

# Teachable Moments

Development, retention and wellness

Supervision Suite · Topic families

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# Part 1 · Slides

## Teachable Moment Recognition

Maximizing Natural Learning Opportunities

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### INTRODUCTION

#### Teachable Moment Recognition

##### Maximizing Natural Learning

Teachable moment recognition is the sophisticated ability to observe, recognize, and respond to natural learning opportunities that arise during routine clinical operations. It transforms everyday situations into dynamic learning experiences.

Strategic observation

Immediate recognition

Real-time feedback

Authentic context

High relevance

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### CORE CONCEPT

#### Strategic Positioning

##### Being Where Learning Happens

Deliberately placing yourself in locations and situations where you can observe clinical interactions, decision-making, and professional dynamics. If you aren't present, you miss the moment.

Regular presence in clinical areas

Unobtrusive observation

High-stress situation support

Maximizing exposure

Systematic observation

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### CORE CONCEPT

#### Observational Awareness

##### Seeing the Learning Potential

Developing acute sensitivity to clinical dynamics, staff interactions, and situations that contain learning potential. It's about noticing the subtle cues.

Subtle communication patterns

Clinical decision points

Staff confidence levels

Client dynamics

Distinguishing routine vs. teachable

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#### CORE CONCEPT

### Immediate Recognition

#### Catching the Moment

Rapidly identifying learning opportunities as they arise to enable timely intervention. Delayed recognition often means the learning opportunity is lost.

Quick assessment

Timely intervention

Identifying potential

Assessing readiness

Educational value recognition

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#### CORE CONCEPT

### Real-Time Feedback Mastery

#### Guidance in the Moment

Skillfully providing immediate guidance, correction, or reinforcement that enhances learning without disrupting clinical workflow or creating anxiety.

Natural, supportive guidance

Enhancing workflow

Increasing confidence

Client and staff needs

Educational focus

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#### CORE CONCEPT

### Clinical Modeling Excellence

## Showing, Not Just Telling

Demonstrating effective clinical thinking and intervention approaches during actual situations. Staff learn best by observing mastery in action.

Natural demonstration

Educational modeling

Thinking processes visible

Realistic emulation

Inspiring confidence

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### CORE CONCEPT

## Learning Integration

### Connecting the Dots

Connecting immediate teachable moments to broader professional development goals ensures spontaneous learning builds systematic skills.

Connecting to themes

Progressive skill building

Pattern recognition

Reinforcing training

Long-term development

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### CONCLUSION

## Dynamic Learning Laboratories

### Accelerating Growth

Teachable moment recognition transforms routine clinical operations into dynamic learning laboratories where professional development occurs within authentic contexts.

Accelerated development

Authentic context learning

Integrated supervision

Memorable experiences

Clinical excellence

## Part 2 · Self-Assessment

### Teachable Moment Recognition

#### Self-Assessment

##### Part 1: Vulnerabilities

##### Questions 1-35

1. I miss learning opportunities because I'm not physically positioned to observe clinical interactions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

2. My location during clinical operations prevents me from witnessing important teachable moments.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

3. I spend most of my time in my office rather than observing clinical activities directly.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

4. My positioning fails to enable natural observation of staff clinical decision-making processes.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

5. I lack systematic approaches for positioning myself to observe different types of clinical work.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

6. I fail to notice subtle clinical dynamics that could provide valuable learning opportunities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

7. Learning opportunities pass by unrecognized because I'm focused on other matters.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

8. I struggle to identify the clinical significance of situations I observe.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

9. My observational skills miss nuanced interactions that could benefit from supervisory input.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

10. I have difficulty distinguishing routine situations from those with teachable moment potential.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

11. I recognize learning opportunities only after they've passed and the moment is gone.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

12. My recognition of teachable moments comes too late to provide immediate guidance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

13. I struggle to identify learning opportunities quickly enough to respond in real-time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

14. Important clinical moments pass without my recognition of their educational value.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

15. I lack the rapid assessment skills needed to recognize immediate learning potential.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

16. I struggle to provide immediate feedback without disrupting clinical workflow.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

17. My attempts at real-time guidance feel awkward or intrusive to staff and clients.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

18. I lack skills for delivering immediate feedback that feels helpful rather than critical.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

19. I avoid providing real-time feedback due to concerns about disrupting clinical work.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

20. My immediate feedback tends to increase rather than decrease staff anxiety or self-consciousness.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

21. I miss opportunities to model effective clinical thinking and decision-making in real-time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

22. My clinical modeling feels forced or artificial rather than natural and instructive.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

23. I struggle to demonstrate clinical approaches while situations are actually occurring.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

24. Staff members don't benefit from observing my clinical decision-making processes directly.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

25. I lack skills for modeling clinical thinking in ways that feel educational rather than showing off.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

26. I fail to connect immediate teachable moments to broader professional development goals.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

27. My real-time feedback doesn't build into progressive skill development over time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

28. I miss opportunities to reference previous teachable moments to reinforce learning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

29. Individual teachable moments don't accumulate into systematic skill building.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

30. I struggle to help staff see patterns and themes across multiple spontaneous learning experiences.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

31. I fail to document important teachable moments for later supervision discussion.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

32. My teachable moment interventions lack follow-up that reinforces the learning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

33. I don't track patterns in teachable moments to identify systematic development needs.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

34. Important real-time learning gets lost because I don't integrate it into formal supervision.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

35. I miss opportunities to build on teachable moments in subsequent professional development planning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

## Part 2: Strengths

## Questions 36-70

36. I position myself strategically throughout clinical areas to maximize observation of staff interactions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

37. My location during clinical operations enables natural witnessing of important teachable moments.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

38. I spend optimal time observing clinical activities while balancing other supervisory responsibilities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

39. My positioning allows for unobtrusive observation of staff clinical decision-making processes.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

40. I maintain systematic approaches for observing different types of clinical work and staff interactions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

41. I consistently notice subtle clinical dynamics that provide valuable learning opportunities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

42. I maintain awareness that enables recognition of learning opportunities as they develop.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

43. I quickly identify the clinical significance and educational potential of situations I observe.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

44. My observational skills detect nuanced interactions that benefit from supervisory guidance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

45. I reliably distinguish routine situations from those with significant teachable moment potential.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

46. I recognize learning opportunities immediately as they arise, enabling real-time response.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

47. My recognition of teachable moments occurs quickly enough to provide timely guidance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

48. I possess rapid assessment skills that identify learning opportunities in real-time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

49. I consistently recognize the educational value of clinical moments as they're occurring.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

50. I maintain acute awareness that enables immediate identification of learning potential.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

51. I provide immediate feedback that enhances clinical workflow rather than disrupting it.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

52. My real-time guidance feels natural and helpful rather than intrusive to staff and clients.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

53. I possess strong skills for delivering immediate feedback that feels supportive and educational.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

54. I confidently provide real-time feedback that improves clinical practice without creating anxiety.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

55. My immediate feedback consistently decreases staff uncertainty while increasing confidence.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

56. I skillfully model effective clinical thinking and decision-making as situations occur.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

57. My clinical modeling feels natural and instructive, providing clear examples for staff learning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

58. I demonstrate clinical approaches during actual situations in ways that enhance staff understanding.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

59. Staff members benefit significantly from observing my clinical decision-making processes directly.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

60. I model clinical thinking in ways that feel educational and inspiring rather than intimidating.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

61. I successfully connect immediate teachable moments to broader professional development goals.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

62. My real-time feedback builds progressively into systematic skill development over time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

63. I reference previous teachable moments to reinforce learning and demonstrate progress.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

64. Individual teachable moments accumulate into comprehensive skill building for each supervisee.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

65. I help staff recognize patterns and themes across multiple spontaneous learning experiences.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

66. I document important teachable moments for integration into formal supervision discussions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

67. My teachable moment interventions include systematic follow-up that reinforces learning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

68. I track patterns in teachable moments to identify and address systematic development needs.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

69. I successfully integrate real-time learning into formal supervision and development planning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

70. I build effectively on teachable moments in subsequent professional development activities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

## Scoring guide

High Vulnerability: Significant missed opportunities. Immediate attention needed.

Moderate Vulnerability: Notable areas for improvement limiting efficiency.

Mild Vulnerability: Good recognition but opportunities for strengthening.

Low Vulnerability: Reliable recognition and utilization of learning moments.

Strong Capabilities: Robust recognition accelerating staff development.

Developing Capabilities: Established practices with room for greater impact.

Basic Capabilities: Beginning to implement approaches but need development.

Limited Capabilities: Insufficient utilization of natural learning opportunities.

Dynamic Learning (>1.5): Capabilities substantially outweigh vulnerabilities.

Healthy Balance (1.26-1.5): Good foundation for real-time learning.

Moderate Balance (1.0-1.25): Capabilities slightly outweigh vulnerabilities.

High Risk (<1.0): Vulnerabilities outweigh capabilities. Requires attention.

## Part 3 • Worksheet

### Teachable Moment Worksheet

Profile Understanding

Which aspect is your greatest strength?

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What specific challenges have you noticed?

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How has your approach evolved?

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Strategic Development

Strategies for effective positioning:

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Balancing guidance with independence:

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Ensuring feedback is supportive:

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Action Planning

**Priority Area 1**

**Specific Capability**

E.g., Immediate Recognition

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**Measurable Goal**

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**Action Steps**

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**Timeline**

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**Accountability**

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**Priority Area 2****Specific Capability**

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**Measurable Goal**

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**Action Steps**

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**Timeline**

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## Accountability

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## Part 4 · Mind Map

### Teachable Moment Map

Map your learning opportunities

Strategic Positioning

Locations for observation.

Rounds scheduleCommon areasPeak times

Add example...

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Add example...

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Observational Awareness

Noticing learning potential.

Clinical cuesStaff signalsClient dynamics

Add example...

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Immediate Recognition

Identifying opportunities fast.

Decision pointsCritical momentsLearning gaps

Add example...

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Real-Time Feedback

Immediate guidance.

Supportive wordsBrief correctionReinforcement

Add example...

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Clinical Modeling

Demonstrating skills.

Thinking aloudInterventionDecision process

Add example...

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