Coaching the Preceptor when the Student is not Meeting Expectations

Oralea A. Pittman, MS, FNP-BC, FAANP

Objectives

• Identification of students at risk will be reviewed.
• The role of clinical faculty will be defined.
• Teaching strategies to meet students learning needs will be explored.

Reasons students may not be meeting expectations

• Limited fund of knowledge
• Performance anxiety
• Difficulty applying didactic learning in the clinical setting
• Overwhelmed by family, work and student responsibilities.
• Inappropriate preceptor expectations
Characteristics of a student who is potentially failing:

- Lack of competence/performance/skills
- Intuitive judgment of the preceptor
- Threat to patient safety
- Failure to progress/improve
- Lack of insight into failing/lack of personal awareness
- Absence of professional boundaries and poor professional behavior. (Skingley, Arnott, Greaves, & Nabb, 2007)

Role of Faculty

- Learning about the problem
- Whenever possible, obtain first hand experience of the student’s performance
  - Site visit
  - Precept in your own practice for a day
  - Standardized patient or simulation
  - Videotaped patient encounter
- Contracting with the student

Coaching the Preceptor

- Principles for teaching and learning:
  - Students learn differently.
  - Beginning students often need more structure than advanced students.
  - A variety of precepting strategies are useful.
  - Understanding generational differences in learning patterns (Barker and Pittman, 2010).
Precepting Strategies

- Observation with a purpose
- Focused half day
- Case discussions
- Assigning directed readings
- Choosing patients to teach a principle
- Coaching and “cheerleading”
- Think aloud
- One Minute Preceptor

Observation with a Purpose

- The student spends the day observing the preceptor as he or she sees patients, etc.
- The preceptor gives the student an assignment during the day to observe how they do a particular aspect of the visit and reflect with them at the end of the day.
- Assignment can be opportunity to teach a student one way to do a particular skill or what to include in a particular type of visit.
- Student sees again and again how to do something and what variations are introduced with different patients.

(Levine, C., personal communication, December, 2006)

Focused Half Day

- Student spends time before the patient arrives studying the chart, looking up material related to the focus of the day and the care of the patient.
- The schedule is the “table of contents” for the day’s educational experience.
- Student and preceptor look at schedule and patients’ reasons for visits
- Choose a focus for the half day and a limited number of teaching patients the student will see. (Maybe only one or two)

(Taylor, Lipsky, Bauer, 1998)
Focused Half Day

• Focus can be age related, disease related, assessment skills related, etc.
• Beginning student or students first days in a new setting-less overwhelming
• Students find that the preparation makes them more efficient and confident in the patient encounter. (Taylor, et al., 1998)

Additional Strategies

• Case discussions
• Assigning directed readings
• Choosing patients to teach a principle
• Coaching and “cheerleading”
• Think aloud

One Minute Preceptor

• Five microskills for clinical teaching
  – Get a commitment-What do you think is going on?
  – Probe for supporting evidence-What led you to that conclusion?
  – Teach general rules-Many times when...
  – Reinforce what was right-You did an excellent job of...
  – Correct mistakes-Next time this happens, try this (Neher, Gordon, Meyer, Stevens, 1992)
Coaching the preceptor when the student does not succeed

• Coaching preceptors to give feedback
  – Ask students for their evaluation of their performance, strengths, weaknesses.
  – Give as much specific information in your comments as you can.
  – Focus on behaviors rather than personality traits.
  – Written evaluation should match verbal one.

• Supporting the preceptor through the process
  – Keep good documentation of conversations with preceptor and student.
  – Document specific examples of behaviors.
  – Document remediation.
  – Ask preceptor to be specific with behavioral examples on the formal evaluation.
  – Ask preceptor for recommendations on what student needs for success.

References

References
