

NO STUDENT, PRECEPTOR, OR ROTATION IS EVER THE SAME



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- I have no financial interest or arrangement to disclose that would create a conflict of interest related to this presentation

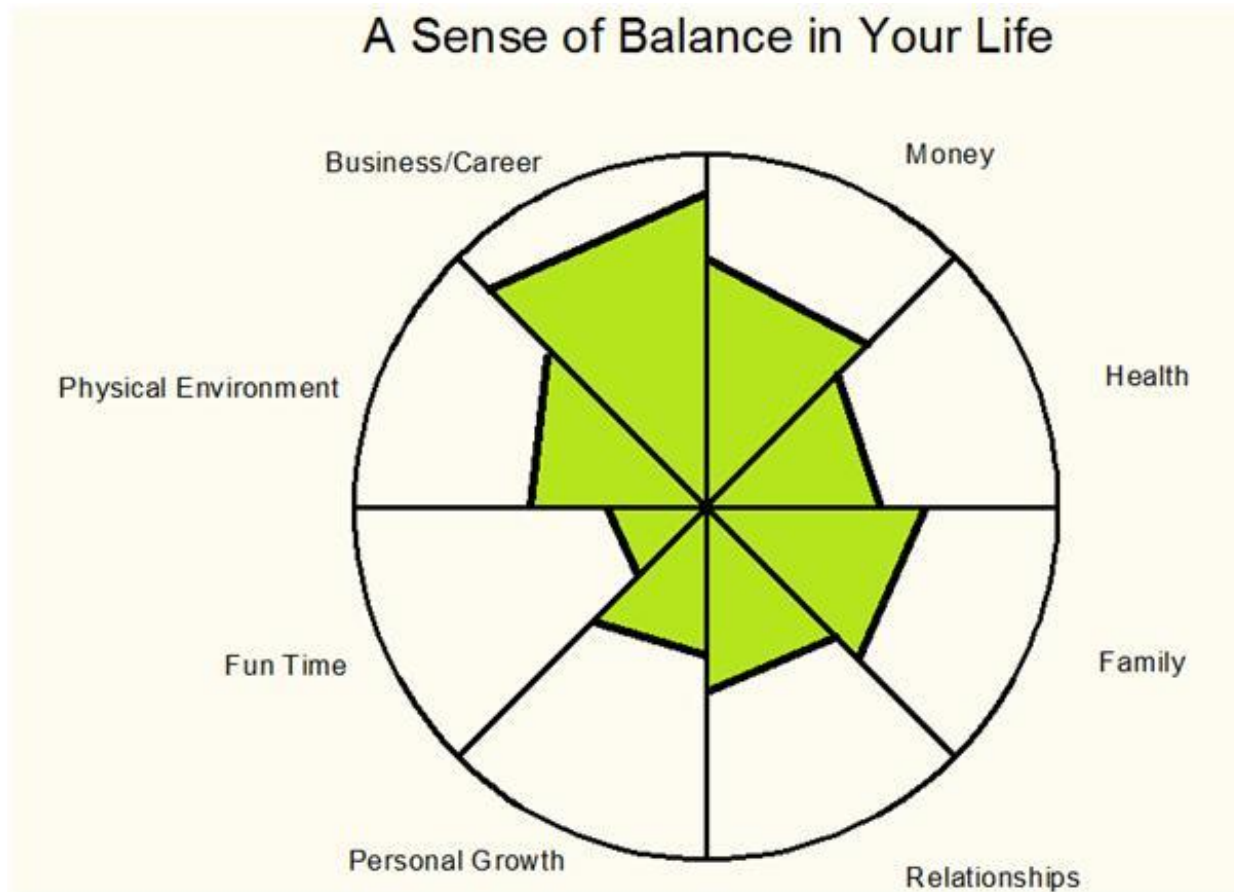
Objectives

- Recognize the relationships between students, preceptors, and their learning environments and their collective impact on the quality of experiential training.
- Demonstrate techniques for determining the most appropriate teaching strategies to utilize during an experiential rotation.
- Solve challenging preceptor and student scenario focused on common issues faced in the experiential learning environment.

Who are we?

- “**BUSY people**” – not enough time to do it all!
- Work life
 - ▣ Teaching (didactic & *experiential*), scholarship, practice, & service
- Home life
 - ▣ Spouse, children, friends, housework, etc.
- Spiritual life
- Personal life
 - ▣ Exercise, diet, sleep, etc.
- Financial responsibilities
- Other (volunteer church/school activities)

Wheel of Life - (*Assessing Balance*)



What should you do?

- Need to take time to “think” about what your doing
- Need to be sure efforts are “more calculated”
- Need to “focus” on the “right things”
- Need to do this for all aspects of your life, but today we will focus on precepting
 - ▣ Can apply similar process for all other areas
 - Scholarship, Practice, Service, Family, Finances, etc.

Personal Reflection - *Precepting*

- Think back on your preceptor experiences (both with residents and students).
- Identify two preceptor areas that you would like/need to enhance
- **Note:** These may be areas you self-identified or that student and/or administrator evaluators have recommended.
- Take 3 minutes to complete this exercise.

Keys to a Successful Experience

- Preparation
 - ▣ Get to know syllabus, assignments, assessments
 - ▣ **Get student, site, and you ready**
- Orientation
 - ▣ Go over information developed during preparation & finalize
- Rotation Experience
 - ▣ Implement what you prepared & discussed during orientation
 - ▣ **Utilize teaching strategies designed for the learner**
- Evaluation / Reflection
 - ▣ Preceptor and student self-reflection of rotation

Preparation



BE PREPARED



**Watch
Introductory
Video**

What did we learn from video?

- As a preceptor you **DO NOT** need to always be with student for learning to occur
- There are things you can accomplish by recording a video or preparing a “rotation” folder in advance (*help save you time*)
- With envelopes we learned that people are different? We react to learning situations in different ways (*i.e. learning styles*)

Rotation Preparation - *Student*

- Autobiographical form
 - Request information before rotation (2 weeks?)
 - List of courses student has completed
 - List of work experience (intern, technician, etc.)
 - List of personal/professional goals
- Learning Styles Inventories / Learning Stages
 - Field dependent or field independent
 - VARK (Visual, Auditory, Read/Write, Kinesthetic) method
 - **PILS (Pharmacist Inventory of Learning Styles)**
- Generational Differences
- Pre-Tests (*if applicable*)
 - Determine baseline knowledge of disease states and/or drugs

Pharmacists Inventory of Learning Styles (PILS)

- 17 questions focused on how you like to learn
- As individual completes questionnaire must reflect on “Learning something new”
- Determine number of each of the four symbols
- Two symbols with most instances represent your “dominant” and “secondary” learning styles
 - ▣ If a tie, than read the descriptions of learning styles and determine which one best fits you
- Four different types of learning styles
 - ▣ Accommodators, Assimilators, Convergents, and Divergers
- Knowledge of learning styles may allow for utilization of more appropriate teaching & feedback strategies
- Easy to do (takes less than 5 minutes to complete!)

Question to consider:



Which is your "dominant" learning style?

- A. Accommodator
- B. Diverger
- C. Assimilator
- D. Converger

Pharmacists Inventory of Learning Styles (PILS)

□ Accommodators

- *Teaching strategies:* Efficient, purpose-driven, provided with necessary resources to complete assigned activities
- *Feedback strategy:* “Cut to the chase”, “Good is good”

□ Assimilators

- *Teaching strategies:* Expert lectures, individual homework
- *Feedback strategy:* “Sandwich method”, “Good is not good”

□ Convergors

- *Teaching strategies:* Competitions, purpose-driven group work
- *Feedback strategy:* “Cut to the chase”, “Good is good”

□ Divergers

- *Teaching strategies:* Creative & unstructured tasks, group work, not pressured for time
- *Feedback strategy:* “Sandwich method”, “Good is not good”

Generation Differences

THE BOOMERS



THE GEN X'RS



THE GEN Y'S



& GEN Z



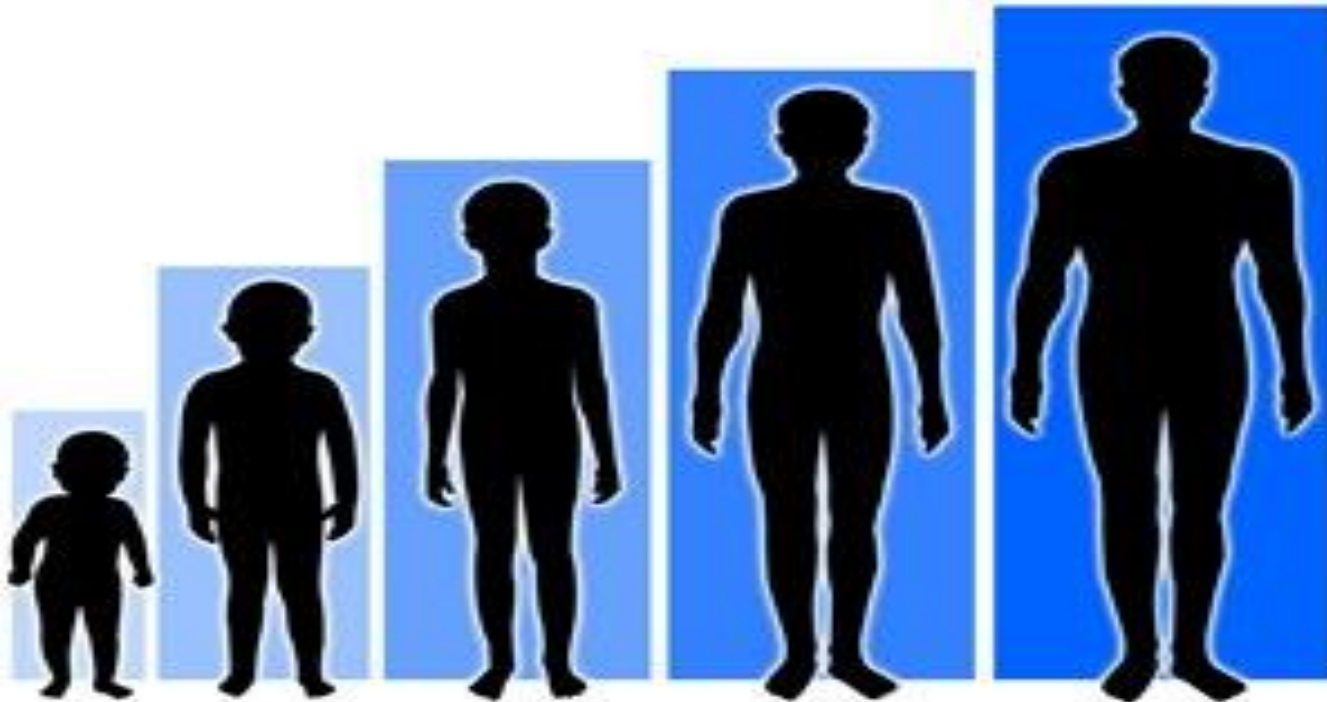
GENERATION GAPS

Generation Differences

	Learning Style	Preferred Learning Activities
Baby Boomers (1943 - 1960)	Preceptor Contact Told “Good Job”	Lecture Handouts
Generation X (1961 – 1980)	Individual Learning Flexible Learning Must see benefits of learning	Learn at own pace Learn on own time What’s on test?
Millennials (1981 - 2002)	Teamwork Good multi-taskers Want immediate feedback	Group activities Creative games Challenging

Learning Stages

Students & preceptors are at different stages of learning process



Learning Stages

- Unconscious incompetent (*1st year*)
 - ▣ Eager, naïve, etc.
- Conscious incompetent (*1st – 3rd year*)
 - ▣ Hesitance, low confidence, aware of own limitations
- Conscious competent (*4th year*)
 - ▣ Focused on quality
- Unconscious competent (*> 10 yrs, and preceptor*)
 - ▣ Confident, uses a lot of short cuts, impatient

Rotation Preparation - *Rotation*

- Preceptor must know the syllabus
 - ▣ Must know learning objectives/activities
 - Required vs. Elective
 - ▣ Must know how activities will be offered
 - ▣ Must understand assessment/evaluation tools
 - ▣ If not familiar than ask Office of Experiential Programs
- Preceptor should create a rotation schedule
 - ▣ Assignment / Assessment dates
 - ▣ Disease / Drug discussion dates
 - ▣ Preceptor / Student dates to be out of office
 - ▣ Schedule can include other health professionals, times when student(s) are working on own
- Develop ground rules for rotation (i.e. use of phones)

Schedules

- Need to be sure to develop a comprehensive schedule at beginning of rotation
 - ▣ Allow student to provide input so they feel their concerns are being heard
 - Make adjustments based on their concerns if possible
 - ▣ Be sure you consider all of your potential conflicts throughout the rotation
 - ▣ Inform them at start of rotation, schedule is final
 - This should really be for them and for you!

Rotation Preparation - *Preceptor*

- Student gets to know you
 - ▣ Send to learners prior to start of rotation (2 weeks?)
 - ▣ Describe your current job position / preceptor experience
 - ▣ Describe dress code (i.e. lab coat, name tag, tie, etc.)
 - ▣ Outline hours of rotation (onsite vs. offsite activities)
 - ▣ Provide overview of “Common pitfalls”
 - ▣ Provide overview of “Unique learning opportunities”
 - ▣ Provide overview of “Expectations”
 - ▣ Provide some “Preparation ideas – How to get ready”
- Could be provided in different formats
 - ▣ **Pre-recorded video session**
 - ▣ Pre-developed document and/or portfolio
- Could require learners to acknowledge review

Rotation Preparation - *Site*

- Prepare individuals for student interactions
 - ▣ Great resource to use other individuals but it needs to be coordinated and communicated well
 - ▣ Discuss their role with clinical activities
 - ▣ Discuss their role in assessment/evaluation
 - ▣ Could include physicians, nurses, students, etc.
- Complete “pre-rotation” paperwork (*if possible*)
 - ▣ Obtain computer access for patient charts
 - ▣ Sign confidentiality forms
 - ▣ Get badges for hospital and/or pharmacy access
 - ▣ Try and do this **BEFORE** rotation, it will allow you to hit the ground running!



Finding ways to get to know your learners prior to and during a rotation is critical

No learner or rotation is the same

Orientation



Orientation

□ General Principles

- **DO NOT** rush!!
- Can be done on more than 1 day
 - If IPPE & APPE students with different objectives
 - If students from two schools with different objectives
 - If students have different interests / focus
- Allow students to take active role!
 - Preceptor should not be doing all of the talking
- **DO NOT** assume that students know!

Orientation

- Discuss preceptor / student expectations
 - ▣ What are objectives for rotation?
 - Student & preceptor
 - ▣ What activities will be expected?
 - Patient counseling, chart exercise, etc.
 - ▣ How will grade(s) be determined?
 - Why are assessments being done – relate to courses they have or will complete?
 - “A” vs. “B” vs. “C” or “Pass w/Honor” vs. “Pass”
 - How often will feedback be given? (midpoint, final)
- Go over schedule / ground rules

Rotation Experience



Rotation Experience

- General Considerations
 - Follow-through on rotation plan
 - Don't just “check the boxes”!
 - Be flexible & understand things may change
 - Provide frequent & constructive feedback
 - If problems arise, deal with them swiftly
 - Create a motivating culture
 - Be creative, enthusiastic, and have fun!
 - Challenge student out of their comfort zone
 - “Practice what you preach”
 - Remember you are not a great “multi-tasker”

Multitasking Exercise

- Please find Multitasking Exercise – it will have three blank lines on it
- Step 1 – Please write the following phrase on line one **“Multitasking is worse than a lie”** then write the numbers 1 – 27 on line 2. I will be timing you – remember time when you finished.
- Step 2 – Please write the same phrase on line 3, but also be writing the numbers 1-27 at same time on line 4. I will be timing you – remember time when you finished.

Consequences of Multitasking

- Amount of time it takes to accomplish things increases
- Quality of products is negatively impacted
- Stress level accomplishing tasks is increased

Teaching Strategies – *Student Driven*

- Assigned Readings
 - ▣ Disease state guidelines & other literature
- Self-Reflection Activities
 - ▣ My role on a health-care team
- Games / Contests
 - ▣ “Who Want’s to be a Pharmacist” – Knowledge
- Cases / Daily Reviews
 - ▣ Case involving complicated patient, drug of day, disease of day

Teaching Strategies – *Peer to Peer*

- Could involve Introductory to Introductory student
- Could involve Advanced to Advanced student
- Could involve Advanced to Introductory student (*best model*)
- Could involve Resident to Introductory or Advanced student
- Let learners be the “Preceptor for a day”
- Utilize “student driven” activities from prior slide but allow learners to work together
- Allow learners to decide how activities will be performed
- Ask learners to formally assess each other
- Begins development of “student” and “resident” preceptors
- Must build in preceptor review process

Teaching Strategies – *Utilize Others*

- Recognize you are not alone & utilize others to help you deliver your rotation
- Find “champions” at your site
 - ▣ Find areas you **DO NOT** have “expertise” in
 - ▣ Find areas you **DO NOT** have “time” to teach
 - ▣ Find areas that **WILL BENEFIT** the champions
 - ▣ Allow champions to routinely teach students in the **SAME** area to allow for enhanced quality of learning process
 - ▣ Hospital operations: Sterile compounding (technicians), personnel management (pharmacy director), medical device review (nurses), etc.
 - ▣ Clinical hospital: Patient chart reviews (medical trainees), Provision of patient care – rounds (physicians), Disease state review (physicians), etc.

Rotation Experience

- Deal with problems as they arise
 - ▣ Pay attention to your “gut feeling”
 - ▣ Listen to what others are telling you
 - ▣ Don’t assume the student had a “bad day”
 - ▣ Don’t wait, it could only get worse
 - ▣ Give specific feedback on regular basis surrounding issue
 - ▣ Example: Blood pressure is slightly elevated (treat & prevent CV events)

Rotation Experience

- When dealing with problems, consider:
 - ▣ You don't have to do it all yourself
 - ▣ Sometimes "Enough is enough!"
 - ▣ Don't give passing grade if student has not earned it (it is your professional responsibility)
 - ▣ If the student does not succeed, don't blame yourself or feel defeated
 - ▣ Don't say "Well, I am just going to survive the next two weeks and then it will all be over!"

Tips on Providing Feedback

- Make feedback a part of your culture
 - ▣ Ask students to provide you feedback
- Let student perform self assessment
 - ▣ Try **“notecard” method**
- Maintain equal opportunity for discussion
- Don't “call student out”, rather raise issues with questions
- Direct vs. Sandwich method
- Have a 3rd party available if you deem necessary
 - ▣ If you are informing student they will fail or other sensitive topic
- Give the students the “real-world” twist
 - ▣ Let them know how their performance would be viewed in workforce

Tips on Providing Feedback

- Share challenging issues you have had
 - They need to know you are not perfect
- Utilize learning styles knowledge to determine best “method” and best “words” to use
- Be specific with your feedback
 - **Example: Late 43 minutes on 1 1/4**
- Summarize conversation (careful of “halo” effect)
- Develop plan on fixing problem
- Develop timeline for following up with plan
- Take only one issue at a time

Evaluation / Reflection



How do you feel at the end of a rotation?



How do your students feel?





**“Not always a perfect ending, however,
the evaluation should be no surprise
if you were engaged in learning process
from beginning to end!”**

End of Rotation

- Student & preceptor should have sense of accomplishment
- Grades are not everything!
 - ▣ Good or Bad there should be more than this
- Student should leave with knowledge of:
 - ▣ One or two things they do very well
 - ▣ One or two things they need to work on
- Student & preceptor should leave experience with plan for future (i.e.. life-long learning)
- **Example:** Lack of Knowledge (peripheral brain)
- **Example:** Lack of Confidence (challenge self out of comfort zone)



Challenging Case



- Consider the following questions:
 - ▣ Identify potential issues
 - ▣ If you were the preceptor, how would you deal with each issue?
 - ▣ Could you have prevented issue?

Challenging Case: Apathetic Student

- Greg is on his last rotation (inpatient medicine); he will graduate in 6 weeks. He states that he cannot wait to finish the rotation and actually admits that he really does not care what grade he makes since he is soon to begin working in community pharmacy.
- Greg puts minimal effort into evaluating patients and formulating drug therapy plans. He is unprepared for his assignments and presents only basic facts.
- When asked drug information questions, he does not know the answers. You tell him to look up the questions.
- He tells you the next day that he forgot to do it.



**Students are not the only learners in
this process, so are you**

**You must learn from your
successes & mistakes**

“Success is walking from failure to failure with no loss of enthusiasm”

– Winston Churchill

**“Let no feeling of discouragement prey upon you, and in the end
you are sure to succeed”**

– Abraham Lincoln

“A goal properly set is half-way reached”

– Zig Zigler

**“Opportunity is missed by most people because it is dressed in
overalls and looks like work”**

- Thomas Edison

Goal Setting Principles - *Precepting*

Lot of information today – but you can't do it all!

- ❑ What excites you about precepting?
- ❑ Who is your customer?
- ❑ What are your strengths?
- ❑ What are your job expectations as a preceptor?
- ❑ Goals should have a high payoff...
- ❑ Goals should focus on future not past...
- ❑ Goals should match personal values...
- ❑ Goals should be measurable...

Goal Setting Exercise - **Now**

- Write down (3) things you learned today you would like to consider implementing during your rotation experiences
- Narrow these (3) things down to **one item** you feel will have the greatest impact on your precepting.
- Write a goal for addressing this one item you identified above. Be sure it is **measurable!**

Brian Tracy. "Goals! How to Get Everything You Want – Faster Than You Ever Thought Possible" (2010).

Goal Setting Exercise - *Home*

- Take time to write (1-2) short paragraphs about “why” you selected the goal that you did...
- Develop a plan on reaching this goal
 - ▣ What obstructions do you have toward reaching goal?
 - ▣ Who do you need to accomplish this goal?
 - ▣ What knowledge / skill must you obtain to reach goal?
 - ▣ What timeline will you follow? (Work backwards from date you want to have accomplished goal)
- Live and breathe your goals – think about them every day. Talk to others about them.
Revisit/Rewrite – since we all know life changes.

General Goal Setting Principles

- You can't hit a target you can't see
- Without goals / priorities you may be wasting a lot of time doing things that do not matter!
- Need small successes to see large successes
 - ▣ Mini-goal accomplishments make you feel like a winner each time you accomplish – self esteem rises
- Remember that people who ultimately succeed have most likely failed many times before
- Goal setting gets you out of your comfort zone
 - ▣ We all have good intentions – but no actions

“95% of everything you do is the result of habit”

-ARISTOTLE

So...set **GOOD** habits
that address **GOALS** that **MATTER!**

Summary

- ❑ No one student rotation experience is the same
- ❑ Take a look at all components of a rotation (before, during, and after experience)!
- ❑ Preparation is critical!
- ❑ Feedback should be frequent and constructive!
- ❑ Proactive vs. Reactive approach is preferred
- ❑ Take a look at your role as a faculty member/preceptor (before, during, and after experience)!
- ❑ Reflect, set goals, manage your time

QUESTIONS??



Which one of the following strategies could be used to get to know your learner?

A

Autobiographical form or student portfolio

B

Learning style inventory

C

Pre-tests of rotation material (i.e.. drug knowledge)

D

All of the above

Which of the following teaching strategies could you use in delivery of your rotations?

A

Student-driven exercises

B

Peer to peer teaching

C

Utilization of other health care professionals (*champions*)

D

All of the above