MISSION (IM)POSSIBLE: PRECEPTING STRUGGLING STUDENTS

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LEARNING OBJECTIVES

1. Gather audience feedback about precepting struggling students.
2. Outline factors that may contribute to student struggles.
3. Describe preceptor strategies that can support and manage students in difficulty.

Defining the problem...

What is a struggling student? Or how do we define "at risk" students?

- A learner in difficulty is a student at risk for receiving less than "pass" (by end of experience) because of concerns regarding knowledge base, clinical skills or professionalism.

- Notably, learners in difficulty rarely self-identify (for a variety of reasons).

- The good news: early identification, with appropriate intervention, seems to lead to better outcomes.

Bernstein et al. Pediatrics 2013;132(2).

POLLING
What words come to mind when you think of working with a struggling student?

What words come to mind when you think of working with a struggling student?

41 responses

POLLING

List some reasons why you think students struggle.

List some reasons why you think students struggle.
37 responses

What did my experiential colleagues say?

| Knowledge/Skill-Related	Personal-Related	Practice or "Real World"-Related
Deficiencies in knowledge / skills / attitude	Poor time management and/or organization	Mismatched expectations (student and preceptor)
Unprepared	Anxiety/confidence	Frequent changes in preceptors and having to adapt to different expectations.
Struggling to APPLY knowledge (where things are dynamic and they have a responsibility to take care of actual patients)	They have complicated personal lives	Having to adapt quickly to new settings and work methods (steep learning curve in a new practice setting)
Challenges applying "textbook" knowledge to dynamic, real world situations	Lack of adaptability	Lack of involvement with the team
Lack thought process or systematic approach	Lack social emotional skills	

Characteristics of students who need support

A. Poor learning skills 1	B. Poor learning skills 2
• Often strong past academic performance • Easily coached, motivation variable • Slow to adapt to higher education environment of more self-direction • Challenged by not being "at the top"	• Variable age and education achievement • Performance poor • Has specific knowledge/skills gaps
C. **Poor organizational skills** • Poor performance • Unable to meet deadlines • Does not respond to emails/feedback • Performs less well in experiential	D. **Poor insight** • Poor performance (professionalism, sometimes also academic) • Strong self-belief • Impervious to feedback (does not "get it") • External locus of control (it's *their* fault)
E. **Poor mental health** • Poor performance (after initial acceptable performance) • Depression (or other) becomes evident • May be previous history of similar events	F. **Major personal crisis** • Variable age and background • Performance suddenly fails • Background issues (money, family, illness)

Hays et al. Medical Teacher 2011;33:161-4.

A reminder about learning…
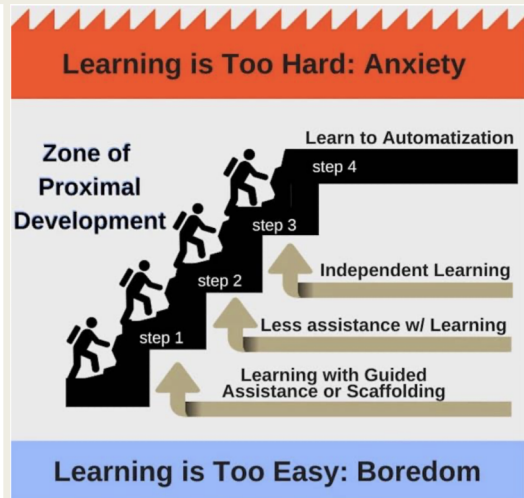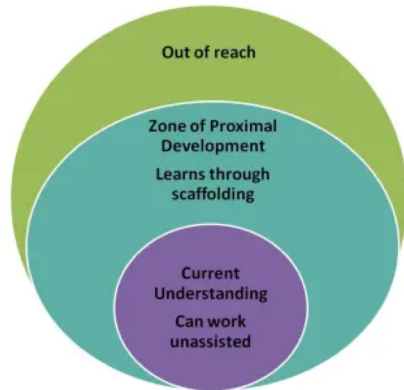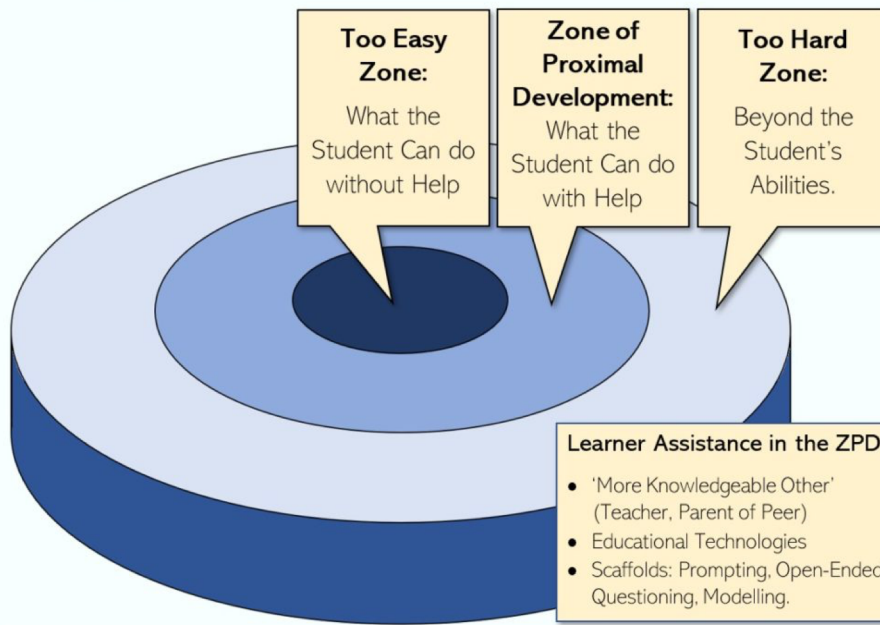
POLLING

What are student attributes that help them achieve success (when they are struggling)?

What are student attributes that help them achieve success (when they are struggling)?

19 responses

What did my experiential colleagues say?

- Student willingness to accept constructive feedback and apply it. (This can't be done in isolation, there needs to be a supportive environment through active preceptor & faculty/coordinator involvement.)
- Proactivity - taking charge of their own learning, asking for help and clear expectations from the preceptor(s)
- (Receptive to)Coaching on skills/approach (to deficiencies)
- Action plan with expectations and clear, concise communication
- Growth mindset, resiliency, tenacity, motivation, accountability, ability to self-assess/self-awareness

POLLING

What are preceptor attributes that enable them to achieve success with struggling students?

What are preceptor attributes that enable them to achieve success with struggling students?
31 responses

consistent expectations
curiousity
spidey sense
reflection
understanding
patience
consistency
letting go
available
empathy
approachable
listening
supportive
flexibility
open
clear
pivoting
responsibility

What did my experiential colleagues say?

Biggest Theme
- Supportive, compassion, caring, empathy, understanding, positive regard for the student, attentive
- Be able to encourage the student by recognizing their successes, desire to facilitate learning / wanting to see the student be successful

Other Characteristics
- Early identification and proactively reaching out for supports (i.e. course coordinator, faculty, their manager, or other preceptors)
- Ability to try different teaching methods, enthusiasm for teaching
- Clarity in communication (with student and faculty coordinator) (ie: setting clear expectations)
- Delivering regular effective feedback, ability to give honest tactful feedback, coupled with open communication
- Time and patience
- Adaptability, being able to effectively use situational leadership

Ann's observations (over the years) to achieving success

Student Factors	Preceptor Factors
• Receptive to feedback on WHAT needs to improve	• Takes a caring approach to the student
• In terms of HOW to improve – takes a proactive approach to creating a plan (and get preceptor input to ensure reasonable and feasible); course coordinator input can be valuable	• Clear with expectations and helping student with road map on "how to get there". This will likely require baby steps.
• Exhibits curiosity and desire to learn	• Provides direct instruction (ie: where to find an answer, how to approach a task, how to "connect the dots")
• Provides feedback about what works best for them	• Leads with "What can I do to help you be successful? How can I help build confidence?

Building confidence is KEY!

Approach to Helping a Struggling Student
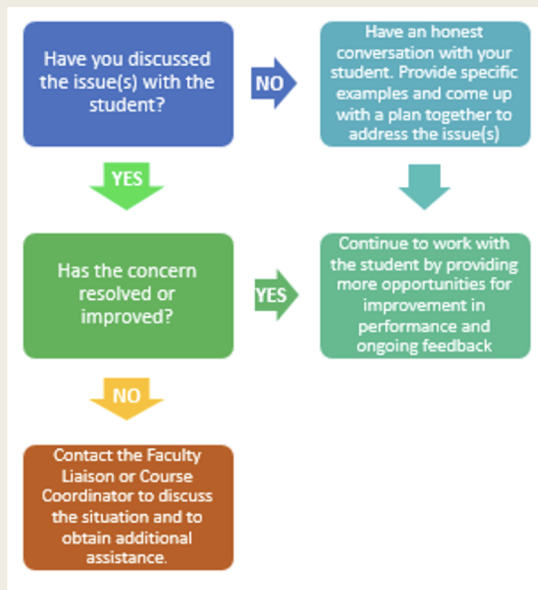
From: Preceptor Guide, Supporting Students for Success (in press; soon to be available on Faculty website)

Diagnosing the Situation

- Consider a differential diagnosis
  - *What is happening? What are all the potential causes for this?*
  - *There may be multiple factors*
- Take a focused history
  - *Engage the student in your observations. Seek their input for explanations.*
  - *This can help determine the nature of the intervention.*
- Define a management plan
  - *What steps will best support the student in being successful?*

EARLY RECOGNITION IS VERY HELPFUL!

Bernstein et al. Pediatrics 2013;132(2).

The Differential: K-SALTS

Factors	Considerations	Possible Manifestations or Observations
Knowledge	Deficiencies in pharmacotherapy or pharm sciences; anxiety, reduced sleep	Below expectations/inconsistency in knowledge
Skills	Difficulty with communication, clinical tasks, clinical reasoning, organization	Disorganized
Attitude	Lack of motivation or insight	Distracted, disinterested, apathetic
Learner	Stress, learning disability, mental illness	Stressed over performance/personal issues
Teacher	May be dissatisfied with own role (stretched thin); may have own stresses or biases	Not much time to spend with learner, observe, provide feedback
System	Overwhelming workload, inconsistency of teaching/supervision, reduced clinical exposure	High patient load, high acuity/urgent situations, staff shortages

Bernstein et al. Pediatrics 2013;132(2).

Taking the (Student) History

- Start with open-ended questions to determine level of insight about your observations; look for possible causes such as:
  - *Academic history*
  - *Social circumstances (family, illness, financial)*
  - *Wellness (any new or previously known physical or mental health issues that are impacting situation)*
  - *Relationships (with preceptor(s) or other students if in PAL model)*
  - *Learning context or placement site: inconsistent supervision, poor role modeling, lack of feedback or coaching)*

Bernstein et al. Pediatrics 2013;132(2).

Constructing a Plan

- Document concerns and what has already been done about them, in as much detail as possible (ie: timeline, who has been engaged, key findings).
- Reach out to the faculty with your observations and plan thus far. See if this is a pattern or if supports have been in place in past.
  - *Be transparent about this with the student.*
  - *Encourage the student to also reach out to the faculty for support.*
- Create a plan of action.
  - *This should be student led.*
  - *Build upon learning plan already created at the beginning of the placement. Create milestones for the student to achieve.*

Bernstein et al. Pediatrics 2013;132(2).

Select strategies to support learning
(which depends on the differential)

- Learning supports
  - *Academic Success Center (study strategies)*
  - *Role playing (preceptor or peer students or other staff members)*
  - *"Think Out Loud" by preceptor (role model) and student*
  - *Increased feedback and addition of supplemental assessment*
  - *Learning plan support for student*
- Wellness supports
  - *Counselling and clinical services*
  - *Need for LOA?*
- Professionalism
  - *Clear expectations and consequences if inability to follow-through*

Students need to buy-in for support to have a chance at success.

But this all takes time, and I don't have it!

- It's true – it all takes time. NO STRUGGLE is time-free.
- Having said that, there are some strategies you can use.
  - *Meet the student where they are to achieve some wins, that are within their Zone of Proximal Development. Builds confidence.*
  - *Schedule activities they can do on their own (like reviewing a patient chart, DI question) and debrief when you have time.*
  - *Only schedule the amount of time you have; be transparent with the student about this.*
  - *Tailor the workload to what they can achieve.*
  - *Ensure patient safety; only allow supervised patient or team interactions until competence established.*
- If this is impossible, contact the faculty for help with next steps.

The importance of orientation....

- Setting the stage for the experience can really alleviate the "what happens now" as the experience progresses
  - *Clear expectations – include how patients will be reviewed together*
  - *Daily & overall plan – workflow, supervised vs unsupervised time*
  - *Get student to share their expectations and Learning Plan*
  - *Feedback plan – when, how often, format, student role*
  - *Communication style and plan*
  - *Assignments timeline*
  - *What happens if there are unforeseen challenges? What then? (examples can be helpful here)*

Summary

New guidebook coming soon!

- Early identification ideal; this gives more time to work with the student and develop strategies that can support them.
- Determine what is happening (the differential) and possible causes (the history).
- Work with the student (and possibly the faculty) to develop a plan (student needs to be accountable – it is their learning); faculty are available to support both student and preceptor(s).
- Be kind!

I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.

-Maya Angelou