Effective and Efficient Teaching Methods: The One Minute Preceptor

Teaching of Tomorrow
November 2016

Objectives

› By the end of the session, participants will be able to:
  – List the steps in the one-minute precepting method
  – Identify three advantages to using the one-minute precepting method
  – Apply questioning styles while getting a commitment and probing for evidence

Consider the Goals of MS3 Clerkships….

How do they differ from clinical experiences with MS1 and MS2 students?
The One Minute Preceptor

- An efficient method
- Learner & teacher engaged
- Begins the clinical reasoning process
- Direct relevance
- Immediate feedback

Consider Video of Standard Precepting

Video

Typical teaching encounter

Discussion
Presentation
Questioning
What was covered in the video?

- Reporting H&P
- Refining H&P
- Assessment and Plan

The One Minute Preceptor

<table>
<thead>
<tr>
<th>Step</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get a commitment</td>
<td>The learner will articulate his/her own diagnosis</td>
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<tr>
<td>Probe for supporting evidence</td>
<td>The preceptor will evaluate the learner's knowledge or reasoning</td>
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<tr>
<td>Teach general rules</td>
<td>Preceptor emphasizes common &quot;take-home&quot; points</td>
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<tr>
<td>Reinforce what was right</td>
<td>Preceptor provides reinforcing (positive) feedback</td>
</tr>
<tr>
<td>Correct mistakes</td>
<td>Preceptor provides constructive feedback with specific recommendations for improvement</td>
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Teacher Reasoning and Action

- Diagnose the patient
  - Listen to presentation
  - Ask questions
- Diagnose the learner
  - Get a commitment
  - Probe for supporting evidence
- Teach
  - General rules
  - Provide feedback
Consider same encounter with OMP model

OK, 5 minute preceptor
Encounter is just as long BUT:
› Better needs assessment
› More focused/efficient/effective teaching
› Encourages student/resident to be more active in higher order thinking (analysis, planning, etc)

Step #1: Get a commitment
› Encourages learner to process further and problem solve
  – Critical to understanding needs
› Ask what they think
  – What do you think is going on?
  – What other information do you need?
  – What would you like to do next?
› May need to proactively employ more assertive questioning styles if the learner is stumped

NOTE: Asking Learner to end presentation with a summary statement can give you their commitment from the outset.
Addressing Needs Using Different Teaching Styles

Assertive  Suggestive  Collaborative  Facilitative

Step #2: Probe for supporting evidence
› Helps you to assess the learner’s knowledge and thinking process
› Examples
  – “Why do you think that this is the diagnosis?”
  – “What history and physical findings that support this conclusion?”
  – “What else did you consider?”
› Avoid grilling/pimping
  – “What are the possible causes of the heart failure?”

Step #3: Teach general rules
› Teaching emphasizes common take home point
  – “If the patient is waking up with pain, consider that it may be something serious.”
› Keep it to standardized approach or key feature of diagnosis
  – “If the patient has otitis, the landmarks should not be visible.”
› Avoid idiosyncratic approach
  – “I’ve had a lot of luck treating this with Infectogon.”
Steps 4 & 5 are about Feedback

Step #4: Tell them what was right

› Behaviors are reinforced and will be more firmly established
› Tailored feedback
  - “Obviously you considered the patient’s finances in selecting the therapy. This will improve adherence. Well done.”
  - “When emotion came up, you explored it. This usually ends up saving time. Very nice”
› Avoid general praise
  - “Great job!”

Step #5: Correct mistakes

› Forms a foundation for improvement
› Ask for self assessment first
  - “Anything you want to do differently next time?”
› Discuss what was incorrect and how to avoid in future.
› Be specific
  - “You may be right that this is cholecystitis but you really haven’t considered other possibilities such as GERD. It’s important to avoid premature closure.”
› Avoid vague judgments
  - “I wouldn’t have put it together that way.”
Varying use of this method
(when the learner doesn’t know)
› So what do you think is going on?
› So what are the possible causes of cough?
  – What causes beyond the lung should you think of?
  Beyond the respiratory tract?
› If learner still doesn’t know, consider
  – Is one minute preceptor still worth pursuing?
  – Do you switch to a brief presentation (for knowledge)?
  – Do you switch to modeling (for a skill)

Summary: One Minute Preceptor
› Efficient technique for teaching on the fly
› Stimulates problem solving and decision-making
› Facilitates needs assessment
› Leads to teaching targeted to needs
› Reinforced by providing balanced feedback

Demonstration Role Play