Welcome to the Clinician Café—A unique learning model

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The National Clinical Training Center for Family Planning (NCTCFP) had to reassess strategies for delivering distance education during the pandemic and how it might be received by practitioners weary from virtual meetings, classes, and continuing education activities. The NCTCFP developed the Clinician Café: a virtual, multimodal, timelimited educational program that is hosted live on an interactive platform. The Clinician Café satisfied a variety of learning styles, engagement preferences, and work commitments for those on the front lines of sexual and reproductive healthcare delivery.

Key words: virtual learning, learning styles, family planning, online learning, nursing, continuing education

Womens Healthcare. 2022;10(6):40-43. doi: 10.51256/WHC122240 © 2022 HealthCom Media. All rights reserved.

he National Clinical Training Center for Family Planning (NCTCFP) has delivered inperson and distance education for sexual and reproductive healthcare (SRH) providers for over 15 years, with the goal of encouraging skill and knowledge acquisition as well as practice and systems change. In early 2021, the NCTCFP accelerated the development of a new delivery method for continuing education (CE) in response to the Covid-19 pandemic and clinicians' requests for easily accessible, topic-specific materials. The Clinician Café was developed as an interactive educational program with a variety of learning materials focused

on a single clinical content area, based on the "cafeteria learning" model.¹ Similar to recent healthcare startups that alter traditional care delivery models in new ways, this model for CE evolved from an analysis of evaluation data from a wide variety of educational and informational programming offered by the NCTCFP. We hypothesize that utilizing a virtual "place" (ie, the Café platform) might be useful to advanced practice registered nurses (APRNs) convening meetings, more informal educational sessions such as staff meetings, or as an engaging web-based location for formal synchronous and asynchronous CE.

Cafeteria learning model

The cafeteria learning model was developed as an in-person training technique for organizational development.¹ It mixes social, experiential, and constructivist learning approaches, integrating elements of choice to acknowledge and support participants' diverse learning styles.^{2–6} The Café operationalizes these constructs by providing a selection of learning activities on the same topic through various vehicles and virtual modalities that provide primarily active learning experiences, either individually or within a group. The constructs of social learning theory assume that people learn from interactions with others in a social context, while experiential and constructivist theories rely on learners' previous experience, reflection on new information, and integrating new knowledge into what they already know. Experiential theory further clarifies that knowledge construction occurs through discovery and active participation. Similar to a learning collaborative or learning community, clinicians participating in a Café are able to transfer knowledge and expertise by seeking advice from experts and colleagues.³

Through an online platform, learners can review content via virtual station-based activities at their own pace and consistent with their



personal learning styles, including live clinical roundtables with colleagues and experts inspired by the ECHO [Extension for Community Healthcare Outcomes] model, an asynchronous guestion and answer portal, and various on-demand activities, such as interactive case studies, podcasts, guizzes, and journal articles.⁷ The Café encourages participants to act, problem solve, and construct their knowledge with a variety of interchangeable activities resulting in knowledge acquisition, content application, and practice change.

Providing a variety of activities allows a Café participant to explore a single topic from multiple perspectives and meet more learning objectives. Whereas some topics lend themselves to stand-alone learning products (eg, changes in treatment for a particular sexually transmitted infection), other topics such as hypertension assessment and management in family planning settings are more complex. These require more time and activities to cover screening, diagnosis, treatment, epidemiology, and effects on sexual and reproductive health outcomes.

Built on a unique software platform, the Clinician Café learning space is an interactive, online educational program that has the look and feel of a café, all via cloud computing. This platform allows the creation of audio-visual learning materials and the integration of multiple forms of media. Users can access the platform via desktop, mobile device, tablet, or virtual reality headset.

Each Café menu consists of several standard activity choices, with the option of adding extra items depending on the breadth of the content needs for that particular Café topic. The standard menu options include Morning Read, which includes 2 to 4 peer-reviewed journal articles coupled with a knowledge check to provide continuing education credit; Tea and Talk, which provides two live online didactic discussions with ample question-and-answer time to discuss the topic; Grab and Go, consisting of one or more podcasts produced by NCTCFP and related to the Café topic; and finally Coffee and Cases, which include one or more interactive case studies developed by subject matter experts to contextualize the content based on how

the topic might present in a Title X setting. Title X settings are federally funded and provide family planning and related preventive health services. Each Café also contains additional resources related to the topic such as clinical toolkits, FAQs from health professional associations, or additional peer-reviewed articles.

Each activity included on the Café platform was chosen to appeal to different styles of learning. For those who are solo learners, the Morning Read journal articles and Grab and Go podcasts offer self-paced knowledge acquisition and provide options for visual or auditory learning. For those who learn best through active participation, the Tea and Talk and Coffee and Cases are based on constructivist and experiential learning theory and allow learners to build knowledge and skills through interaction, and a choice of learning in a group setting or a self-paced setting. The inclusion of multiple asynchronous activity options was important to NCTCFP. Due to the nature of clinical work, attendance at live webinars is not always possible, but clinicians still desire the knowledge presented. Finally, the addiNCTCFP continues to COllect post-Café evaluations that will better inform clinical education providers on the benefits of learning activities grounded in Social, constructivist, and experiential theories such as the Clinician Café.

tional resources blend elements of these to enhance learning and cover aspects of the Café subject that may be less common or more niche. Additionally, each Café has free CE credits available for some activities, though not all, to appeal to learners seeking those credits while offering a lower-pressure learning option to those who do not want or need CE education credits.

Study findings

The Clinician Café was piloted with 100 registered participants in January 2021. Immediate post-event evaluations were collected to assess training impact (eq, plans to change practice) and satisfaction with learning activities and platform. After a successful pilot, NCTCFP sought and received approval for data collection from March through July 2021 from the Institutional Review Board at the University of Missouri-Kansas City School of Nursing and Health Studies, and registration was opened to accommodate up to 300 participants for each of three sessions offered in March, May, and July 2021. Participants were recruited via Twitter, NCTCFP's newsletter, and advertisements by other national organizations in the sexual and reproductive health field.

Both the pilot and successive sessions were evaluated according to the Kirkpatrick Model at level 1 (reaction–user satisfaction and relevance), and level 2 (learning–degree of acquired knowledge, skills, attitude, and confidence).⁸ Levels 3 (behavior) and 4 (results) are difficult to assess in universal training opportunities, and evaluation at these levels was not supported in this study.

Eighty-four participants agreed to participate in the study and completed the evaluation survey. Respondents were primarily advanced practice clinicians (n = 60; 71.4%) and registered nurses (n = 14; 16.7%). Ages ranged from 26 to 69 years (average, 51 years). Years since last formal education ranged from 0 to 40 (average, 14). Total years in the field of reproductive health ranged from 1 to 50 (average, 18). Respondents described their primary workplace setting as rural (n = 30; 35.7%), suburban (n = 25; 29.8%), and urban (n = 29; 24.5%). In the evaluations, 66 respondents (78.6%) reported acquiring new skills as a result of their participation in the Clinician Café and 75 respondents (89.3%) believed it would help them perform better in their jobs. When asked how

they intended to apply what they learned in the Café, respondents reported that they would share information or tools with their colleagues (n = 65; 77.4%) and with their clients (n = 56; 66.7%) and by making or proposing a change in client education (n = 38; 45.2%), patient treatment (n = 31; 36.9%), clinic flow (n = 16; 19.1%), protocols (n = 15; 17.9%), and exam technique (n = 13; 15.5%). Respondents were highly satisfied with the Café, with 78 respondents (92.9%) rating the educational activity as excellent or good.

In the last two Cafés, we asked respondents (n = 67) if they preferred this style of learning to traditional webinars. Over two-thirds of respondents (n = 45; 67.2%) strongly agreed or agreed that they prefer this style of learning to traditional webinars, with another 21 respondents (31.3%) neither agreeing nor disagreeing. The majority (n = 63;94.0%) said they would participate in another Clinician Café. Some respondents (n = 20; 29.9%) indicated that they would also like to have the resources and links to activities in a single document rather than navigating the virtual Café.

Open-ended feedback was generally positive. Participants highlighted a preference for the new platform and the ability to access materials at any time, enjoyed the variety of different learning modalities, and provision of a "relaxed" environment. Respondents reported the combination of fixed lecture times and flexible learning allowed greater integration of sessions into busy work schedules. Access data from the platform indicated, on average, that participants opened the live Zoom Tea & Talk and Morning Reads the most, followed by the additional resources and case studies (Figure).

The wide range in participants' ages and years of clinical practice

and the near-equal split between types of practice settings suggest that this training method is appealing to clinicians across generations, locations, and years of experience in the field/levels of expertise. Many participants self-reported new knowledge acquisition and that they would recommend the Café to others. The virtual platform setting of the Café was well received, visually pleasing, and clinicians reported preferring the active learning activities over traditional, more passive online seminars.

Conclusion

Clinicians are constantly in need of access to learning activities that will keep them up to date on current best practices regardless of their experience or geographic location.⁹ The data support learning opportunities through a novel approach, as it permits learners to engage in content and improve their practices regardless of length of experience in the family planning field or their geographic location.

Despite its strengths, this study has several limitations. One limitation is the small sample size, making results less generalizable. Additionally, each Café presented an entirely different topic, making each sample size smaller. Due to these small sample sizes, the data may not represent the full health professions workforce. Additionally, results may be less generalizable across specialties and subspecialties in healthcare professions because recruitment focused on sexual and reproductive health clinicians.

NCTCFP continues to collect post-Café evaluations that will better inform clinical education providers on the benefits of learning activities grounded in social, constructivist, and experiential theories such as the Clinician Café.

NCTCFP has a long history of providing clinical education and training. In 2021, it developed and launched this novel, evidence-based approach to provide clinical education that, to the best of NCTCFP's knowledge, has not been done for an audience of healthcare professionals. The innovative, multimodal platform approach to a single content focus area was preferred by participants over traditional online learning. This suggests that adapting traditional online training to a multimodal model may offer clinicians a more tailored, individualized learning experience, as well as being a more accessible and engaging way to improve current practice regardless of years of practice, experience, age, or geographic location. Online platforms, which support individual learning styles and offer APRNs choices about how they access and engage in knowledge and skill acquisition activities, show promise as a strategy for expanding and enhancing a variety of educational activities, including prelicensure, precertification academic, and ongoing professional development programs.

All authors are affiliated with the National Clinical Training Center for Family Planning (NCTCFP) **Collaborative to Advance Health** Services at the University of **Missouri-Kansas City School** of Nursing and Health Studies. This work was supported by the Department of Health and Human Services (DHHS), Office of the Assistant Secretary of Health (OASH), Office of Population Affairs (OPA), Office of Family Planning Grant #5 FTP-PA006029-03-00. The funder was not involved in study design, data collection, analysis, or interpretation and did not participate in writing this report. The authors have no actual or potential

conflicts of interest in relation to the contents of this article.

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