

VALUES BASED SURGICAL PRACTICE FEEDBACK 23/03/16

	(Marks out of 5)
Introduction	4.3
Small group work	4.0
Discussion of key ideas	4.3

State one aspect done especially well

Interactive. Good discussion of patient values
 Very clear and engaging
 Using scenarios to get me thinking about my values at the start
 Relating value-based practice to legal responsibilities and case discussion
 Thought the treatment choice question at the beginning was really thought provoking
 Lucy was a very good facilitator
 The talk was very engaging and made relevant to relatable scenarios. The balance of talking and audience participation was just right
 Intro – useful to consider the variety in opinion amongst the group
 Really liked the intro and interactive discussion
 The discussion on Treatment A vs Treatment B
 Case discussions are a good way to consider it
 I like the A vs B drug question
 Very interactive – interesting approach – got everyone involved and contributing
 Good use of scenarios to illustrate concepts
 Dr Fulford-Smith was excellent
 Actively engaged audience in discussion – we were allowed to freely express our ideas
 Good to discuss the initial question after people put answers on the flip chart
 The start was really engaging and thought provoking
 Description of the Montgomery ruling
 Lucy was really good
 Explanation of cases
 The discussion of what values are and the hypothetical discussions were interesting
 Discussion of ethical issues (and finishing early!)
 Intro thought experiments good – could do more
 Very clear, engaging and concise presentation
 Small group chat about values, the treatment A/B discussion
 Case studies were well done
 Lucy was great and had a good delivery and pace. Enjoyed the thought exercises re A&B treatments
 Discussion of cases
 I enjoyed discussion of the cases and discussion of the legal aspect

Slides were clear

State one aspect not done well and how might it be improved?

Would have been better to do discussion part in smaller groups but understand why this wasn't possible

A bit shorter

It would have been easier to fully explore our own views if there was an opportunity to work in small groups

Maybe a greater variety of cases would have been good

The case studies could have been clearer

Sometimes it could have been more interactive (based on the success of Treatment A vs B)

Only one tutor

Small group work needed smaller groups

A shorter intro and big group discussion

Some of the discussion was quite repetitive

The intro seemed long and drawn out

There was no small group teaching

Lack of group discussion

The case discussions went on for a bit long

Force more group talking during the session

We did not have enough opportunities for discussion

Not sure about 'choosing A or B' – was too hypothetical to really demonstrate much of material value

It would be helpful to have the session earlier in the year because we have learned most of this info by now through experience on wards

Writing down our ideas on values seemed a bit slow and pointless but I understood it's about appreciating we have different values – maybe there is another way to do this, eg with another hypothetical question like treatment A vs B that will generate different answers and discussion

Not enough facilitators

State one idea for improving the session

Integrate legal points into the cases

Consideration of cultural / religious values we may encounter

Case study for consent / Montgomery ruling

Find an open-minded patient (or actor) that has relatively strong values to talk with us (this is obviously very challenging to implement but the yield may be enormous)

More tutors – smaller groups would be better, otherwise fantastic

Smaller group discussion

Small groups would have been good; ideally groups of 10 people

Try and make the whole session as interactive as the start

Actually describe what values based practice is – I'm still not sure

More facilitators

We didn't split into groups, probably would have been better if we'd been able to

More discussion of the case studies to drive home essential points

Have people break into small groups / pairs to discuss cases before giving feedback to the group. Don't put 'answers' on the screen

More group discussion on the cases

Change A/B scenario to something more applicable to our age or get rid of it

Maybe show us an example (eg videos) of consent being done very well

Specific real life examples

Any other comments? *(Please continue overleaf if necessary)*

Thank you!

Thanks

Good facilitator, thank you!