



MICHIGAN STATE  
UNIVERSITY

## PRECEPTOR RECRUITING

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### 1. PROBLEMS

#### Need for More Preceptors

- Expansion of both medical schools at Michigan State University
- Growing number of medical schools in Michigan (almost doubled between 2010 and 2016)
- College of Human Medicine (CHM) is a community-based medical school with:
  - Two four-year campuses: East Lansing, Grand Rapids
  - Five additional clinical campuses: Southeast Michigan, Flint, Midland, Traverse City and Marquette in the Upper Peninsula
  - Just under 60 hospital partners with multitudes of ambulatory clinical sites around the state
  - Over 4,600 community faculty (volunteer)



Clinical and Community  
Campuses and Clinical Sites

#### Preceptors Recruited by Community Assistant Deans

- Each four-year and clinical campus is headed by a community assistant dean, who recruits volunteer faculty by:
  - Identifying and calling prospects
  - Traveling to meet with them and following up
  - Making sure the appointment paper work had been filled out and sent in
  - Training them and keeping track of their needs, requests and issues
- Community assistant deans do not have enough time to recruit preceptors and manage their other activities

In order to better manage our resources, a different strategy had to be tried. The approach we decided to try is called Academic Detailing.

### 2. APPROACH

#### Use of Academic Detailing at Michigan State University College of Human Medicine

- Purpose: Recruit and retain community-based volunteer physicians as preceptors
- Specialists hired for three largest clinical communities: Flint, Grand Rapids, and Lansing (Rural Community Health Program assistant director recruits for Midland and smaller communities farther north)

#### Specialist: Characteristics, Knowledge and Skills

- Professional level education
- Detail-oriented and organized
- Energetic and takes initiative
- Knowledge of medical community and how they function and communicate
- Train specialists on organization of medical school and community, and curriculum



#### Preceptor Recruitment Process

- Asks clerkship directors what preceptors are needed
- Looks for prospective preceptors in private practice, employed group practices, hospitals
- Contacts prospective preceptors to explain CHM and gauge interest
- If preceptors are interested, asks how they want to participate (how many students, when, for how long)
- Sends faculty appointment applications to HR and tells clerkship to schedule students with new preceptors

#### Preceptor Retention Process

- Regular contact with preceptors
- Routine communications to address any problems
- Keeps track of contact in a database
- Small appreciation gifts such as pens, t-shirts, cookies, apple baskets, pies, candy

#### Results of Use of Academic Detailing for Recruitment and Retention

- Critical needs for preceptors have been met
  - Specific specialties in specific communities
  - Additional preceptors required to implement new *Shared Discovery Curriculum*
- Preceptor relationships actively managed for timely identification of challenges

#### Advantages of Academic Detailing

- Community physicians can put a local face to the medical school
- Allows community assistant deans to prioritize activities that more directly impact the student experience
- Creates a regular and consistent visit schedule with community preceptors to address issues and provide follow-up
- Adds a "professional" element/commitment to recruiting and retaining preceptors rather than relying on relationships of the CAD
- Builds buy-in so community volunteer faculty are more likely to become involved

### 3. LESSONS LEARNED

#### Community Involvement

- Community should create own academic detailing model
- Community should interview specialist

#### Specialist Traits

- Hire specialist with professional level education who knows community, medical community or some related area
- Hire specialist who is motivated and takes initiative (so community assistant dean can be less involved in recruitment and retention)
- Non-clinicians can successfully recruit and retain preceptors

#### Specialist Needs

- Process for responding to issues identified during recruitment or retention
- Resources and training before starting
- Common contact management system
- Training materials standardized across College for specialists to take to preceptors
- Mentor within community to train them and introduce them to community partners and local physicians
- Defined training specialists can do (e.g., administrative and logistics problems)
- Strategies and budget for purchasing small gifts for preceptors while adhering to University restrictions on purchasing

### 4. SIGNIFICANCE

CHM's program of academic detailing for preceptor recruitment and retention is used in four different types of communities, providing evidence that it can be transferred to other settings. Specialists' skills are transferrable to other kinds of communities.

#### Description of Communities

##### Flint

- Three large hospital systems that do not require their physicians to teach
- Community assistant dean introduces specialist to community agencies
- Specialist searches for preceptors in hospitals and private practices
- In addition to recruiting preceptors, she also finds opportunities for medical students to volunteer or work in community agencies



##### Grand Rapids

- Primarily a two-hospital system and affiliated large group practices that require their physicians to teach
- For employed physician groups a faculty appointment form is included in the new hire packet
- Community assistant dean is involved in recruitment and includes specialist when presenting to physician and hospital leadership groups
- Largest community campus



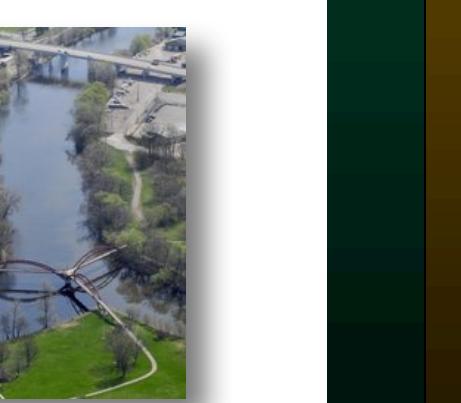
##### Lansing

- A large hospital system that does not require its physicians to participate in medical education but includes faculty appointment form in new hire packet
- Adjacent to home of Michigan State University
- Community assistant dean addresses preceptor concerns
- Specialist searches for preceptors in hospitals and private practices



##### Midland

- Small city with a rural medicine program
- Recruiting part of job of Rural Community Health Program assistant director
- Assistant director searches for preceptors in hospitals and private practices
- Not part of College-sponsored academic detailing but coordinator works in collaboration and participates in regular meetings with specialists to share materials and strategize with colleagues about how to improve efficiency and effectiveness
- Community assistant dean involved in faculty development



### REFERENCES

- Soumerai SB & Avorn J. Principles of educational outreach ('academic detailing') to improve clinical decision making. *JAMA* 1990; 263(4):549-56
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## Academic Detailing

- One-on-one outreach strategy where faculty/staff meet with individual physicians or group practices
- Originally used by pharmaceutical industry for marketing
- Used in medical schools for promoting use of evidence-based health care delivery, providing faculty development, and recruiting preceptors

## FACULTY DEVELOPMENT

Andrea Berry, MPA

### 1. PROBLEMS

#### Establishing the Groundwork for a New Medical School in Orlando Florida

##### UCFCOM

##### was established in an area where other schools already existed

- For LCME accreditation purposes, preceptors must be made aware of goals and objectives for each program for which they are supervising students
- The college wanted community faculty to feel part of the academic culture and community
- Early clinical experiences were novel for many community faculty
- Most preceptors supervised M3/M4 versus M1/M2 students
- There was confusion as to the type of clinical skill preparation incorporated into the preclinical curriculum
- Most preceptors assumed that preclinical students would only shadow them versus practicing their clinical skills

#### Vetting Preceptors for Early Clinical Experiences

##### UCFCOM

##### had little to no experience with physicians in the Orlando and Central Florida community

##### Very few community faculty (40-50) were involved in early curriculum development in preparation for LCME

##### Only 2-3 core faculty were recruited from the local community thus limiting the experience our faculty or administration had with community physicians

##### The college wanted to ensure positive learning environments for all students

#### Addressing the issues associated with preparing community faculty at a new medical school in a new community required a targeted approach. Academic Detailing was the best way to ensure faculty were prepared for their roles.

### 2. APPROACH

#### Use of Academic Detailing at University of Central Florida College of Medicine

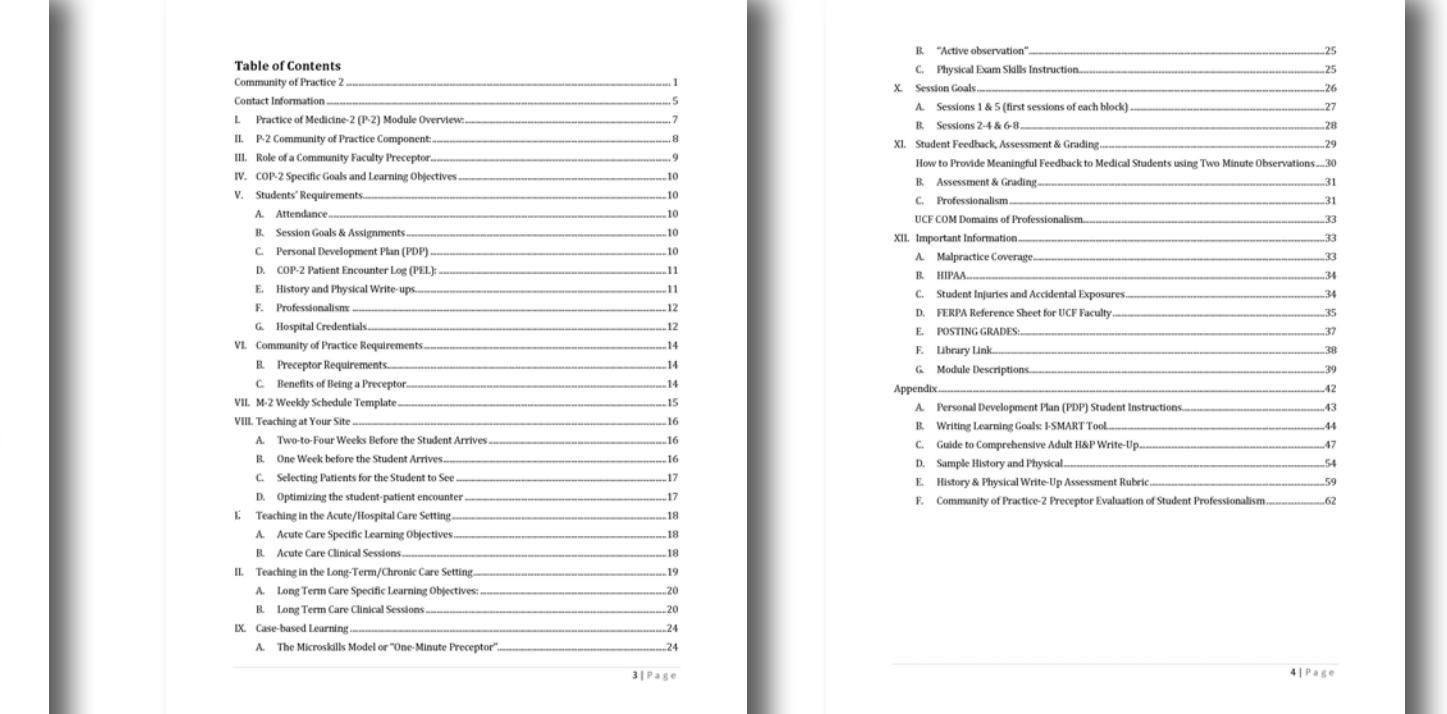
##### 2016-17

##### Preceptor Manual

Community of Practice 2

2016-17

Preceptor Manual



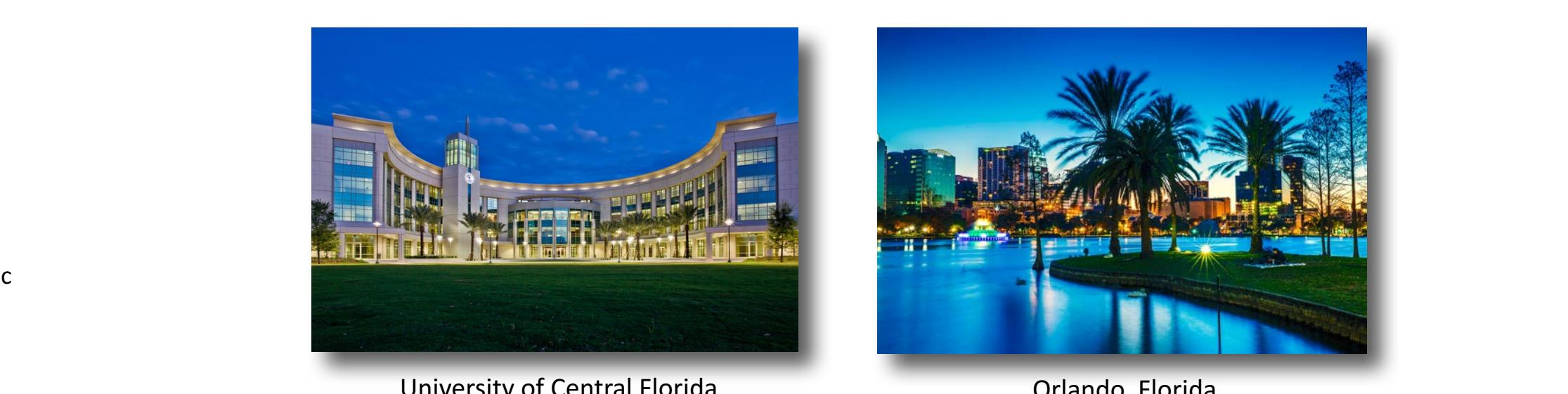
UCFCOM's use of academic detailing for Faculty Development has been utilized for 6 years in the Community of Practice 1 and 2 courses. Qualitative data from preceptors indicate a positive perception regarding the visit's ability to orient faculty to the course, clinical teaching techniques and serves to make the community faculty feel a part of the academic community. There have been discussions with other course and clerkship directors regarding the implementation of the model for the Faculty Development, Inquiry and Research Experience mentors and Clerkship preceptors thus making it transferrable to other courses and settings.

Academic detailing requires a significant investment of time and resources that may limit its feasibility. In response to the concerns regarding feasibility, Faculty Development has initiated online academic detailing visits utilizing skype business. Early indicators suggest that this model is perceived positively by preceptors.

### 5. ACKNOWLEDGEMENTS

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University of Central Florida  
College of Medicine

Orlando, Florida

### 4. SIGNIFICANCE