### **MENTOR'S MANUAL**

The mentoring experience is one of three aspects of the clerkship for third year students. They spend 21/2 weeks in ambulatory care and 21/2 weeks on the wards. The mentoring experience is designed to provide continuity to the students' experience; it is the only component that exists over the entire five weeks and therefore is a unique opportunity for **students** to build a close relationship with a faculty member. This is the most important function of this component.

The mentoring experience also provides a unique opportunity for us to observe the outpatient skills of our students first hand. In most settings students present cases and house staff and faculty evaluate all their skills based on the presentation. However, you have the opportunity to care for a patient with the student in the room. You can ask them to do part of the history or physical exam and give them feedback on these specific skills.

And finally, the mentoring experience is the only component where they can observe a physician who has an ongoing relationship with a family. Therefore, it lends itself to emphasizing preventive care and counseling.

In summary, your overall goals are:

- 1. To establish a trusting/close relationship with a student over five weeks.
- 2. To observe their clinical work and teach general clinical skills; give students feedback on their knowledge, clinical skills and interpersonal skills and attitudes based on direct observation and to evaluate them on these areas.
- 3. To emphasize their learning about preventive care, unique ambulatory issues, behavior and development and family dynamics.

# **LOGISTICS**

- 1. Set the schedule for the entire five weeks. Try, to avoid Tuesdays afternoons in general and mornings when they are based on the wards. They should spend one session (half day) a week with you while they are based in the inpatient service and 2-3 sessions with you while they are based in the ER/outpatient setting.
- 2. Let them know what their role will be with patients.
- 3. Make them keep a log of their patients and identify three learning objectives for each patient.
- 4. Assign them one topic/case per week to read about which they should be able to discuss with you. Please follow through on this discussion (at least for five minutes). Topics/cases can come from their list of objectives or from cases they have been given in their handouts.
- 5. Have them do a write up on a patient they have seen which includes history, physical, labs, and most importantly a short summary of the patient; a problem list and a discussion of the most pressing problem.

### **General Tips:**

### I. ORIENTATION

A. Make a schedule and go over your expectations.

### II. FEEDBACK

- A. Observe their work as much as possible and try to give them specific feedback on their
  - 1. knowledge base
  - 2. clinical skills and
  - 3. interpersonal skills.
- B. The attached evaluation sheets will clue you in to the skills they should be mastering. Fill out as many encounter forms as you can.
- C. Have a formal mid-clerkship feedback session with them at the end of the third week and at the end of the clerkship (for 5-10 minutes).

# III. EVALUATION

- A. Try to evaluate their knowledge skills and interpersonal skills using the sheets provided.
- B. Evaluating knowledge: Use their weekly discussions of a topic and their write-up to guide you. Also, if it is quiet, pick some of the attached cases to go over with them and get a sense for how much knowledge they have been accumulating.
- C. Clinical skills: Try to observe them doing some data gathering (history and physical exam) and assess their ability to synthesize data into coherent assessment of the patients' problems. Even if they are mostly shadowing you, make them present their assessment of what the patients' issues were and get a sense of their ability to recognize and prioritize issues.
- D. Interpersonal skills: Try to observe how they speak to parents and staff and how they listen to your feedback. These are <u>skills</u> that they must have. Feedback in this area is tricky; remember to emphasize specific behaviors as opposed to personality traits. For example, it is better to tell someone that they did not introduce themselves to the nurses than to say that they are "too quiet or rude".

### IV. TEACHING/LEARNING

A. Emphasize their role in looking things up. Ask questions as opposed to giving "mini-lectures."

- B. Give them one hypothetical case each session, i.e., what would you do with a 2-month-old whose mother refused vaccines.
- C. Go over a topic each week. Assign the topics for each week in advance (i.e., five topics on the first session, such as vaccines, cholesterol screening, obesity, attention deficit disorders, and birth control) to be spaced over five weeks. The student will give you a five minute presentation on the topic. Emphasize topics unique to your setting.

### Goals

- I.To build a trusting relationship with the medical student.
  - A. Set up a definite schedule during the first week (see logistics).
  - B. Go over their patient logs with them to see what their experiences have been in other areas.
  - C. Take the time to let them give you feedback on their overall experience. A few minutes at the end of each week would be fine.
- II. To observe some of their clinical work and teach them clinical skills.
  - A. Try to spend some time directly observing part of an interaction with a patient. Give them direct feedback <u>whenever</u> that happens.
  - B. Have them give you a summary of the patients' issues after each encounter. Make it short (about five sentences). It should mimic a summary you would give to a colleague. This is crucial for those of you who will have the students shadowing you.
  - C. Think out loud and ask them questions about how they would handle things.
  - D. Go over hypothetical cases with them (See attached list),
  - E. Evaluate their clinical encounters. The check list provided should be used to evaluate it and can be a springboard for feedback.
- III. To give student feedback and evaluate their knowledge, clinical skills, interpersonal skills, and attitudes.

### A. Knowledge:

- 1. Use the hypothetical cases to probe their level of knowledge. Tell them what they need to read about, i.e., where their gaps are.
- 2. Ask them about their knowledge of the cases you or they are seeing. Make a point of telling them they need to read about certain things instead of answering all of their questions.
- 3. Go over their logs. Ask them about their "Learning objectives."
- 4. Have them present one topic from the list of objectives (see attached) each week. Give them feedback on the depth of the content.

- B. Clinical skills:
  - 1. See goal II
- C. Interpersonal Skills and attitude:
  - 1. Observe interactions with patients and staff. Watch their specific behaviors; if they strike you as awkward or quiet or arrogant try to think of exactly what they do that makes them come off that way. (See attached article on feedback by Jack Ende).
  - 2. Have them give you a schedule and hold them accountable for timely completion of their tasks.
- IV. To stress preventive care, behavior, development, family dynamics and unique issues of ambulatory and community care.
  - A. Choose one of these each week as a theme for the students to work on; especially developmental and preventive care. For example, you might ask them to write down their observations about the development milestones of each patient they see in a particular session and go over it at the end of the day.

In order to meet these goals it is crucial that you orient the students to your specific expectations of them. Please fill out the encounter forms for one patient per week (see attached) Please fill out a mid clerkship and final evaluation form. Return to Jakki (fax # 305-3020).