

The One Minute Preceptor

Teaching of Tomorrow
November 2023



Objectives

- List steps in the OMP method
- Identify advantages to using OMP as a precepting method
- Apply questioning styles while getting commitment and probing for evidence.
- Briefly compare OMP to SNAPPS as teaching methods

The One Minute Preceptor (OMP)

A Five-Step “Microskills” Model of Clinical Teaching. *JABFP* 1992, 5:419-24

- Adapted from 1976 article outlining 18 microskills
- Formulated for FM residents in busy outpatient practices.
- A way to streamline and standardize brief clinical teaching encounters

Special Communication

A Five-Step “Microskills” Model Of Clinical Teaching

Jon O. Neher, M.D., Katherine C. Gordon, M.A., Barbara Meyer, M.D., M.P.H., and Nancy Stevens, M.D.

Abstract: Teaching family practice residents in a clinical setting is a complex and challenging endeavor, especially for community family physicians teaching part-time and junior faculty members beginning their academic careers. We present a five-step model of clinical teaching that utilizes simple, discrete teaching behaviors or “microskills.” The five microskills that make up the model are (1) get a commitment, (2) probe for supporting evidence, (3) teach general rules, (4) reinforce what was done right, and (5) correct mistakes. The microskills are easy to learn and can be readily used as a framework for most clinical teaching encounters. The model has been well received by both community family physicians interested in teaching and newer residency faculty members. (*J Am Board Fam Pract* 1992; 5:419-24.)



Assumptions:

- Learner has already accurately taken/performed H&P
- Graduate-level learners are competent to do this
- ?Undergraduate-level learners?

The One Minute Preceptor

5 Clinical “microskills”

1. Get a commitment	Learner will articulate their own diagnosis.
2. Probe for supporting evidence	Preceptor evaluates learner’s knowledge/reasoning
3. Teach general rules	Preceptor emphasizes common “take-home” points
4. Reinforce what was done well	Preceptor provides feedback
5. Correct mistakes/misperceptions	Preceptor provides feedback

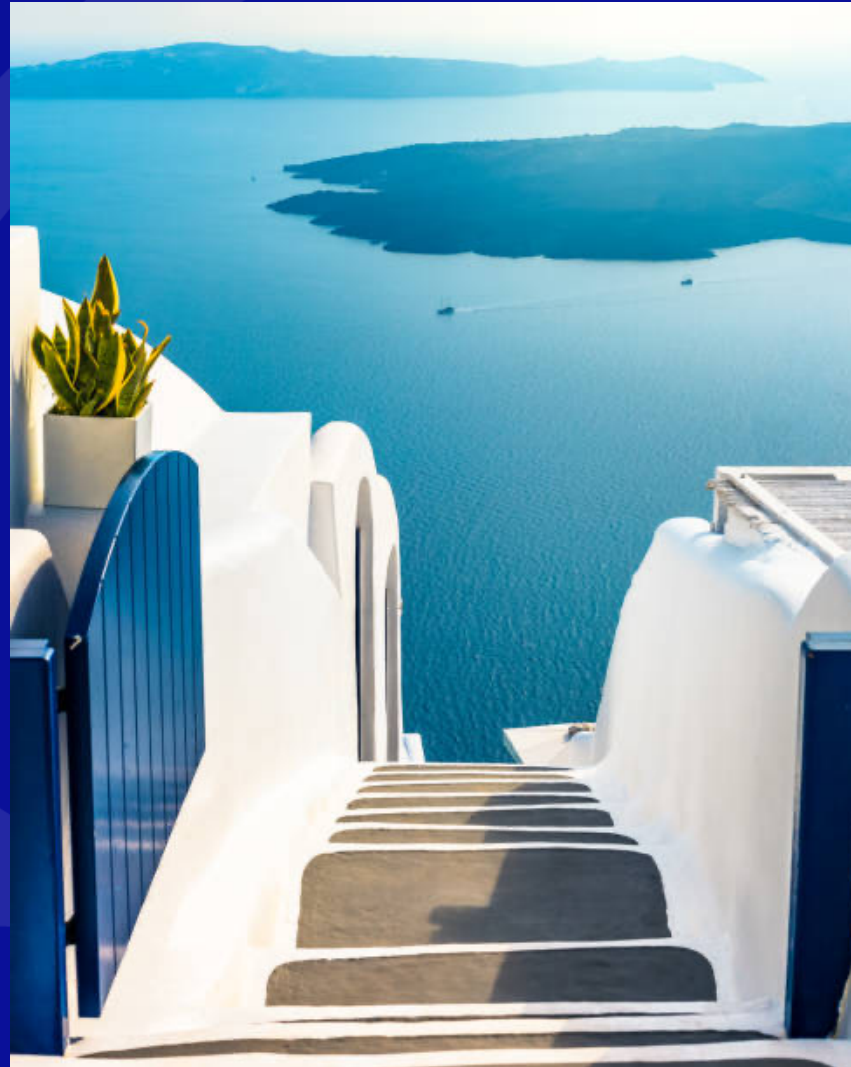
} 40%



Comparison

OMP	Conventional Precepting
Learner centered	Problem/patient centered
Promotes skill development <u>and</u> knowledge	Medical knowledge focused
Promotes feedback throughout	Feedback typically given at end (if there is time)
Learner displays knowledge, preceptor fills in gaps	Often preceptor delivers mini lecture
Empowers educational opportunity not limited by brief encounters	Education components often left behind when time is short

OMP Steps



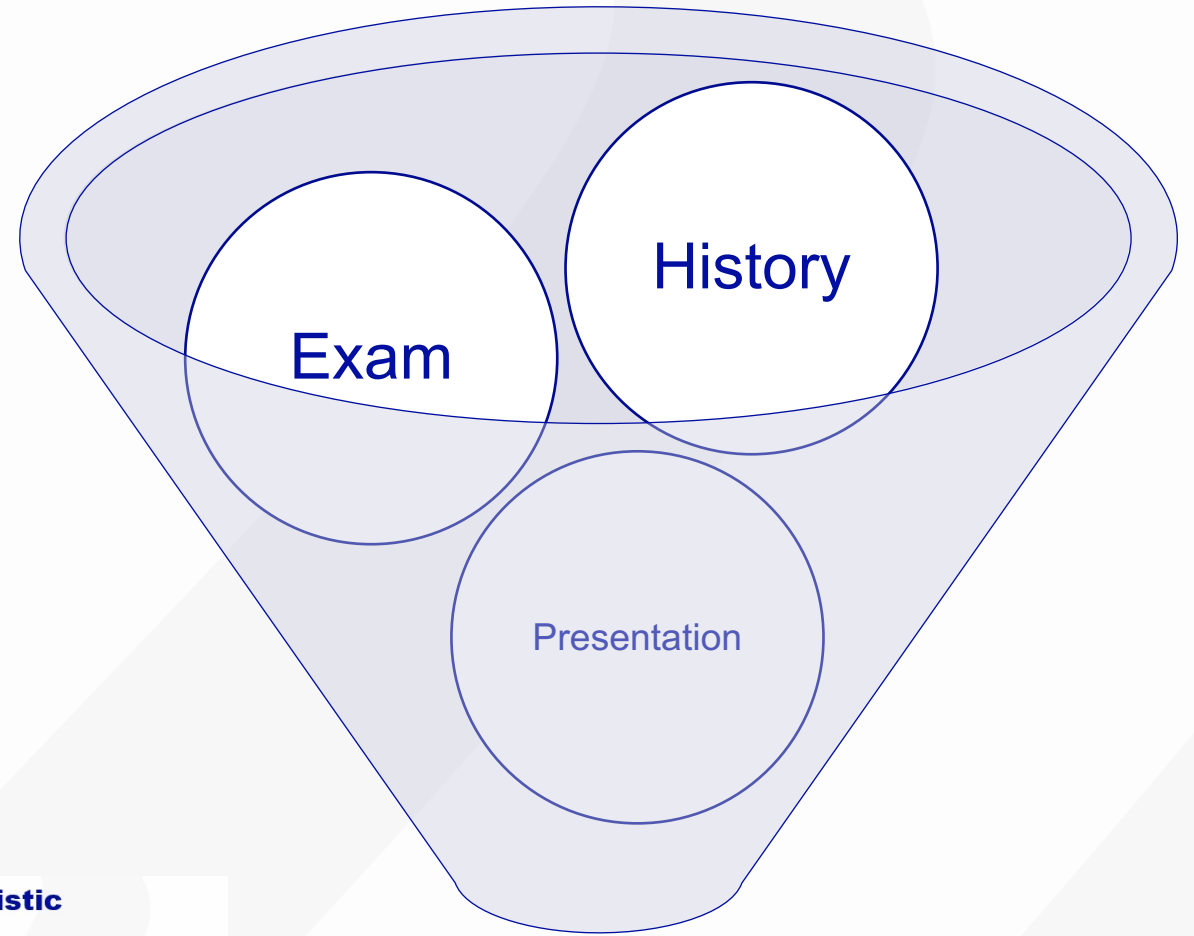
Oía village, Santorini, Greece
2022



Wittgenstein's Hut, Skjolden, Norway
2023

1. Get a Commitment

- There is no wrong answer!
- Thought process > correct diagnosis.
- Gives preceptor a baseline to teach from.



Questioning Styles have characteristic Behaviors and Results

Assertive	Suggestive	Collaborative	Facilitative
Asks <u>focused/closed</u> questions	Asks <u>leading</u> questions	Uses <u>open/exploratory</u> questions	Uses <u>open/reflective</u> questions
Elicits information	Elicits comparisons	Asks about reasoning/personal approaches	Elicits feelings

Teaching medicine involves establishing relationships with learners, finding them doing something right, then building on it!

“What do you think?”

2. Probe for Supporting Evidence

- What lead you to that conclusion?
- Were there any other considerations on your D/Dx?
- Be supportive!
 - You asked them to stick their neck out...don't chop it off.

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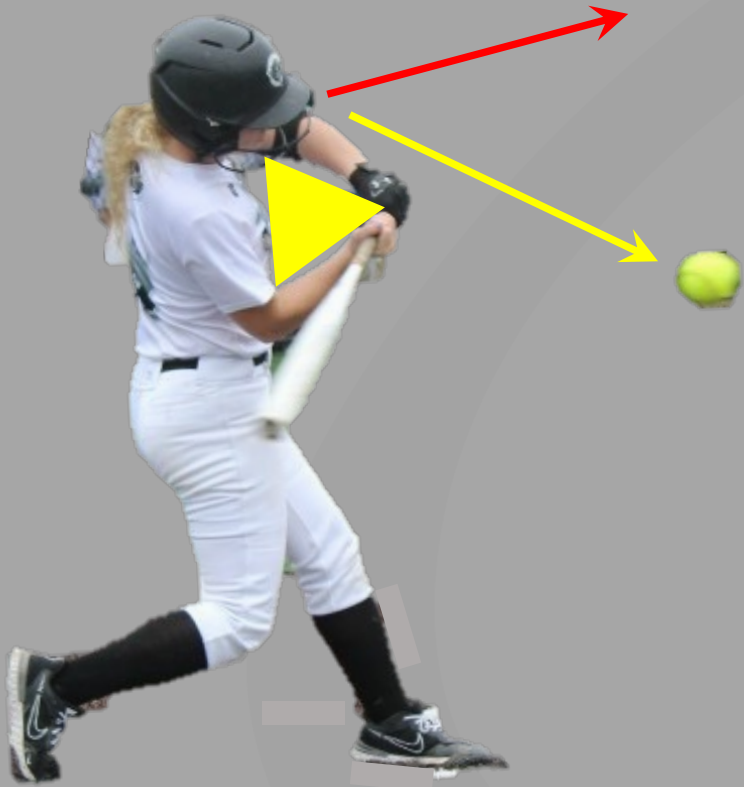




You never know what
hoofbeats mean at this ranch

3. Teach General Rules

- Junior learners
 - focus on the typical presentations of common things
- Senior/advanced learner
 - can add in the atypical presentations or uncommon diagnoses



“Nice hit”

4. Reinforce what was done right.

- Learners get used to hearing what they are doing wrong, so be sure to highlight what they are doing well.
- They respond well to positive feedback...

Avoid general praise

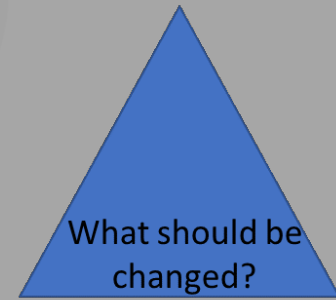


UMass Chan
MEDICAL SCHOOL

5. Correct Mistakes

- ...but also learn immensely from what they do wrong.
- When done correctly, learners often learn more from what they get wrong from what they get right.

Be specific!

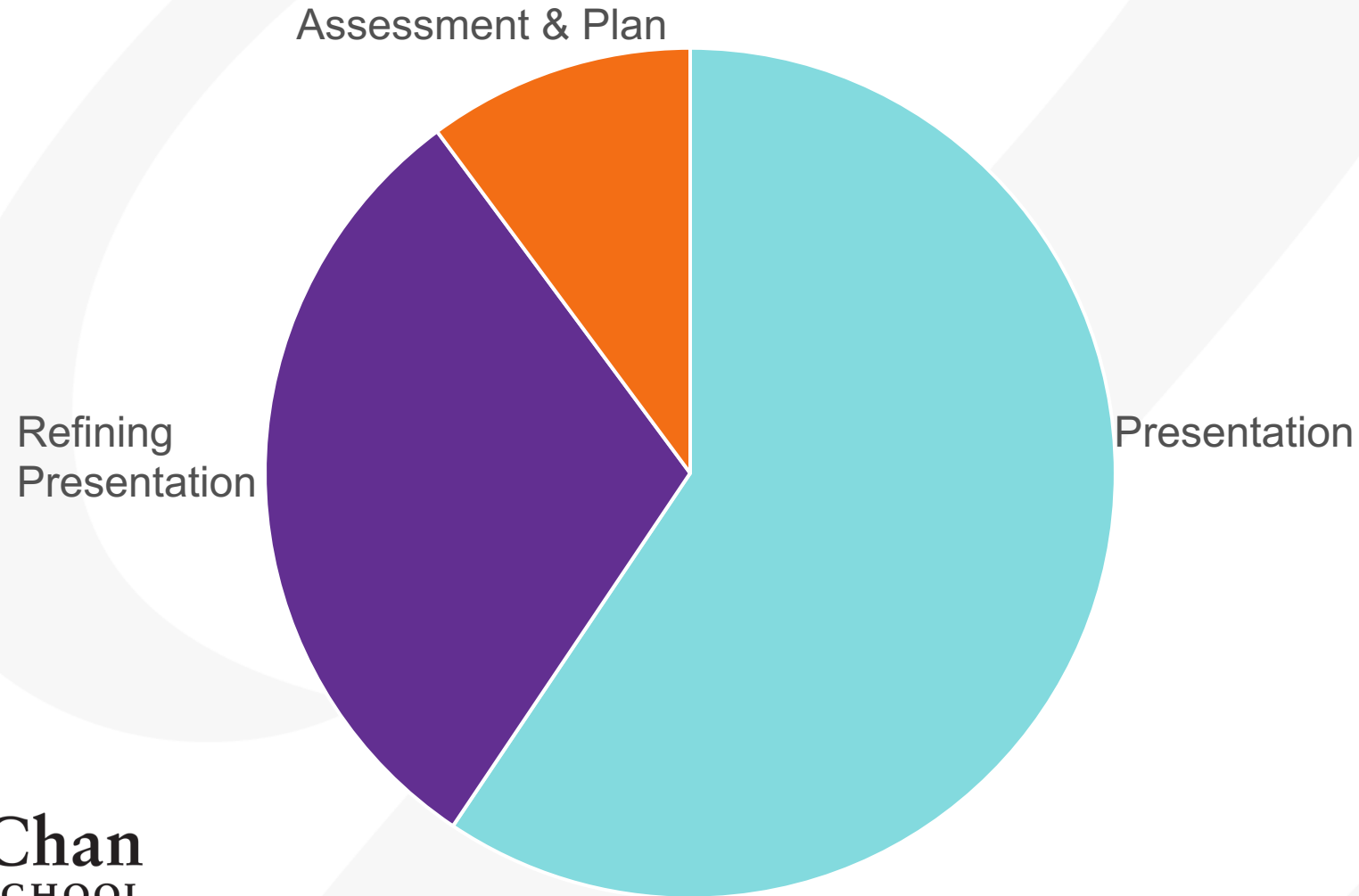


Action steps (with assignments):

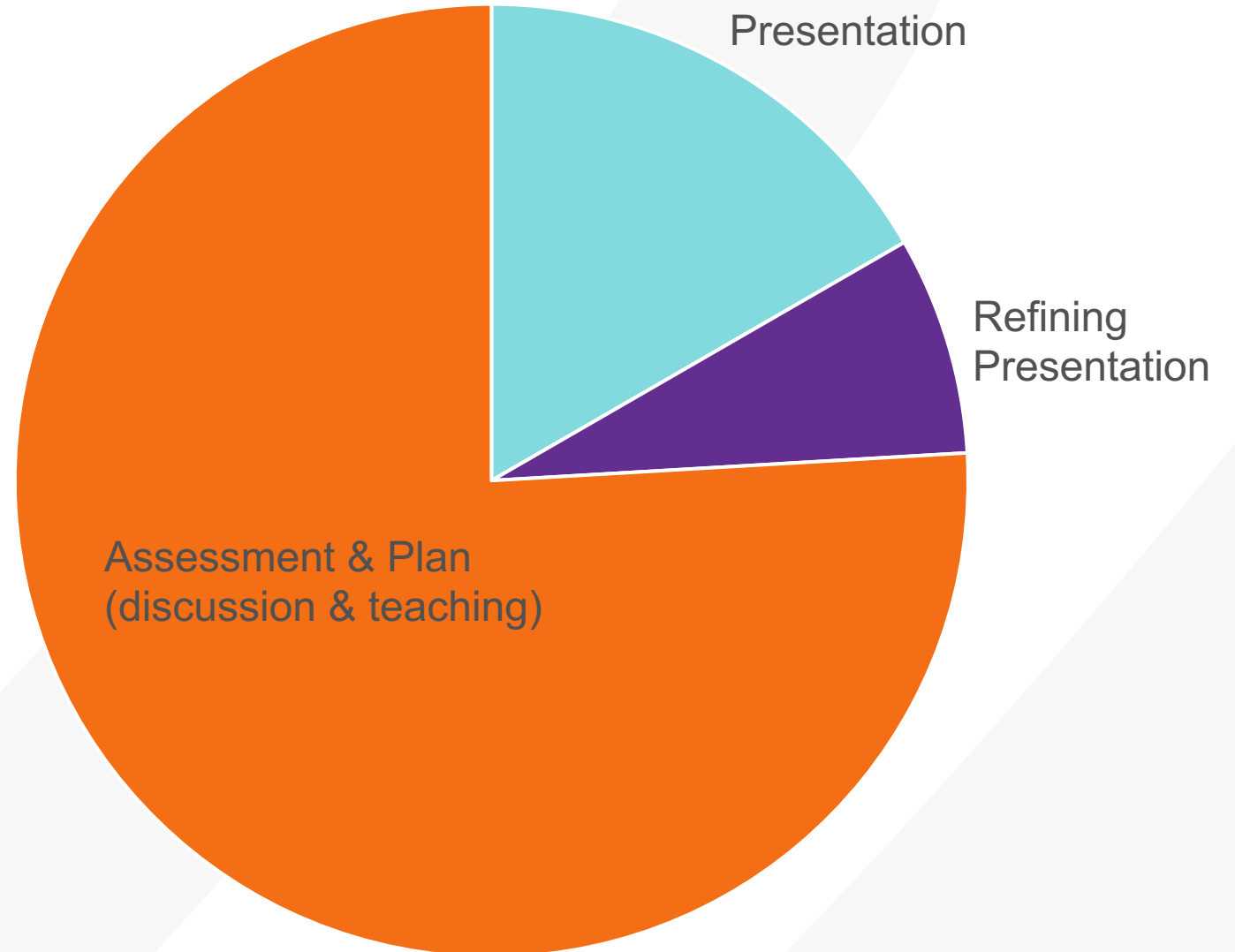
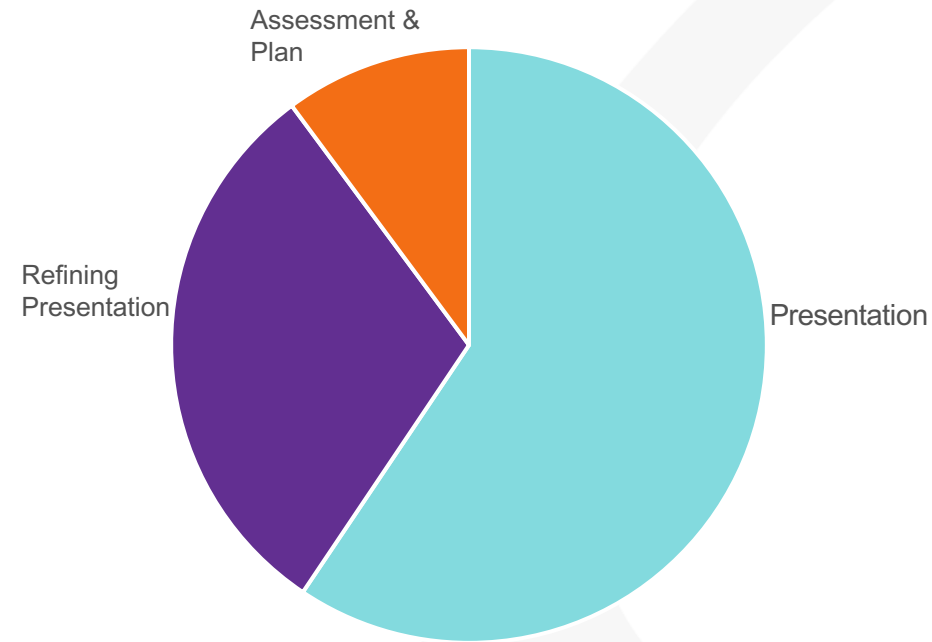
Stay tuned for more
Feedback in Workshop II
(March 2024)

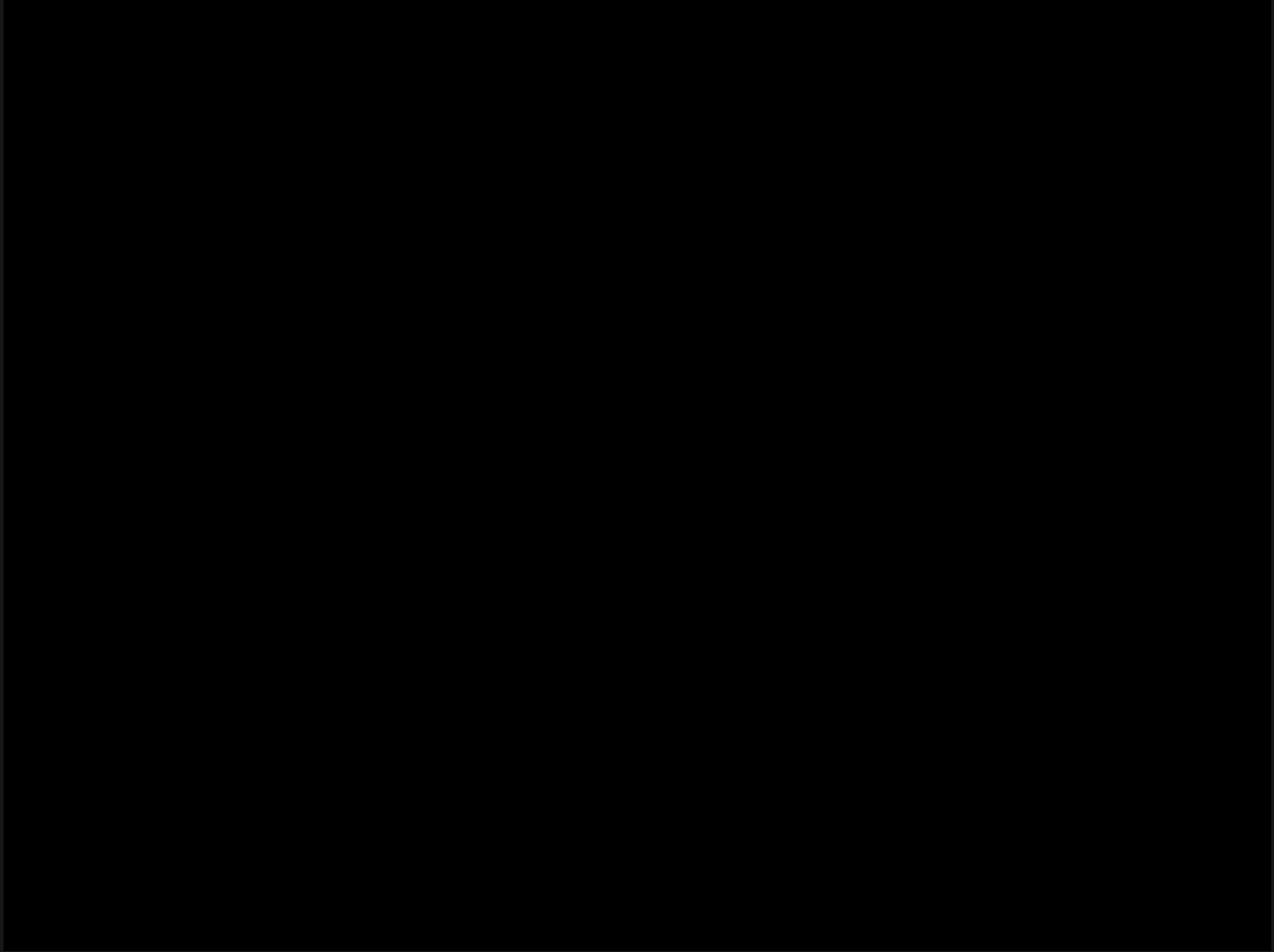
**A Precepting
Experience**

How was this experience?



How was this experience?





**OMP Precepting
Experience**

What was different?

- Realistically a “FMP”.
- Better needs assessment
- More focused & effective teaching
- Encourages learner to be more involved in management.

Be Flexible

- If learner doesn't know...
 - Is this correct tool in this situation?
 - Switch to presentation (knowledge)
 - Switch to modeling (skill)
- If you have an advanced learner, consider...



Oh SNAPPS!



The learner will:

- Summarize history and findings
- Narrow the differential
- Analyze the differential
- Probe the Preceptor about uncertainties
- Plan management
- Select case-related issues for self-study

Must be taught beforehand



OMP vs SNAPP

OMP

- Preceptor driven
- Preceptor:
 - Identifies gaps/needs
 - Feedback given to learner
 - Suggests areas for further study

SNAPPS

- Learner driven
- Learner:
 - Identifies own gaps/needs
 - Elicits feedback from preceptor
 - Select issues for self-study

REVIEW

One-minute preceptor and SNAPPS for clinical reasoning: a systematic review and meta-analysis

Sabrina Teixeira Ferraz Grunewald,¹ Thiago Grunewald,² Oscarina S. Ezequiel,¹ Alessandra L. G. Lucchetti¹ and Giancarlo Lucchetti ¹

Perspect Med Educ (2020) 9:245–250
<https://doi.org/10.1007/s40037-020-00588-y>



Case presentation methods: a randomized controlled trial of the one-minute preceptor versus SNAPPS in a controlled setting

Eleonora D. T. Fagundes  · Cássio C. Ibiapina · Cristina G. Alvim · Rachel A. F. Fernandes · Marco Antônio Carvalho-Filho · Paul L. P. Brand

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Evidence-Based



<https://padlet.com/pjsell/one-minute-preceptor-dlr1vt7kdscg2jpn>

Summary: OMP

1. Get a commitment	Encourages clinical problem solving
2. Probe for supporting evidence	A needs assessment
3. Teach a general rule	You found a gap...address it (briefly)!
4. Reinforce what went well	Just in time teaching—be specific and provide examples
5. Discuss what may need to change	Just in time teaching—be specific and provide examples

Thank you!

Sunset on the Norwegian Sea
(Sognefjorden)

