The Effective Preceptor

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Orientation Recommendations

Prior to Arrival: student profile (student background, training and interests)?

Initial Meeting:

- Practice Overview & Tour (spaces, materials, procedures – flow, breaks, food..., written documentation, available activities)
- Introductions (assume staff is aware student doctor is scheduled)
- Patient population
- Allied health services (systems-based practice)
- Community items of interest
- Student level & Hx
- Scheduling & Routine
- Contact Information (scheduling, questions...)
- Communication Expectations (cell, texts, timing...)
- Professionalism & Decorum (dress, arrival times, sundries, cell phone)
- Work Space (phone, breaks, locker, security of stuff, desk...)
- Setting Clear Expectations (from you of student and from student of you)
- Rotation Objectives (students & yours)
- Mode of Operation (leadership style - situational, permission levels)
- Feedback System (meetings, timing, process, product)
- Evaluation/s
- Reflections & Challenges
- Patient Processing (what can student do?)
- Legal restrictions
- Patient education
- Best practices from others? All covered.
Teaching Recommendations

- Setting Goals & Expectations
- Role Modeling (Think Out Loud)
- Teaching Skills
  - See one, do one, teach one (video 😊)
    - Overview, illustrate, emphasize, check for understanding
    - Student talk through, perform supervised, self-assess, feedback
- Treat as Adult Learners
  - Active Learning (engaged, hand/mind on)
- Question Strategy (5 teaching micro skills)
  - Get a Commitment
  - Probe for Evidence
  - Teach General Rules
  - Say What’s Right
  - Correct What’s Wrong
- Attitude (support and encourage)
- Best practices from others
  - Use case studies…small to large
  - Book of guidelines
  - Mini-conference before each patient
  - Give “situational” reading material
  - See what the student can do on their own
Feedback Recommendations

- Timing and Setting
  - Most useful immediately following the experience
  - Process established during orientations
  - Formative & Summative: Brief in-route encounters; Day end; Rotation end

- Effective Feedback Characteristics:
  - **Specific** and performance based.
  - Descriptive, not labeling.
  - Focuses on observations, repeated if possible
  - Begins with “I” statements
  - Balanced praise (1st) & correction
  - Based upon objectives & observable behaviors
  - Provides two-way communications
  - Brief
  - Based upon trust, honesty, concern (relational)
  - Private, particularly if correction
  - Best practices from others
    - Don’t be afraid to think/give incorrect answer
    - Teach & stress importance of DOCUMENTATION
    - Have student practice on you before pt
    - Discuss in advance difficulties of practice and how to navigate
    - Provide feedback on information flow
BONUS

Student Evaluation of Preceptor
http://www.oucom.ohiou.edu/ed/preceptor%20evaluation%20Draft%20of%20new%20yellow%20form%20NP%20090106.htm

Preceptor Evaluation of Student

Use to self-assess and check your “One Thing(s)”
Use to orient your student to what you’ll be grading

For more on Evaluation see: http://www.oucom.ohiou.edu/fd/monographs/evaluationmono.htm
Selected References

- [The Expert Preceptor Interactive Curriculum](http://www.med.unc.edu/epic/welcome.htm)
- OUCOM/CORE Faculty Development Websites: [http://www.oucom.ohiou.edu/fd/programs.htm](http://www.oucom.ohiou.edu/fd/programs.htm), [http://www.ohiocore.org/cf/index.htm](http://www.ohiocore.org/cf/index.htm)
- Paulman, et. all eds., “Precepting Medical Students in the Office,” John Hopkins University Press, 2000
- Baker, Dennis, FSU “Teaching Tips & Resources” brochure
- Schwenk, Whitman; “Residents as Teachers: A Guide to Educational Practice, DFM Utah School of Med, 1984