaborate questions, noting inaccuracies, incompleteness, inconsistencies, ambiguities, and other challenges. During this process, the preceptor must support the student to move from a "provisional synthesis" to a "new synthesis"; -Create questions and seek new information; -Build new meanings from intuition and imagination; - Feel and evaluate the results of learning is also a key point of the algorithm, which allows the teachers to improve the ability to highlight the knowledge construction, which reflects in the medical and therapeutic approach of the patients in our institution [3,4,5,6].
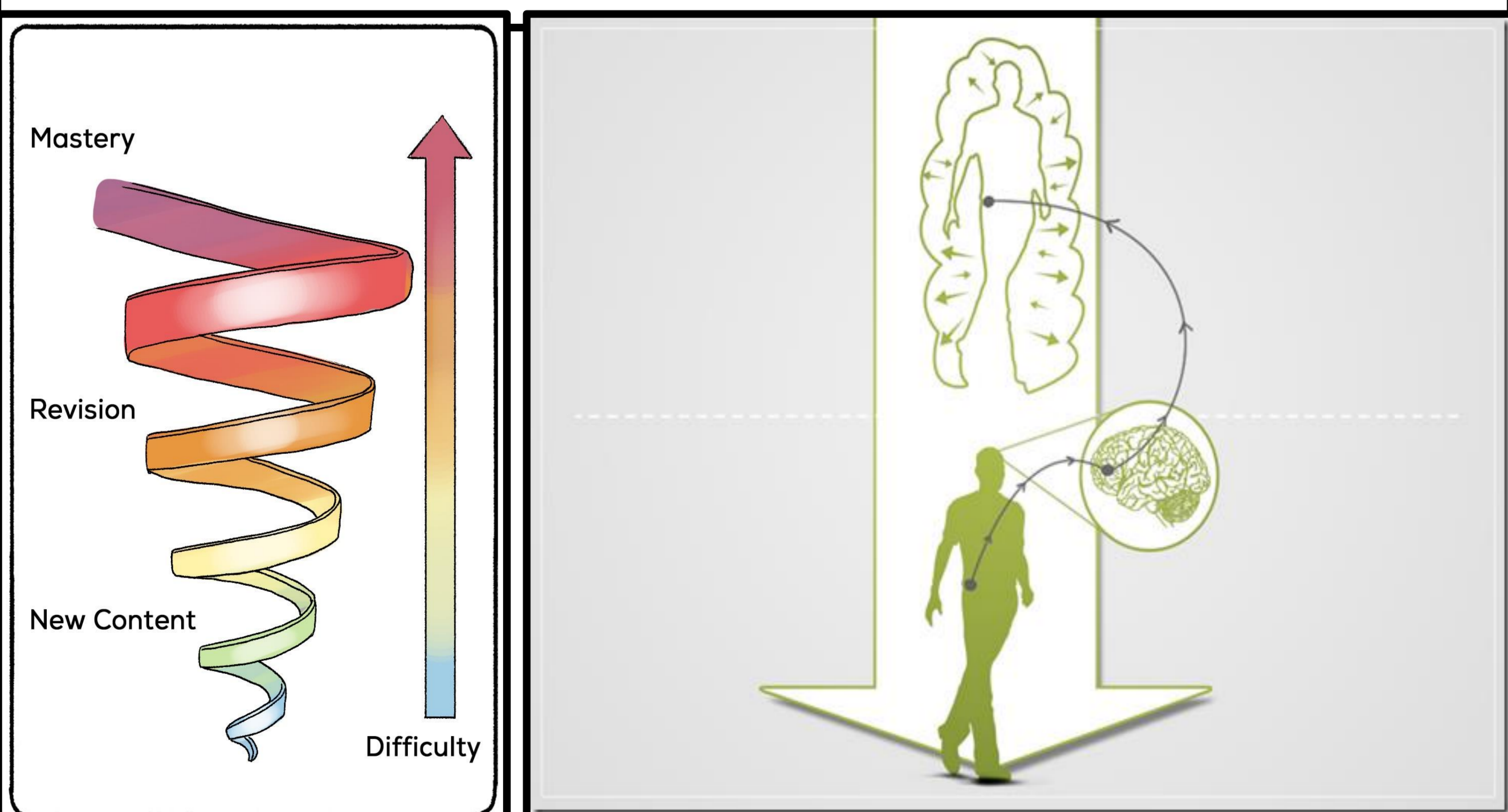

Teachers and students of the medical residence from Surgery Department, Otorhinolaryngology Medical Residency/Interdisciplinary Neurosurgery Approach, Jundiaí Medical School, Jundiaí, Brazil, where the method is applied.

Discussion and Conclusion

TTT is not a simple task, especially considering healthcare professionals. According to the anthroposophic educational approach, "Every education is self-education" [1]. Saying it another way, there is no education other than self-education, and as preceptors we can only provide the environment for healthcare professionals carry out their training. We must provide the most favorable conditions where the professionals can educate themselves according to their own destinies. With the improvement of preceptors, considering the CS and anthroposophic education, we encourage residents to base their work on the development of their own skills, increasingly recognizing their autonomy and evolution in self-knowledge.

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