

Remediation of the Struggling Learner



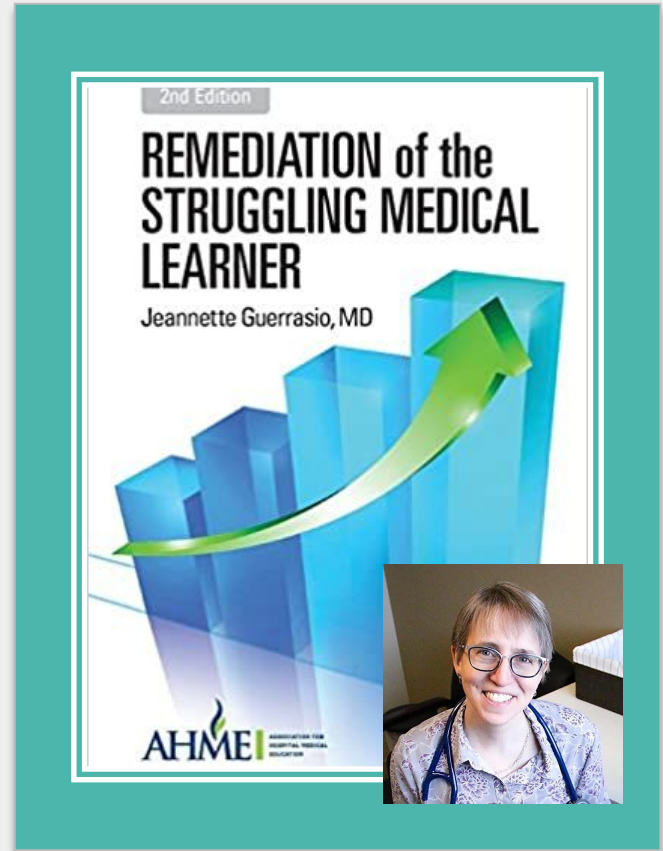
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Objectives

- 1 Discuss the importance of early identification of struggling learners
- 2 Form a differential diagnosis of a learner's educational deficits
- 3 Incorporate deliberate practice, feedback, and self reflection into remediation plans
- 4 Develop a customized remediation plan with measurable outcomes

Disclosures

No disclosures; no conflict of interest in relation to this presentation



The Challenge for Clinical Preceptors

- Patient care + supervision of learner
- Struggling learners take up time
- Affects team morale
- Impacts the program's reputation
- No resolution without intervention
- Impacts pt safety, quality of care
- Obligation to educate all learners

(Guerrasio, 2018)

10-15%

experience significant difficulties

(Boileau et al., 2017)

2-6%

will self identify

(Boileau et al., 2017)

Why?

- Fear of academic and social consequences
- Self-appraisal significantly different from actual performance
- Doesn't know what they don't know

Conscious Competence Learning Matrix



The Mission

“Ensure patient safety and to make sure that every patient who interacts with a clinician gets reliable, trustworthy, satisfactory care.” ~*J. Guerrasio*

What is a Struggling Learner?

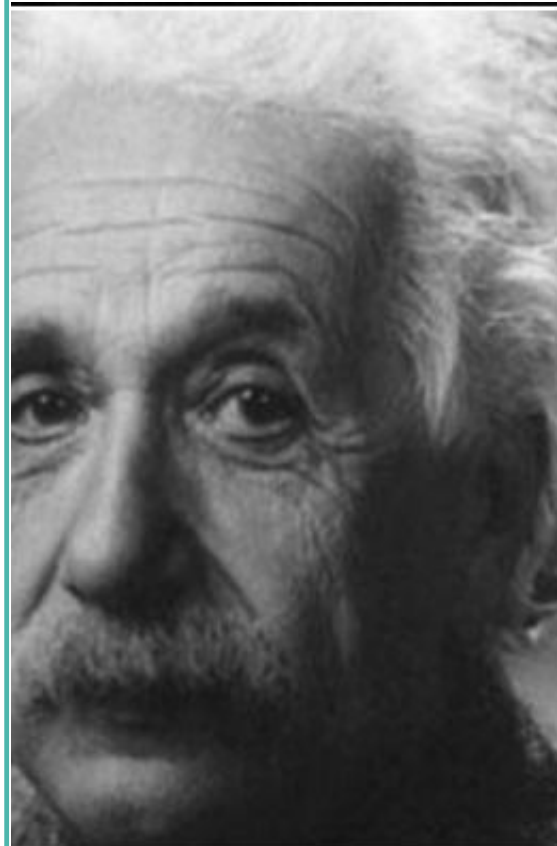
- “failing to meet expectations of a training program” (Steinert, 2008)
- Time consuming
- Require close supervision and additional teaching skills
- Faculty reaction of helplessness, frustration, avoidance
- Failing to recognize/remediate may allow subcompetent trainees to progress

(Boileau & Audetat, 2017)

What is Remediation?

“Additional teaching above and beyond the standard curriculum, individualized to the learner who without the additional teaching would not achieve the necessary skills for the profession”

(Guerrasio et al., 2014)



Teaching should be such that what is offered is perceived as a valuable gift and not as a hard duty.

— *Albert Einstein* —

AZ QUOTES

SOAP Approach for Struggling Learners (Boileau & Audetat, 2017)

1

Subjective

- Trust impressions
- Doubts = further obs/doc
- Goal is early identification (25%)

3

Assessment

- Make a diagnosis
- Address issues one at a time
- Cog difficulties most common

2

Objective

- Multiple sources
- Use milestones/EPAs
- Direct observation
- Informal discussion

4

Plan

- Pinpoint the issue
- Have a clear process in place
- Integrate into learner's regular activities

DDx of Educational Deficits (Guerrasio, 2018)

- Medical knowledge
- Clinical skills
- Clinical reasoning
- Time management and organization
- Professionalism
- Communication
- Interpersonal skills
- Practice-based learning and improvement
- Systems based practice
- Mental wellbeing

Identifying the Struggling Learner (Guerrasio, 2018)

1

**Direct
observation**

2

**Presentations
& rounds**

3

**Interview
the learner**

4

**Other
sources**

Direct Observation

- Ability to collect history and perform a physical exam
- Ability to collect additional patient information
- Efficiency and prioritizing tasks
- Responsiveness (to colleagues, nursing etc.)
- Interactions
- Ownership of pt care

Presentation & Rounds

- Integration of information
- Problem representation
- Formulation of DDx, assessment, and plan
- Ability to summarize the case
- Formulation of questions

Interview the Learner

- Review reading materials
- Explore social stressors, mental health
- Substance use/abuse
- Learner's perspective

Other Sources

- Chart review
- Arrival/departure time
- 360 evaluations
- Multiple choice exams
- Mini-clinical skills exam
- Brief structured clinical examinations
- Patient/procedure logs

Preceptor Responsibilities

- Give the learner feedback ASAP
- Review specific expectations
- Notify appropriate leaders
- Provide specific examples
- Do not contribute to the rumor mill
- Document deficits with examples
- Help identify the greatest deficit to address first

Todd is a new APP fellow in your program...

Your faculty already dread working with him. You receive the following evaluations from several different preceptors:

- *“Todd seems to be struggling with all aspects of practice.”*
- *“Todd routinely shows up late to rounds and conferences. When on rounds, he is unable to articulate information coherently about his patients.”*
- *“Todd is behind on basic skills and lacks basic knowledge.”*

Todd is a new APP fellow in your program...

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Next Steps...

- 1. Direct observation**
- 2. Presentations and rounds**
- 3. Interview the learner**
- 4. Other sources**

A person in a blue jacket stands on a large, dark rock formation, looking out over a vast, hazy mountain range. The sky is a pale, clear blue. The overall mood is contemplative and serene.

*Defeat is not the worst of failures.
Not to have tried is the true failure.*

George Edward Woodberry

Remediation Goals

- Target and fix the greatest deficit
- Develop the plan as a team
- Determine a step-by-step approach

(Guerrasio, 2018)

Step-by-Step Approach

1. Request documentation and examples
2. Only notify/discuss issue with those who need to know
3. Confirm concerns and collect more information as needed
4. Decide if this a trend/isolated problem needing intervention, OR only monitoring warranted at this time?
5. Make sure they receive direct feedback of the deficit

Ex: Step-by-Step Approach for Time Management

1. Meet with team (program director, preceptor, learner)
 - a. Review expectations
 - b. Obtain learner perspective/concerns
 - c. Teach data organization system including length of time for tasks
2. Model behavior for learner observation
3. Assist learner to identify/prioritize tasks
4. Provide reinforcing/corrective feedback and help strategize
5. Lighten the load if needed
6. Address stress management*

(Guerrasio, 2018)

Remediation Outcomes

- Criteria: Has the learner shown significant improvement *and* caught up to their level of training? Is the improvement sustainable?
- Avoid preceptors involved in the remediation to assess. They are biased. When possible, reassessment should occur with a blinded, neutral party.
- The reassessment options depend on the deficit.

Reassessment Options

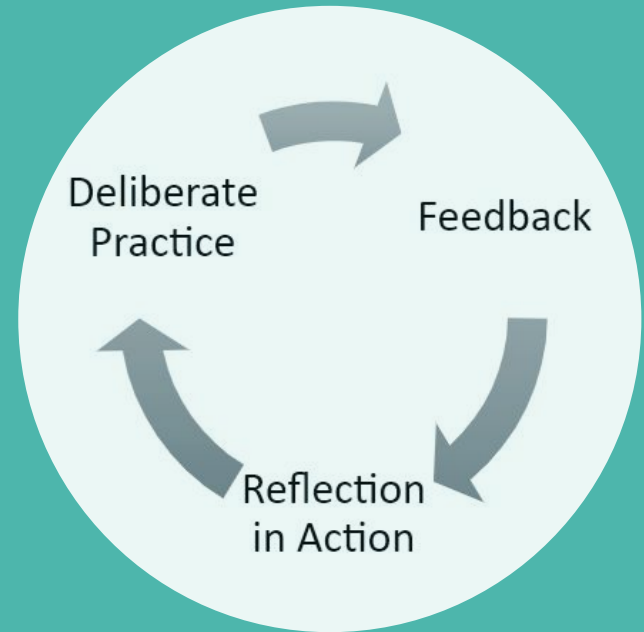
- Repeat block w/ new team
- Simulation exams
- Directly observed real patient encounters
- Multiple-choice exams
- Written or web-based assessments
- Chart reviews
- Supervisor observations
- Peer observations
- Patient and procedure logs
- Critique of journal articles
- Responses to self-assessment

"Critical reflection is the process of analyzing, questioning and reframing an experience in order to make an assessment for purposes of learning and/or improve practice."

(Aronson, 2011)

What is Deliberate Practice?

- K. Anders Ericsson PhD
- Acquisition of expertise
- Focuses on a deficient skill
- Direct observation
- Specific feedback
- Self-reflection



(Guerrasio, 2019)

Why Reflection?

- Develops critical thinking skills and clinical reasoning
- Failure to reflect leads to overconfidence and dx error
- Fosters professionalism
- Improved therapeutic relationship
- Necessary for effective use of feedback



"Reflection means letting future behavior be guided by a systematic and critical analysis of past actions and their consequences."

(Driessen, 2008)

Remediation Pearls

- Develop a system of evaluation for early identification
- Identify a remediation team
 - To diagnose the deficiency and develop a plan
- Develop faculty on how to identify/consult early
- Establish measurable outcomes to determine success
- Identify financial resources and institutional backing
- Establish policy & procedure before there's an issue

(Guerrasio, 2018)



“ Develop success from failures.

Discouragement and failure are two of the surest stepping stones to success. ”

- Dale Carnegie

References (Recommended Reading)

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