

The Effective Preceptor



An Educational Monograph

For Community-Based Teachers

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Continuing Education

Purpose: The purpose of this Preceptor Development Program Monograph Series is to provide training in teaching and educational techniques to individuals who teach health professions students in the community setting.

Target Audience: This monograph is designed for clinicians who teach students in the office or hospital settings.

Accreditation: The Dartmouth-Hitchcock Medical Center is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians. The Dartmouth-Hitchcock Medical Center designates this continuing education activity for up to 1 hour in Category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he or she actually spent in the educational activity.

This continuing education session has been awarded 1.2 contact hours by the Southern New Hampshire Area Health Education Center which is approved as a provider of continuing education in nursing by the New Hampshire Nurses' Association Commission on Continuing Education. NHNACCE is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation.

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Timeframe: It is estimated that it will take 1 hour to complete each module which is available in hard copy or on the web at www.snhahec.org under the topic preceptor development

This course was planned and produced in accordance with ACCME Essentials.

To Obtain CME Credit:

- 1) Read the monograph.
- 2) Complete the post-test questions.
- 3) Complete the program evaluation form.
- 4) Return Answer Sheet and Evaluation to the Southern NH AHEC.
- 5) Enclose appropriate processing fee, if required.

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INTRODUCTION

As a health care professional you strive to maintain and improve your knowledge and skills in order to provide the highest quality of care possible. For many of you, this passion for excellence spills into other areas of your lives and professional work, and the evidence is seen in the high quality of teaching provided by community-based preceptors.

This monograph will review some of the literature on the characteristics of effective clinical teachers and preceptors.

The goals of this monograph are to:

- 1) Review the characteristics of the effective clinician.
- 2) Apply the qualities that characterize effective clinical care in defining the characteristics of the effective preceptor.
- 3) List and discuss characteristics of the effective preceptor as indicated by research.
- 4) Explain the concept of becoming a connoisseur of excellent teaching.

Reading this monograph alone will probably not make you an effective preceptor, but it is hoped that it will show where your excellence already lies and encourage your efforts towards continuous improvement.

THE EFFECTIVE CLINICIAN/ THE EFFECTIVE PRECEPTOR

Since we are discussing clinical teaching, what are the characteristics of the “Effective Clinician?” In his book by that name, Philip A. Tumulty, a professor of medicine at Johns Hopkins School of Medicine, discusses the characteristics of the effective clinician. In the preface to his book he outlines the important components of effective medical management.

“To approach and manage a particular problem most effectively requires the following:

- 1) Detailed familiarity not only with the patient’s specific complaint and his physical status but also with the patient as a person including, knowledge of family and of his life circumstances. This can be realized only if the clinician has acquired the great facility and knowledgability in *communicating* with his patient, and in examining him, and also in communicating with his *family* as well. For it is only by means of such communication and physical examination that the basic clinical evidence is derived, and this is, after all, the essential stuff behind the clinician’s thinking and action.
- 2) An organized, disciplined, structured method of analyzing the clinical evidence thus derived, so that no specifically treatable possibilities are overlooked in the clinician’s diagnostic approach, and consequently in his plan of management.
- 3) Employment of wise principles of management, well tested through broad experience, that emphasize regard for the entire patient and not merely his illness, and even more, regard for the patient as part of a family and a community, not as an isolated being.
- 4) Securing patient compliance based upon effective communication with the patient (and his family), which aims to accomplish two main objectives: (a) understanding by the patient of the nature of his problem in terms which are positive and do not generate unnecessary anxiety; and (b) motivation to do whatever may be necessary for him in order to best meet his problem.” (Tumulty, 1973: v)

These same principles can be distilled into what is required for the clinician to provide effective teaching to a learner:

- 1) Communication
- 2) Careful analysis
- 3) Skill in teaching and practice
- 4) Motivating the learner

In the following sections, we will better define these categories by reviewing some of the literature on effective clinical teaching and its relation to the Effective Clinician.

COMMUNICATION

Communication for the effective clinician is clearly a complex exchange of information between the parties involved. The same is true for the effective preceptor.

The transfer of clinical information is an important component of clinical teaching. Learners value preceptors who possess broad knowledge of the medicine (Irby, Ramsey, Gillmore, & Schaad, 1991). A preceptor demonstrates this knowledge as he or she “discusses current developments, reveals broad reading, discusses divergent points of view, relates topics to other disciplines and directs students to useful literature in the field,” and explains the basis for his actions and decisions and answers questions raised clearly and precisely (Stritter & Baker, 1982).

There is more involved than the demonstration or passive transfer of clinical information. The preceptor must not only share his or her own knowledge but should be open to views in conflict with his own (Stritter & Baker, 1982). The effective teacher is also personable and approachable (Irby et al., 1991). Listening to the learner, being open to and respecting their ideas and opinions strengthen the teacher/ learner relationship in the same way the openness and respect with patients is vital in the doctor/patient relationship.

Table 1:
COMMUNICATION AND THE EFFECTIVE PRECEPTOR

- 1) Possesses and demonstrates broad knowledge**
- 2) Explains the basis for actions and decisions**
- 3) Answers learner questions clearly and precisely**
- 4) Open to conflicting ideas and opinions**
- 5) Connects information to broader concepts**
- 6) Communicates clear goals and expectation**
- 7) Captures learners attention**
- 8) Makes learning fun**

Connecting information to broader concepts is important in patient care and teaching. For example, in patient care, the anxious patient must generalize the effect of his or her stress in order to see the connection to insomnia, headaches and indigestion. Similarly, the learner needs assistance in taking the information from a specific case and generalizing it other clinical situations. {Irby 1994 #1440}p336

Clear communication of goals is vital to effective precepting (Skeff, 1988). Too often teachers do not define the specific observable behaviors that are desired. When clear expectations are set and communicated the learner is better able to focus his or her energies and efforts. (See the monograph on “Setting Expectations” for more information.) Developing goals for what you wish learners to achieve while working with you can assist you in measuring your own effectiveness.

The environment in which teaching takes place has a major effect on the transfer of information. For example, the clinician’s body language and tone of voice has a significant effect on communication with the patient. Likewise, learners remember more when a preceptor who can capture their attention and make learning fun (Irby, 1994). This can be accomplished by using humor, dramatic case examples, suspense and enthusiasm.

In summary, the effective preceptor communicates his/her clinical knowledge clearly to the learner while remaining open and respectful. Specific concepts are expanded to general principles. Careful listening indicates respect for the learner. Goals and expectations are defined and clearly communicated, and a pleasant and stimulating learning environment is fostered using humor and enthusiasm.

CAREFUL ANALYSIS

The most skillful clinical interview and physical examination is useless if the clinician is not able to analyze the information and use it to assist the patient in his or her problem. The effective preceptor analyzes the data obtained from his or her interaction with the learner and uses this information to benefit the learner through assessment, feedback and evaluation.

In order to accurately assess the learner's performance the effective preceptor observes that performance directly as often as is possible (Irby, 1995). Often a preceptor's observations tend to be second hand – based on presentations or write-ups. It is important to directly observe those vital history-taking and physical exam skills in order to give the necessary guidance to the learner.

Feedback is highly valued by learners (Goertzen, Stewart, & Weston, 1995; Irby, 1995; Skeff, 1988; Stritter & Baker, 1982). It is the mechanism by which the effective preceptor promotes the positive behavior and skills and works to modify those areas where improvement is needed. (See the monograph on "Feedback" for more information.)

Table 2:
CAREFUL ANALYSIS OF THE LEARNER

- 1) Accurate assessment of learner's knowledge attitudes and skills**
- 2) Uses direct observation of the learner**
- 3) Provides effective feedback**
- 4) Performs fair and thoughtful evaluations**

Evaluation is a key function of the effective preceptor. Through clear goals and expectations, ongoing assessment of the learner, and continuing feedback to guide progress, the preceptor has integrated the evaluation process into the entire rotation. The final evaluation is the culmination of an ongoing process and is more relevant and valuable as a result. (See the monograph on "Evaluation: Making It Work" for more information.) Schools and training programs highly value evaluations, but learners also value a fair and thoughtful evaluation (Goertzen et al., 1995; Irby, 1995; Skeff, 1988; Stritter & Baker, 1982).

SKILL IN TEACHING AND PRACTICE

The demonstration of skill is important in clinical practice and in clinical teaching. Residents and students value the demonstration of skillful clinical practice and effective role modeling (Irby, 1978, 1994, 1995; Skeff, 1988). Clinical teaching is more than telling someone what to do and how to do it – the effective preceptor not only "talks the talk" but also "walks the walk." In the close quarters of the teaching relationship, true role modeling involves being consistent in what you say and do in your relations with patients, staff and learners.

Table 3:
SKILL IN PRACTICE AND TEACHING

- 1) Provides effective role modeling**
- 2) Demonstrates skillful interactions with patients**
- 3) Generates interest in the subject matter**
- 4) Presents information with organization and clarity**
- 5) Organizes and controls the learning experience**
- 6) Balances clinical and teaching responsibilities**
- 7) Gives appropriate responsibility to the learner**

There is more to clinical teaching than just being an excellent clinician in the presence of others. Most of us can probably recall someone we have met or worked with who was an excellent clinician – an astute diagnostician, a compassionate provider of high quality care – who seemed unable to transmit this knowledge or skill to others. A colleague recalls:

“My partner was an incredible diagnostician but he just could not communicate how he did it. One difficult patient presented with fever and back pain. He examined him, and then proceeded to place a needle in the exact spot necessary to drain an epidural abscess. I asked him, ‘Tell me how you knew to do that.’ He replied with a quizzical look, ‘I don’t know how... I just knew.’”

Just as a Nobel Prize winner may not be an excellent teacher of biochemistry or pharmacology, the top clinician is not necessarily the best teacher.

The best teachers provide useful information in a creative way (Whitman, 1990). The excellent preceptor must not only have knowledge and skill but must be able to share it in a way that is useful and interesting to the learner. Some would object to the assertion that the teacher must be entertainer as well. I would only ask you to think back to a recent CME conference you attended. From which speaker did you gain more – the knowledgeable expert who presented his information in an flat and uninteresting manner or the knowledgeable expert who captured your interest with a stimulating presentation?

Learners also value an organized approach to teaching. Organization and clarity are important in the impromptu teaching in your practice as well as in a formal lecture (Stritter & Baker, 1982). What should the learner focus on with this next patient? How do you want the next case presentation to be different? Actively directing the learning will create small individual goals that will build into greater accomplishments.

Just as the clinician needs to have control of the patient interview, learners value a preceptor’s control of the teaching situation (Skeff, 1988). In the ambulatory setting there is intense pressure for efficient use of time. The clinician and the preceptor who plan and control the use of time effectively can better serve the needs of the patient and the learner. In managing the use of time, the effective preceptor sometimes makes difficult decisions regarding the conflicting needs of patients and learners. There must be a clear balancing of clinical and teaching responsibilities, and an ability to do this well is valued by learners (Goertzen et al., 1995).

The effective preceptor recognizes that, when appropriate, he or she must relinquish some of the control in the clinical area to the learner. Shadowing can be a useful introduction to clinical care, but this technique alone grows old after several days of following the preceptor. Learners value

appropriate increases in responsibility coupled with careful oversight and guidance (Irby, 1978; Irby et al., 1991). With careful ongoing analysis, the effective preceptor can balance the educational needs of the learner with the needs of the patients and the office.

MOTIVATING THE LEARNER

A clinician can make the correct diagnosis and prescribe the perfect therapeutic regimen, but if the patient does not accept the diagnosis and is not motivated to follow that regimen, the result will be disastrous. The situation is similar for the preceptor. Your communication, feedback, and teaching skills may be top notch, but the results will be sabotaged if the learner is unmotivated.

Learners in health care professions usually enter their training with high levels of energy and motivation. Sometimes though, the rigors and challenges of pre-clinical teaching in the classroom can take their toll, leaving the learner depleted and questioning the relevance of what they have learned. The application of knowledge to solving problems and the generalization of the current experience to future patients can help revive flagging energy and waning motivation in early clinical training.

Adult learning involves internal motivation – learning because one wants to and not for some external reward such as a grade. Many of the learners we see as we teach clinical medicine have not made this transition to an adult learning style. Active involvement of the learner is a characteristic of the effective preceptor (Goertzen et al., 1995; Irby, 1994) and is an important method of encouraging the adult style of learning and thereby increasing motivation. This clinical experience may be

**Table 4:
MOTIVATING THE LEARNER**

- 1) Emphasizes problem solving**
- 2) Translates specific cases into general principles**
- 3) Promotes active involvement of the learner**
- 4) Demonstrates enjoyment and enthusiasm for patient care and teaching**
- 5) Develops a supportive relationship with the learner.**

the first time that a learner has been able to select some of his or her own learning goals and to help direct the methods to best achieve them. This also can be an important step to life-long self-directed learning.

A recurrent theme in reviewing the qualities of the effective preceptor is the value of enthusiasm (Irby, 1978). Demonstrating enjoyment of patient care and teaching is among the most important characteristics of the effective preceptor (Irby et al., 1991). With the current changes in health care this may be the characteristic that is most under siege. Pressure to see more patients, shrinking reimbursements, and increasing difficulty in fitting teaching into a busy life are making it harder to be positive and enthusiastic. From time to time it is essential to stop, get beyond the pressures and demands of the minute and look back to those qualities of the patient care and teaching that are most important and rewarding to you. Enthusiasm is not something that can be faked; but an honest discussion with the learner of the challenges you face and the values and ideals which keep you going, can be an important boost to your own motivation.

Finally, a supportive relationship with the preceptor is another factor that motivates learners (Goertzen et al., 1995).

The effective preceptor shows respect for the learner (Irby, 1995) and by doing so creates a safe environment for professional growth. Just as a growing bone is more fragile, the learner needs a safe environment, characterized by trust and respect in which to build momentum, gain motivation, and achieve the maximum possible growth from the rotation.

GROWING IN EFFECTIVENESS

Many health care professionals work hard to constantly improve their skills, in order to better care for their patients.

This characteristic often extends to clinical teaching, where many of the best teachers are constantly seeking to improve their skills. How does a preceptor move beyond effectiveness to excellence?

Whitman presents one strategy for improving ones teaching – by becoming a *connoisseur of teaching* (Whitman, 1990). Think for a moment about what it means to be a connoisseur. One does not become a connoisseur of wine just by drinking a lot of wine! Careful study of wine is needed. One carefully selects and tries new wines selecting the good and learning to avoid the not so good. Other knowledgeable wine tasters are sought out and knowledge is exchanged. One’s knowledge and skill increases with each new experience.

The preceptor seeking to be a connoisseur studies teaching techniques. New strategies are carefully tested. Other preceptors are sought out and information and ideas are exchanged. Preceptor development activities are in many ways like wine tastings. Often the exchanges between preceptors are the most valuable components of the events.

You have dedicated a significant amount of energy to becoming an effective clinician. By continued attention to communication skills, careful ongoing analysis, skillful practice and teaching, and building motivation, your effectiveness preceptor will grow, as has your effectiveness as a clinician.

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RELEVANT PRECEPTOR DEVELOPMENT PROGRAM TOPICS

Setting Expectations

Feedback

Evaluation: Making It work

Teaching Styles/ Learning Styles

The One-Minute Preceptor

POST-TEST FOR CME CREDIT

- 1.) Which of the following statements is correct?
 - A) Clinical effectiveness has no relation to effective precepting.
 - B) Setting goals and expectations is valuable to learners.
 - C) The preceptor's knowledge base is not important to learners.
 - D) The preceptor should not consider conflicting opinions
 - E) All of the above

- 2.) Choose the incorrect statement from the following:
 - A) The effective preceptor makes learning fun and enjoyable.
 - B) It is important to connect information to broader concepts.
 - C) Learner questions should be ignored in favor of the preceptor's agenda.
 - D) The preceptor should explain basis for actions and clinical decisions.

- 3.) Careful analysis of the teaching/learning experience by the preceptor is important and valuable. Select the incorrect statement from those listed below.
 - A) Assessment is an ongoing process of collecting information about the learner's current level of knowledge, skill and attitude.
 - B) Direct observation of the learner is not useful in effective precepting.
 - C) Feedback is a key function of the effective preceptor.
 - D) Evaluation, when well integrated into the learning experience, can guide and improve the learning experience.

- 4.) Skill in teaching and practice is a valued characteristic of the effective preceptor. Which of the following is not a component of this concept.
 - A) The preceptor provides an effective role model.
 - B) The preceptor demonstrates skillful interaction with patients.
 - C) Information is presented with organization and clarity.
 - D) The preceptor generates interest in the subject matter.
 - E) The learner is responsible for organizing and controlling the learning experience.

- 5.) Motivation is a key ingredient in learning. Which of the following statements is not correct.
 - A) Preceptor enthusiasm helps motivate learners.
 - B) A supportive relationship promotes learner growth.
 - C) External sources of motivation are a characteristic of the adult learning style.
 - D) A focus on problem solving helps learners see the importance and usefulness of the knowledge they have.
 - E) All of the above.

- 6.) True or False: The teaching connoisseur is simply someone who done a lot of teaching.
- 7.) As a clinician you have been exposed to a great many teachers in your years of training and preparation. Think about the best teacher you can recall and, in the space provided on the answer sheet please briefly describe the technique or characteristic that distinguishes that person as an effective teacher. (Note: Your answer need not be restricted to clinical teachers.)
- 8.) As a clinical teacher you have had the opportunity to develop your own skills and techniques for effective precepting. In the space provided on the answer sheet, please briefly describe a technique that you use that you find effective in clinical teaching.

POST-TEST ANSWERS AND DISCUSSION:

1.) B.

Surveys have shown that setting clear goals and expectations is considered an important aspect of effective precepting. Clinical effectiveness is very important in teaching learner, as is the demonstration of a broad knowledge base. Learners value a preceptor who is open to considering new ideas and conflicting opinions.

2.) C.

Learner questions should be answered clearly and precisely. Efforts to make learning fun and enjoyable are valued by learners. The preceptor should willingly explain the rationale for actions and decisions. Connecting information to broader concepts helps communicate valuable principles to the learner.

3.) B.

Direct observation is a valuable tool in analyzing the performance and needs of the learner. Assessment is the ongoing process of collecting information on the learner's progress. Evaluation can be integrated into the rotation making it a valuable component of ongoing careful analysis of the learner and the educational experience.

4) E

The preceptor should maintain control and ultimate responsibility for the rotation, but should give the learner appropriate responsibility as their skill and training warrants. The effective preceptor provides an effective role model and demonstrates skillful interaction with patients. Information should be presented with organization and clarity and the preceptor should generate as much interest as possible in the subject matter at hand.

6.) False

Just as a wine connoisseur is more than someone who drinks a lot of wine, the teaching connoisseur is more than someone who teaches a lot. The connoisseur actively seeks to learn more about teaching, practices and perfects skills seeks opportunities to meet and learn from other clinical teachers.

7) Self-correct.

Thank you for sharing characteristics of an effective teacher who you have encountered. Thinking carefully about those who have taught us and the techniques that were most valuable to us, is a first step in expanding the repertoire of the skills we use. We would like to share your comments in other preceptor development materials. If you will allow this please check the box on the answer sheet.

8) Self-correct.

Thank you for sharing your skills and techniques. As a clinical teacher you have a unique experience to share. We would like to share your technique with your colleagues through other preceptor development materials site. If you will allow us to share your response please check the box on the answer sheet.

CME POST-TEST and EVALUATION

The Effective Preceptor Monograph

This Monograph is eligible for one (1) hour of AMA Category 1.

To receive credit: You must practice or teach in New Hampshire and must complete this Post-Test and Evaluation form and submit it to:

**Southern NH AHEC
128 State Route 27
Raymond, NH 03077**

NOTE: A processing fee of \$5.00 is required from participants located outside New Hampshire.

Name: _____ **Today's Date:** _____

Address: _____

Social Security Number: ____ _ -- ____ _ -- ____ _

Profession: MD/DO ____ NP ____ PA ____ RN ____ Other: _____

Specialty: _____

Type of Learners Taught: (Circle all that Apply)

Medical Students Residents NP Students PA Students Nursing Students Other:

POST TEST ANSWERS:

Circle letter that corresponds to your answer for each question

1) A B C D E

4) A B C D E

2) A B C D

5) A B C D E

3) A B C D

6) T F

The Effective Preceptor: Post-Test (continued)

7) Please briefly describe characteristics and techniques of an effective teacher you have known.

May we share this information with other preceptors via our web-site? Yes____No____

8) Please briefly describe a teaching technique that helps you to be a more effective preceptor.

May we share this information with preceptors via our web-site? Yes____No____

PLEASE COMPLETE THE ACCOMPANYING PROGRAM EVALUATION FORM

PROGRAM EVALUATION: The Effective Preceptor

Rating Scale Range is 5-1

5=Excellent 4=Good 3=Fair 2=Somewhat Disappointing 1=Poor

Please rate:

- 1. The monograph overall 5 4 3 2 1**
2. The extent to which the learning objectives were met, that you are now able to:

- Review the characteristics of the effective clinician. 5 4 3 2 1**
Apply the framework for effective clinical care to defining the characteristics of the effective preceptor. 5 4 3 2 1
List and discussed characteristics of the effective preceptor as indicated by research. 5 4 3 2 1
Explain the concept of becoming a connoisseur of excellent teaching. 5 4 3 2 1

- 3. The relevance of the content to your precepting 5 4 3 2 1**

- 4. The extent to which this format makes it easier for you to participate in preceptor development activities 5 4 3 2 1**

- 5. What did you like about this monograph (in terms of content or format)?**

- 6. What would make it better?**

- 7. List one idea or recommendation gained from this activity that you will use in your future clinical teaching.**

Check off additional PDP topics that you are interested in learning more about:

- Setting Expectations**
- Feedback**
- Evaluation: Making it Work**
- Dealing with the Difficult Learning Situation**
- Teaching Styles/ Learning Styles**
- Integrating the Learner into the Busy Practice**
- Teaching at the Bedside**
- The One-Minute Preceptor**

Preferred Format(s):

- Monograph**
- World-Wide Web**
- Lecture/Seminar**

~~Thank You~~

The Effective Preceptor

A review of selected literature has revealed that the following are characteristics of effective clinical teachers:

❖ **COMMUNICATION**

- Possesses and demonstrates broad knowledge
- Explains the basis for actions and decisions
- Answers learner questions clearly and precisely
- Open to conflicting ideas and opinions
- Connects information to broader concepts
- Communicates clear goals and expectation
- Captures learners attention
- Makes learning fun

❖ **CAREFUL ANALYSIS OF THE LEARNER**

- Accurately assesses learner’s knowledge attitudes and skills
- Uses direct observation of the learner
- Provides effective feedback
- Performs fair and thoughtful evaluations

❖ **SKILL IN PRACTICE AND TEACHING**

- Provides effective role modeling
- Demonstrates skillful interactions with patients
- Presents information with organization and clarity
- Generates interest in the subject matter
- Organizes and controls the learning experience
- Balances clinical and teaching responsibilities
- Gives appropriate responsibility to the learner

❖ **MOTIVATES THE LEARNER**

- Emphasizes problem solving



- **Translates specific cases into general principles**
- **Promotes active involvement of the learner**
- **Demonstrates enjoyment and enthusiasm for patient care and teaching**
- **Develops a supportive relationship with the learner.**

