Precepting - A bridge to the Future

Tracy S. Hunter, RPh, MS, PhD
Assistant Dean, Experiential Education
UNM College of Pharmacy
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The Challenge: to Learn, UnLearn, & ReLearn
I do NOT have, nor does my family have, financial interests to disclose.
Organization of Discussion

- Vision
- External Forces
- Strategies
Prepare UNM Student Pharmacists to be Leaders in Pharmacy Practice Today and Tomorrow
Vision

Design experiences that benefit both the preceptor and student pharmacist.
Objectives

At the end of this presentation, pharmacists will be able to:

- Describe the knowledge, skills, and competencies expected of Pharmacy graduates.
- Explain why precepting is important to your practice and the profession.
- Prepare constructive ways to prevent, identify, and address knowledge skill or attitude issues in experiential education.
Objectives for Technicians

At the end of this presentation, technicians will be able to:

- Describe the knowledge, skills, and competencies expected of Pharmacy graduates.
- List the characteristics of successful preceptors.
- Recognize constructive ways to prevent, identify, & address KSA issues in experiential education.
Organization of Discussion

- Vision
- External Forces
- Strategies
Converging Forces

- Health Care Environment
- ACPE 2016 Standards
- ASHP Residency Standards
- NAPLEX Blueprint
- EPAs
Changes in Health Care Environment

- Expanding role of Pharmacists on Health Care Team
- Reimbursement Changes
- Patient expectations & access to information
- Aging of the population
- Bottom line
Changes in Health Care Environment

- Expanding role of Pharmacists on Health Care Team
- Reimbursement Changes
- Patient expectations & access to information
- Aging of the population
- All doing more with less
The curriculum prepares all students to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team. Team exposure includes prescribers as well as other healthcare professionals.
The ACPE Outcomes: 2016

Practice-ready

• Provide direct patient care in a variety of healthcare settings

Team-ready

• Contribute as a member of an interprofessional collaborative patient care team

IPPEs: Pre-Advanced Pharmacy Experience Curriculum

Prepares for APPE

IPPE exposure to contemporary practice models:

- Interprofessional shared patient care decision making
- Professional ethics
- Expected behaviors
- Intentionally structured sequenced “...purposely integrated into didactic curriculum”
IPPEs: Pre-Advanced Pharmacy Experience Curriculum

P1: Community in Summer

P2: Institutional in Summer

P3: Concurrent Transitions of Care 2016
New Postgraduate Year One (PGY1) Residency Accreditation Standards

• Purpose of revision:
  • Streamline requirements
  • Reduce documentation
  • Align standards to current pharmacy practice trends

• Global changes:

<table>
<thead>
<tr>
<th>Terminology</th>
<th>CURRENT</th>
<th>NEW</th>
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<tbody>
<tr>
<td>ASHP Standards&lt;sup&gt;a&lt;/sup&gt;</td>
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<td>6</td>
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<tr>
<td>Competency Areas&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>4 Required 7 Elective</td>
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<td>Required Goals</td>
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<tr>
<td>Criteria&lt;sup&gt;c&lt;/sup&gt;</td>
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Design & Conduct of Residency Program

- NEW statement: 3.3.a.(6)
- “Residents must spend two thirds or more of the program in direct patient care activities”
Taxonomy

• Educational Objectives:
  • Each is classified according to an educational taxonomy and level of learning

Doing is primary focus

Knowing
NAPLEX Blueprint: 2 Areas

1: Ensure Safe & Effective Pharmacotherapy & Outcomes

2: Safe & Accurate Preparation, Compounding, Dispensing, & Admin of Meds & Provision of Health Care Products

http://www.nabp.net/programs/examination/naplex/naplex-blueprint
NAPLEX Blueprint

Area 1: Ensure Safe & Effective Pharmacotherapy & Outcomes

Area 2
33%

AREA 1: 67%
Which of the following most closely matches your knowledge of EPAs?

- I am Well-versed about what EPAs are & how to use them?
- I have some understanding of what EPAs are and & how to use
- I have very minimal understanding of what EPAs are or how to use them
- This is my first time learning about EPAs
What are EPAs?

• Entrustable Professional Activities
• EPAs -- units of practice or descriptors of work.
• Defined as specific task or responsibilities that trainees are “trusted” to perform with direct supervision
• Independently executable, observable & measurable in their process & outcome
What are EPAs?

• EPAs for New Pharmacy Graduates
  • discreet,
  • essential activities & tasks
  • that ALL new graduates **Must** be able to perform **without** direct supervision upon entering practice or graduation.
<table>
<thead>
<tr>
<th></th>
<th>Entrustable Professional Activities</th>
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<tbody>
<tr>
<td>1</td>
<td>Patient Care Provider Domain</td>
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<tr>
<td>2</td>
<td>Population Health Promoter Domain</td>
</tr>
<tr>
<td>3</td>
<td>Information Master Domain</td>
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<tr>
<td>4</td>
<td>Practice Manager Domain</td>
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<tr>
<td>5</td>
<td>Self-Developer Domain</td>
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</tbody>
</table>
Example of EPAs:
Patient Care Provider Domain

- **Collect information to identify a patient’s medication related problem**
- **Analyze info. to determine effects of med therapy, identify med-related problems, & prioritize health-related needs.**
- **Establish patient-centered goals, create a plan for a patient with patient, caregiver(s), & other hps that is evidence-based & cost-effective.**
- **Implement care plan in collaboration with the patient, caregivers, & other health professionals.**
Pharmacy Practice Modified Levels of Entrustable Professional Activities (EPAs)

• Level 1  Observe only, even with direct supervision
• Level 2  Perform with direct, proactive supervision
• Level 3  Perform with reactive supervision (quick, on request)
• Level 4  Supervise at a distance or after
• Level 5  Supervise more junior colleagues
Example of EPAs:
5. Self Developer Domain

- Collect information to identify a patient’s medication related problem
- Create & update a curriculum vitae, resume, and/or professional portfolio.
- Perform a self-evaluation to identify professional strengths and weaknesses.
I trust the student ...

- Level 1  ...with specific direction & supervision to initiate a preliminary assessment of common conditions. Student required significant correction.
- Level 2
- Level 3  ...with limited correction... Student is self-directed & seeks guidance as necessary
- Level 4
- Level 5  ...has mastered the ability to completely & competently assess common conditions. Student is able to give feedback to other learners.
Summary External Forces
Converging Forces

- Health Care Environment
- ACPE 2016 Standards
- ASHP Residency Standards
- NAPLEX Blueprint
- EPAs
Organization of Discussion

Vision

External Forces

Strategies
Go Teach Students!!!

Making Precepting a joy
Qualified Preceptors

- Demonstrate expertise
- Enthusiastic for Teaching
- Strong communication skills
- Willingness to provide feedback
- Willingness to receive feedback
How many Preceptor roles & Responsibilities can you name?
Preceptor Roles & Responsibilities

- Teacher/educator
- Skilled Communicator
- Facilitator -- Motivator
- Socializer
- Role Model
- Expert patient care provider
Teacher educator roles

Assessor

Planner

Implementer

Evaluator
Assessor

- Determine current level
- Determine Learning needs
- Assess early: EDOC
- Listen

Diagnose Your Learner
Maximize Assessment

- Diagnose Student deficits and strengths
- Determine what works well or not in on your clinical teaching
- Develop & implement a assessment system for competency development over the experiences
- Chart student progress through learning curve
- Deliver personalized tutoring to students
Maximize Assessment

- Diagnose Student deficits and strengths
- Determine what works well or not in on your clinical teaching
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- Chart student progress through learning curve
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Planner

- Identify timeline, learning preferences
- Select learning activities
- Develops a personalized approach
- Creates learning contract
The preceptor’s role & tasks

Striving to be aware of their:

- Biases
- Judgments
- Pre-conceptions &
- How these influence the learner.

Gass MA, Gillis HL, Russell KC (2012)
Organization of Discussion

Vision

External Forces

Strategies
The preceptor’s role & tasks

- Recognize & encourage spontaneous opportunities for learning
- Design of experience to include the possibility to learn from natural consequences, mistakes & successes

Concrete Steps: The preceptor’s role & tasks

- Setting suitable experiences
- Posing problems to solve
- Setting boundaries
- Supporting learners
- Insuring physical & emotional safety
- Facilitating the learning process

Gass MA, Gillis HL, Russell KC (2012)
Concrete Tasks: Preceptor development

Increase sense of worth & confidence

Competent in at least one model

Common models include
- The one-minute preceptor
- Pimping
Steps to Making Precepting a joy

The Teachable moment

1-minute Preceptor

SNAPPS

Aunt Minnie

2-minute Observation

Activated Demonstration

See One, Do One, Teach One

Teaching Scripts

ASK ME TELL ME

Ask-tell ask

“Pimping”
<table>
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<th>Step</th>
<th>Action</th>
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<tr>
<td>Get a Commitment</td>
<td>Ask: &quot;What do you think is going on [with the patient]?&quot;, Provides assessment of student's knowledge/skill, teaches interpretation of data</td>
</tr>
<tr>
<td>Probe for Supporting Evidence</td>
<td>Ask: &quot;What led you to this conclusion?&quot; or &quot;What else did you consider?&quot;, Reveals student's thought process and identifies knowledge gaps</td>
</tr>
<tr>
<td>Teach General Rules</td>
<td>Say: &quot;When you see this, always consider...&quot;, Offers 'pearls' which can be remembered</td>
</tr>
<tr>
<td>Reinforce What was Done Right</td>
<td>Say: &quot;You did an excellent job of...&quot;, Offer positive reinforcement</td>
</tr>
<tr>
<td>Correct Mistakes</td>
<td>Say: &quot;Next time, try to consider this...&quot;, Comment on omissions and misunderstandings to correct errors in judgment or action</td>
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The One Minute Preceptor

- https://www.youtube.com/watch?v=hmKvei3thwQ
How would you apply this in your practice?

• JS, a 48 yo woman with a history of T2D, obesity, HPT, & migraine headaches is admitted for Syncope work up. Her recent A1c is 7.4%.
• She was diagnosed with microalbuminuria (1945mg/dl) [Jan. 2015].
• Last 3 reading: BP 154/86 mmHG pulse 78bpm
• Med list: Metformin 1000 BID
  • Glyburide 10 mg BID
  • Lisinopril 20 QD
  • Ibuprofen 200mg prn
Practice Reflection

What key ideas did you encounter that build on, or conflict with your practice?

What ideas do you commit to implementing?

What connections with others can you develop to help you accountable to change?
Key Takeaways

What are your key Takeaways?
Key Takeaways

- Prepare early
- Set expectations early
- Assess early
- Give feedback early & often
- Evaluate and document
- Find techniques that work for you
Thank You!


