Precepting – Going for Gold!

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Learning Objectives

• List the required standard for preceptors according to the ACPE 2016 Standards

• Identify at least one innovative precepting strategy to incorporate into a pharmacist’s current practice setting

• Analyze case study presentations regarding student performance on experiential rotations and interact with your colleagues regarding appropriate management of the situation.
Disclosure:

• Diane McClaskey does not have any potential conflicts of interest in relation to this presentation
Pharmacy Students

First year !!

Last year !!
2016 ACPE Standards

- Curriculum Design, Delivery and Oversight
  - Knowledge application
  - Application of the Pharmacist’s Patient Care Process
  - Promote self-directed lifelong learning
  - Experiential quality assurance
  - Experiential placement at employment site
Interprofessional Education (IPE)
- Prepares all students
- Practice-ready, patient-centered care
- Variety of practice settings
- Contributing member
- Interprofessional team
  - Includes prescribers
2016 ACPE Standards

- Pre-Advanced Pharmacy Practice Experience (APPE) Curriculum
  - Introductory Pharmacy Practice Experiences (IPPE)
  - Contemporary US practice models
    - Including IPE
    - Direct patient care
  - 300 clock hours (minimum)
2016 ACPE Standards

- APPE Curriculum
  - Prepare practice-ready graduates
  - Patient care emphasis
  - Diverse population
  - Required rotations:
    - Community pharmacy
    - Ambulatory patient care
    - Hospital/health-system pharmacy
    - Inpatient general medicine patient care
2016 ACPE Standards

- Preceptors
  - Student-to-preceptor ratios
    - APPE 2:1
    - IPPE 3:1
  - Aptitude for teaching
  - Preceptor attributes
  - Preceptor assessment
Strategy #1 - Learners
(This includes you!)
<table>
<thead>
<tr>
<th>Stages of Learning</th>
<th>Preceptor’s Role</th>
<th>Learner’s Role</th>
<th>Appropriate Instructional Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Culminating Integration</td>
<td>Facilitating</td>
<td>Independent Practice</td>
<td>✓ Practice-based teaching (e.g. direct patient care, pharmacy practice)</td>
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<td></td>
<td></td>
<td></td>
<td>✓ Simulation/Role play</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>✓ Case-based teaching</td>
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<td></td>
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<td>✓ Case presentation</td>
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<tr>
<td>Practical Application</td>
<td>Coaching</td>
<td>Guided Practice</td>
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<tr>
<td></td>
<td>Modeling</td>
<td>Shared Demonstration</td>
<td></td>
</tr>
<tr>
<td>Foundational Skills &amp; Knowledge</td>
<td>Instruction</td>
<td>Demonstration</td>
<td>✓ Guided discussion</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>✓ Lecture</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>✓ Reading</td>
</tr>
</tbody>
</table>
H-PILS$^3$

• Health Professionals’ Inventory of Learning Styles
  – H-PILS

• Four styles
  – Accommodator
  – Assimilator
  – Converger
  – Diverger
SNAPPS

1. Summarize history and findings
2. Narrow the assessment of the problem to 2-3 relevant possibilities
3. Analyze the assessment by comparing and contrasting each possibility
4. Probe preceptor by asking questions and uncertainties
5. Plan development for the patient’s drug therapy issues
6. Select a case-related issue for self-study and preceptor follow-up
Strategy #2
Five Microskills of Precepting
One Minute Preceptor

1. Get a commitment
   • What medication do you recommend?

2. Probe for supporting evidence
   • Why did you select that medication?

3. Teach general rules
   • Use your experience!

4. Reinforce what was done right
   • What went well?

5. Correct mistakes
   • What needs improvement?
AHLTA$^6$

A – Advanced Planning
H – Hands-on Help
  • Direct observation
L – Listen
  • Avoid temptation to take over
T – Teach
  • Ensure at least one take-away teaching point
A – Accountability
  • Documentation and/or self-reflection
Case #1

John has completed his second year of pharmacy school and comes to your community pharmacy for an IPPE. One of his rotation requirements is to provide an OTC recommendation and counseling for a patient. John hasn’t worked in a pharmacy before. JR, a 28 y/o male asks John about using diphenhydramine cream to put on his poison ivy rash.

Pair up and go through the 1 Minute Preceptor or AHLTA steps using this scenario.
Case #2

Susan has been a pharmacy technician working in a community pharmacy for 10 years. She is on her APPE rotation with you and your staff. HB, a well-known patient to your pharmacy comes in with a new prescription for meloxicam. Susan is eager to provide counseling to HB for this medication, however, HB only wants to talk to you. Susan tells you, “I got this” and takes over the conversation.

Go through the 1 Minute Preceptor or AHLTA steps using this scenario.
Strategy #3

Reflection
Kolb’s Experiential Learning Cycle

The Simplest Experiential Learning Cycle

DO IT.

What?
What happened?
What were the results?

So What?
What do these results imply?
How did I influence the outcome?

Now What?
What will I do differently next time?

compiled by Andrea Corney

UMKC
Continuous Professional Development (CPD)¹⁴,⁸

- Self-directed, ongoing, systematic, and outcomes-focused
- Lifelong learning applied in practice
- CE is a part of CPD
- Why do you select a program?
- How will this program affect your professional development?
CPD and Precepting?

- Acquired expertise will wane over time
- “Expertise” in healthcare
- Fostering CPD in learners
- Fostering CPD in yourself
Case #3

MB is on her APPE rotation with you at your ambulatory care clinic. You hear MB say to the medical student, “I don’t like working with the diabetic patients at this clinic; they are all noncompliant and don’t follow recommendations for their diet and blood sugar checks. I just want to get through this rotation so I can graduate and start my residency at University Hospital.’

Discuss at your table how you would use Kolb’s Cycle to discuss with MB.
Case #4

DJ is an IPPE student with you and MB from the previous case. A newly diagnosed patient with hypertension has an appointment with all of you. DJ will provide dietary/lifestyle recommendations and MB will provide medication counseling. DJ begins, is very nervous and takes 20 minutes to explain the DASH diet. MB keeps rolling her eyes and sighing.

Discuss at your table how you can use CPD or Kolb’s for both DJ and MB.
Nurstoons by Carl Elbing

It's nice that you let me follow you for a day, but do I have to wear this t-shirt?

Since my subjective judgement of your performance could alter your entire future, I'm surprised you even asked that question.

I just meant that it's so obvious you're a genius that the shirt isn't needed.

You're probably right, but you should wear it anyway.

www.nurstoons.com
3. Austin, Z. Health Professionals Inventory of Learning Styles (Zubin ... Retrieved August 18, 2016, from https://www.acpe-accredit.org/pdf/Learning_Styles_Handout.pdf
Thank you!

Questions are guaranteed in life; Answers aren't.

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