

# “I’m new here” – New Practitioners Pearls for Precepting during COVID-19

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# Presenters

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# Objectives

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- Describe precepting opportunities that developed during COVID-19
- Discuss precepting challenges that arose during COVID-19
- Identify future strategies to enhance precepting skills

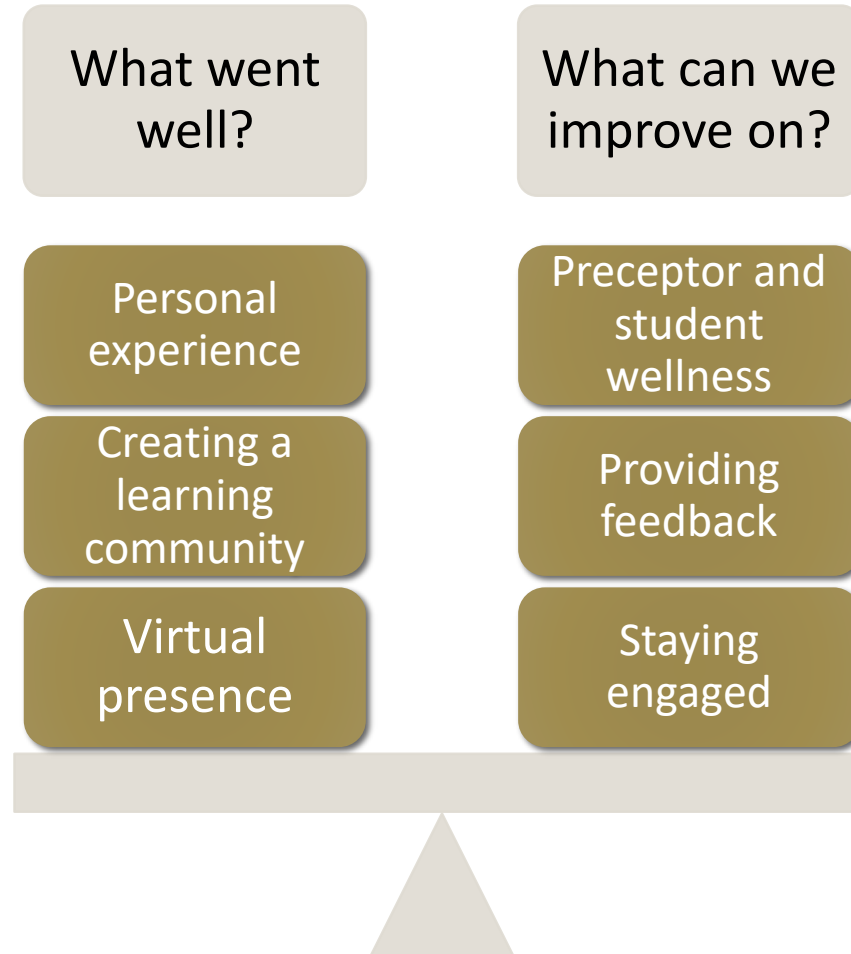
# Conflict of interest

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All presenters report no financial relationships relevant to this activity

# Looking back...

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# Niagara Falls Memorial Medical Center

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- 178 bed community teaching hospital
- Preceptor for PGY-1 and APPE Internal Medicine/Cardiology rotation
- COVID rotation impact

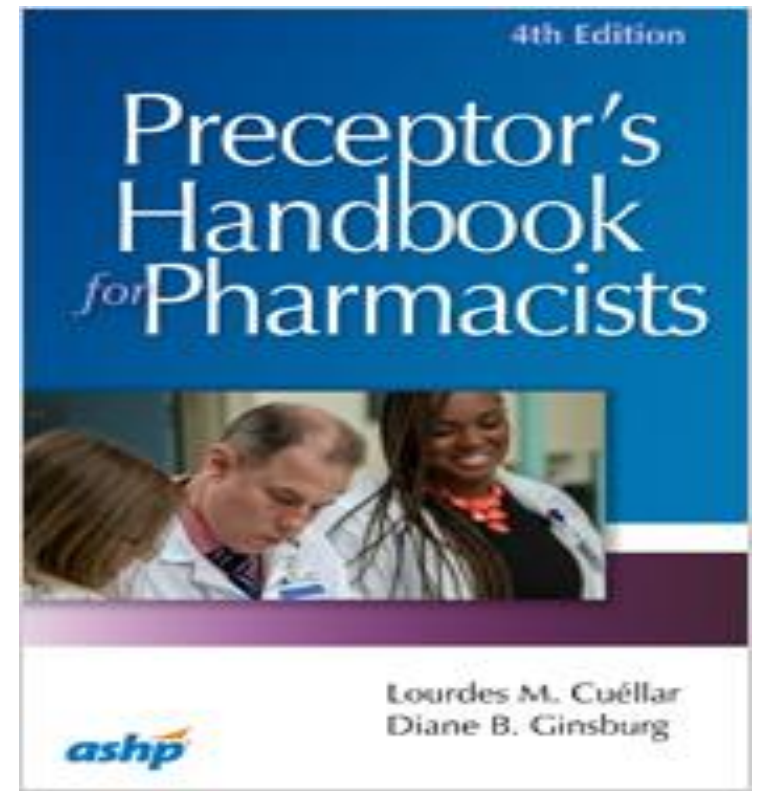


# What went well?

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## The Elements of Precepting:

- Role modeling
- Education



# What went well?

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## Role modeling

- How to model remotely?
  - How to model bedside etiquette...when we can't be at the bedside?
  - **Phone etiquette even more important**
- How can I get to know my patient?
  - Connection with patients and families



# What went well?

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## Education

- How can I limit my learners on-site activities?
- Remote learning activities
  - Podcasts
    - Pharmacy to dose (Critical Care)
    - The Elective Rotation (Critical Care)
    - ASHP Podcast
  - ASHP E-Learning Webinars
- Lifelong learning

## Podcasts:

- **CardioScripts**

- Acute Coronary Syndrome
  - Episode 2 – REACT(5)ion
  - Episode 6 – Entering the Twilight Zone
  - Episode 11: Crushing ISCHEMIA
  - Episode 14 - The Cold Truth of COLCOT
  - Episode 20 - To beta block or not
- Congestive Heart Failure
  - Episode 3 – SGLT2
  - Episode 9 – Spironolactone: TOPCAT
  - Episode 10 – PIONEERing HF Care
  - Episode 16 – GUIDE-IT Guidance
  - Episode 21 - Vasodilators in HFrEF [Part 1]
  - Episode 22 – Vasodilators in HFrEF [Part 2]
- Anticoagulation
  - Episode 18 – The Caravaggio Trial

- **Curbsiders**

- Congestive Heart Failure
  - Episode 45 – Heart Failure Update
  - Episode 150 – HFpEF
  - Episode 230 – Kittleson Rules Acute Heart Failure
- Acute Coronary Syndrome
  - Episode 5 – Cardiac chest pain
- Anticoagulation
  - Episode 3 – Anticoagulation Basics
  - Episode 92 – Pulmonary Embolism for the Internist
  - Episode 154 – DVT and PE Master Class
- Atrial Fibrillation
  - Episode 159 – Atrial Fibrillation Review and Update
- Dyslipidemia
  - Episode 10 – Cholesterol and Lipid Management
  - Episode 37 – Lipid Lowering Controversy
  - Episode 191 – Lipids Update

- **Curious clinicians**

- Episode 4 – Digitalis and Van Gogh
- Episode 5 – Contraction Alkalosis

# What have others done?

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Badreldin et al. (2020) provided guidance and insight on how other pharmacy schools addressed global pandemic

- Restructuring the APPEs
  - Daily videoconference sessions
    - National/international COVID-19 updates
    - Assess knowledge domain (topic discussions)
    - Assess cognitive domain (designing care plans)
    - Assess communication domain (debating clinical controversy topics)

# But I work in....

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## Internal Medicine

- Perform simulated patient inhaler sessions
- Formulate total parenteral nutrition regimen

## Critical Care

- Interprofessional education on enteral feeding-drug interaction
- Assessing cardiac life support simulation

## Infectious Diseases

- COVID-19 educational videos (proper precautions to take)

# Restructuring a Specialty Ambulatory Care Rotation

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## Patient work-up and care plan development

- De-identified patient information
- Telehealth involvement

## Topic discussions

- Via Zoom
- Allowed inclusion of midlevel providers who were new to the specialty

## Drug information questions

- De-identified patient information
- Called patients with preceptor on Zoom incase there were questions

# Restructuring a Specialty Ambulatory Care Rotation

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## Newsletter

- Helped update our providers on COVID related information as it pertained to our patients

## NAPLEX Review

- Doubled as BCACP review for resident

## COVID-19 Learning Community

- Teaching experience for resident

# COVID-19 Online Learning Community

6 weeks (length of student rotation)

Discussion based (NOT lecture based)

Run by PGY-2 resident

- Good teaching experience

COVID-19 Discussions		
Week	Topic	Associated work
1	Mental Health and COVID-19  Intro to SARS-CoV-2  Discussion on Tools for Keeping Up with Evidenced Based Medicine During the COVID-19 Pandemic	<u>Pre-reading:</u> <b>Please come prepared to discuss these papers and ask questions</b> (1) Hyperlinked studies (usually 3 per week as they weren't very long in the beginning)  <u>Meeting:</u> Time and Date
2	Are my medications making it worse? Understanding the Data on NSAIDs and ACE Inhibitors in the Context of COVID-19  5 Essential Tips for Reading COVID-19 Literature	<u>Pre-reading:</u> <b>Please come prepared to discuss these papers and ask questions</b> (2) Hyperlinked studies (usually 3 per week as they weren't very long in the beginning)  <u>Meeting:</u> Time and Date
3	To Prescribe or Not Prescribe: Hydroxychloroquine and COVID-19  The Ramifications of the Hydroxychloroquine Miracle Drug Claims  "I'm so sorry" Communicating in Times of Grief	<u>Pre-reading:</u> <b>Please come prepared to discuss these papers and ask questions</b> (1) Hyperlinked studies (usually 3 per week as they weren't very long in the beginning)  <u>Meeting:</u> Time and Date
4	Options, Options, Options: Potential COVID-19 treatments  Potential COVID-19 Vaccines	<u>Pre-reading:</u> <b>Please come prepared to discuss these papers and ask questions</b> (1) Hyperlinked studies (usually 3 per week as they weren't very long in the beginning)  <u>Meeting:</u> Time and Date
5	5 Minute Literature Updates by APPE Students	<u>Pre-reading:</u> <b>This week, APPE students involved will present on their own articles for 5 minutes. Articles chosen by students can be found here: <a href="#">Week 5 Article Sign-up</a></b> (1) Final schedule of presentations and articles being presented will be sent out  <u>Meeting:</u> Time and Date
6	5 Minute Literature Updates by APPE Students continued...  Pharmacists Role in COVID-19	<u>Pre-reading:</u> <b>Please come prepared to discuss these papers and ask questions</b> (1) TBD  <u>Meeting:</u> Time and Date

# COVID-19 Online Learning Community

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Students expressed feeling more

- Prepared to discuss COVID-19 with patients
- More prepared to read articles on COVID-19
- More knowledgeable about COVID-19
- More confident in their COVID-19 knowledge

Students also felt they had more tools and resources to stay up-to-date with COVID-19



# COVID-19 Online Learning Community

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Preceptors and students generally had the same knowledge base

- **We learned together**

Connection with others was very important in a time where physical isolation was common

Made a learning opportunity out of a situation that limited students onsite learning time

# NewYork-Presbyterian Hospital



## Approximately 2600 beds

- NYP/Weill Cornell Medical Center
- NYP/Columbia University Irving Medical Center
- NYP/Morgan Stanley Children's Hospital
- NYP/Komansky Children's Hospital
- NYP/Alexandra Cohen Hospital for Women and Newborns
- NYP/Allen Hospital
- NYP/Lower Manhattan Hospital
- NYP/Westchester Division
- NYP/Lawrence Hospital

# NewYork-Presbyterian Hospital/ Morgan Stanley Children's Hospital (MSCHONY)

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- 300 Bed Level 1 Pediatric Trauma Center affiliated with Columbia University Vagelos College of Physicians and Surgeons.
- Leading pediatrics hospital in New York-Presbyterian Hospital enterprise

# EPICENTERS OF COVID-19

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New York-Presbyterian became epi-center for COVID-19 patients between two main campuses at Weill Cornell and Columbia Medical Centers

- MSCHONY transition to be only hospital to take pediatric patients in NYPH enterprise
- Pediatrics at other sites transition to take only adults

In time, MSCHONY became leading center dealing with MIS-C pediatric patients

# Rotations...Students...Residents...

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**APPE students** transition to full virtual mode at onset of COVID

**Resident** experiences were in-person at first before transitioning to hybrid model of part virtual part on-site

- Resident mimicked that of clinical preceptor model (either working/rounding from home or onsite)
- Some experiences shortened due to high demand operationally needing residents to staff

# Virtual Presence & Experience

## Virtual Rounding

- Inter-disciplinary virtual rounds to adhere to social distancing
- Created environment for an organized order of progression between team during patient rounds
  - Everyone had a part and opportunity to discuss anything pertaining to patient
- Empowered pharmacy resident/student to “speak up”

## Empowered Pharmacy Need & Worth

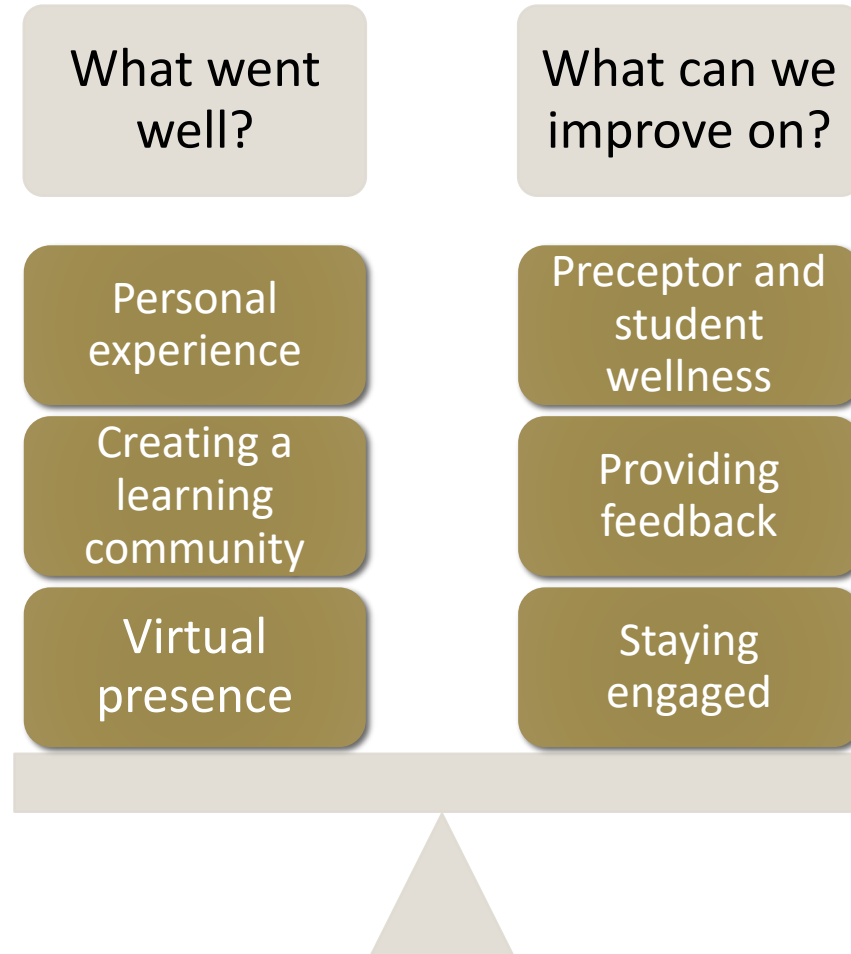
- True appreciation from medical teams when on-site
- Providers more dependent on contacting us via phone or virtual platform

## Increased opportunity for increase covering patients

- Utilized student/residents to virtual screen uncovered patients and provide clinical coverage

# Looking back...

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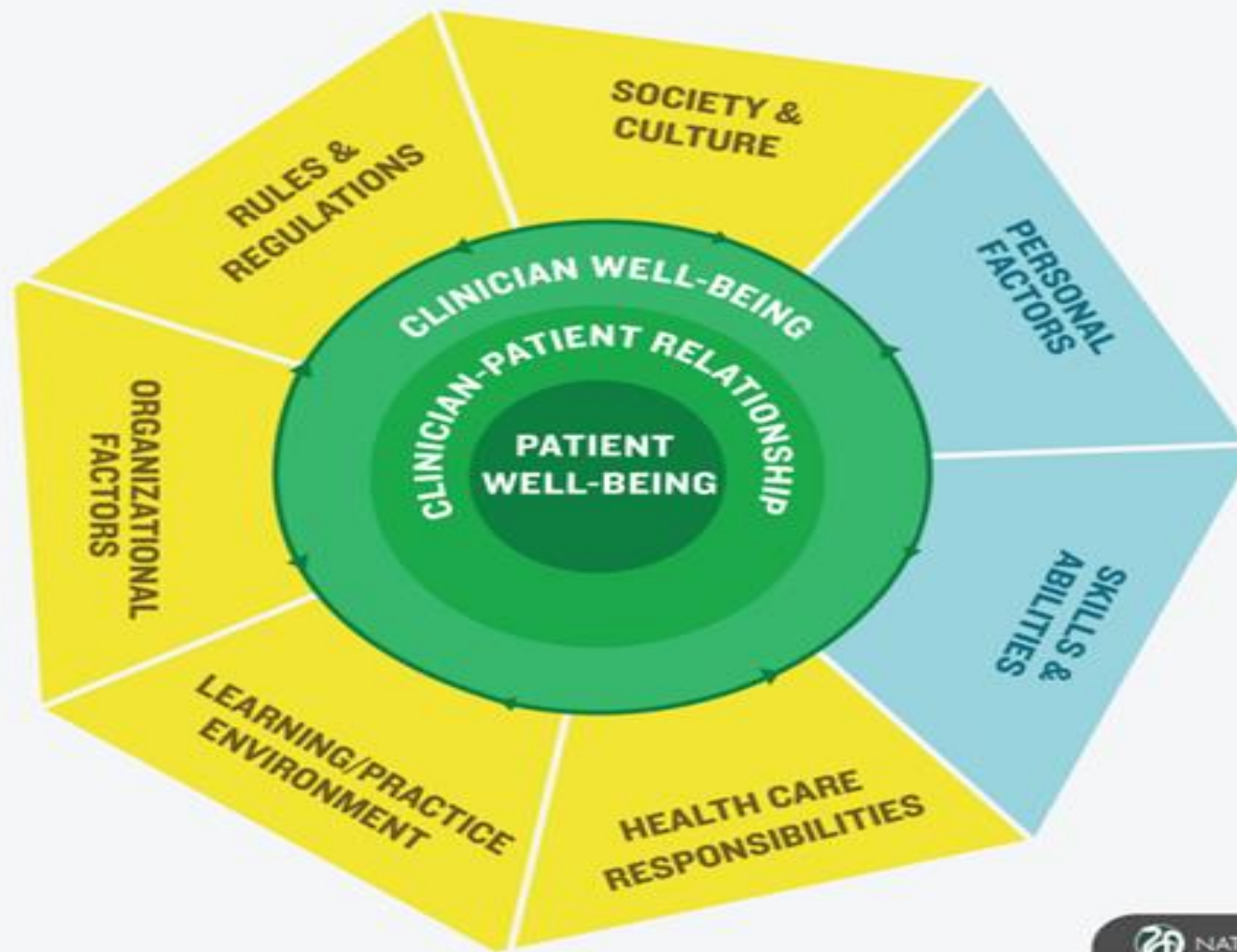
# What can we improve on?

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## Preceptor & Student (Learner) Well Being

- 53% of health-systems pharmacists surveyed reported a high degree of burnout (2018)
- Pharmacy residents working > 60 hours of work reported high levels of stress, depression and hostility
- Pre COVID numbers....



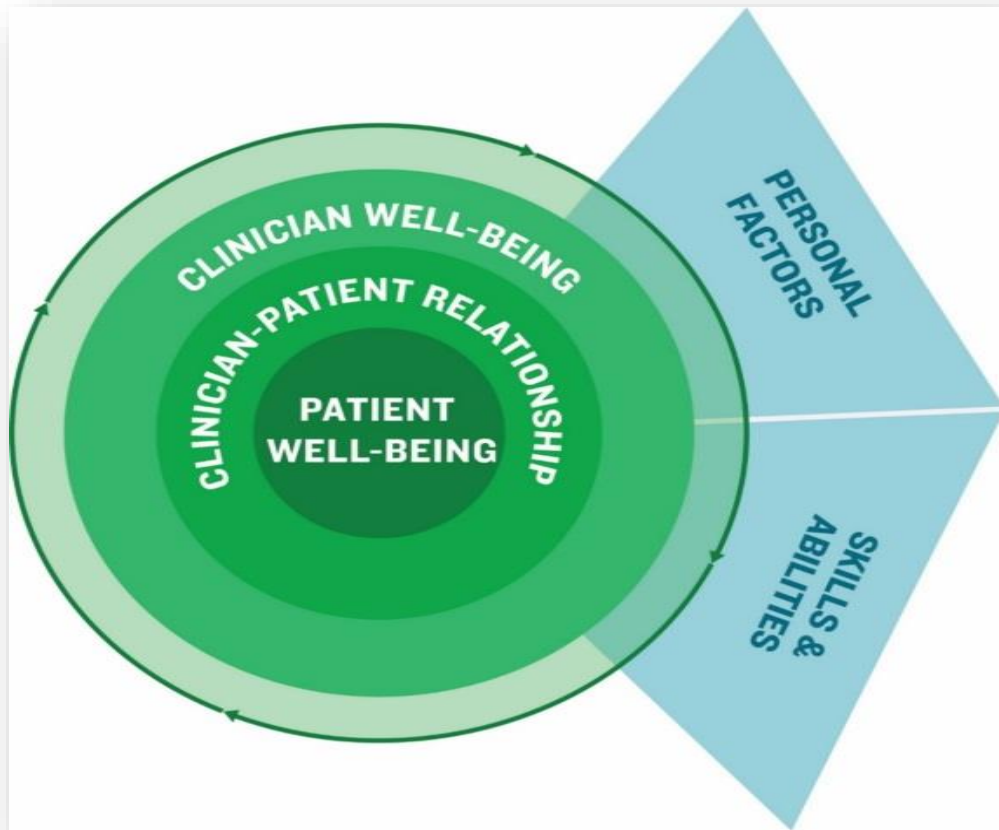


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# Preceptor & Student Well-Being



## Personal factors:

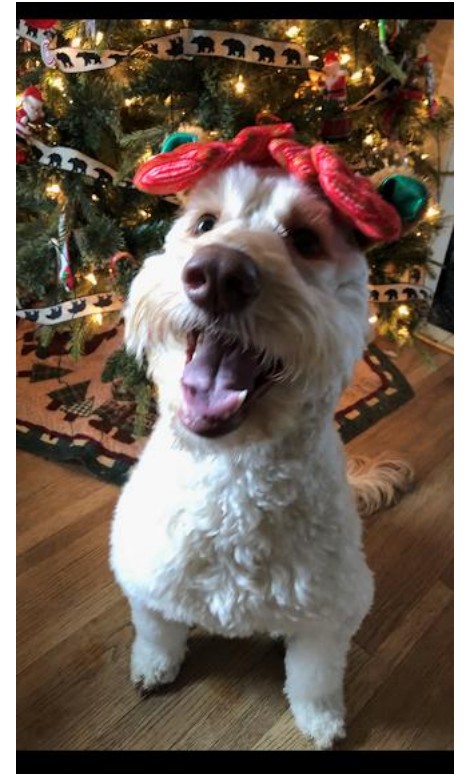
- Access to a personal mentor
- Inclusion and connectivity
- Family dynamics
- Financial stressors/economic vitality
- Flexibility and ability to respond to change
- Level of engagement/connection to meaning and purpose in work
- Personal values, ethics and morals
- Physical mental, and spiritual well-being
- Relationships and social support
- Work-life integration

# Preceptor & Student Well-Being

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## What's worked for me?

- Social support
- Find time for fitness and health
- Self-reflect on:
  - What is making you burnt out
  - What's important to me
- **Importance of appreciation**
- Try something new



# Preceptor & Student Well-Being

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## Importance of showing appreciation

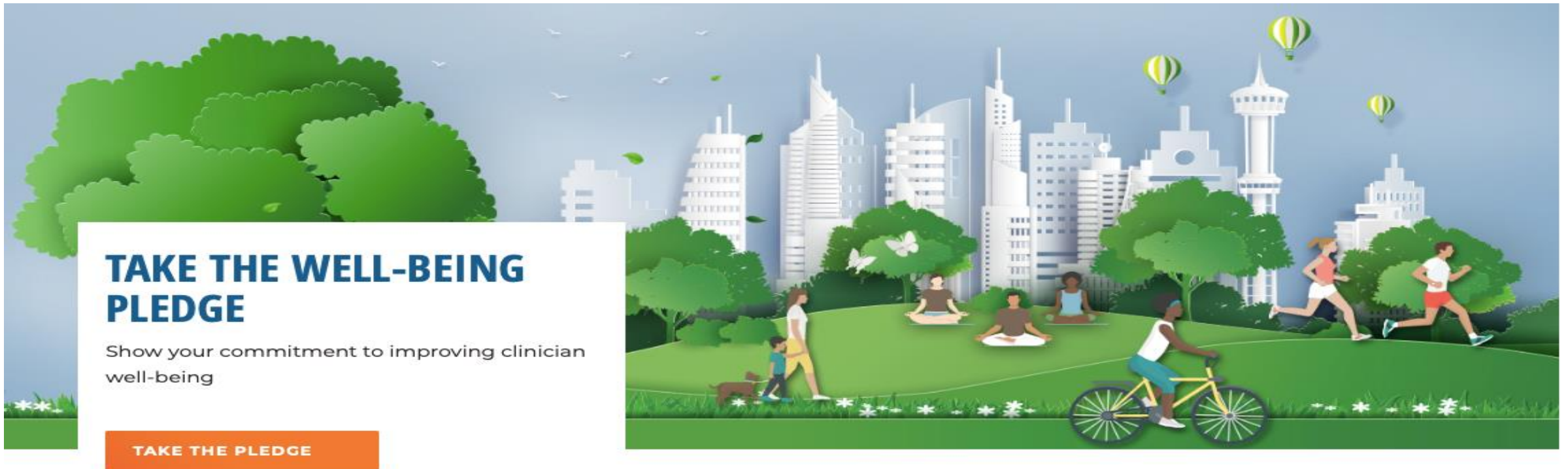
- 64% of Americans leave their job because they do not feel appreciated
- Team members may:
  - Lack connectedness
  - Become discouraged
  - Complain
- Recognition:
  - Individualized
  - Delivered personally

# Preceptor & Student Well-Being

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Plenty of resources!

- ASHP Well-Being and Resilience Series



# Preceptor & Student Well-Being

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We can't forget about our learners!

## Strategies:

- Introduce them to burnout concept
  - Topic discussion idea
- Setting pre-rotation goals and expectations
- Being ultra aware on when students may need a break

# The Challenge: Feedback

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If a rotation is virtual, there tends to be less face to face time

- Decreased time to evaluate student performance
- Decreased time to evaluate student professionalism

Changing expectations

# Feedback Pearls

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Don't wait for formal evaluation time points

- Feedback unlike evaluation, is meant to be given informally

Incorporate task based and scheduled feedback

- Feedback Fridays

Encourage self reflection

- “How do you feel \_\_\_\_ went?”

Create goals



# The Challenge: Flexibility

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## Personal and professional challenges

- Precepting and helping children at home attend virtual school
- Decreased support staff due to financial instabilities
- Increased time needed for planning rotation activities
- Technology challenges

# Flexibility Pearls

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## Communication

- Orientation to technology
- Scheduling (e.g., calendar invites and/or daily expectations for students)

## Collaboration platform (e.g., Google Drive, Dropbox, etc. )

- Single place where a student can find all of the information they need to be successful

## Collaborate with other preceptors, if possible

- Online learning community

# Engagement...

## How to Stay Engaged When You're Not There

### Create and ensure face-to-face time

- Try to make face time in person with either topic discussion, patient discussion or just check-in
- Virtual or in real time

### Not just doing busy work

- Ensure doing things that take up the day but are not just “fillers” (i.e. in-services, drug shortage updates, COVID newsletter, drug alerts)
- Partake in more in depth topic discussion / cased based (topics that likely would not have been able to cover normally)

### Collaboration with other virtual students and preceptors

Thank you for your  
dedication to student  
learning!

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# Key Takeaways

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## Reflect on your positives

- What have you done well that you want to continue to do throughout “Phase 2”
  - Role modeling? Creating a culture? Increasing your virtual presence?

## Reflect on your improvements

- What do you want to improve on during “Phase 2”
  - Wellness? Flexibility? Empowerment?

# Question 1

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What are some strategies to encourage preceptor well-being?

1. Ignore it, COVID-19 will be gone soon
2. Identify and connect with role models
3. Identify important bodies of work that align with your goals
4. 2 and 3

# Answer: Question 1

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What are some strategies to encourage preceptor well-being?

1. Ignore it, COVID-19 will be gone soon
2. Identify and connect with role models
3. Identify important bodies of work that align with your goals
4. **2 and 3**

# Question 2

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You are a preceptor for an internal medicine APPE rotation and just found out your students for this upcoming module will not be allowed onsite. Which method of rotation restructuring would be **BEST** to improve the clarity of rotation expectations?

1. Creating a Dropbox, Google Drive, AND shared drive where rubrics and rotations expectations can be found
2. Working with a resident to create a 6 week learning experience for all students off site
3. Creating a daily schedule outlining the students activities each day



# Answer: Question 2

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You are a preceptor for an internal medicine APPE rotation and just found out your students for this upcoming will not be allowed onsite. Which method of rotation restructuring would be **BEST** to improve the clarity of rotation expectations?

1. Creating a Dropbox, Google Drive, AND shared drive where rubrics and rotations expectations can be found (try to only use one file location so students are not confused as to where things are located)
2. Working with a resident to create a 6 week learning experience for all students off site (this is a great way to engage students, but 3 is the best way to clarify expectations in this case)
3. **Creating a daily schedule outlining the students activities each day**

# Question 3

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Which method **BEST** engages students in practicing gratitude?

1. Telling the student they should be grateful they are allowed to be at their site
2. Telling the student that you are grateful you still get to have them attend an onsite rotation
3. Asking the student to discuss one good thing that has happened in the last week

# Answer: Question 3

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Which method BEST engages students in practicing gratitude?

1. Telling the student they should be grateful they are allowed to be at their site
2. Telling the student that you are grateful you still get to have them attend an onsite rotation **This is a great way to model gratitude, but asking the student reflect and find something they are grateful for is a hands on way of practicing gratitude**
3. **Asking the student to discuss one good thing that has happened in the last week**

# Question 4

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Which challenge is **BEST** matched to a method of combating that challenge?

1. Decreased in person observation: creating a folder where all rubrics can be found
2. Decreased student engagement: scheduling as many busy work meeting as possible for the student to fill their time
3. Increased preceptor time required to create the rotation: collaborating with other preceptors

# Answer: Question 4

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Which challenge is **BEST** matched to a method of combating that challenge?

1. Decreased in person observation: creating a folder where all rubrics can be found
2. Decreased student engagement: scheduling as many busy work meeting as possible for the student to fill their time
3. **Increased preceptor time required to create the rotation: collaborating with other preceptors**

# Questions?

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