Preceptors are Essential!

- The success of each student’s experiential education is dependent on the selection of qualified pharmacists to serve as faculty in the field.
- As instructors, role models, and mentors, you guide and monitor students in the application of knowledge learned in the classroom to patient care in practice.
- And you evaluate and grade the student’s progress toward defined professional behaviors and competencies.

Goal

- To provide knowledge, know-how, tips, and tools to help you prepare, organize, conduct, and manage your rotations with effective feedback and meaningful evaluations, for a better experience for both you and your students.

Handout: Challenging Student Situations + Challenging Preceptor Situations Identified by Attendees

Learning Objectives

At the end of the workshop, you should be better able to:

1. Recognize some ways that communication styles and expectations differ between generations.
2. Recognize some ways that differences in cultures and linguistics may impact learning experiences.
3. Manage difficult learning situations with students relative to documented expectations shared at orientation.
4. Choose more appropriate phrases for meaningful feedback to students to guide their improved performance.
5. Select the evaluation rubric that best reflects the student’s abilities and performance of each competency and behavior.
Generations

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Hero</td>
<td>Artist</td>
<td>Prophet</td>
<td>Nomad</td>
<td>Hero?</td>
</tr>
<tr>
<td>Patriotism, Great Depression, WWII</td>
<td>Rebels without a cause, Activists</td>
<td>Prosperity, TV, Vietnam, space, civil rights, cold war</td>
<td>Scandals, divorce, latch key kids, MTV, AIDS, computers</td>
<td>Multiculturalism, school violence, mass media</td>
</tr>
<tr>
<td>Loyalty</td>
<td>Idealism</td>
<td>Optimism</td>
<td>Skepticism</td>
<td>Realism</td>
</tr>
<tr>
<td>Military chain of command</td>
<td>Discussion, inclusion</td>
<td>Change of command</td>
<td>Self-command</td>
<td>Collaboration</td>
</tr>
</tbody>
</table>

Veterans
- Also called Traditional
- Strong value of family and community
- Limited resources lead to value of the common good
- Military influence
- Willing to help wherever needed

Silents
- Grew up as seen, but not heard
- Evolved to become civil-rights and anti-war activists, early rock and rollers
- Were the parents who divorced during the epidemic of the 70s & 80s
- Focus on discussion, inclusion, and process
- Never elected a President or Supreme Court Justice

Baby Boomers
- Prosperity of the post-WWII era
- New Luxuries - TV, car ownership
- 80 million members have made major changes in the world
- Competitive
- Recognition of hierarchy along with belief in advancement and change
- View career as a priority with sensitivity to status, position, and experience

Generation X
- Turmoil and scandal - Watergate, tripling divorce rate, deterioration of social security
- Less attention to kids (latchkey, divorce)
- Skeptical outlook, value independence and self-reliance
- Value lifestyle and family
- Limited devotion to work
- Value efficiency, not authority or hierarchy
- Generally in demand, willing to change companies

Self Assessment
Which of the following is true regarding the generations?

A. The Baby Boomers are considered the greatest entrepreneurial generation.
B. Millennials tend to be emotionally distant from their families.
C. Gen Xers tend to be cynical and emphasize self-reliance.
D. Most presidents in the 20th century were from the Silent Generation.
**Millennials**

- Also called Generation Y, Nexters, the Nintendo Generation
- As Kids - Busy schedules of activities, technology, *helicopter parents*
- As Learners - Expect to be entertained, enjoy a team approach, value feedback and evaluation

This group is technologically literate like no one else. Technology has always been a part of their lives, whether it's computers, the internet, cell phones, or text pagers.

*The rise of the cell phone is often blamed for the explosion of helicopter parenting.*

- "The world's longest umbilical cord" - Professor Richard Mullendore, Univ. of Georgia*

- Parents, for their part, point to rising college tuitions, saying they are just protecting their *investment* or acting like any other *consumers.*^


---

**Overparenting**

- The helicopter parent tries to protect their child at all cost.
- This often results in *overparenting.*
- Parents have become obsessed with 'bubble-wrapping' their little ones in order to protect them from all that threatens them.
The Bubble Wrap Waiting to Burst!

- Bought macrobiotic cupcakes (no eggs, no dairy products, no meat, vegan)
- Bought hypoallergenic socks
- Hired tutors to correct a 5-year-old’s “pencil-holding deficiency”
- High school teachers received irate text messages from parents protesting an exam grade before class was even over
- Hooked up broadband connections in the tree-house, but took down the swing set after the second skinned knee

Millennials Have One Thing in Common

They are new to the workplace.

- Definitely in need of more formal mentoring - with set meetings and a more authoritative attitude on the mentor’s part
- Respond well to personal attention
- Appreciate structure and stability - this means breaking down goals into steps, as well as offering any necessary resources and information they will need to meet the goals

Millennials

In the workplace

- Value teamwork, work well in groups
- Prefer flexible hours
- Require minimal supervision
- Respectful of authority, positions and titles
- May be impatient
- May have trouble with interpersonal conflict

Gardner SF. Preparing for the nexters. Am J Pharm Ed 2006;70(4) Article 87

Characteristics

- Accepting of diversity
- Community and group oriented
- Loyal
- Value self-fulfillment
- High student loan burden
- Involve parents in decisions
- Want alternative work arrangements


Conflicts with Generation X

- Want to work independently and lack respect for authority - hands-off style
- Vocation v. day job
- Viewed as lacking commitment
- Motivation depends on individual determination of the value of the activity


Conflicts with Millennials

- High demand for feedback
- Impatient for advancement opportunities
- Desire to collaborate and make a difference
- Socially bold, asking questions and offering opinions
- Desire to pursue multiple interests and careers
- Delayed adulthood
Millennial Students Expect to...

- Be entertained
- Share their ideas
- Work as a group and collaborate
- Engage in active-learning
- Not be embarrassed in front of their peers
- Have real time answers
- Have fun while learning

Pros/Cons of Millennial Generation

<table>
<thead>
<tr>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>They feel special and needed.</td>
<td>They can act spoiled, entitled, and conceited.</td>
</tr>
<tr>
<td>They own the world of technology.</td>
<td>They expect easy and instant results.</td>
</tr>
<tr>
<td>They are the focus of their parents.</td>
<td>They may be unable to cope with reality.</td>
</tr>
<tr>
<td>They are adept at multitasking.</td>
<td>They have difficulty focusing.</td>
</tr>
<tr>
<td>They want to be the best.</td>
<td>They can get depressed if they're not.</td>
</tr>
<tr>
<td>They are confident and assertive.</td>
<td>They can come across as careless and rude.</td>
</tr>
</tbody>
</table>

Effective Teaching Strategies for Millennials

- Provide high and clear expectations
- Individual feedback
- Engage students through technology when appropriate - web based
- Utilize groups and collaborative learning
- Active-learning experiences - role playing, case-presentations
- Entertaining and engaging
- Reflection

Self Assessment

In general, which of the following learning techniques would be best suited for millennial students?

- A. Group projects and collaborative experiences
- B. Entertaining and socially involved utilizing web technology
- C. Traditional lecturing with testing focused on memorization
- D. Both A and B
- E. All of the above

Questions? Comments?

Learning Objective

2. Recognize some ways that cultures and linguistics may impact learning experiences.

Patricia Richards-Spruill
Hampton University School of Pharmacy
Adapted from materials and information created by Dr. Marya Shogog
Audience Participation

Handout: Self-Assessment of Values and Attitudes

“Humans cannot eat, breathe, defecate, mate, reproduce, sit, move about, sleep or lie down without following or expressing some aspect of their society’s culture. Our cultures grow, expand, and evolve. It’s their nature.” - Marvin Harris

Culture is a Framework

Culture is a Framework to focus and understand a person’s or a group’s behavior.

So What Can Be a Culture?
- East Coast/West Coast
- Rural/Urban
- Sexuality
- Religion
- Ethnicity
- Race
- Blue Collar/White Collar
- Drug Addiction
- Body Size

We all Participate, Influence, and Shape Multiple Cultures Simultaneously

Ecological Model

What is Cultural Competency?

NOT
Cultural Competency Definition

- Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals and enable that system, agency or those professions to work effectively in cross-cultural situations.

Cross et al. 1989

Cultural Competency and Healthcare

Culture impacts:
- Perception
- Communication
- Adherence
- Understanding
- Willingness

Cultural Competency

Five essential elements contribute to a system's, institution's, or agency's ability to become more culturally competent, which include:
1. Valuing diversity
2. Having the capacity for cultural self-assessment
3. Being conscious of the dynamics inherent when cultures interact
4. Having institutionalized culture knowledge
5. Having developed adaptations to service delivery reflecting an understanding of cultural diversity

National Center for Cultural Competence, 1998, modified from Cross et al.

Recognize

Valuing Diversity

Respect

Engage

Communicate

Understand

Differences

- The world is not homologous.
- In the US differences are encouraged.
- First impressions are natural but don’t let them become your only impression.
- Don’t let your personal beliefs stand in the way of your professional job.
- Provide educational opportunities for students to test and expand their boundaries and skills.
First Impressions
As pharmacists, timely assessment is critical to providing appropriate and timely service.
- Do we look at people and create expectations of what type of services they will be seeking?
- Do our expectations impact how we treat patients?
- How do our actions impact the health and health seeking behaviors of our patients?

Cultivating Cultural Competency Professionally
- Assess yourself
  - Do you allow your personal convictions to impact how you evaluate students?
  - Do you regularly look for educational opportunities that allow students to understand, create, and/or utilize appropriate and culturally competent materials?
  - Do you demonstrate your willingness to learn about others' cultures?
  - Do you actively seek to understand how cultures impact health and health-seeking behaviors?
  - Do you actively advocate for policies and procedures that support cultural competence within your organization?

Cultivate Cultural Competency in Your Work Place
- Assess your service environment
  - Do the pictures, posters, and pamphlets reflect the cultures of your customer base?
  - Does printed material reflect culture and languages of your community?

Cultivate Cultural Competency in Students
- Integrate Self-Assessment into the curriculum
- Learn with them and from them
- Incorporate cultural competent behaviors into evaluation
- External review of student interactions with patients

Questions? Comments?
Learning Objective

3. Manage difficult learning situations with students relative to documented expectations shared at orientation.

Make invisible expectations explicit.

Phyllis Moret
VCU/MCV School of Pharmacy

Challenging Student Situations

- Unmotivated/unengaged
- Hesitant
- Different skill levels
- Missed document deadlines
- Tardiness
- Untimely request for absence
- Misuse of approved time off
- Sleeping
- Inappropriate use of computer
- Asked student to look up answer to question & 2 days later didn’t know the answer
- Texting & phone calls
- Minimalist
- “Senioritis”
- Preceptor’s time constraints+

The Learning Process

Difficult Learning Situations

- Exception rather than the norm
- Student and/or preceptor factors can contribute
  - Knowledge deficit
  - Inappropriate behavior
  - Personal issues
  - Attitude/motivation
- Supervisor needed

Desirable Characteristics of a Supervisor/Preceptor

- Guide, coach, role model, mentor … boss
- Professional always, enthusiastic, inspiring
- Shares their philosophy, vision, passion, knowledge, skills, abilities
- Demonstrates leadership skills
- Organized, firm, fair
- Willing to work with a diverse team
- Respects their team and is available to them
- Communicates with team early and often, good and bad
- Encourages critical thinking & problem-solving
- Willingness to let you do your job
- Provides timely, constructive feedback
- Evaluates honestly, fairly

Supervisor/Preceptor

- Present … not absent
- Firm … not lenient
- Fair … not biased
- Truthful … not dishonest
- Sincere … not cynical
- Polite … not rude
- Focused … not distracted
- Classy … not tacky
- Friendly … but neither pal nor foe
Your Student’s Attributes?

- Frequently demonstrates knowledge & capability
- Assertive
- Pleasant
- Respectful
- Enthusiastic
- Engaged
- Caring

Or These Attributes?

- Infrequently demonstrates knowledge & capability
- Unmotivated, indifferent
- Hesitant to act
- Unfriendly
- Impolite
- Over-confident
- Arrogant
- Contentious

Questions to Ask Yourself

- What do I want?
- What will it cost?
- Am I willing to pay it?
- If not, what am I willing to settle for?

Consider

- Are patients in danger?
- Who is at the center of the pharmacist’s and student’s universe?
- What’s motivating the student?
  - Intrinsic: desire to do well, help others, interested in area
  - Extrinsic: grades, graduation, future goals, parents’ approval
- Who’s in control/responsible/accountable?
- Generational differences?

What to do?

- Prevent: Stop before occur
- Identify: Detect early
- Resolve: Manage effectively

Prevent

Prevent: Stop before occurs

- Know the school’s expectations: syllabus
- Know the curriculum the student has completed
- Review the evaluation and rubrics
- Know you can call the school for guidance
- Know you are not required to pass the student
- Know grounds for failure
- Define your own clear expectations
Challenging Situations

- Easily occur when expectations and objectives are not clearly stated and understood early on and reinforced during the rotation.
- When the expectations of the preceptor and student are not met, the rotation can quickly become a negative experience for all parties.

Important/Urgent

<table>
<thead>
<tr>
<th>Important</th>
<th>Not Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urgent Important</td>
<td>Urgent Not Important</td>
</tr>
<tr>
<td>Not Urgent Important</td>
<td>Not urgent Not important</td>
</tr>
</tbody>
</table>

Begin with an End in Mind

- Handout: "Preceptor’s Expectations of Students & Student Learning Agreement" template
  - Pre-rotation requirements for documents
  - Pre-rotation preparation
  - How you will conduct yourself during the rotation
  - What you will learn and do on the rotation
  - Feedback and evaluations
  - Termination and failure
  - Share before the rotation starts
  - Review during orientation (Day 1), clarify queries, & sign

Identify

Identify: Detect problems early

- Look for red flags
- Pay close attention to early warning signs, comments, or opinions of staff
- Do not delay: assess a potential problem situation early
- Avoid tendency to ignore, shrug off as immature, wait and see
- Screen to validate concern and determine scope

Preceptor’s Self-Assessment

- Did I clearly and fully communicate my expectations from the beginning?
- How did I account for my student’s prior experiences?
- How can I separate performance from personal attributes?
- Have I been approachable?
- Have I spent time with the student to review progress and provide adequate feedback?
- Have staff been supportive and helpful to the student?

Consider

- What may be causing the student to perform poorly?
- In which rotation block is the student (first, last)?
- Is this the first time the student has been exposed to this type of practice environment?
- Review the evaluation form and note the areas where the student is having difficulty.
Intervene
- Monitor closely for a limited time
- Observe and record examples of specific behaviors.
- Contact the school as needed
- Early intervention
- Minor problems may only need specific feedback on the issue
- Document and continue to monitor

Resolve
Resolve: Manage effectively
- Can the student continue the rotation without compromising patient care?
- SOAP: Subjective, Objective, Assessment, Plan
  - Decide & document the course of action appropriate for the problem
  - Include resolution, remediation as needed, follow-up and feedback, and outcome if plan is not followed
- Contact the school for assistance
  - If the student may not pass the rotation, notify the school immediately.

Discuss
- Discuss the situation with the student using detailed, specific observations
- Review the Student Learning Agreement of what you expected & discussed vs. what you’re observing
- Use the evaluation to identify areas of concern
- Ask the student for their view

The Plan
- Describe the plan for specific changes/improvements of what needs to happen and when
- Describe what failure to improve will look like
- Set a time to reassess the student’s performance to see if improvement has occurred
- Stay in close contact with the school

Student to Decide
- What do I want?
- What will it cost?
- Am I willing to pay it?
- If not, what am I willing to settle for?

Managing the Unmotivated Student
- Here’s what I expected: B1-2; C1a-d, g; C2; C12; D items TBD; E2 all; F2
- Here’s what I’m observing
- Ask the student for their view
- Here’s the plan for improvements of what I want to see and when
- Here’s what failure to improve by X date will look like
- You have a choice and decisions need to be made
Audience Participation

Edit Handout: “Preceptor’s Expectations of Students & Student Learning Agreement” template

Edit it & make your expectations explicit.

Learning Objective

4. Choose more appropriate phrases for meaningful feedback to students to guide their improved performance.

Sarah Parnapy Jawaid
Shenandoah University
Bernard J. Dunn School of Pharmacy

Scenario: “Medication History”

- You are precepting an APPE student who submitted a medication history for a patient. The student did not include the frequency of how the patient used their medications. You are not happy with this student and write “REDO” at the top of the paper.

Scenario: “DI distress”

- You are precepting an APPE student on her first rotation. She submitted her 3rd DI response to you prior to the scheduled midpoint evaluation. You notice that there is significant improvement since her first DI response and she is grateful since she has worked really hard on improving this skill. But you are stern with her and state that she still has some work to do in this area.

Scenario: “Medication Reconciliation”

- TM is an APPE student in an emergency room setting. One of his responsibilities is medication reconciliation. While he is speaking with the patient, he only asks about prescription medications.

What is your job as a preceptor?

- Coach the student with constructive feedback
- Evaluate the student’s performance
A Preceptor Workshop: Providing Feedback & Evaluating Students 2012-2013

Audience Participation
Why do students want to get feedback and evaluation?
Why do preceptors need to provide feedback and evaluations?

What is feedback?
- Formative
- Informal, continuous, unscheduled
- On-going process of correction and reinforcement to help with desired outcomes
- Purpose: improvement

Feedback
- Conduct in a safe, confidential environment
- Relate feedback to goals/objectives
- Be specific
- Keep it simple
- Give positive feedback and areas for improvement

Feedback Techniques
- Positive sandwich technique: Start with a strength, then discuss the area of improvement, followed by another strength or suggestion for growth
- Planned sessions: Cue the person to the general nature of the feedback, ask for the recipient’s assessment
- Mini evaluations: Weekly, less than 5 minute summary of your overall impression of their performance

Feedback
Suggest correct performance
- Be objective
- Be aware of verbal and non-verbal behaviors
- Allow time for the student to respond
- Make sure that the student understands your feedback

Benefits of Feedback
For Students …
- Self-evaluate their own knowledge
- Identify strengths and weaknesses
- Better understand expectations
- Make continual adjustments to improve performance
- Learn through trial, error, feedback, repeat
Benefits of Feedback
For Preceptors …
- Helps you modify your coaching to maximize student progress
- Allows you to recognize a student’s progress
- Encourages your interaction with the student
- Builds a productive working and learning relationship
- Serves as a means to express interest in the development of the student

Words/Phrases to Avoid
- “You always…”
- “You never…”
- Avoid mixed messages
  - “Yes, but…”
  - “You have worked hard on this, but…”

Scenario: “Medication History”
- You are precepting an APPE student who submitted a medication history for a patient. The student did not include the frequency of how the patient used their medications. You are not happy with this student and write “REDO” at the top of the paper.

What type of feedback would you provide?

Scenario: “DI distress”
- You are precepting an APPE student on her first rotation. She submitted her 3rd DI response to you prior to the scheduled midpoint evaluation. You notice that there is significant improvement since her first DI response and she is grateful since she has worked really hard on improving this skill. But, you are stern with her and state that she still has some work to do in this area.

What type of feedback would you provide?

Scenario: “Medication Reconciliation”
- TM is an APPE student in an emergency room setting. One of his responsibilities is medication reconciliation. While he is speaking with the patient, he only asks about prescription medications.

How would you start providing feedback?
How could this be prevented?

Audience Participation
What can you provide in your rotation to allow for more feedback on a regular basis?
Summary on feedback

<table>
<thead>
<tr>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourage more of the same behavior</td>
<td>Do it in private, make sure you are calm</td>
</tr>
<tr>
<td>Discuss the behavior</td>
<td></td>
</tr>
<tr>
<td>Do it soon, don’t wait</td>
<td></td>
</tr>
<tr>
<td>Be specific, provide examples</td>
<td></td>
</tr>
</tbody>
</table>

What is an evaluation?
- Summative
- Formal, scheduled
  - Midpoint and final
- Compares the student’s knowledge and skill to a standard
  - Evaluation forms/rubrics
- Summarizes performance
- Purpose: grading, improvement

Evaluations
- Students self-evaluate
- Preceptors evaluate the student’s competencies and professionalism
  - Determines final grade
- Student evaluates the preceptor, site, and rotation

Formative Evaluation
- Early in the learning experience, feed students with information and lead them toward success.
- Feedback: Present the facts in a non-judgmental manner
- Encouragement: Recognize the student’s need for support
- Direction: Focus on the outcome

Encouragement
- Encourage is the opposite of “dishearten”
- The manner in which we provide feedback and direction
- Show kindness and respect: MODEL the interpersonal skills you want to see students display

Direction
- Competency-based
- Focus on the desired outcome
- Small steps: Encourage small, simple corrections at the time needed
- Design specific learning activities
  - Practice of a skill
Why are constructive feedback and evaluation important?

- Patient care
- Students are within one year of graduation
- Students
- Positive reinforcement
- Areas for improvement
- Remediation if needed
- Profession
- We are the gatekeepers for the students

Appropriate Phrases to Help Motivate the Student

- Good communicator
  - “Excels in clear and concise communication with patients and caregiver”
  - “Excels in communication with individuals and groups”
  - “An empathetic listener and relates well to others”

Appropriate Phrases to Help Motivate the Student

- Dependability
  - “Reliable in meeting deadlines”
  - “Completes project assignments on time”
  - “Consistently punctual”

Appropriate Phrases to Help Motivate the Student

- Initiative
  - “Displays strong initiative in carrying out responsibilities”
  - “Gathers and provides information in advance of a need”
  - “A self-starter”

Appropriate Phrases to Help Motivate the Student

- Knowledge
  - “Is aware of common medications seen within a hospital pharmacy setting, include mechanism of action, pharmacokinetic, adverse effects and monitoring”
  - “Keeps up to date with new medications coming to market and how these medications will affect patient care”

Appropriate Phrases to Help Motivate the Student

- Motivation
  - “Displays a strong personal and professional commitment”
  - “Displays enthusiasm”
  - “Looking for more projects and ways to get involved”
Appropriate Phrases to Help Motivate the Student

- Professionalism
  - “Demonstrate a high level of professionalism through….”
  - “Projects a positive image”
  - “Demonstrates high standards of professional conduct”

Scenario: “Midpoint Mishap”

JM is a P4 student on her 3rd rotation (ambulatory care). She has completed a DI rotation and a community pharmacy rotation. She started rotations with minimal work experience. Her ambulatory care rotation has allowed her to do more advanced practice activities (ex: blood pressure, INR, cholesterol). You never did a midpoint for JM since there just wasn’t enough time. The end of the rotation is here and you give her a C for the rotation. JM is not happy with the grade since she thought that she was working hard and doing well.

What went wrong?
How can this be fixed?

Scenario: “Unmotivated in IPPE”

MJ is an IPPE student on his community IPPE experience with you. This is day 2 of his experience. You were out yesterday, but really excited to start working with the student. Prior to this experience he has never worked in a community pharmacy setting. He tells you that he does not want to work in community pharmacy since he does not want to “deal” with upset patients and insurance companies like he saw yesterday and he is just going to do the minimum to get by.

What do you do?

Key Tips

- Provide regular feedback
- Be familiar with the evaluation form(s)
  - Review prior to the rotation starting
- Be consistent in how you evaluate
- Remove any barriers that may be distracting
- Document, document, document

Compilation of Comments

Handout: Preceptors’ Feedback & Evaluation
Comments Re: Student Performance

How Does Feedback Help with Continuous Improvement?

- Student’s informal feedback to the preceptor
- Student’s formal evaluation of the preceptor, site, and rotation
- Aggregate feedback from the college/school of pharmacy of students’ formal evaluations of preceptor, site, and rotation
Student’s Informal Feedback to the Preceptor

- Some is specific and valuable
- Students are concerned how it will affect their grade
- Valuable to make improvements to the rotation

Student’s Formal Evaluation of the Preceptor

- Given to you by the college/school
- Results are presented in aggregate
- Review the comments

Feedback and Evaluation Summary

<table>
<thead>
<tr>
<th></th>
<th>Feedback</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timing</td>
<td>Immediate, continuous</td>
<td>Scheduled</td>
</tr>
<tr>
<td>Setting</td>
<td>Informal</td>
<td>Formal</td>
</tr>
<tr>
<td>Basis</td>
<td>Observation</td>
<td>Based on rubrics</td>
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<td>Content</td>
<td>Subjective/Objective</td>
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<tr>
<td>Scope</td>
<td>Specific Actions</td>
<td>Global Performance</td>
</tr>
<tr>
<td>Purpose</td>
<td>Improvement</td>
<td>Grading and Improvement</td>
</tr>
</tbody>
</table>

Learning Objective

5. Select the evaluation rubric that best reflects the student’s abilities and performance of each competency and behavior.

Sarah Parnapy Jawaid
Shenandoah University
Bernard J. Dunn School of Pharmacy

Audience Participation

What would cause you to fail a student?
Why You May Not Want to Fail or Honestly Grade a Student

- Hesitant/reluctant
- Uncomfortable/unwilling
- Lack of confidence
- Student maturity
- “Nice guy/gal”
- “Don’t want to get the student in trouble”

We want you to avoid...

- Grade inflation
- Highest scores on all competencies
- Inconsistencies

We want you to...

- Be honest
- Provide comments (see handout for examples)
- Help students
- Students may share your comments with future preceptors
- Contact the school/college if any issues arise at ANYTIME during the rotation

How to grade students

- Competencies
  - Activities the students need to complete
- Professionalism
  - Including E-professionalism

What is a Rubric?

“As applied to student work, a rubric reveals . . . The scoring ‘rules.’ It explains to students the criteria against which their work will be judged. More importantly . . . It makes public key criteria that students can use in developing, revising, and judging their own work.”


Use the Rubrics

- Don’t be focused on the final grade
- Focus on the specific competency or behavior that you are assessing
- Use “Not enough evidence to evaluate (N/A)” sparingly for required rotations
A Preceptor Workshop: Providing Feedback & Evaluating Students

2012-2013

Use the Rubrics
- Explain the rubric grade to the student
- Consistency

Sample Competency
- Dispensing/Distribution - Safely dispenses medications while applying professional standards and legal guidelines. Administers medications when appropriate and upon adequate training. Prepares compounded prescriptions accurately.

Sample Rubric

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Almost always dispenses and administers drugs in a safe manner while applying professional standards and legal guidelines. Applies pharmacy laws and regulations to practice.</td>
</tr>
<tr>
<td>3</td>
<td>Frequently dispenses and administers drugs in a safe manner while applying professional standards and legal guidelines. Requires occasional assistance with applying pharmacy laws and regulations to practice.</td>
</tr>
<tr>
<td>2</td>
<td>Occasionally dispenses and administers drugs in a safe manner while applying professional standards and legal guidelines.</td>
</tr>
<tr>
<td>1</td>
<td>Fails to dispense and administer drugs in a safe manner. Fails to apply professional standards or pharmacy laws and regulations to practice.</td>
</tr>
<tr>
<td>NA</td>
<td>Not enough evidence to evaluate</td>
</tr>
</tbody>
</table>

Sample Scenario: Dispensing/Distribution
- You have been precepting a student on a community rotation. She is aware of how to dispense all medications except C-II’s. After repeated feedback, the student is not aware of the state laws pertaining to C-II’s, including inventory, days supply, and information included on a prescription.

Using the above rubric, what grade would you provide to the student and why?

Sample Competency
- Clinical Pharmacology and Pharmaceutical Product Knowledge - Explains mechanism of action, pharmacokinetics, adverse effects, drug interactions, and clinical use of drugs; discusses aspects of the pharmaceutical sciences that relate to the properties and formulation of drugs and drug products, and medically-related tests and devices.
Sample Scenario: Clinical Pharmacology and Pharmaceutical Product Knowledge

- You are precepting a student on an APPE hospital rotation. This is her 5th rotation. She is doing extremely well with communication skills, disease state knowledge, and obtaining patient information; but she is not performing well with her product knowledge. She is not confident in providing an answer when asked a question and is not familiar with the mechanism of action of common products seen within a hospital setting. This was discussed at midpoint, but she has not made much improvement.

Using the above rubric, what grade would you provide to the student and why?

Sample Professional Behavior

- Professionalism: Accountability and Initiative – Student accepts personal responsibility, demonstrates reliability and follow through with commitments in a timely manner; arrives at practice site on time and completes activities within allotted timeframe.

Sample Rubric Handout: Professionalism Evaluation Sample

<table>
<thead>
<tr>
<th>3 = Satisfactory</th>
<th>2 = Needs improvement</th>
<th>1 = Unacceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student exhibited acceptable professional behaviors</td>
<td>Student's professional behaviors were not acceptable and needed guidance</td>
<td>Student's professional behaviors are below expectations and unacceptable</td>
</tr>
</tbody>
</table>

Using the above rubric, what grade would you provide to the student and why?

Sample Scenario: Professionalism

- During the 1st week of the rotation, your APPE student was showing up on time, if not early. During week 2, he started showing up about 10-15 minutes late. You spoke to him after arriving late 2 days in a row. He was coming on time and did well on his midpoint regarding accountability. During the 4th week, he showed up 20 minutes late 2 days in a row. You spoke with him again and he said, “I am not able to get up early enough to get here on time and I am having a really hard time and I noticed that one of the technicians is showing up late everyday, so I don’t know what the big deal is.” You provide suggestions, but he is not coming to the rotation on time. It is time for the final evaluation ...

Using the above rubric, what grade would you provide to the student and why?

Questions? Comments?

Audience Participation

- As a team or group, select a challenging student situation and discuss your approach to providing feedback, improving performance, and evaluating the student. Report your plan to the audience.
In Conclusion

1. Be a good role model.
2. Be tough and firm, but fair.
3. Have high expectations for students.
4. Make sure students know your high expectations at the beginning … and remind them PRN.
5. Provide feedback on a regular basis, positive and negative.

6. Suggest ways for the student to improve.
7. Hold students accountable for their actions.
8. Don't be afraid to speak up; let the student know what you're thinking.
9. Don't allow a poor performing student to progress; it only worsens the problem long-term.
10. Professionalism is as important as competency. Pay attention to both.

Preceptor Resources

- Handout: VPhA web site screen shot
  - www.virginiapharmacists.org
  - CE/Events > Preceptor Resources
- "Providing Feedback & Evaluating Students" – handouts from this 2012-2013 workshop
  - Preceptor’s Expectations of Students & Student Learning Agreement
  - Preceptors' Feedback & Evaluation Comments re: Student Performance
- "Your Preceptor Take-Home Toolkit" – slides and handouts from the 2011-2012 workshop
  - Activities Checklist
  - Calendar Template
  - Orientation Checklist
  - Plus many more to use or edit to fit your preferences

Future Presentations of This Workshops

Tell your colleagues!

- October 20, 2012 – Sheraton Norfolk Waterside, Norfolk, VA – in conjunction with the VSHP Fall Seminar
- February 24, 2013 – Hotel Roanoke, Roanoka, VA – in conjunction with the VPhA Midyear Meeting
- Date/Venue TBD – Northern Virginia

Audience Participation

Complete form to share your feedback with the schools.

Why are you a preceptor?

The Wisdom of Lola May

“There are 3 things to remember when teaching:
1. Know your stuff
2. Know whom you are stuffing
3. And then stuff them elegantly.”
The Wisdom of James Allen

“No duty is more urgent than that of returning thanks.”

Thank you!

References

A Preceptor Workshop: “Providing Feedback & Evaluating Students”

Jointly sponsored & presented by
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