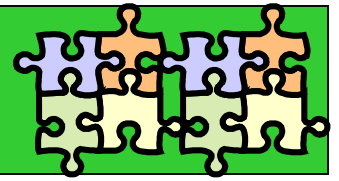


Preceptor's Connection Spring 2009

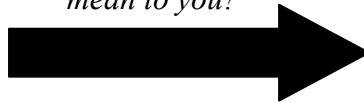


??? Did you know ???

ASHP states that one of the seven principles of a PGY1 Pharmacy Residency is that:

“The residency program director and **preceptors** will be professionally and educationally **qualified** pharmacists who are **committed** to providing effective **training** of residents”

So what does this mean to you?



Preceptors must:

- Be licensed pharmacists
- Have completed a residency or have at least 3 years practice experience
- Have experience in the area(s) they precept
- Contribute to and be committed to pharmacy practice
- Demonstrate an aptitude and desire for teaching
- Supervise and model pharmacy practice skills
- Provide regular criteria-based feedback

How can I “contribute to and be committed to pharmacy practice?”

- Document improvements in and/or contributions to the advancement of pharmacy practice (implementation of a new service, participation in task force/committee, development of guidelines/protocols)
- Appointment to drug policy and other committees within the department and/or organization
- Formal recognition by peers as a model practitioner (board certification, fellow status)
- Contribute to the total body of knowledge in pharmacy practice (publications in professional journals and/or presentations at professional meetings)
- Serving regularly as a reviewer of contributed papers and/or manuscripts
- Demonstrate leadership through active involvement in professional organizations
- Demonstrate effective teaching

ASHP defines a preceptor as:

“An expert pharmacist who gives practical experience and training to a pharmacy resident”

How do you measure up to this description?????

The 4 Preceptor Roles

- **Instructing**-direct instruction of didactic and/or clinical information (lecture, case based teaching, reading, guided discussions)
- **Modeling**-demonstrate appropriate clinical skills and interactions (resident learns from observation)
- **Coaching**-observe residents in direct patient care and provide continuous feedback
- **Facilitating**-teach resident to evaluate their own work (resident has autonomy, while the preceptor acts as a reference)

Partnership for education

Role modeling

Education

Coaching

Evaluation of performance

Professionalism

Teamwork

Investment of time & energy

Negotiation & individualization of learning activities

Guidance

DO's and DON'Ts for preceptors:

- **DO** orient your residents to your service and rotation; provide a schedule of important events; set clear expectations at the start of the rotation
- **DON'T** expect all residents to have the same clinical skill set; always give residents the answers to clinical questions before they have had a chance to research it on their own, model behaviors that you would not want your resident to possess
- **DO** observe the resident's performance and give regular feedback; assure residents understand the goals and objectives of the rotation; individualize experiences to meet the needs of the individual resident
- **DON'T** forget to introduce the resident to the rest of the healthcare team; set unrealistic expectations; forget to complete evaluations in a timely manner

ASHP requires a number of **evaluations** to be completed for each rotation the resident completes. **Evaluations** are important, as they are one of the main ways residents know in which areas they have been deemed competent, and in which areas they still need improvement. Completing **evaluations** in a timely manner helps residents and preceptors to individualize upcoming experiences to address goals and objectives that remain unmet. **Evaluations** of you as a preceptor and of your rotation should be used to improve your rotation and your precepting skills. Formative **evaluations**, or snapshots, are intended to provide the resident with ongoing feedback throughout the rotation. They are designed to assess individual clinical skills, goals, and objectives. Snapshot **evaluations** should focus on a specific event, patient, or case, and immediate feedback will help improve the resident's future performance.

Evaluations

Have ideas for future preceptor development newsletter articles?

Have unique precepting ideas?

Have questions regarding ASHP and their requirements for preceptors or preceptor development?

Contact Renee Marana, Pharm.D. Bronson Methodist Hospital PGY1 Residency Program Director

Do you know the purpose statement of the BMH PGY1 residency?

“To prepare pharmacist clinicians to practice in direct patient care positions, adjunct or clinical faculty positions, or to pursue post-graduate year two training”

Did you know that BMH has had a pharmacy residency since 1961?

Did you know that there are currently 7 pharmacists at BMH who were at one time BMH residents? Can you name them?