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Title

Linking Community Preceptors and Students Through Education

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RATIONALE

Recruitment and retention of community preceptors for clinical education is a challenge. CME-based faculty development activities could be effective interventions to help sustain medical student education. Outcome measures of such programs include improvement in teaching skills, attention to student learning and faculty retention.

METHODS

100 primary care community preceptors at a suburban setting were targeted for CME-based teaching skills workshops using PEP, OSTE and EBM over one year. Physicians precepted one to two second year medical students in their offices once a week for 12 weeks. They also received site visits with observed teaching by project faculty. Outcome measures included self-assessed teaching skills, preceptor evaluations of activities, and ratings by students and observing faculty. Longer term outcomes will include measures for faculty retention.

URL: www.ucihs.uci.edu/family/facultydev/index.html

DESCRIPTION OF ACTIVITIES:

OSTE (Objective Structured Teaching Evaluation) – stations covering orientation, evaluation, teaching physical diagnosis, difficult learners, and EBM (3 hours)

PEP (Preceptors Education Project) 2 – series of workshops using STFM materials on orienting students to practice, evaluation and giving feedback, teaching microskills (1.5 hours x 3)

EBM (Evidence-Based Medicine) – workshop on databases, clinical practice guidelines, case discussion, and teaching EBM while precepting (5 hours)

Site Visits – visits to community preceptor offices with condensed PEP 2 syllabus, weekly checklist, with observations and suggestions after visit (2 -3 hours)

Faculty Evaluations of Workshops 2004 – 2006

Type of Workshop (Number)	OSTE (4)	PEP 2 (6)	EBM (5)
N of community preceptor participants	19	19	43
Overall evaluation	63% excellent; 32% very good; 5% good	68% excellent; 26% very good; 5% good	86% excellent; 14% very good
Responsive to needs	100%*	100%*	100%
Relevant to practice or teaching	100%	100%*	98%
Increased knowledge/skills for delivering or teaching pt care	100%	100%**	100%***

*one no response **two no responses ***three no responses

“How will you change your teaching clinical practice as a result of this activity?”

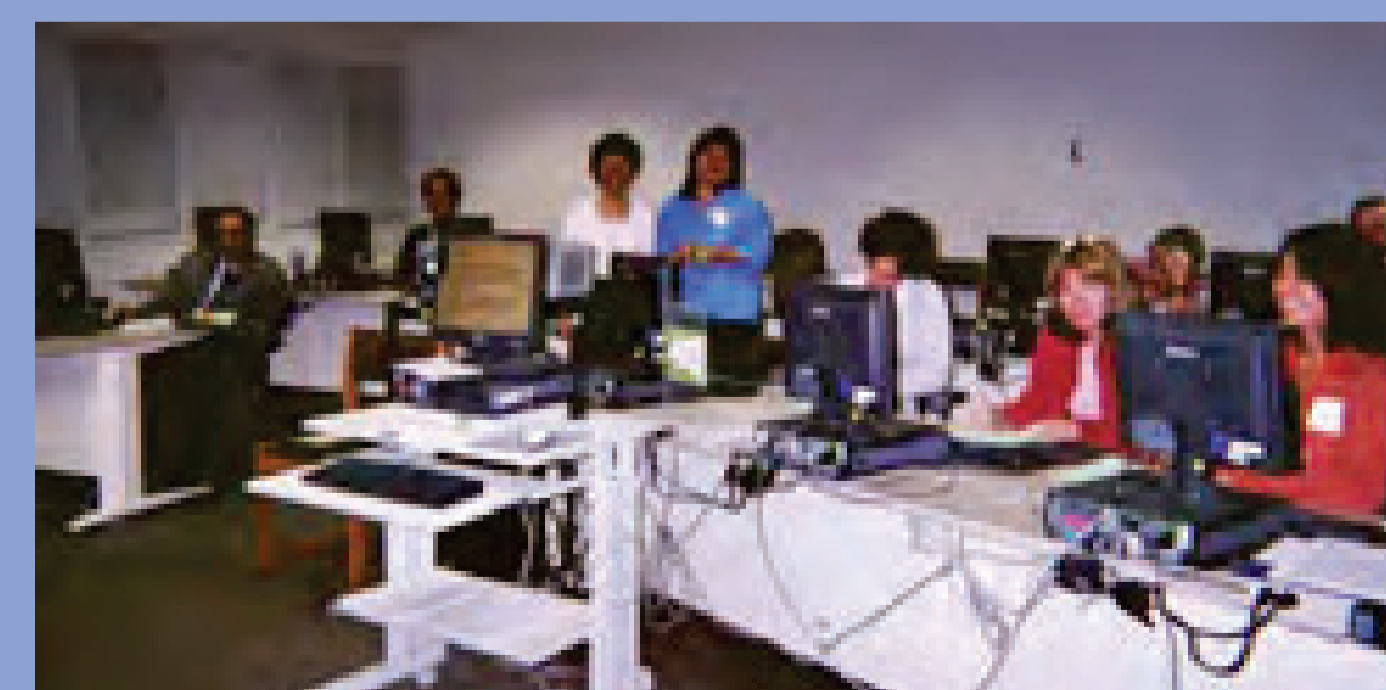


OSTE:

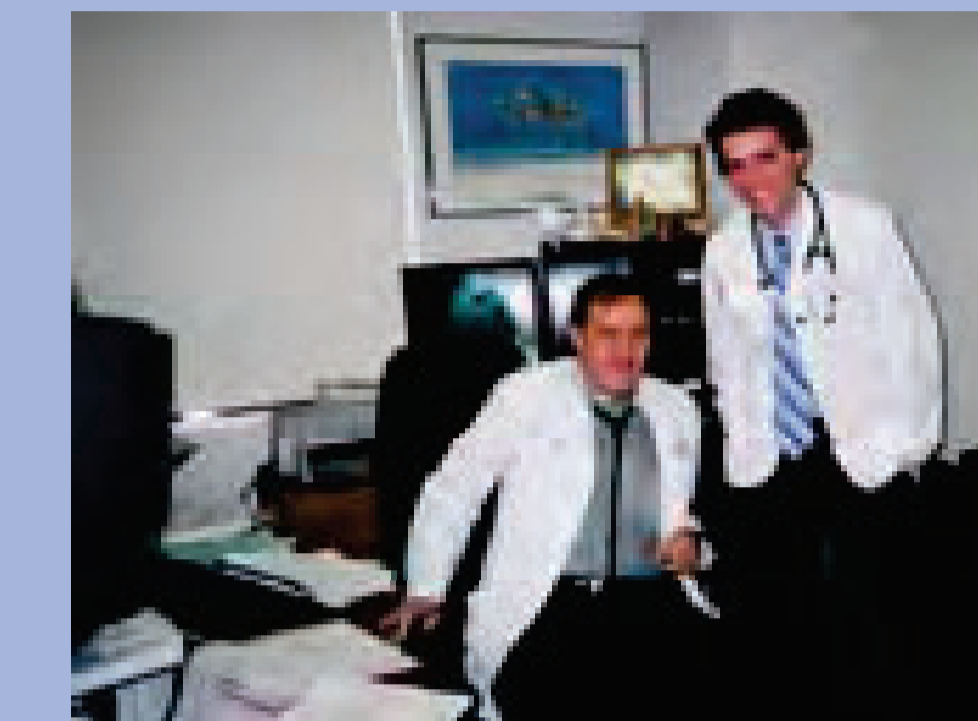
- Be more observant and don't assume what the student knows
- Spend more time interacting with student
- Offer better feedback

EBM:

- Encourage students to look for EBM answers



Site Visits with Community Preceptors



“[Preceptor] takes the time to teach, to demonstrate, and to give instructive assignments.”

“...he always gave me feedback after I was done.”



“[Preceptor] took the time to teach me about diseases, patients, screenings, and exam techniques.”

Student Evaluations of Preceptors 2004-2006

QUESTIONS:	04-05 n=55/92 Mean(sd)	05-06 n=44/48 Mean(sd)
My preceptor allowed me to interview patients.	3.67(1.46)	4.68(0.76)
My preceptor observed me with at least one patient.	3.58(1.44)	4.5(0.88)
My preceptor provided opportunities for physical examination.	3.75(1.33)	4.5(1.01)
I felt my preceptor took time to teach.	3.9(1.12)	4.5(0.72)
I would recommend my preceptor to other students.	3.79(1.41)	4.5(0.72)
My preceptor was an excellent role model.	4(1.27)	4.3(0.99)
My preceptor's patients seemed comfortable working with a medical student.	4.02(1.16)	4.33(0.92)
My preceptor encouraged me to present my ideas.	3.58(1.29)	4.23(0.83)
My preceptor provided feedback on my clinical skills.	3.4(1.33)	4.13(0.88)
My preceptor was informed about my learning needs.	3.56(1.29)	4(1.13)
I was well oriented for my CSE.	3.56(1.11)	3.95(1.18)
My preceptor used the internet for teaching patient care.	3.02(1.31)	3.1(1.5)
TOTAL	3.65(1.29)	4.23(1.92)

*5=Strongly Agree, 1=Strongly Disagree