Delivery of Faculty Development Programming to Preceptors in Regional Campus Systems

Dennis Baker, Ph.D.
Friday, April 6, 2018
Group on Regional Medical Campuses
I have nothing to disclose.
D. Baker: Hx, DDx, Dx, Tx

Mississippi State U. College of Veterinary Medicine 1978 - 82
Michael Reese Hospital - Chicago 1982 - 83
Ohio University College of Osteopathic Medicine 1983 - 92
Oklahoma State University College of Osteopathic 1992 - 95
Ohio University College of Osteopathic Medicine 1995 - 02
Florida State University College of Medicine 2002 - 12
Alabama College of Osteopathic Medicine 2012 - ?
Overview

1. Some Questions for “YOU”
2. FSUCOM Regional Campus Structure
3. FSUCOM FD Program
4. FD: Making it Safe, Engaged, and Active
5. **Role of Learners in FD Process**
6. Evaluation of FD Programming
Broad Objectives

Participants will gain ideas for:
1. relationship building with regional campuses
2. structuring FD programming.
3. engaging preceptors in FD.
4. making learners part of the FD process
5. measuring the effectiveness of FD programming.
Who Is Here?

A. Central/Main Campus Folks
B. Regional Campus Folks
C. Physicians involved in delivery of faculty development
D. Non Physicians involved in delivery of faculty development
E. Librarians involved in faculty development
Questions: Who is …..

1. Involved in the direct delivery of faculty development to preceptors at regional campuses?
2. Part of a team that delivers faculty development to preceptors?
3. Using full time central campus faculty (CS, BS, SS) for some of the delivery of faculty development to preceptors?
4. Involving your year 1 and 2 faculty to interact in some way with your year 3 and 4 preceptors as part of FD?
5. Using multiple approaches (live workshops, on-line modules, office visits,) to the delivery of faculty development?
6. Systematically talking with students who are in the clinical setting about the details of how the teaching and learning process is going for them?

7. Systematically working with year 2 students to prepare them to be proactive in helping their year 3 and 4 clinical teachers exhibit effective teaching strategies?

8. Providing student feedback to your preceptors even if they have only had 1 or 2 students?

9. Including non-physicians (e.g. nurse, PA, etc.) who work with the preceptor in your faculty development programming?

10. Systematically evaluating your faculty development program in a way that leads to program improvement and publishing?
What is a Regional Campus?
Make regular deposits in their emotional bank accounts.

- Listen
- Be early
- Apologize
- Clarify needs
- Say “thank you”
Missed Opportunity

“Perhaps we should invite a nurse or office assistant to come to the workshop with the preceptor.”

Paul McCloud, MD, Regional Campus Dean, Pensacola

“Most people don’t listen with the intent to understand; they listen with the intent to reply.”

Stephen R. Covey
Recipients of FD Programming

Central Campus Faculty
6 Regional Campuses
2 Rural Sites
Year 1 and 2 Tallahassee Preceptors

2009
• 128 Workshops
• 1,471 in attendance

2010
• 135 Workshops
• 1,588 in attendance
Delivery of FD Program for Preceptors

Clinical Teaching
- Associate Dean for FD
- Assistant Dean for FD
- FSUCOM Clinical Faculty
- Regional Campus Deans

Medical Informatics
- Medical Informatics Specialist
- FSUCOM Clinical Faculty
- Librarians
- Medical Informatics Directors

Team Effort
Important/Essential Ingredients

Food
CME
Conducive Space
IT Support
Structured FD Program
Team Approach
Rewards & Recognition
Support of Administration

BEME Article by Steinert
- Good Instructional Design
- Positive Learning Climate
- Active Learning
- Relevant Content
- Safe and Supportive
- Opportunities for feedback
- Opportunities for reflection

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Delivery Methods: Clinical Teaching FD

- Workshops (live and videoconference)
- On-line Modules and CDs
- Pocket Guides / Cards
- Guest Speakers (e.g. Hill Jason, Kelly Skeff)
- Office Visits
Clinical Teaching FD Workshops Presented Routinely

1. 5 Microskills of Clinical Teaching
2. Responding to the Challenging Learner
3. Clinical Teaching Pearls from Your Colleagues
4. Effective Teaching: Views from Our Learners
5. Building on What Students Learn in Years 1 & 2
6. Strategies for Teaching Procedural Skills
7. Covey’s 7 Habits Applied to Clinical Teaching
8. Providing Effective Feedback: ARCH Model
9. Teacher-Student Boundaries
10. MBTI Applied to Teaching and Self Understanding
Example Faculty Development Topics Presented by Regional Deans and Central Campus Faculty

Regional Deans

• Writing Letters of Recommendation for Residency
• Generational Differences: Implications for Clinical Teaching

Central Campus Geriatrics Faculty

• Teaching Students About Medications Mgt
• Teaching Students About End of Life Care

Central Campus FM Faculty

• EBM Point of Care Tools
Example Medical Informatics Topics

1. Introduction to the Maguire e-Library
2. Searching and Accessing Full Journal Articles
3. Decision Support Tools
4. Downloading Programs to Your Mobile Devices
5. Drug Resources
6. Calculators and Quick Decision Support
7. Selecting Best Evidence Based Medicine Resources
Strategies for Making Participation Active, Engaged, and Safe

1. Picture Triggers
2. Video Triggers
3. “Structured/Scripted” Role Play
4. Case Discussion
5. Small Group Discussion
6. ARS
7. Hearing from Learners
8. Hearing from Peers
Characteristics of Effective Clinical Teachers

What do you see in these pictures with regard to teaching and learning?
“A Picture is Worth a Thousand Words”

The importance of students developing good self-assessment skills.
Role Play Scripted (5 Microskills)

One Minute Preceptor

Scenario A

Before role play:
Invite: 2 volunteers to “read” a scripted interaction (See handout.)
Select roles (student and preceptor) and prepare to stand and
Set the scene: M3 student on clerkship rotation; has completed half of the 3
Has seen patient and ready to present to preceptor
Audience: Focus on the interaction. What do you learn about the student would you do differently if you were the preceptor?

Student: I just saw Ms. Jones, a 72 year old patient with three days of has diabetes that is well controlled with medications and no
tired and lives with her husband. She reports pleuritic chest
coughs. On auscultation, I heard decreased breath sounds on

Preceptor: What are her vital signs?
Student: Temp is 39.0 C. Respiratory rate is 24. Heart rate is 100. B

Preceptor: Is her cough productive of sputum? If so, what does the sputum look like?
Student: She has a productive cough. The sputum is rusty brown color

Scenario B

Before role play:
Invite: Same 2 volunteers to “read” Scenario B for optimal comparison
Set the scene: Same case; different precepting approaches
Audience: How was this interaction different for the learner? The preceptor?

Student: I just saw Ms. Jones, a 72 year old patient with three days of increasing dyspnea and cough. She
has diabetes that is well controlled with medications and no other medical problems. She’s
retired and lives with her husband. She reports pleuritic chest pain on the right side when she
coughs. On auscultation, I heard decreased breath sounds on that side.

Preceptor: What do you think is going on?
Student: Well, she looks very sick. I’m worried about pneumonia.

Preceptor: What led you to that conclusion?
Student: She has a temperature of 39.0 C, a respiratory rate of 24, and a cough productive of rusty brown sputum. On chest percussion, there’s dullness on the right side. These signs plus her symptoms of dyspnea and cough are diagnostic of pneumonia.

Preceptor: What else did you consider?
Student: I asked about recent travel, because I was wondering about a DVT and pulmonary embolus. She hasn’t had any prolonged immobilization. Since she has diabetes, I considered an atypical presentation of diabetes ketosis acidosis. Ms. Jones denied...
Video Illustration (5 Microskills)
Critically Important Question

How do you see yourself using the 5 microskills model?
Active, Engaged, Safe

Back to Back Teaching

Deb Simpson
Case 2: Problem with Judgement

Directions:

• Read the case Situation, Pertinent Data, and Social silently

• Then share your thoughts with a peer as to what you think is going on with the described learner.

• If you were the clerkship faculty member supervising this student, how would you go about helping the student? Think of the parallel processes of patient care and clinical teaching.
Jigsaw

1. Small group discusses

2. Groups reconstituted

3. Sharing of what each learned in their original group
Boundaries Workshop

Have you or someone you know experienced mistreatment or a boundary crossing as a medical student or resident during your training?

1. Yes
2. No
Boundaries Workshop

Case 2: Camping

A female preceptor has a student on rotation (3rd year family medicine) with her and wants to illustrate to the student that being a busy physician doesn’t have to be “all work and no play” so she says to the student, “I would really like it if you would join me and my family (husband and 2 small children) on a camping trip this weekend. I know you would have a good time.”

Was the preceptor crossing a boundary by inviting the student to go camping? Why or why not?

What would you have done as a 3rd year student?
Reminder Strategies / Pocket Guides
Regardless of Methods or Content

Good relationships are the essential ingredient.
Required Faculty Development

Success is where preparation and opportunity meet.

The Chance of a lifetime?
FSUCOM Required FD Policy

Year 3-4 Clerkship Faculty Teaching Required Clerkships
1. Complete 6 hrs FD training prior to taking a student.
   • Intro to FSUCOM Curriculum and e-Library
   • Intro to Clinical Teaching
   • Assessment of Students
2. Complete 4 additional hours before end of 2 year period.
3. Then complete 2 hours per year continually.
The Role of Learners in the FD Process

1. FSUCOM Workshop: Effective Clinical Teaching: Views From Our Learners
2. Unplanned Involvement of Learners in Faculty Development
3. Residents and Residency Faculty Discussing Teaching & Learning
4. Leaving the Nest Program at ACOM
Describe how a clerkship faculty member helped you enhance your clinical reasoning skills.

Have you been asked to present a patient in front of the patient? How did it go?

Did you have a clerkship faculty member who periodically asked you to self-assess? How did he/she do this?
FSUCOM Workshop: Medical Informatics
Learners in FD Process, Cont’d

I wanted to talk with learners before preceptor workshop.

Oh no!!

The learners stayed for the preceptor workshop!
Leaving the Nest Program

1. Year 4 student providing tips to year 2 students about how to be successful in year 3.

2. Clerkship directors providing overview (via Camtasia recording) of their clerkships and how to be successful on them.

Contents of Module

1. RIME: The Context of Clinical Learning
2. Your Orientation at the Beginning of Each Clerkship
4. How to Maximize The Effectiveness of a Mid-Clerkship Feedback Session
5. Helping Your Preceptor Conduct an End-Of-Clerkship Discussion
Learners Can Be Part of the “Teaching/Learning Team”

We need to make students part of the teaching-learning team by sharing with them what we are teaching preceptors to do as teachers and also teaching them how they can make it easier for the preceptors to exhibit critically important teaching behaviors.
Lynchburg Residents and Residency Faculty Talking About Teaching and Learning
Lynchburg Residents and Residency Faculty Talking About Teaching and Learning

Group 1: Teaching/Learning Strategies (Teaching a Procedure)

**Faculty:**
When you think about teaching or learning how to perform a procedure, What teaching strategies have you found to be effective? OR What teaching strategies do you think would be effective?

**Residents:**
What teaching strategies help you learn to perform a procedure? OR What teaching strategies do you think would be effective?
Evaluation of FD Programming

**Assessment and Evaluation Results**

*Handling Difficult Teaching/Learning Situations*

*November 18, 2010 Sarasota Regional Campus*

**Presenters:** Dennis Baker Ph.D.

<table>
<thead>
<tr>
<th>Mean Response</th>
<th>Workshop Evaluation Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.65</td>
<td>1. I am now more aware of how a teacher’s reaction to a potentially difficult situation with a student can possibly make the situation worse.</td>
</tr>
<tr>
<td>4.7</td>
<td>2. I can describe some of the broad categories into which student difficulties can fall.</td>
</tr>
<tr>
<td>4.57</td>
<td>3. I can list common pitfalls into which a teacher might fall when confronted with a challenging student’s situation.</td>
</tr>
<tr>
<td>4.67</td>
<td>4. I can describe a strategy for helping the learner in difficulty that parallels the patient care process.</td>
</tr>
<tr>
<td>4.57</td>
<td>5. I can list the “3 levels of prevention” model as it can be applied to working with challenging learners.</td>
</tr>
<tr>
<td>4.57</td>
<td>6. The workshop was helpful to me.</td>
</tr>
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</table>

Participants: 24
Categories of Items from Evaluation Forms

Awareness
• I have a better understanding of the FSUCOM curriculum as a result of the workshop.
• I gained new knowledge with regard to the characteristics of effective clinical teachers.

Description
• I can describe the characteristics of effective feedback.
• I can describe two characteristics of adult learners.

Application
• I will be able to use the ARCH feedback model
• I will be able to provide appropriate guidance/support to the 3rd and 4th year medical students in conducting a Comprehensive Therapeutic Review on one or more patients.
2009-2010 Aggregated Workshop Data

December 2009-December 2010 Aggregated Mean Data

<table>
<thead>
<tr>
<th>Category</th>
<th>Mean</th>
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</thead>
<tbody>
<tr>
<td>Awareness</td>
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<tr>
<td>Description</td>
<td>4.62</td>
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<tr>
<td>Application</td>
<td>4.05</td>
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<td>Valuable</td>
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<td>Organized</td>
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<tr>
<td>Enjoyable</td>
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## GQ Evaluation Data

Faculty members provided me with sufficient feedback on my performance.

<table>
<thead>
<tr>
<th>Specialty</th>
<th>FSU COM (% agree/strongly agree)</th>
<th>All Schools (% agree/strongly agree)</th>
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</thead>
<tbody>
<tr>
<td>Family Medicine</td>
<td>95.9</td>
<td>79.6</td>
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<tr>
<td>Internal Medicine</td>
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<td>84.3</td>
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<tr>
<td>Ob-Gyn</td>
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<td>65.6</td>
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<tr>
<td>Pediatrics</td>
<td>89.2</td>
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<tr>
<td>Psychiatry</td>
<td>90.5</td>
<td>80.9</td>
</tr>
<tr>
<td>Surgery</td>
<td>91.9</td>
<td>64.9</td>
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</table>
## GQ Evaluation Data

A faculty member personally observed me performing examinations during the clerkship.

<table>
<thead>
<tr>
<th></th>
<th>FSU COM (% agree/strongly agree)</th>
<th>All Schools (% agree/strongly agree)</th>
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</thead>
<tbody>
<tr>
<td><strong>Family Medicine</strong></td>
<td>93.2</td>
<td>78.0</td>
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<td><strong>Internal Medicine</strong></td>
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<td><strong>Ob-Gyn</strong></td>
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<td><strong>Pediatrics</strong></td>
<td>98.7</td>
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<tr>
<td><strong>Psychiatry</strong></td>
<td>88.9</td>
<td>79.4</td>
</tr>
<tr>
<td><strong>Surgery</strong></td>
<td>90.3</td>
<td>54.6</td>
</tr>
</tbody>
</table>
Year 3 Faculty Evaluations – 2007-2010
“Understands the goals and objectives of the clerkship experience”
Reporting FD Activities

### FACULTY DEVELOPMENT UPDATE FOR FEBRUARY, 2008

Dennis Baker, Ph.D., Assistant Dean for Faculty Development

The table below displays 10 faculty development events conducted during February. Locations included central campus and 6 regional campuses. There were 131 participants and 248 hours of CME were provided. Presenters for workshops included Directors of Medical Informatics, Director of Medical Informatics, the DOCCING I Course Director, a Department Chair, a Regional Dean and the Assistant Dean for Faculty Development.

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Location</th>
<th>Participants</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 12</td>
<td>Building On What Students Learn in Years 1 &amp; 2</td>
<td>Sacred Heart Hospital Pensacola</td>
<td>Clerkship Faculty</td>
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<tr>
<td>Feb 18</td>
<td>Introduction to FSUCOM Educational Program</td>
<td>Daytona Regional Campus</td>
<td>New Clerkship Faculty</td>
<td>6</td>
</tr>
<tr>
<td>Feb 18</td>
<td>Academic Portfolio Introductory Session</td>
<td>Central Campus</td>
<td>Clerkship Faculty</td>
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<tr>
<td>Feb 20</td>
<td>Workshop: Evidence Based Approaches to Teaching Geriatric Polypharmacy</td>
<td>Orlando Regional Campus</td>
<td>Clerkship Faculty</td>
<td>17</td>
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<td>Feb 21</td>
<td>Introduction to FSUCOM Educational Program</td>
<td>Sarasota Regional Campus</td>
<td>New Clerkship Faculty</td>
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<tr>
<td>Feb 25</td>
<td>Clinical Teaching I</td>
<td>Daytona Regional Campus</td>
<td>New Clerkship Faculty</td>
<td>23</td>
</tr>
<tr>
<td>Feb 25</td>
<td>Evaluation of the Student: Nuts and Bolts</td>
<td>Daytona Regional Campus</td>
<td>Clerkship Faculty</td>
<td>24</td>
</tr>
<tr>
<td>Feb 26</td>
<td>Teaching Skills Workshop: Views from Our Learners About Effective Teaching</td>
<td>Archbold Hospital</td>
<td>Clerkship Faculty</td>
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<tr>
<td>Feb 28</td>
<td>Medical Informatics Series: Disease Resources and Textbooks</td>
<td>Sarasota Regional Campus</td>
<td>Clerkship Faculty</td>
<td>6</td>
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<tr>
<td>Feb 29</td>
<td>IT Orientation</td>
<td>Sarasota Regional Campus</td>
<td>New Faculty/Staff</td>
<td>3</td>
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</tbody>
</table>

Total Participants: 131
Evaluation of Student

1. Understanding Evaluation Items/Statement
2. Understanding Rating Scale
3. Writing Narrative Comments that Support Ratings
Constant Adjustment

- Needs Assessment
- Planning
- Modify
- Delivery
- Evaluation
Your Doctor Is A Teacher

Your doctor is one of a select group of community physicians chosen by the Florida State University College of Medicine to teach medical students.

Students training here are learning patient care skills by working closely with your doctor and his/her health care team.

As a patient, you should know that the presence of medical students in this office indicates that your doctor has been identified not only as an excellent physician, but also as an exceptional role model and teacher.

John P. Fogarty, M.D.
Dean, College of Medicine

“The best in patient care is provided by those who teach.”
Year 3 Faculty Evaluations – 2007-2010
“Efficiently oriented me early in my rotation to his/her practice and expectations”
Year 3 Faculty Evaluations – 2007-2010
“Gave me specific information that helped me improve my skills”

Mean 3rd Year Clerkships
- Family Medicine
- Internal Medicine
- Obstetrics & Gynecology
- Pediatrics
- Psychiatry
- Surgery
Year 3 Faculty Evaluations – 2007-2010
“Instructed me at my own level of expertise”
Informatics Curriculum Directors (ICDs)

2006: .2 FTE physicians, one per regional campus

Report to the regional campus dean for administrative

Consult with Director of Medical Informatics Education for informatics curriculum issues, Director of the Library for recommendations for improvements to library, and Asst Dean for Faculty Development for FD issues with clinical faculty

Deliver informatics faculty development sessions.

Assist D3 course director in delivery of longitudinal and D3 sessions in delivery of integrated informatics moments at each regional campus
Informatics Faculty Development
6 sessions per year given at each of 6 regional campuses for clerkship faculty
6 given in summer at main campus
Others at remote/rural sites
Monthly IT orientation for new faculty and staff
Special sessions: i.e. Creating Posters, using ePortfolio, etc.
Pre-Post Sample Evaluations

November 2010 Pre/Post Workshops - Assessment and Evaluation Results

Medical Informatics: Using Calculators and other Decision Support Resources
November 2, 2010 Tallahassee Regional Campus

Presenters: Nancy Clark, M. Ed. & Mark Strickland, M.D.

![Bar Chart]

**Scale:**
- 1 = Strongly Disagree
- 2 = Disagree
- 3 = Neutral
- 4 = Agree
- 5 = Strongly Agree