Learning the Learner: A Tool for Mentorship and Goal Development in Medical Education

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Outline

• Clinical preceptorship
• Goal development in medical education
• Mentorship in medical education
• Focus Four Tool
“To hold him who has taught me this art as equal to my parents and to live my life in partnership with him, and if he is in need of money to give him a share of mine, and to regard his offspring as equal to my brothers and to teach them this art without fee and covenant; to give a share of precepts and oral instruction and all other learning to my sons and to the sons of him who has instructed me and to the pupils who have signed the covenant and have taken an oath according to the medical law.”
Early Clinical Experience
Early Clinical Experience: Effects on Student Knowledge

• Knowledge of medical sciences
  – Contextualize the basic sciences
• Knowledge of ethical dimension of care
• Knowledge of professional roles and relationships
• Development of clinical reasoning
Early Clinical Experience: Effects on Student Attitudes

• Effect on student attitudes
  – Develop empathic reactions towards ill people
  – Increased awareness of their emotional reactions to patients

• Professional socialization
  – Maturity in dealing with patients
  – Insight into social and psychological aspects of disease
  – Early exposure to physician role models

• Satisfaction

• Self-awareness
  – The ability to recognize and respond to feelings of uncertainty
Early Clinical Experience: Effects on Student Behaviors

• Effect on career choice
  – Positive impact on attitudes towards rural/primary care practice

• Effect on communication
  – Increased objective ratings of ability to relate to standardized patients
  – Increased self-reported ability to relate to patients

• Effect on clinical skills
  – History-taking, PE, note-writing

• Performance in assessments
Foundations of Doctoring Program

• Clinical preceptorship
  – Practice the PE and communications skills learned in the classroom
  – Exposure to physician role models early in education experience
Preceptorship is an opportunity to learn clinical information that was not covered in other blocks.

- Percent of Medical Students:
  - Strongly Disagree: 4
  - Disagree: 11
  - Agree: 47
  - Strongly Agree: 38
Preceptorship is an opportunity to work with a positive physician role model.
Preceptorship is an opportunity to have ongoing feedback from a physician who knows me well.
Self-Directed Learning
Self-Directed Learning

• First steps in the self-directed learning process are:
  – Definition of learning needs
  – Articulation of learning goals
Self-Regulated Learning Theory

- Forethought Phase
- Performance Phase
- Self-Reflection Phase

Goal Setting
Strategic Planning
Self-Assessment

- Key step in the continuing professional development cycle
- Self-assessment does not reliably concur with external assessment
Self-Assessment Strategies

• Dedicating time
• Creating accountability
• Goal generation through mentorship
• Looking outward for formative and summative assessments of current level of performance
Informed Self-Assessment

• Data interpretation
  – Rating scales, Narrative comments, Test scores, SP encounters

• Standards

• Self-monitoring and reflection
ISMART

• Important
• Specific
• Measurable
• Accountable
• Realistic
• Timeline
“Use Wisdom to Defeat Opponent”
Role Models & Mentors

• Role model: teach by example
• Mentor: guide in professional development
Excellence in Role Modeling

- interpersonal skills
- positive outlook
- commitment to excellence and growth, integrity and leadership

Academy of Emergency Med 2004
Barriers to Role Modeling

- impatient
- overly opinionated
- being quiet
- being overextended
- having difficulty remembering names and faces
Role Modeling Consciousness

• Specifically think about being role models when interacting with learners
Why have a mentor?

• Professionals with mentors make approx $5600-22,500 than their equivalent counterparts
• Increased job satisfaction, retention, and productivity
Again and Again…. 

• Literature supports that mentorship relationship needs GOALS!
Mentorship

• The birth of an idea
• A paucity of tools
Focus Four Goalsheet

• Simplicity
• Gives direction
• “Builds checkpoints and helps achieve small victories that you can build momentum from”
Focus Four Goal Sheet©

Marisa Echaniz  Kristin Furfari

• We would like for you to compile a list of goals that you would like to meet, in order to make your time with your preceptor as productive as possible. To help, we’ve entered some categories, but feel free to move beyond this area. We also expect that as you feel more comfortable or master certain areas, you will take those goals off your list and add new ones. Included, are some example sheets.

• Advising/Networking:

• History-Taking/Communication Skills:

• Physical Exam Skills:

• Clinical Reasoning/Additional Skills:
Focus Four Mentee Goal Sheet© – Jan 2014

- Advising/Networking:
  1) Find out more about becoming a hospitalist
  2) How should I prepare for 2\textsuperscript{nd} yr
  3) If my preceptor is not in the specialty that I’m interested in, could they introduce me to someone in that specialty?

- History Taking/Communication Skills:
  1) Practice my “COLDER” mnemonic
  2) Ask in social hx if they have ever smoked

- Physical Exam Skills:
  1) Practice lung exam
  2) Practice checking for JVP

- Clinical Reasoning/Additional Skills:
  1) Find out how we get people to SNF’s
Focus Four Mentee Goal Sheet© – June 2014

- Advising/Networking:
  1) How should I prepare for 2nd yr?
  2) Meet with hospitalist that preceptor set me up with

- History Taking/Communication Skills:
  1) Make smoother transitions in my HPI, tell it chronologically like a story

- Physical Exam Skills:
  1) Keep practicing JVP
  2) Practice neuro exam

- Clinical Reasoning/Additional Skills:
  1) Work on differential diagnosis
  2) Find out how to get people into SNF’s
Hypothesis

• Focus Four will improve MS 1’s:
  * history taking/communication skills
  * physical exam skills
  * clinical reasoning skills
  * mentor/mentee relationship
Methods

• Jan 2014: rolled out to 80 MS 1’s
• Live orientation
• Administer surveys at end of 1st & 2nd yr
• Hard outcomes: CAPE results
Next Steps

• Correlating goal development more with external data sources
• Align pre-clinical goal development with ongoing goal development projects in the clinical years
• Helping preceptors be more effective mentors
• Closing the loop and looking at feedback
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