

# How Theory Can Inform Practice

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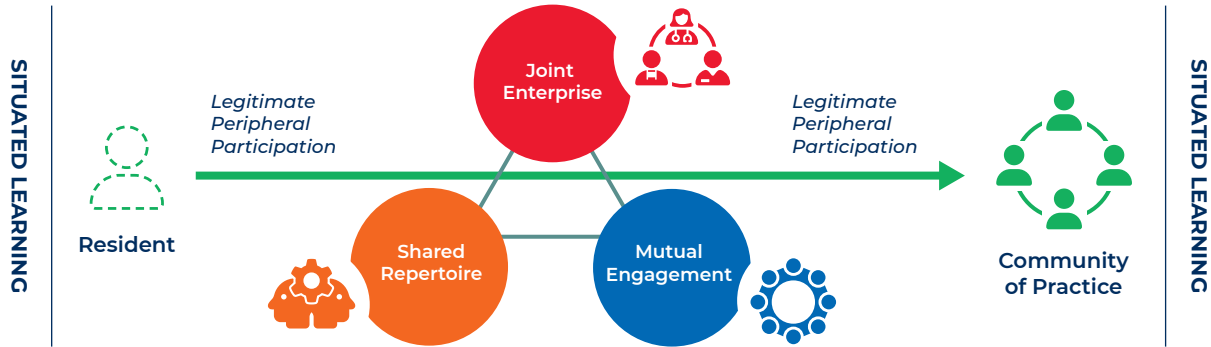
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# How Theory Can Inform Practice: A Case of Easing Transition Into Residency

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Health professions educators aim to optimally prepare trainees for future practice; educational theory can help reach this goal. Below we present an authentic case, *I Just Need to Speak With My Eyes*, that displays the significant struggles of transitioning into residency training. Using this case, we show how the application of 4 learning mechanisms described in Lave and Wenger's<sup>1,2</sup> theories of *situated learning* and *communities of practice* can help ease the transition into residency by addressing issues like self-questioning and emotional turmoil (see the colored boxes below). *Situated learning* refers to learning in everyday practice and highlights its fundamentally social nature as well as the progressive participation of the learner.<sup>1</sup> *Communities of practice* builds on the notion of people learning from each other, viewing learning as a shared enterprise among a group of people with a common purpose.<sup>2</sup>



## *I Just Need to Speak With My Eyes*

*I just started as a resident, and from that first day on I keep asking myself “Who am I?” Suddenly, I have responsibilities, I’m on the roster, people depend on me. I’m a doctor now. The attendings say: “This will become second nature. You’ll get the hang of it quickly. You’ll be alright.” During the day, I try to manage as best as I can: logistically, medically, emotionally; getting to know new colleagues; figuring out how to work together with nursing staff, patients, resident colleagues, supervisors, and all the other professionals. I closely observe my supervisors, their questions, and their solutions. At home, I start overthinking, which I share with my peer group: “Should I have done this differently? Should I have told my supervisor that detail I forgot?” In the morning, I check my patients and feel relieved nothing has happened overnight. On the positive side, the masks we’re wearing due to the COVID-19 pandemic mean I can more easily hide my emotions: I just need to speak with my eyes.*

Legitimate Peripheral Participation	Shared Repertoire	Mutual Engagement	Joint Enterprise
To help residents answer “Who am I?” in this community of practice:	To help residents gain shared history and “get the hang of it”:	To help residents “work together” with the team:	To help residents shift from “overthinking” to negotiating shared goals:
<ul style="list-style-type: none"> <li>Actively engage residents in meetings</li> <li>Share educators’ unique roles and perspectives</li> <li>Think aloud while practicing (e.g., during physical examinations and clinical reasoning)</li> <li>Provide extra support for difficult cases, fading over time</li> </ul>	<ul style="list-style-type: none"> <li>Encourage residents to be observed and participate in different settings (e.g., rounds, patient safety efforts, handovers)</li> <li>Acknowledge and discuss important practices like entrustment, professionalism, case presentations, use of abbreviations, and electronic patient file management</li> </ul>	<ul style="list-style-type: none"> <li>Create opportunities for meaningful interactions and information exchange (e.g., ward rounds, team meetings)</li> <li>Acknowledge and discuss diversity in backgrounds, experiences, and expertise</li> <li>Encourage and create peer support and collaboration opportunities</li> <li>Celebrate milestones, accomplishments, and transition</li> </ul>	<ul style="list-style-type: none"> <li>Make time to discuss and negotiate how to attain shared patient care goals</li> <li>Acknowledge and discuss clinical practice diversity within these goals</li> <li>Invite senior and peer team members to share what matters, experiences, and strategies for practice</li> </ul>

**Disclosures:** None reported.

**References:**

- Lave J, Wenger E. *Situated Learning: Legitimate Peripheral Participation*. Cambridge, UK: Cambridge University Press; 1991.
- Wenger E, McDermott R, Snyder W. *Cultivating Communities of Practice: A Guide to Managing Knowledge*. Boston, MA: Harvard Business School Press; 2002.

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