



### **Introduction**

This module introduces the topic of small group teaching and links closely with the modules [Facilitating learning in the workplace](#) and [Improve your lecturing](#). This module briefly considers how small group teaching can be planned and structured and some of the techniques teachers can use to facilitate group and individual learning, including strategies for preventing difficult situations in groups.

By the end of the module you should have learned and updated some of the principles behind running small group teaching sessions and considered some of the issues involved in ensuring that groups function well and that the learning environment is conducive to learning for all those involved. You will also have an opportunity to apply the learning from the module to your own practice through carrying out activities and reflecting on these.

### **Before you start**

Before you start the module we recommend that you spend a few minutes thinking about the following points and noting down some of your thoughts. If you are registered on the site, you can do this in the 'reflections area'. Click on the 'my area' link at the top of the page to access your personal pages. Please note that you must be logged in to do this. Please also note that you will need to contribute to the 'reflections area' during the course of the module in order to complete and print out your certificate.

#### **Thinking points**

- What activities are you currently involved in that require you to plan or run events that involve small groups?
- Have you had any formal education or training in running small group teaching sessions

and, if so, what are some of the key principles you remember?

- What are your main reasons for studying this module, i.e. what are your learning needs?
- What specific aspects of your teaching practice are you hoping to improve?

## What is a 'small group'?

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A typical view of a 'small group' is around eight to 12 learners facilitated by a teacher. 'The purist view of small group teaching is that it must be learner-centred, with all students joining in free discussion of a particular topic' (McCrorie, 2006, p. 5).

In clinical teaching, however, groups may be smaller than this, sometimes even a pair of students or trainees working with a healthcare team. In other cases, as higher education programmes take larger numbers, 'small groups' may comprise as many as 25 or 30 students. Small groups can also operate within a much larger setting, such as a lecture, workshop or conference. Small group teaching is necessarily more demanding of staff and room resources and time than lectures; however, well-designed small group teaching has clear benefits for student learning in terms of retention of information, critical thinking and consolidation of learning from different parts of a programme (McCrorie, 2006, pp. 1-4).

As McCrorie notes, however, 'group size is probably less important than what the group actually does' (2006, p. 5). So what characterises a 'small group' is not so much its size, but the teaching and learning context and the way in which the teacher works with and facilitates the learning process. Small groups provide opportunities for learning that are difficult to establish in large group settings. They are particularly useful to enable learners to take part in discussion, active participation, feedback and reflection, and to consolidate learning, clarify understanding, and explore ideas and concepts. Depending on the purpose and nature of the group, small group teaching can also help to develop 'transferable' skills, such as study skills, communication skills, teamwork, problem solving and personal development.

Small group events have an emphasis on learning (as opposed to teaching), a specific task or focus and involve active participation by group members. One of the characteristics that differentiates small group teaching from large group teaching is that there is a greater attention to group processes as well as to achievement of tasks. Some of the aspects that help to make small group teaching effective in the clinical environment include both task- and process-related aspects and draw from adult learning theory:

- building on and relating activities to learners' prior knowledge and experience
- relating to the perceived learning needs of the participants
- involving active learning and participation
- enabling group interaction within a positive group atmosphere
- adherence to group goals
- cases that promote critical thinking and problem solving
- being clinically relevant and applicable to practice
- facilitating the integration of knowledge and skill
- cycles of action–reflection
- allowing the acquisition of technical skills
- effective tutors

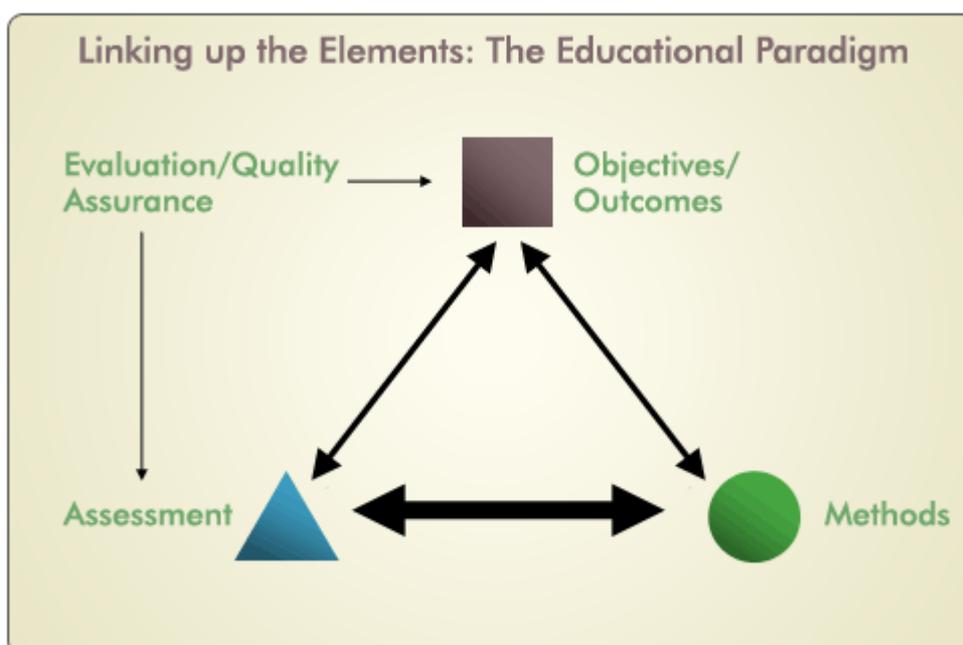
(de Villiers *et al.*, 2003; Steinert, 2004).

We go on to consider some of these specific aspects in more detail in the following sections.

### Small group teaching and learning in context

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Small group teaching does not take place in a vacuum. The diagram below shows how teaching and learning methods interrelate with learning outcomes/objectives, assessment, and evaluation and quality assurance. The teacher has a role in ensuring that each session forms part of the whole curriculum by creating opportunities (through selecting appropriate teaching and learning methods and creating a stimulating learning environment) for learners to achieve the stated objectives and thus be capable of passing assessments.



See the [Setting learning objectives](#) module and 'Curriculum design and development' in Explore around this topic for more information about planning learning events, the wider aspects of course planning and design, and how learning outcomes relate to setting assessment criteria as part of curriculum alignment.

### Thinking point

What do you think are some of the most appropriate activities and learning/teaching methods that will facilitate both achievement of set task as well as group processes?

## The role of the teacher

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There are three main activities that small group teachers have to manage simultaneously:

- managing the group
- managing activities
- managing the learning.

In many small group teaching situations, the role of the teacher is that of facilitator of learning: leading discussions, asking open-ended questions, guiding process and task, and enabling active participation of learners and engagement with ideas. However, small groups function and behave in various ways and have different purposes. Teachers therefore need to be able to adopt a range of roles and skills to suit specific situations, often during the same teaching session.

Other roles that may be adopted include that of:

- the instructor, who imparts information to students
- the neutral chair
- the consultant, from whom learners can ask questions
- the devil's advocate
- the commentator
- the wanderer, such as in a larger workshop
- the absent friend (McCrorie, 2006).

Some of the problems associated with leading effective small groups are summarised by Jacques (2003):

- the teacher gives a lecture rather than conducting a dialogue
- the teacher talks too much

- students cannot be encouraged to talk except with difficulty; they will not talk to each other but will only respond to questions from the tutor
- students do not prepare for the sessions
- one student dominates or blocks the discussion
- the students want to be given the solutions to problems rather than discuss them.

Effective tutors are essential to ensuring that small groups work well. Any teaching event will be more successful if the teacher:

- is enthusiastic
- has organised the session well
- has a feeling for the subject
- can conceptualise the topic
- has empathy with the learners
- understands how people learn
- has skills in teaching and managing learning
- is alert to context and 'classroom' events
- is teaching with their preferred teaching style
- has a wide range of skills in their teaching repertoire, including 'questioning, listening, reinforcing, reacting, summarising and leadership' (McCrorie, 2006, p. 8).

Making the shift from teacher as expert to facilitator is sometimes seen as diminishing a teacher's power and authority, but this should not be the case. Facilitating learning is empowering for both the learner and the teacher and frees the teacher from many of the burdens that having to be an 'expert' might entail. It would traditionally have been seen as a weakness for a teacher to say 'I don't know, let's find out' or 'I don't know, do any of you students know the answer?' and clearly clinical teachers need to know more about many topics than their students or trainees, but medical science is changing so rapidly that no one can know everything. Implementing an evidence-based approach to clinical learning and to medical practice involves finding out about the latest research. You can use these techniques and this approach to facilitate your own and your students'/trainees' learning.

### Group dynamics – how group size affects function

It is vital when dealing with any size or composition of group that the teacher is aware of the ways in which groups may interact. As well as the physical environment and seating arrangements, other factors such as the size of the group influence the group dynamics. The size of the group places limitations on the tasks and functions that it might be expected to perform. The table below indicates some of the constraints and positive functions relating to group size.

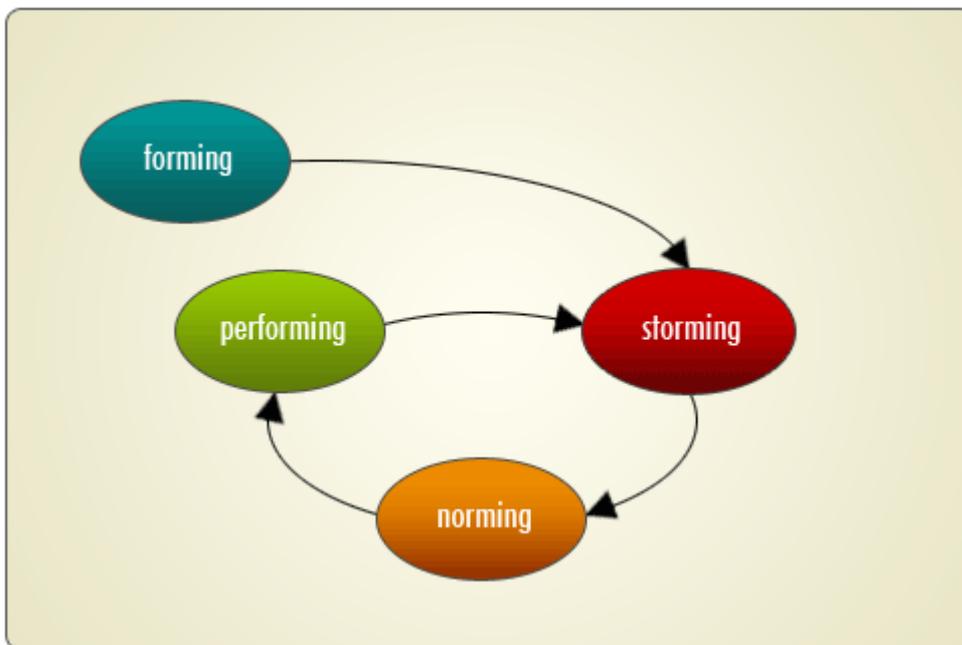
<b>Size</b>	<b>Task function</b>	<b>Affective functions</b>
<b>Individuals</b>	Personal reflection: - generating personal data	Personal focus increases 'safety': - personal focus means positive start - brings a sense of belonging and ownership
<b>Pairs/threes</b>	Generating data: - checking out data - sharing interpretations - good for basic communication skills practice (e.g. listening, questioning, clarifying) - good size for co-operative working	Builds sense of safety: - builds sense of confidence by active involvement (self-belief) - lays foundation for sharing and co-operating in bigger group - reticent members can still take part
<b>Fours/tens</b>	Generating ideas: - criticising ideas - usually sufficient numbers to enable allocation of roles and responsibilities, therefore wide range of work can be tackled (e.g. project work, problem-based learning, syndicate exercises)	Decreasing safety for reticent members: - at lower end of the range still difficult for members to 'hide', this risk increases with size - strong can still enthuse the weak - size of group still small enough to avoid splintering - sufficient resources to enable creative support
<b>More than ten</b>	Holding on to a task focus becomes difficult: - size hinders discussion but workshop activities possible, e.g. using purposeful sub-groups to	Difficulties in maintaining supportive climate: - 'hiding' becomes common

	address some of the issues	<ul style="list-style-type: none"> <li>- 'dominance' temptation and leadership struggles a risk</li> <li>- divisive possibilities with spontaneous splintering into sub-groups</li> </ul>
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Understanding the way in which the size of a group impacts on function is useful if teachers are planning to break groups into sub-groups or if they only have a small number of learners with them.

### Group dynamics - group processes

In addition to thinking about the impact the size of a group can have on learning, it is also useful to think about some group processes. There are many useful books and resources about group dynamics and process (see Further reading section) and so we will not go into detail here. However, one useful way of thinking about the processes through which a group goes when carrying out a task is Tuckman's (1965) framework:



Source: <http://www.infed.org/thinkers/tuckman.htm>

<p><b>Forming</b></p> 	<p>This is when a group comes together for the first time. The teacher can help by facilitating introductions, using ice-breaking tasks, and explaining the tasks and purpose of the group.</p>
<p><b>Norming</b></p> 	<p>The group begins to share ideas, thoughts and beliefs, and to develop shared norms (group rules). The teacher can help by clarifying ideas and ground rules, encouraging more reticent people to participate and moving the group towards its purpose.</p>
<p><b>Storming</b></p> 	<p>This stage is when the group is actively trying to carry out a task and there may be conflict between one or more group members as the group sorts itself out and becomes more functional. The teacher can help by clarifying and reflecting ideas, smoothing over and moderating conflicts and acting as a go-between between members.</p>
<p><b>Performing</b></p>	<p>This is when the group focuses on the activity and starts to work together as a team to perform the set tasks. The teacher's role is to keep the group focused and to encourage and facilitate as necessary.</p>



We might also add some final stages, such as 'adjourning' or, in the case of a group that has successfully worked together, 'mourning'. 'A good group will look back over its achievements and reflect on each others' contribution, on lessons learnt, on what worked well and what could have been done better' (McCrorie, 2006, p. 17).

Groups can loop back into the norming or storming stages, especially if there are some personality clashes in the group or difficulties with learning or understanding the tasks. The tutor needs to keep an eye on process as well as task or outputs and intervene if necessary. 'Being a democratic discussion leader involves making the right sorts of nudges and interventions. The role can be made a lot less demanding by using more structure and less intervention in the group process' (Jacques, 2003, p. 19).

So, let us go on to look at different ways that small group teaching sessions might be structured to enable effective group working.

## Planning and preparation

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'One of the most important (principles of good teaching) is the need for planning. Far from compromising spontaneity, planning provides a structure and context for both teacher and students, as well as a framework for reflection and evaluation' (Spencer, 2003, p. 25).

We have seen that one of the advantages of small group teaching is that it provides opportunities for in-depth discussion, reflection and consolidation of learning. Small group teaching is also costly in terms of time and physical resources, so it is important to maximise the learning that can be achieved by forward planning and appropriate structuring of activities.

Spencer (2003, p. 25) notes that there are four fundamental questions a clinical teacher should ask themselves when planning a teaching session.

- Who am I teaching? The number of learners and their study level or stage in training.

- What am I teaching? The topic or subject, the type of expected learning (knowledge, skills, behaviours).
- How will I teach it? Teaching and learning methods, length of time available, location of teaching session, access to patients, internet resources, clinical skills models, etc.
- How will I know if the students understand? Informal and formal assessments, questioning techniques, feedback from learners.

To these we might add the following.

- What do the learners know already?
- What are the learners going on to next?
- What do the learners want to know or be able to do as a result of your teaching? And how will I find this out?
- How will I build in flexibility to address unforeseen learning needs?

#### **Thinking point**

- Can you answer the above questions for all the groups you teach? If not, how might you find out the answers?

You will find more detailed ideas about identifying learning needs in the [Assessing educational needs](#) module in this series.

It can be helpful to devise a lesson plan for each teaching session, this may be very detailed or a simple broad-brush plan, but before the session, you should:

- define your aims and learning outcomes or objectives
- think about the structure of the session and timing of activities
- decide on the best teaching and learning methods to achieve the learning outcome
- list content and key topics, and research more if needed
- refine the lesson plan
- identify learning resources and support material
- finalise any linked assessment or evaluation.

See the [Lesson plan](#) from the Teachers' toolkit.

Jacques defines three steps in planning the structure of a small discussion group:



#### Thinking point

- What sort of group tasks do you think are the most appropriate for:
  - small group learning in general?
  - knowledge/understanding-based learning outcomes?
  - clinical or procedural-based skills?
  - developing teamwork skills?

## Structuring small group teaching

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Richmond (1984) sets out five key roles of the teacher in terms of the 'strategic interventions' required to maintain the group as a functional unit.

- Start and finish group work – keeping to time, ensuring outcomes and tasks are explained and that the activities draw to a close with learning needs being achieved.
- Maintain the flow of content – ensuring learning follows in a logical sequence and providing stimulus materials and questions.
- Manage group dynamics.
- Facilitate goal achievement – of the wider curriculum, of the session and those identified by the learners themselves.
- Manage group environment – both physical and psychological.

Small group sessions work well if there is a mix of activities and timings, with activities selected so that people can work individually, in different-sized groups and with and

without teachers or facilitators. A rule of thumb is that real concentration on one activity, such as listening to someone talk, lasts around 10 minutes without a break or change of pace. It is important therefore to keep the session flowing, and concentration and learning occurring. This is facilitated by including breaks and opportunities to move around. However, it is equally important to allow time for groups to bond and work together on shared tasks and not to keep switching people round for the sake of it. We look at some of the different activities you can use further on in the module.

Here are some suggested timings and tasks for a 60-minute small group session which includes different types of learner and teacher-centred activities.



### Thinking point

- Looking at the structures above, what common features do you see for each of the sessions and what are your thoughts on the balance of teacher- and learner-centred activities?

Let us now go on to consider some of the types of event, and the tasks and techniques available to small group teachers.

## Types of small group event

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There are a number of models for small group teaching, designed around specific tasks and with a specific purpose in mind. When planning the type of small group teaching that might be most appropriate for your session, think about the learners who will be involved, the resources available (teachers, facilitators, 'experts', patients, rooms, equipment), the learners' needs and the learning outcomes that are to be achieved.

Small group teaching can be structured around:

- topics or themes - e.g. evidence-based practice, asthma, chronic lung conditions
- clinical cases (actual patients or case notes) - e.g. Mrs X presents with...
- clinical or community-based problems - e.g. problem-based learning, a child with a wheeze
- situations - e.g. critical incident or significant event analysis
- tasks or skills - e.g. X-ray meetings, clinical audit, examination of cardio-vascular system.

The format of small group teaching events needs to encourage and facilitate participation by group members. Sometimes, there is little or no choice about the sort of event that a teacher has to facilitate, as these are pre-planned as part of a programme. Knowing some of the advantages and disadvantages and aims of each of these can be helpful in terms of your own preparation and expectations.

The next section considers some of the most common formats and types of small group teaching event. Lectures and clinical skills teaching are covered in two other modules in this series: Improve your lecturing and Teaching clinical skills (please note this module will be available soon).

**Seminars** and **tutorials** are two of the most traditional models for learning in groups in higher education. The words can be used interchangeably but the main aim of both is to encourage group discussion. Teachers tend to have a more directive role in these types

of small group teaching event, although it can be useful to rotate the leadership role around the participants.

A 'seminar' normally describes a group discussion led formally or informally by the tutor, focusing on issues arising from subject matter. The number of students is normally between eight and 20. In the traditional model, one student will be asked to present a critical analysis or other preparation to introduce the discussion. Often seminars are used at postgraduate level, providing a forum for presenting research findings to a constructively critical group of academics and peers.

The word 'tutorial' tends to be used for smaller group teaching events where more time is spent with individual students and their development, using certain aspects of subject matter to stimulate debate. In one-to-one tutorials the tutor may look at assignments prepared by the learner or discuss career options or other professional development topics. Tutorials can also be delivered online. Tutorials can be very successful if a clinical or other 'trigger' is used to stimulate discussion and debate. Triggers might include videos, photographs, results of tests or investigations or, in problem-based learning (PBL) and case-based learning (see below), a short paper-based scenario or set of case notes and test results.

**Clinical tutorials** should focus on the solving of patient problems rather than delivering factual information. You will need to plan the teaching, with clear aims and objectives. Ensure that students/trainees know that they will be expected to participate, and set tasks for them to perform in preparation for the tutorial. Remember to act as a facilitator and encourage interaction between the participants. You should avoid conducting tutorials in which you or your students/trainees present topics. If, for example, you wish to have a tutorial dealing with hypertension, then the case notes and investigations of a patient with hypertension should be the focus.

See 'Facilitating learning: small group teaching methods' in Explore this topic, for further discussion and 'hints and tips' for delivering seminars and tutorials.

**Workshops** are educational seminars or meetings where there is interaction and exchange of information; sometimes they are designed to generate information or position papers. They may be offered on a residential basis over several days to introduce a course and core topics, or at the end to reinforce and integrate learning. They are particularly useful as part of blended or distance learning programmes to bring participants together face to face or to deliver learning where there is a need for resources, people and equipment to which students do not normally have access. A range of activities can be used, including role-play triggers, video, case studies and patient encounters to set the scene and stimulate discussion and debate.

**Journal clubs** are meetings of staff where everyone is asked to present their comments on recent papers in the medical (or other) literature. This works well, provided the topic is of direct relevance to participants, everyone comes prepared and there is time for discussion and clarification. It should not turn into a series of mini-lectures.

**Syndicate groups** are where participants are asked to prepare (individually or in pairs) on a pre-selected topic around a theme (for example, on different conditions/diseases around a theme of chronic obstructive airway disease) and report back at the syndicate group. Again this needs to be well facilitated, everyone needs to have prepared and be willing to contribute, and time needs to be set aside for discussion.

**Action learning sets** (ALSs) are frequently used in postgraduate staff development and training. They comprise a group of six to eight people who come together around shared and negotiated tasks, problems or 'issues'. Some ALSs are task-focused, others are set up to support and facilitate personal and professional development and allow individuals to bring work-related 'issues' to the group, which helps the person to reflect, find solutions and discuss options. There is a set structure to an ALS, with clear ground rules around time and participation. The group usually facilitates itself, although some sets are facilitated and more task-focused.

## Problem- and case-based learning

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Problem-based learning (PBL) was first implemented at McMaster University in Hamilton, Canada, in the late 1960s. It can also be argued that PBL is the formalisation of a process that has underpinned clinical teaching for many years. PBL is now to be found in undergraduate medical curricula throughout the world, and its introduction in the UK was encouraged by the General Medical Council's recommendations on undergraduate medical education, *Tomorrow's Doctors* (1993, 2003).

### **What is problem-based learning?**

As Davis and Harden (1999) have indicated, there is still some confusion about what PBL really is. It is best thought of as an educational approach where students are encouraged to take an active role in their learning by discussing a problem (or scenario) centred on a clinical situation, community problem or current scientific debate. In the clinical context, this might be a description of events when a patient attends a GP surgery or A&E department. The history, presenting complaint, signs and symptoms, ethical issues, investigations needed (and their outcomes) can all be woven into the case, as required. The problem has to be written so that the students can identify the areas that they need to explore in order to be able to resolve satisfactorily gaps in their knowledge and understanding that become apparent during group discussion.

A key point in understanding the nature of PBL is to differentiate it from problem solving. In problem solving exercises the basic assumption is that the students have the knowledge and skills required to arrive at a solution (albeit that the application to a specific problem may further stretch them). In PBL the problem is the starting point that enables students to identify for themselves new areas for their learning.

For PBL to be effective, it is important that participants work together in a structured way. Initially, a problem designed by the faculty staff is reviewed by a group of students. Ideally, there should be no more than 10 members in the group, and they should select for themselves a student chair and scribe for the session. (The scribe will record the ideas generated by the group on a whiteboard or flipchart.) It is the task of the staff facilitator to ensure that the group works through the problem in a methodical way. A series of steps can be identified – that below is based on the Maastricht ‘seven jump’ model.

1. The group starts by identifying any terms with which they are unfamiliar. Some members of the group may have some prior knowledge that will help the group.
2. The students openly discuss the scenario and define the problem.
3. The group brainstorms possible explanations or hypotheses which fit with the events/problems they identified.
4. Some provisional explanations/conclusions are reached that would reasonably explain the essence of the case.
5. The students formulate their learning objectives – those aspects which the group have determined need further study.
6. Working independently (or in pairs) the students use the resources available to them to achieve the learning objectives.
7. The group meets again a few days later to pool the information they have gained from private study and discuss the case in the light of this new knowledge.

Ideally, the students and facilitator should then evaluate the case and its suitability for PBL. Schmidt (1983) provides a fuller description of the process.

For more about PBL, see 'Facilitating learning: small group teaching methods' in Explore around this topic. Please note this will be available soon.

You may want to explore different approaches from the ‘classic’ PBL approach to encourage and develop learners’ problem-solving skills or clinical decision-making skills. Such approaches might include clinical case-based learning and clinical scenarios.

## **Clinical case-based learning**

Developing a 'bank' of interesting clinical cases that illustrate various aspects of clinical learning. These might include:

- case notes/extracts from a case history
- investigations carried out and the results, X-rays, etc.
- reports written by other health professionals
- examples of letters (referral, discharge, follow-up)
- video or audio tapes of patient encounters
- extracts from relevant articles about the clinical condition, treatment options, etc.

These cases can be used as stimulus material to encourage students or trainees to learn about a specific clinical condition. This can be helpful, for example if the condition is a common one, but the patients the learners have had the opportunity to see have not been typical or did not stay in hospital long enough. Because the material is based on real patients and real resources, it is seen as interesting and relevant by learners and allows the teacher to pre-select material which illustrates specific learning points.

Remember to seek appropriate permissions when copying and using such material.

Websites such as the Patient Voices site are useful sources of case-based multimedia resources.

## **Clinical scenarios**

You may find it useful to write or think about some typical clinical scenarios to use as a stimulus for discussion or to encourage learners to seek out more information about a topic. These may cover wider issues than just clinical conditions. The advantage of writing these yourself is that you can tailor them to include the issues you want learners to discuss or find out more about. These might include legal or ethical issues, public health issues, resource allocation issues, etc. Such clinical scenarios might include:

- newspaper cuttings about clinical cases
- articles from, for example, the *Lancet* or *British Medical Journal*
- reports or recommendations from public bodies or agencies
- statistical reports showing trends or disease patterns
- a stimulus piece you have written which points learners in the right direction or which asks some key questions.

Other types of clinical scenario could be written more like anecdotes about situations in which you or colleagues have been involved. These may be used to stimulate discussion about doctor-patient relationships, dealing with carers or relatives, communicating with colleagues, dealing with complaints, etc.

## Practical arrangements

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One of the key elements for the success of small group teaching is to ensure that the physical environment is appropriate for the learning that you plan will occur.

Sometimes there is little choice about room size, heating/temperature, noise or facilities and resources, and teachers just have to make the best use of what there is. Paying attention to the basic physiological needs (Maslow, 1943) is always the starting point, particularly if the group is going to be together for some time and you want learning to be productive.

Take a few minutes at the start of the session to make sure that everyone is comfortable in terms of room temperature and lighting, that they know where rest rooms are and when breaks will be, and let them know if you're happy with them bringing drinks into the session.

Make sure that you are familiar with the learning resources available, such as the computer equipment, know how to load presentations, access the internet and set up the data projector, especially if you are using someone else's equipment. If you are using interactive whiteboards or other equipment, make sure you know how to use it. And make sure that other equipment you need for activities, such as flip charts and pens, is available. The technology and equipment should act as a backdrop to the activities and learning, not intrude or dominate because you are fiddling around trying to locate a file on a computer or can't make the movement-sensitive lights turn off on a sunny day.

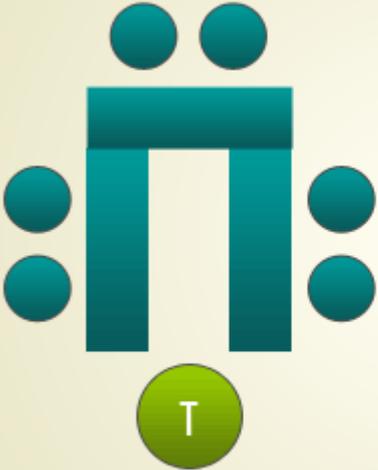
See 'Using learning resources to enhance teaching and learning' in Explore around this topic for more detailed information.

### **Seating layout**

One of the important aspects that influences how small groups function is the layout of the room and specifically the relationship between group participants, and between participants and the tutor or facilitator.

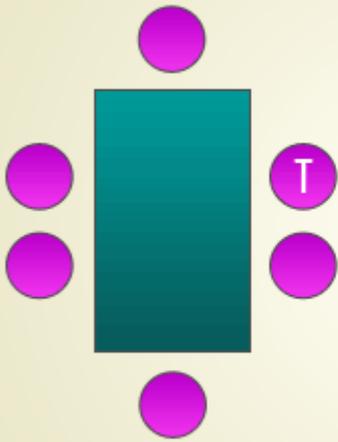
The group size and the activities you have planned will influence how you set up the room. Take a little time before the session to make sure that the layout is appropriate and be confident in moving furniture around, if this is possible, so as to facilitate discussion and group interaction.

Here are some examples of room layouts for different activities:



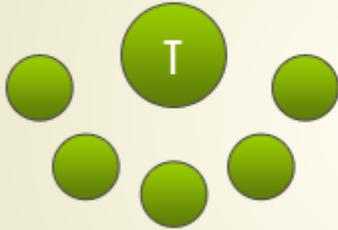
The diagram shows a U-shaped arrangement of teal rectangular tables. At the top of the 'U' are two teal circles representing participants. On the left and right sides of the 'U' are two teal circles each, also representing participants. At the bottom of the 'U', centered, is a green circle with a white letter 'T' inside, representing the teacher.

In this U-shaped layout, the teacher again is clearly leading the group, but participants can see one another and make eye contact and could talk together in pairs.

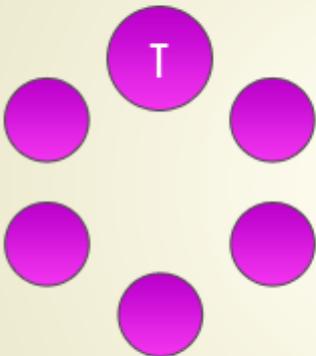


The diagram shows a central teal rectangular table. On the left side of the table are two magenta circles representing participants. On the right side of the table are two magenta circles, one of which contains a white letter 'T' representing the teacher. Above the top edge of the table is one magenta circle, and below the bottom edge is one magenta circle, representing participants.

In this layout, the teacher is set within the group, although there is still a table which might act as a barrier to movement and interaction, although useful if people need to write or spread out papers. This layout would enable relaxed discussion and some group work. Note that the teacher cannot easily make eye contact with all the group members, especially the one sitting next to the teacher at the end of the table so some members might feel less included.



In this horseshoe layout, everyone can see everyone else, the teacher is placed so as to lead discussions easily and the teacher can back off so as to allow the group or pairs to discuss issues. There are no tables.



This layout enables good group discussion, the teacher is part of the group rather than in a physical leadership position. Eye contact can be maintained between group members and there is no 'hiding place' so participation is encouraged.

For larger groups, you might place tables, each seating five or six people, around the room in 'cafeteria' or 'cabaret' style, with the teacher and equipment at the front of the room. This enables participants to talk and work in small groups very easily and also to move around the room. The facilitator can 'float' when the groups are working.

## Starting the session

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The main task for the teacher at the start of the session is to facilitate forming and norming. To do this we need to:

- create a positive learning environment
- outline our expectations and explore those of the group
- negotiate and set ground rules
- identify, agree and assign roles and responsibilities
- facilitate participation and enable communication between group members through setting appropriate tasks.

### Thinking points

- How do you make groups of students feel welcome?
- What strategies do you and could you use to help them 'settle in' rapidly?

The first step is to ensure that group participants feel welcome. Learn people's names, help them feel welcome through introductions and have the room set out in such a way as to facilitate the learning and activities you have planned.

The group members may or may not know each other. If they do not, then '**ice-breaker**' activities can provide a fun, non-threatening start to group sessions. Examples include asking students to say their name and link it with an animal beginning with the same letter (not so easy for the Xanthes of this world!) or pairing people up and asking them to introduce one another to the rest of the group, with a memorable aspect such a holiday or one interesting or unusual thing about them. Other ice-breakers involve setting people to work in teams on a task or getting them to line up alphabetically according to the place they are from (or were born) or some other aspect that means they have to talk to people to work out where they fit in the line. For larger groups, people can be given a short list of names of participants they have to meet and exchange information with. Name badges are essential for this task of course.

Once participants are talking, then the next part of the forming and norming stage is to define learning outcomes and needs and establish ground rules. At the start of the session build in time for students and trainees to define their own learning needs and then translate their learning needs into achievable outcomes. Some tutors agree a learning contract with their students (either individually or as a group), which includes agreeing learning objectives and assessment procedures and criteria, allocating tasks and

developing group rules. This involves setting out your expectations for timekeeping and process, including what learners can expect from you and the 'ground rules'.

## Setting ground rules

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Teachers need to establish an appropriate micro-culture within the group. This includes the physical environment, the psychological climate, the interactions between the teacher and the group, and between the individual group members. Sometimes the 'rules' are assumed and problems are rare, but it usually helps to establish the ground rules from the start. The ground rules can be elicited from the group or determined by the tutor. If tutor-led, then they should be stated verbally or provided to the learners on a handout or slide, with the opportunity for the learners to respond, add more and negotiate the 'rules'. This provides good role modelling and a transparency about expectations for behaviours. Typical ground rules might be:

- starting and finishing on time
- coming prepared
- listening to others without interruptions
- participating
- saying when you don't understand
- when anyone is speaking, addressing the whole group and not just the teacher
- switching off mobile phones
- treating others' contributions with respect
- keeping personal issues out of the session
- maintaining confidentiality within the group.

In specific learning situations, such as when dealing with interpersonal development, communication skills, in interprofessional groups or learning about difficult situations, the ground rules should always be set out at the start of the session to help ensure that learners feel safe to express their views and make mistakes, and that a congenial, relaxed atmosphere is developed and maintained. This is very important in many aspects of clinical teaching. We are all aware of the 'teaching by humiliation' that has been challenged in medical education, but clinicians are in an inherent position of power over their students and juniors, often responsible for carrying out assessments and providing references. Awareness of these power relations can help clinical teachers to become more sensitive to the needs and expectations of learners.

## Small group activities

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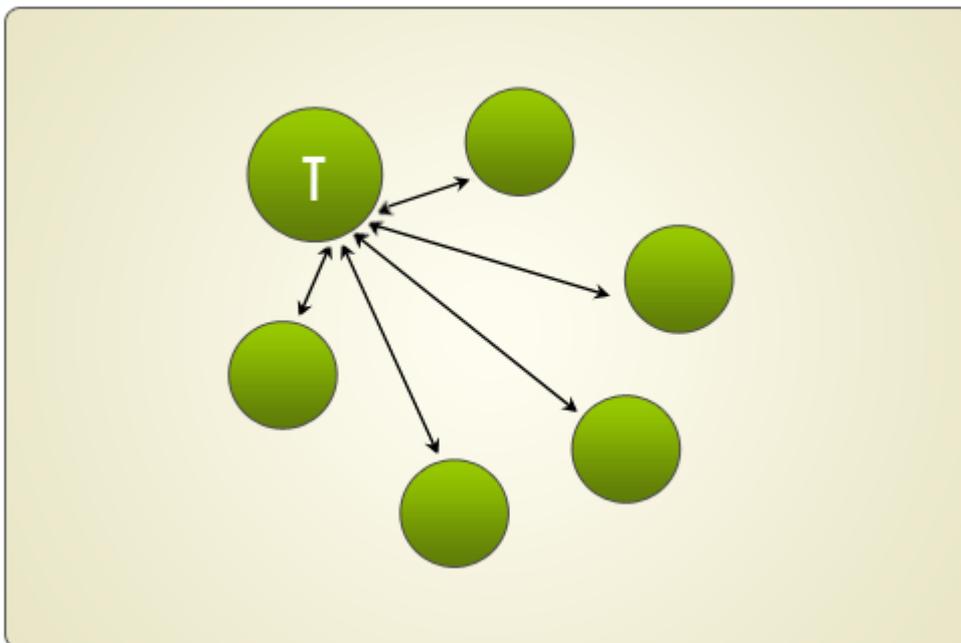
Jacques (2003) suggests that teachers have a range of choices available to them when working with groups. The sequence of activities is a strong determinant of learning, as is the way that teachers handle group processes and dynamics: sensitivity being one of the most important skills. Jacques also suggests that 'imaginative management in the setting of tasks and the organizing of purposeful activities for sub-groups... can create a firm foundation for qualities such as openness, networking and proactive communication – important ingredients in the process of personal and organisational change' (p. 21).

The attached Teachers' toolbox item ([Small group activities](#)) summarises a selection of activities. Some require more active facilitation by the teacher, while others require the teacher to take a back seat and allow the group process to determine events and outputs.

## Questioning and facilitation techniques

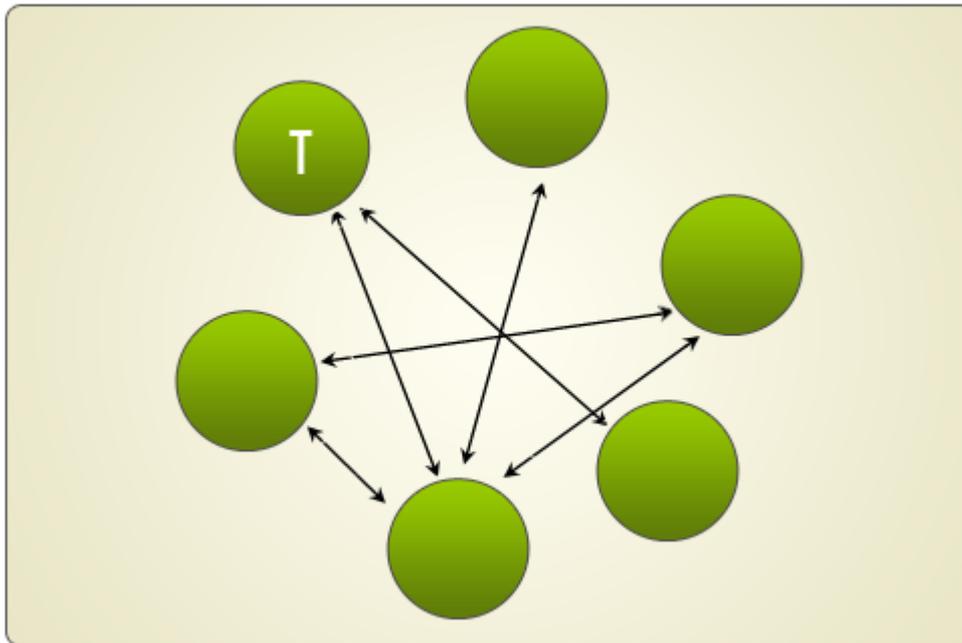
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We have seen how the role of the teacher can be more or less directive and how particular activities, and indeed complete sessions, can vary from being more teacher-centred to being more learner-centred. It is the role of the teacher to select the most relevant methods and styles for the task; good teachers can switch styles and pace to suit the needs of the learners and the moment.



In the diagram above, we can see that the teacher is in a more didactic role, with interactions being between the teacher and individual learners. While in the diagram

below, the participation is much more active, with interactions between participants as well as between the teacher and the participants.



How can we facilitate discussions and promote the interactions that are one of the hallmarks and purposes of small groups?

In addition to setting activities that encourage discussion between participants and get them engaged with the topic, one of the main techniques that a teacher can use to stimulate discussion is the use of appropriate questioning. Jacques (2000) suggested that by using different types of questioning technique teachers can shift the learning and participation focus (see the diagram below).



We can also use different question strategies to pose to learners so as to elicit different responses, stimulate deeper thinking and reflection, and promote critical thinking and discussion. Some examples are given below.

### Question strategies

- **Evidence** - How do you know that? What evidence is there to support that position?
- **Clarification** - Can you put that another way? Can you give me an example? Can you explain that term?
- **Explanation** - Why might that be the case? How would we know that? Who might be responsible for...?
- **Linking and extending** - Is there any connection between what you have just said and what Y said earlier? How does this idea support/challenge what we explored earlier in the session?
- **Hypothetical** - What might happen if...? What would be the potential benefits of X?
- **Cause and effect** - How is this response related to management? Why is/isn't drug X suitable in this condition? What would happen if we increased/decreased X?
- **Summary and synthesis** - What remains unsolved/uncertain? What else do we need to know or do to understand this better/be better prepared?

(adapted from Brookfield 2006)

The final task of the facilitator is to close and conclude the session. Here it is important to leave time to wrap up activities and review the learning outcomes, making sure that you also attend to concluding group processes as well as task functions. It is helpful also to link the session to the learners' next steps, ensuring that any follow-up activities are clear and that any evaluation requirements or other activities are set in place.

### Handling problems or difficult situations

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'If you haven't got problems in your group, then something is wrong' (Jacques, 2000).

McCrorie summarises a list of common problems encountered by small group teachers and suggests that the best strategy is to let the group sort out its own problems. This is more effective in the long term, and if a group is to remain together for some time then it is worthwhile to do so. If the group is very new or working together for a very short time (e.g. a workshop) or has a complex and essential task to perform with a short deadline, then tutor intervention will help keep the group task focused.

## Challenging learners

The dominant learner	The disengaged learner
The arrogant learner – the know-it-all	The bored learner
The learner who wants to be the centre of attention at all times	The learner who relies on everyone else to do the work
The aggressive or argumentative learner	The lazy learner
The offensive and rude learner	The shy learner
The politically incorrect learner	The delicate, tearful learner
The flirtatious learner	The over-dependent learner
The joke-a-minute learner	The constantly late learner
The garrulous learner	The frequently ill learner
	The mentally disturbed learner

(McCrorie, 2006, p. 20)

Understanding a little about the internal dynamics of the group and how to manage different learners will make group working more effective. There are some common problems with communications that can be helped by active facilitation by the teacher.

### The persistent talker

- Monopolising group discussions – summarise their main points and divert the discussion to others; interrupt with a yes/no question and ask someone else to comment; give them a specific task (e.g. taking notes, writing on a flipchart) so that they have to listen to others; divide the group into sub-groups for specific tasks and ask them to chair or act as scribe so their focus is on others' contributions.
- Rambling and diverting the discussion – break in and bring the discussion back to the point; be direct; indicate pressure of time and the need to get on with the task; ask questions of other people in the group.
- Always tries to answer every question – acknowledge their help but suggest you seek out several ideas/answers; direct questions to other people in the group.
- Talking to others nearby and not joining in with the whole group – directly address them and ask them to contribute to the whole group; stop talking until they realise others are listening.

### Quiet people

- Shy and timid – they may speak quietly or cannot find the words to say what they mean. You can help them by allowing time for them to respond; asking 'easy' questions of them; asking the same question of different trainees with them safely in the middle;

protecting them from mockery or teasing; acknowledging their contribution; putting the group into pairs on a task to increase confidence.

- Reticent – often has a valid contribution but is unwilling to participate. You can draw them into the discussion by name; invite them to comment about something you know they have experience of; motivate by focusing on something they find interesting; positively reinforce any contribution.

### **Negative attitude**

These people may like to talk but have a negative attitude that can affect others.

- Superior – they appear to know everything. Flatter a little by indicating how others can learn from their experience; ask for specific examples, ask the group to comment, then ask the person to summarise the rest of the group's points; indicate to the group that they will learn more if everyone shares experience and knowledge.
- Complainer – blames others and finds fault. Get them to be specific about the problem and invite the group to think of positive solutions; be direct and say that the group has to get on with the task.
- Clown – ridicules discussion by joking or making irritating remarks. Ask them for a serious contribution; acknowledge any valid contribution; be direct and say that although this was amusing, the group must move on to complete its task.
- Arguer – is often aggressive, hostile and antagonistic. Rephrase the point in milder terms; acknowledge that they feel strongly about the issue and invite the group for their comments; avoid lengthy debates by saying you can discuss this after the session; defuse the 'heat' and then move on; as a last resort, ask them to leave the group.

## To sum up

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- Always consider whether a session can be better run as a small group.
- Plan the session carefully.
- Vary the session plan according to the size of group and venue.
- Run large groups in a workshop format using café-style tables.
- Include a range of formats in any one session, recognising that active learning is likely to be more successful than passive learning.
- Consider your role in the group process: being a group leader is only one of several options.
- Remember the importance of maintaining good dynamics.
- Deal with issues as and when they arise, bearing in mind it is often better to let the group address the issues themselves.
- Take care not to overstep boundaries and destroy good working relationships.

(McCrorie, 2006)

### **Congratulations**

You have now reached the end of the module. Provided you have entered something into your log you can now print your certificate. To generate your certificate please go to 'my area' and click on 'complete' in the course status column. Please note, you will not be able to print your certificate unless you have entered something in your 'reflections area'.

Please now take a moment to evaluate the course and enter your comments below.

## Further information

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This module was written by Judy McKimm, Visiting Professor of Healthcare Education and Leadership, University of Bedfordshire, and Clare Morris, Associate Dean, Bedfordshire and Hertfordshire Postgraduate Medical School, University of Bedfordshire.

## Teachers Toolkit

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- [Lesson planning checklist](#)
- [Small group activities](#)
- [Action learning](#)

## References

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Brookfield S (2006) [Discussion as a way of teaching](#).

De Villers M, Bresick G and Mash B (2003) The value of small group learning: an evaluation of an innovative CPD programme for primary care medical practitioners. *Medical Education*. **37**: 815–21.

General Medical Council (2003) *Tomorrow's Doctors: recommendations on undergraduate medical education*. GMC, London.

General Medical Council (1993) *Tomorrow's Doctors: recommendations on undergraduate medical education*. GMC, London.

Jacques D (2003) Teaching small groups. In: Cantillon P, Hutchinson L and Wood D (eds) *BMJ ABC of Learning and Teaching in Medicine*, pp. 19–21. BMJ Publishing Group, London.

Jacques D (2000) The tutor's job. In: *Learning in Groups* (3e), pp. 155–80. Kogan Page, London.

Maslov AH (1943) A theory of human motivation. *Psychological Review*. **50**: 370–96.

McCrorie P (2006) *Teaching and Leading Small Groups*. Association for the Study of Medical Education, Edinburgh.

[Patient Voices website](#).

Richmond DE (1984) Improving the effectiveness of small-group learning with strategic intervention. *Medical Teacher*. **6**: 138–45.

Spencer J (2003) Learning and teaching in the clinical environment. In: Cantillon P, Hutchinson L and Wood D (eds) *BMJ ABC of Learning and Teaching in Medicine*, pp. 25–8. BMJ Publishing Group, London.

Steinert Y (2004) Student perceptions of effective small group teaching. *Medical Education*. **38**: 286–93.

### Further reading

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Elwyn G, Greenhalgh T and Macfarlane F (2001) *Groups: a guide to small group work in healthcare, management, education and research*. Radcliffe Medical Press, Oxford.

Grant J (2007) *Principles of Curriculum Design*. Association for the Study of Medical Education, Edinburgh.

Jacques D (2000) *Learning in Groups* (3e). Kogan Page: London.

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**Aim**

An aim in educational terms, is a brief statement of intent, indicating the scope and range of intended learning outcomes that the educational episode has been structured to address.

**Assessment**

Assessment is the term used to indicate an appraisal of students' performance. Typical formal assessments in medicine include written examinations, Multiple choice questionnaires (MCQ), observations of clinical or communication skills, Objective Structured Clinical Examinations (OSCEs) and Multi-Source Feedback (MSF). Assessments may be summative (where the marks gained contribute to a formal grade or award) or formative (where the focus is on providing feedback for ongoing development).

**Class**

Class refers to hierarchical differences between individuals or groups in societies or cultures . Factors that determine class may vary widely from one society to another. However, economic disadvantage and barriers to access services are major issues within class discrimination.

**Curriculum**

A detailed schedule of the teaching and learning opportunities that will be provided (GMC, 2004)

**Curriculum**

The GMC, 2004 described the curriculum as a detailed schedule of the teaching and learning opportunities that will be provided. A curriculum is a statement of the aims and intended learning outcomes of an educational programme. It states the rationale, content, organization, processes and methods of teaching, learning, assessment, supervision, and feedback.

**Learning Outcomes**

Learning outcomes are similar to learning objectives in that they specify the intended outcomes of the programme of study. These should be stated in clear and specific terms and should be developed along with a specification of the learning experiences that will allow the outcomes to be achieved.

**Learning objectives**

Grant describes learning objectives as "the specific knowledge, skills and attitudes that the student will display at the end of (a) course" (p20, 2007). The earliest (and very pervasive) objectives models of education were linked to behaviourist theories and 'transmission' models of learning, emphasizing measurable, observable behavioural achievements that can be clearly and rigorously assessed. Later models considered problem solving or expressive outcomes as being more flexible than behavioral objectives.

**Learning outcomes**

Learning outcomes are similar to learning objectives in that they specify the intended outcomes of the programme of study. These should be stated in clear and specific terms and should be developed along with a specification of the learning experiences that will allow the outcomes to be achieved.

## Learning activities

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Select one or more of the activities below to develop your skills in working with small groups.

If you are registered on the site, you can write up your reflections in the 'reflections area'. Click on the 'my area' link at the top of the page to access your personal pages. Please note that you must be logged in to do this.

### 1 The impact of group size

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One of the factors that makes a group a 'small group' is its size. But a small group can range from two or three people to 30 or so. Over the next week or two, looking at your own teaching groups or as a participant in meetings or other small group situations, pay particular attention to considering how the size of a group impacts on:

- the group dynamic
- the activities a group participate in
- how the leader or teacher copes with the size of the group
- how the size of the group affects possible learning outcomes or outputs.

Note some of the things that you would have done differently (techniques, structure, room layout, teacher-centredness versus learner-centredness, etc.).

List some changes that you will make to your teaching practice.

### 2 Trying new activities and techniques

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This activity asks you to try out some new activities and techniques when you are running your next small group teaching session.

Take one or two activities or techniques that you have never tried before to introduce into your lesson plan. Choose activities that are appropriate to the task and group process, and that you think will encourage more discussion and engagement with learning.

Test these out on one or two occasions.

Reflect on how they worked in practice.

- Did these activities help to make the learning more effective?
- Did it make your teaching more difficult?

- What were the key practical effects on the teaching?

Review your teaching practice and plan how you will change your teaching to incorporate the learning from this activity.

### 3 Questioning techniques

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The section on Questioning and facilitation offers some ideas on different sorts of questioning techniques. Some or all of these may be familiar to you, but in this activity think about how you could improve your questioning techniques:

(a) to encourage participation and deeper reflection and thinking from individual learners and

(b) to encourage and promote group discussion.

Take some time to reflect on how using the questioning and facilitation strategies and ideas worked for you.

- What worked well?
- What didn't?
- What further information or learning do you need?
- What did the students or trainees think?