Disclosures

• I have nothing to disclose
Please evaluate this presentation using the conference mobile app! Simply click on the "clipboard" icon on the presentation page.
Session Outline

• Introduction: Goals and Structure of MOC Pilot (3 minutes)
• Background on FAU’s Implementation and Recruitment Plan (7 minutes)
• Outcomes of Pilot and Lessons Learned (5 minutes)
• Questions and Next Steps (5 minutes)
Session Goals

1. Identify opportunities to expand the pool of qualified community-based preceptors through innovative incentives and faculty development opportunities.
2. Describe the plan utilized at the Charles E. Schmidt College of Medicine to engage community-based preceptors in a teaching improvement activity.
3. Plan for having community-based faculty hit certain benchmarks in order to track and report earning Maintenance of Certification Credit.
4. Share the strategy for designing a teaching improvement curriculum, recruiting community-based preceptors and share lessons learned during the pilot program.
Preceptor Crisis and MOC
STFM/ABFM Precepting Performance Improvement Program

This program offers Performance Improvement credit for certification (previously MOC Part IV) to ABFM diplomates who provide personal instruction, training, and supervision to a medical student or resident and who participate in a teaching improvement activity. ABFM is piloting the program before opening it up to all academic units/preceptors.

http://www.stfm.org/Resources/ResourcesforMedicalSchools/PreceptorExpansionInitiative/Tactic5
Pilot Requirements

• 1. Identify a need
• 2. Create an aim for improvement
• 3. Conduct an Intervention
• 4. Measure Improvement
Our Need

- Students in LICs
- Busy Community-Based Preceptors
- Limited time to develop and implement
- Aim to improve developmental precepting over time: LIC-specific teaching
Intervention

- **PODCASTS:**
  - Podcast 1: Encouraging Continuity
  - Podcast 2: Bedside Teaching
  - Podcast 3: Encouraging Student Ownership of Patients
  - Podcast 4: Communicating and Managing Patient Results During Off-Clinic Days
  - Podcast 5: Choosing the Right Patients for Continuity
- Embed in modules in CANVAS course online
- Supporting materials and discussions
- Pre and post assessment
**Measure Improvement**

**Teaching Assessment:**

<table>
<thead>
<tr>
<th>Clinical Teaching</th>
<th>Self-Assessed Skill/Knowledge Level</th>
<th>Priority for Self-Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 2 3 4 5</td>
<td>Low, Medium, High</td>
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<tr>
<td>Setting expectations with learners</td>
<td></td>
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<tr>
<td>Assessing Learner Needs</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
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<tr>
<td>Adjusting teaching style based on learner needs</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
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<tr>
<td>Direct Observation Skills</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
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<tr>
<td>Teaching Physical Exam Skills</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
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<tr>
<td>Giving Constructive Feedback</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
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<tr>
<td>Assessing Learner Skills</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
</tr>
<tr>
<td>Identifying a struggling learner</td>
<td>1 2 3 4 5</td>
<td>L M H</td>
</tr>
</tbody>
</table>

*Not a validated instrument. Developed by the Society of Teachers of Family Medicine Medical Student Education Committee. April 2018.*

Measure Improvement

Burnout Assessment:

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5794850/
Results – Feasability?

- 24 Family Physicians Identified (ABFM Diplomates, Met hours requirement)
- 15 requested enrollment in pilot
- 10 completed all modules
- (1 abandoned after first module, 4 never entered the course)
- ABFM provided credit for 8 who completed attestation and surveys
Results (Data Pending)

- N=8, Plan is ANOVA
- Pre and Post – matched per participant
- Teaching ability – novice to master
  - Clinical Teaching
  - Preparation for Learners in Your Clinical Setting
  - Professionalism
- Priority for Self-Improvement (low, medium, high)
- Professional Fulfillment Index, Burnout, Likelihood of Medical Errors
Improved Performance?

• Commitment to change:
  – “I will encourage my Student to present differentials and treatment plans (once we have gone over them) to the Patient so that he/she feels ownership / greater value in managing the Pt.”
  – “Discuss the need for continuity with my staff, who are unfamiliar with LIC. Having everyone involved at the office will create more unity and benefit the student's education.”
  – “At least a discussion can take place between student and preceptor regarding the care of the patient between sessions and the student may then read up on the case for further discussion next clinic session. Also at the next clinic session, the preceptor could get the student more involved by making calls or transcribing in EMR with preceptor's supervision.”
  – “I will review hospital follow-up patients as potential continuity patients, and contact them ahead of their appts for interest in the student-provider.”
  – “I can encourage students to accompany their assigned patients to their specialist visits.”
Lessons Learned

• Stick to deadlines!
• Clear messaging around what is available when
• Not burdensome
• Preceptors appreciate
• Students notice change
Next Steps

- Roll out to more programs
- Sustainability?
- What else to improve?
Questions?

References:


