Surviving Clinical Rotations: Tips for
Interprofessional Precepting-Best Practice

CYNTHIA BOOTH LORD, MHS, PA-C
ASSOCIATE PROFESSOR &
DIRECTOR, PA PROGRAM
CASE WESTERN RESERVE UNIVERSITY



Objectives

Understand the vital role community preceptors play in educating future health professionals.

Establish strategies for effective and efficient precepting.

Identify solutions for time management and maintaining productivity when precepting students.





"Rather than training the next-generation workforce in health professions silos, interprofessional education means creating both academic and clinical experiences for students that advance the goal of the health professionals working in collaboration to provide the very best patient-centered care."

Mary Wakefield, Ph.D., R.N., Administrator of the federal Health Resources and Services Administration (HRSA)

Tip 1: Set the Stage-Define Expectations

Clarify your (preceptor) expectations up front

- Daily routine
- · Work hours
- How does this differ from arrival time?
- Learner level of responsibility and autonomy in providing patient care
- Rounds and night and weekend call
- Amount of reading expected
- Outline preferred text(s) and/or articles to read throughout rotation



Tip 2: Prepare & Orient

- Provide a "<u>seat at the table</u>" for all learners

 Make it <u>safe for learning</u> and taking risks

 Know who your learners are and their responsibilities
- Allow for role overlap

Review the cases for the day with learners and mutually decide where the best learning opportunities are likely to arise.

Quality not Quantity

- Quality of patient encounter trumps the number of patients seen
- old learners are seeing every patient with you---that is too much!



https://nexusipe.org/preceptors-nexus. http://healtheducation.umn.edu/nexus/ippreceptor/index.php?stamp=1442436233&sig=0f4b19dd49

Tip 2: Prepare & Orient

Define Office/Hospital Policies

- Directions for medical documentation, e-Rxs, making referrals
- How patients are selected for learner to see
- Length of time to spend with each patient
- $^{\circ}$ Absentee policy-how to reach preceptor, how to notify office

Define Preceptor/Learner Interaction

- Format of case presentations
- Time and process for feedback
- Learner self-evaluation before discussing preceptor evaluation



Tip 3: Develop Objectives

Work with your learner to develop 4-6 achievable rotation objectives

- Specific knowledge, skills, and attitudes to develop
- Focus on those objectives for the rotation
- $\,^\circ$ Familiarize yourself with criteria included in the learner clinical evaluation form
- Advise the learner to use a checklist to remember key points

Tip 4: Use Creative Scheduling

Schedule your patients in waves:

- Two in time slot 1
- One in time slot 2
- None in time slot 3.



You will have kept your productivity numbers at three cases in three time slots.

Tip 5: Use a Step-Wise Approach to Teaching

Have the learner focus on <u>one</u> aspect of a patient encounter rather than a comprehensive approach with <u>each</u> patient.

Emphasize (3) key teaching points only

 $^{\circ}\mbox{Lengthy}$ discussions usually not necessary











Tip 6: Observation is Important

Observe H&Ps and other skills over time with multiple patients.

Observe based on patient's medical problem and learner's skill level.

Have learner keep track of what skills have been observed.

 $\underline{Communicate}$ with learner about what skills still need to be observed and plan accordingly.



Tip 7: Mix Up the Type of Teaching You Do

<u>Work together</u> with one patient to decrease the time spent and allow the learner to see your assessment and plan for efficiency.

• Have the learner do the history, and then you do the physical

Assign the learner to patients whom you know like extra time.

• Have the learner see the difficult or talkative patient

Set a time limit on the learner:

""Get as much of the history as you can in 10 minutes and I will come in."

Burs C, Beauchesen M, Ryan-Krause P, Sawin K. Mastering the Preceptor Role. Journal of Pediatric Healthcare 2006; 20(3):172-8



Tip 8: Share Patient-Care Responsibilities 7

<u>Don't repeat unnecessary items</u> that you know the learner does well, just clarify.

Have learners $\underline{look\ up\ questions}$ that the patients have and after they discuss it with you, have them call patients back.

have learners <u>call patients with results</u> after you discuss them with the learner.

Have the learner <u>call specialists</u> and help facilitate care with ancillary services

If you have more than one learner, <u>they can teach each other</u>. <u>Set priorities</u> for learners to accomplish and activities to complete by the end of the day.

Tip 9: Co-Precept with other Health Professionals

<u>Share teaching responsibilities</u> & encourage preceptors from multiple professions to get involved in IP precepting.

- $^{\circ}$ Each preceptor will bring a different perspective and will likely contribute different teaching points
- Involve <u>nurses</u>, medical assistants, <u>billing specialists</u>, pastoral care, mental health providers, <u>social workers</u>, OT, PT, respiratory and <u>dental providers</u>
- $^{\circ}$ Spend time with the $\underline{\text{pharmacist}}$, to conduct medication reconciliation and to look for medication interactions.
- <u>Pastoral care</u> can work with an IP team of learners regarding health and spirituality
- <u>Create a physical space for all IP preceptors so</u> the team can present to everyone, allowing for all perspectives to be heard.



IP Preceptors Co-Precept Together



https://nexusipe.org/preceptors-nexus

Tip 10: Consider Interchangeable Preceptors

 $\ensuremath{\mathsf{IP}}$ teams may benefit from working with a variety of preceptors from different professions that change during their rotation.

The concept of interchangeable preceptors can serve the mission of realigning practice and education.

Example of IP precepting in a primary care practice:

- Precepting by a physician 3 days a week
- OT and NP one day a week during a falls clinic
- · Certified diabetes educator one day a week

https://nexusipe.org/preceptors-nexus.



Interchangeable Interprofessional Preceptors

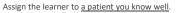




https://nexusipe.org/preceptors-nexus

Tip 11: Rethink Patient Presentations

 $\underline{\text{Set a limit}}$ on the length of presentation time.



Include patients and consider presenting in the patient's room.

 $^{\circ}$ Learners will need to think about their language, assumptions, motivations and behaviors before the presentation.

After patient presentations, encourage the learner to think about how they will deliver the plan, partner with patients, and provide patient education.

https://nexusipe.org/preceptors-nexus.

Tip 11: Rethink Patient Presentations

If you precept multiple learners concurrently:

Direct learners to physically move to a space to <u>huddle</u> and discuss patients. Encourage learners to <u>review patient charts together.</u>

 $\underline{\text{Rotate responsibility}} \text{ of the lead presenter among the learners}.$

Or encourage a $\overline{\text{shared presentation format in which all learners taking turns presenting information from their profession's viewpoint$

Help learners to learn $\underline{with},\underline{from}$ and \underline{about} each other for the sake of patient care.

https://nexusipe.org/preceptors-nexus.



Tip 12: Find Time for Discussion & Feedback

Learners need time to reflect upon the process and results of patient care.

- Schedule regular debrief sessions or spontaneous debrief sessions
- Keep debrief sessions brief (10-15 minutes)

Ask learners to keep a file card handy to write down questions for discussion.

Use travel time to and from clinic or to lunch to discuss cases.

Ask learners to look up information on three cases you saw during the day

Ask for a report the next session on only one of the three cases

Tip 12: Find Time for Discussion & Feedback

Provide meaningful feedback to the learner: The 4 T's

Be honest and thoughtful;

Define the $\underline{\text{time}}$ and the $\underline{\text{topic}}$ with the learner and,

Take action and follow-up on the feedback you give the learner to see if they have taken action on your recommendations.

Conduct a formal mid-term evaluation with review of rotation criteria

Quick Tip-Preceptor Feedback - The Four T's

Time

- Provide feedback in a timely manner
- Set aside time to give feedback in a "safe" space
- Conduct a formal mid-term evaluation
- Make time for regular debriefs

- Be specific with your feedback
- 1 to 3 areas to review in 5 to 15 minutes

Thoughtful

- Review the preceptor evaluation prior
- Avoid saying "you are doing fine"
- Provide specific examples of both strengths and areas for improvement

Take Action

- Take action and follow-up with the learner to see that they took action on your recommendations.
- Find opportunities for the learner to work on areas in need of improvement.







Interprofessional Teams in Practice

WHAT <u>YOU</u> CAN DO TO CREATE INTERPROFESSIONAL COLLABORATIVE PRACTICE WITH STUDENTS

Scenario 1: Student Rotation in a Primary Care Clinic-The Classic Approach

Learners rotate on different schedules in a primary care clinic and work in professional silos, only interacting with preceptors from their own profession.

Patient Preceptor Proceptor Patient Presented Preceptor Preceptor

IP Team Approach: Student Rotation in a Primary Care Clinic-Phase 1

Hold weekly case conferences with $\underline{\text{all}}$ IP learners and whichever preceptors are available.

 $^\circ$ Allows students to learn <u>with, from</u> and <u>about</u> each other as it relates to patients, populations and the healthcare system.

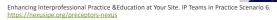
Intentionally assign learners to mutual patients or tasks to complete together (e.g., follow-up calls), in addition to handling patients individually with their preceptors.

IP Team Approach: Student Rotation in a Primary Care Clinic-Phase 2

Create IP student teams that rotate together and intentionally reflect (e.g. at weekly debrief sessions) about practice opportunities.

Assign them to a special group of patients and/or specialized tasks that they can complete together such as

- · calling patients to remind them of upcoming scheduled labs
- o conducting medication reviews and reconciliation
- offering educational services
- conducting group visits (e.g., diabetic group visit)



os	F.	and the second
		M'

Scenario 2: Patient Medication: Non-Adherence-Traditional Approach

A community pharmacist refills an albuterol rescue inhaler for a patient with asthma.

The pharmacist counsels the patient.

The pharmacist wonders if the PCP knows that the patient has not been adherent to the controller steroid inhaler and has not picked it up for three months.

Last time, the patient mentioned she did not like the device.



IP Team Approach: Patient Medication: Creating Adherence with an IP Student Team

Have the IP student team assigned by the triage nurse and/or case manager to call patients to follow up on chronic disease conditions and medication issues.

The student team members are <u>provided the information from the pharmacist</u> and they contact each patient to develop <u>improved care plans</u> that builds on the information the pharmacist has provided when the patient filled their prescription.

Can help prevent readmission:

- AsthmaCHF
- Pneumonia

Enhancing Interprofessional Practice &Education at Your Site. IP Teams in Practice Scenario 4. https://nexusipe.org/preceptors-nexus



Barriers to Team-Based Care

WHAT BARRIERS EXIST AT YOUR SITE? WHAT OPPORTUNITIES MIGHT THEY BRING? WHAT RESOURCES DO YOU NEED TO BEGIN BREAKING DOWN THESE BARRIERS?

Barriers to Team-Based Care

Stable teams vs. rapidly formed teams
• Primary care clinic team vs rapid response team

Time • Time for transition of care huddles, team debrief, reflection etc.

Space and location

. Culture and Hierarchy

Professional identity issues may create conflict (e.g., "turf wars")

Health Policy
Litigation, scopes of practice-IPP has outpaced laws, scopes of practice, licensure and regulatory systems

Reimbursement

- Current model has not adapted to IPP and may not adequately reimburse.

https://nexusipe.org/preceptors-nexus



Resources for Preceptors

PA Education Association (PAEA) Preceptor Handbook & Resources

http://paeaonline.org/publications/preceptor-handbook/

- Incorporating Students into Patient Care/Workflow
- The One-Minute Preceptor
- Ask-Tell-Ask Feedback Model
- SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education
- Introducing/Orienting a PA Student to Your Practice
- Tailoring Clinical Teaching to an Individual Student National Center for Interprofessional Education

https://nexusipe.org/preceptors-nexus. http://healtheducation.umn.edu/nexus/ippreceptor/index.php?stamp=1442436233&sig=0f4b19dd49



R	Δi	fе	r	Δ	n	_	Δ	c

IPEC (Interprofessional Education Collaborative Expert Panel). (2011). Core competencies for interprofessional collaborative practice. Washington, D.C.: Interprofessional Education Collaborative.

Seim H, Johnson OG. Clinical Preceptors: Tips for Effective Teaching with Minimal Downtime. Fam Med. 1999; 31(8):538-39.

Burs C, Beauchesen M, Ryan-Krause P, Sawin K. Mastering the Preceptor Role. Journal of Pediatric Healthcare 2006; 20(3):172-83.

Promes S. One-Minute Preceptor Model for Clinical Teaching. 12th International Conference on Emergency Medicine April 2008; San Francisco, CA.

Usatine R, Tremoulet PT, Irby D. Time-efficient Preceptors in Ambulatory Care Settings. Academic Medicine 2000; 75(6):639-42.

References

Antognoli E, Cohen D, Lawson P, Mason MJ, Flocke S, Biagioli F, Hull C. "I Don't Have Time for Students" Showing Preceptors How to be More Efficient with Students. Presented at STFM 34th Annual Predoctoral Education Conference; January 2008; Phoenix, AZ.

Biagioli F, Hull C. What Can We Learn from our Successful Clinical Preceptors? Presented at 2007 PAEA Annual Educational Forum; October, 2007; Tucson, AZ.

Preceptors in the Nexus Toolkit-Interprofessional Precepting: Best Practices. National Center for Interprofessional Practice and Education Website. https://nexusipe.org/preceptors-nexus. https://nexusipe.org/preceptors-nexus. <a href="https://nexusipe.org/preceptors-nexusipe.org/precep

Thank You!

QUESTIONS?



