

# 11<sup>th</sup> Asia Pacific Medical Education Conference

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Building Bridges, Connecting Minds

Trends · Issues · Priorities · Strategies



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## PRECEPTING AS A TEACHING MODALITY: VIEWS AND EXPERIENCES OF THE PRIMARY CARE TRAINEES

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### Aims

Precepting is a method used to improve clinical competency. Each precepting session involves direct observation and feedback of a trainee's clinical consultation by a faculty member. In primary care specialty where doctors work in isolation through most of their career, precepting during traineeship offers a unique opportunity to enhance performance and address deficiencies in the training of primary care doctors. This study aimed to explore the primary care trainees' experience in precepting.

### Methods

This study was conducted in the Department of Primary Care Medicine, University of Malaya, Malaysia in 2013. A total of 19 primary care postgraduate trainees participated in three focus group discussions. The researchers used a semi-structured interview guide to capture the views and experiences of the participants. The discussions were audio-recorded and transcribed verbatim. Data were analysed by two independent researchers and coded using NVivo 10, using a grounded theory approach. Focus groups ceased when saturation of data was achieved.

### Results

The participants' age ranged from 28 to 38 years old. The level of experience spanned from second year trainee (6), to final year trainee (7). The trainees felt that precepting was helpful in terms of: improving their consultation skills; enhancing their awareness of cultural issues; allowing them to practice for clinical examination and promoting self-directed learning. However, the trainees experienced some 'side effects' of precepting: emotional turbulence; impressions of being observed in a standardised consultation, and the intrusive effect of being observed in a doctor-patient communication. The trainees were exposed to different styles of precepting. Different preceptors focused on different issues (e.g. consultation skills, clinical skills or prescribing) and this helped to enrich the trainees' learning experience. Uncertainty about precepting goals and performance anxiety caused stress among the trainees. The longer consultation time required for feedback on performance created the impression of an 'unreal' clinical encounter. The presence of a senior doctor as observer during the consultation was felt to adversely affect trainee doctor-patient relationship.

### Conclusion

The trainees valued the impact of precepting on their clinical skills. However, they found precepting stressful. Standardisation of the precepting process, and formal training of preceptors may improve the learning experience.



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## BACKGROUND

- Precepting involves direct observation and feedback of a trainee's clinical consultation by a faculty member.
- In primary care setting where doctors mostly work in isolation, precepting offers a unique opportunity to enhance performance and address deficiencies in the training of primary care doctors.

## RESEARCH QUESTION

What are the views and experiences of postgraduate trainees towards precepting?

## METHODS

- This study was conducted in the Department of Primary Care Medicine, University of Malaya, Malaysia in 2013.
- A total of 19 primary care postgraduate trainees participated in three focus group discussions.
- The discussions were audio-recorded and transcribed verbatim.
- Data were analysed and coded using NVivo 10, using a grounded theory approach.

## RESULTS

Overall, trainees felt that precepting was helpful in improving their clinical competency. However, perceiving occasionally resulted in negative experiences such as low mood and stress.

### BENEFITS

**Consultation skills:** "I become more patient centred rather than doctor centred." (Student D, Year 2 trainee)

**Cultural sensitivities:** "What I think is probably not to be so rude. We can be very rude to other races, other people. We do learn things from precepting." (Student E, Year 2 trainee)

**Self-directed learning:** "You would realize what mistakes you have done and then go back with lots of points to look up and read, based on the discussion." (Student D, Year 2 trainee)

**Enriched learning experience:** "Some preceptors focused more on management; some focused more on the communication skill." (Student R, Final Year trainee)

**Exam preparation:** "It allows for you to compose yourself especially during exam when there will be somebody looking at you." (Student I, Year 3 trainee)

### DRAWBACKS

**Emotional turbulence:** "The feeling of depression that you have to deal with after that. Yeah, maybe the reflection of 'I am not up to standard yet'. It depresses me most." (Student S, Final Year trainee)

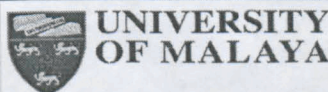
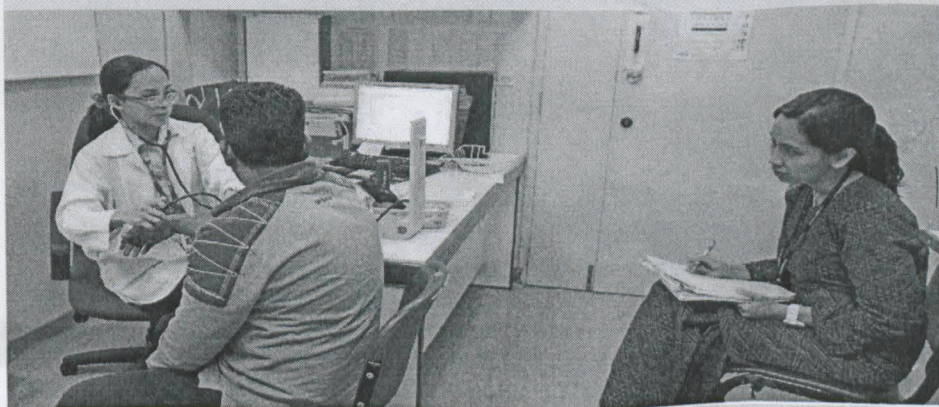
"You got nervous even before the session, just like BLS, then you got the session and after that is the post session. It's really disturbing you." (Student N, Final Year trainee)

**Performance anxiety:** "How can you ask me to be myself when I know that there's somebody beside me, watching me." (Student F, Year 2 trainee)

**Intrusion to doctor-patient communication:** "I have been interrupted by the lecturer in the middle or interrupted in the end; not forgetting as well if they were sitting in with their facial expression." (Student P, Final Year trainee)

## CONCLUSION

The trainees valued the impact of precepting on their clinical skills. However, they found precepting stressful. Standardisation of the precepting process, and formal training of preceptors may improve the learning experience.



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