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*Collaborative Planning and Implementation
of an Inter-departmental
Faculty Development Program
for Preceptors of Medical Students
in Ambulatory Settings*

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Objectives for this Session

- Identify common problems in providing faculty development to physicians practicing in the ambulatory setting
- Review the process Rush followed in developing a new inter-departmental faculty development program
- Discuss the pros and cons of the new Rush program
- Consider how the process used at Rush might apply to the development of a similar program at another institution

Outline

- Ambulatory experiences in the Rush curriculum
- Characteristics of effective preceptors
- Significance of faculty development
- Problems common to faculty development programs aimed at practicing clinicians in ambulatory settings
- Steps in the collaborative planning of the Rush inter-departmental faculty development program
- Review of the 2009 faculty development program
- Questions and discussion

Practice of Medicine Increasingly Outpatient

- Medical education is following this trend.
- 30% or more of Rush Core Clerkship time is spent in ambulatory settings.
 - higher at some schools

Rush Ambulatory Experiences

- Ambulatory rotations at Rush
 - Continuity experience for M1 and M2 students
 - Most core clerkships are 30% to 100% outpatient
- Locations are urban and suburban across three counties
- 80% of the physicians supervising the M1 ambulatory experience are community-based.

Current Problems

- Clinicians in ambulatory settings are busier than ever.
- Many are not employed by the academic medical center.
- These clinicians provide increasingly important education for medical students.
- Implementation of faculty development is problematic.

Potential Support for Ambulatory Teaching

- Funds/ Payment for teaching
- Faculty development
- Access to medical college resources
- Opportunity to network / collaborate
- Awards / Acknowledgement

Characteristics of Effective Preceptors

Survey of 120 second-year medical students in a private Midwestern medical school (Huggett et. al Advances in Health Sciences Education. 13(5):649-58.)

Effective preceptors:

- Demonstrate professional expertise
- Actively engage students in learning
- Create a positive environment for teaching and learning
- Demonstrate collegiality and professionalism
- Discuss career-related topics and concerns

Characteristics of Effective Preceptors

Interviews with 14 preceptors who received either high or low ratings from first-year students (Manyon et. al, Family Medicine. 35(3):181-6.)

High-scoring preceptors:

- Welcome novice clinicians as legitimate participants
- Create a central role for students in patient care
- Regularly engage students in self-reflection to monitor their progress
- Help students discover learning opportunities in routine patient encounters
- Use feedback to shape student performance
- Create an environment where novices felt comfortable practicing new skills with patients.

Faculty development

- Medical training results in content expertise.
- Faculty do not get much training in teaching, feedback and evaluation.
- Faculty development allows faculty to excel as educators by improving
 - their instructional skills
 - the educational climate(Irby DM, Academic Medicine. 73(4):387-96)

Faculty Development: Previous Programs

Previous faculty development programs at Rush / elsewhere have been

- incorporated into other sessions (grand rounds, noon conference, etc.)
- sponsored by one department or specialty;
Recent review of FD programs found that only 40% “welcomed more than one clinical discipline.”

(BEME Collaboration data Medical Teacher 2006)

- focused on faculty teaching in the inpatient setting
- designed as a series of sessions
- poorly attended by those not based on campus

Collaboration

- Role of Core Clerkship Work Group of the Curriculum Committee
 - Teamwork: faculty in charge of these rotations worked well together
 - Working “horizontally” instead of “vertically”
- Recognition of common needs within clerkships that provide a significant ambulatory experience
 - similar skill set required for ambulatory preceptors
 - recruitment of ambulatory preceptors
 - recognition of ambulatory preceptors

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Program Development

- Initial choice of content areas based on clerkship director experience
 - Teaching skills +/- general knowledge CME
- Pre-conference needs assessment
 - 44/65 registrants responded (68%)
 - Highest priority items identified on 5 point Likert scale: Evaluation, feedback, identifying resources and teaching the unmotivated student
- Refined program objectives based on results

Program Format

- Half-day morning program (not “Grand Rounds”)
- Array of learning activities
 - lectures on immunizations, feedback and evaluation
 - small group role play using case scenarios
 - large group sharing of best practices
 - panel discussion including questions from the audience
- Participation of experienced preceptors from each department

Implementation process

- Budget: cost sharing between multiple departments and medical college
- Logistics: room reservation, food, parking, AV equipment, registration support staff
- Publicity:
 - Extensive database developed including clerkship and preclinical preceptors, medical college, medical staff, alumnae, chief residents
 - Electronic and print media, personal communication
- **Key to success: CME certification at NO CHARGE** to participants
- **Key to success: adequate advance notification** to enable clinicians to adjust schedules to attend

Broad support

- Medical college support for inter-departmental collaboration
- Recruitment of other clinical departments/clerkships - initially 3 and eventually 4 of 7 core clerkships involved in planning process
- Participation of preceptors from preclinical ambulatory program for M1/M2s
- Identification of faculty within and outside of the institution for needs assessment, program development, small group facilitators

Strengths of the Program

Interdepartmental collaboration

- Larger target group of participants
- Pooled resources in development process
- Sharing of best practices between disciplines

Block time frame

Focus on needs common to all ambulatory teachers

Skills practice

Responded to identified needs: content areas, recognition

Who Attended in 2009

26 internists

18 family physicians

15 pediatricians

4 obstetrician-gynecologists

3 med-peds

1 emergency medicine

1 surgeon

1 clerkship coordinator

1 education specialist

70 total

Who's Registered for 2010

- 25 Family Med (3 admin)
- 21 Internal Med
- 21 Ped
- 4 OB-Gyne
- 2 Med/Ped
- 2 Surgery
- 1 Neurology
- 1 Psychiatry
- 1 Emergency Med
- 1 Dermatology
- 1 Religion, Health & Human Values

↑ 80 total

Physicians by Location

2009: Rush 32	Stroger 4	Off site 30
2010: Rush 21	Stroger 7	Off site 46

Data from 2009 Program

Participants evaluated the program on 41 items including content, presentation and syllabus.

Scale: 1 (unsatisfactory) to 5 (Excellent)

N = 64 (100% of participants)

Of the 41 items

1) Average rating for 39/41 items over 4.0 (4=Good).

2) One speaker's presentation average rating was 3.5. (3 = Fair)

3) "Course satisfied my reason for taking it" average rating was 3.75.

Representative Comments

- This was great -- very helpful.
- Let's keep offering this type of faculty development.
- Small group sessions were great.
- An excellent, high-quality program and a great use of my time. I hope that this will become a recurrent program or a series. Great job by all of the presenters.
- This workshop was very valuable. I strongly encourage to continue yearly.
- Very useful as an exercise as well as entertaining -- appreciated the commentary and room for hearing from others.
- Please do this every year. Heretofore, it's always been just shooting from the hip -- I've had no education in how to be an educator so this helps a lot!

Shortcomings/ Challenges

- Time (planners and participants)
- Funding to expand the program
- Keeping it “fresh”
- Attracting more community faculty
- Targeting those with needs
- Measuring impact on faculty skills

Conclusions:

New Approach to Old Problem

- This new inter-departmental faculty development program aimed at preceptors in the ambulatory setting was developed collaboratively by faculty responsible for these student experiences.
- Although it has shortcomings and many future challenges, the program has been judged, based on participation and post-program satisfaction surveys, to be significantly more successful than past programs developed for the same purpose.