Developing a Learning Plan for Remediating Clinical Deficiency

GOAL: Draft a "contractual" learning plan between preceptor and student that addresses areas of assessed deficiency using some of the following guidelines.

CAVEATS: Recognize that there is probably no "one size fits all". For students with broad areas of weaknesses, try first to focus on the more fundamental and consequential issues, and introduce the remediation plan in manageable-sized "packages". Be sure to provide positive feedback along with the negative. Sites with multiple externs and/or residents may benefit by using these individuals as additional resources in remediating weak students.

- **Knowledge**
  - Demonstrates operational grasp of applied basic & clinical science, distinguishes normal from abnormal, and independently accesses appropriate resources for acquiring additional needed information

- Remediation pathway:
  - Identify global *vs* focal deficiency and direct remedial activity accordingly.
  - Select patient case-related issues for self-study.
  - Create list of learning issues for student to follow up on. Provide assignments.
  - Encourage self-reflection and independent goal setting for learning.
  - Help direct student to appropriate resources.
  - Help student identify and employ their most effective "learning channels".

- Measuring progress:
  - Set expectations and timelines for attaining competency in areas of weakness.
  - Establish how reassessment will occur (oral questioning, written or oral report, etc).
  - Review consequences of failing to meet expectations and deadline.

- **Technical Skills**
  - Performs tests accurately & efficiently, obtains reliable information, and is able to tailor procedures appropriately to the circumstances

- Remediation pathway:
  - Identify whether there is psycho-motor skill *vs* patient instruction/communication failure.

- Require the student to explain the test protocol or procedure, purpose or indication for performing a procedure, the type of information that is sought from a specific test element, and the expected norms.
- Encourage independent review and practice of procedures.
- Videotape student.
- Model proper procedure and technique.
- Help the student optimize flow of examination for improved efficiency.
- Hold student accountable for recognizing the reliability, validity and relevancy of test results (including the importance or contribution of the test results to the diagnosis).

- Measuring progress:
    - Set expectations and timelines for attaining competency in areas of weakness.
    - Establish how reassessment will occur (oral questioning, demonstration of skill and instructions to patient, explaining test results and their application to the case).
    - Review consequences of failing to meet expectations and deadline.

- **Case Construction** (Clinical Judgment)
    o Gathers relevant & meaningful history, uses good clinical judgment in test selection, applies examination observations appropriately to the construction of a complete case, and completes the case in a timely manner

- Remediation pathway:
    - Identify whether history taking is logical, sequential & complete.
        - Does the student expand questioning when appropriate and limit discussion to relevant topics?
        - Is the student able to develop a "storyline" that leads from the presenting patient complaints to a logical differential diagnosis list?
        - Is the history, chief complaint, and HPI content complete and sound for their contribution to the diagnosis and for insurance billing?
        - Has the student reviewed available prior patient records in preparation for the exam?
    - Observe the student's logic employed in history-taking.
    - Encourage clinical reasoning.
        - Require the student to verbalize (in a case presentation) all observations from the examination that were relevant in developing the diagnosis.
            o Is the student modifying the examination elements based upon an evolving differential diagnosis?

- Require the student to defend their selection of procedures performed or not performed.
  - Is the student able to individualize examination options to the patient?
  - Is the student able to assign pre- and post-test probabilities based upon what is known about this patient?
- Encourage self-reflection and questions in determining what additional tests or inquiry may have been useful in the case and why.
- Measuring progress:
  - Set expectations and timelines for attaining competency in areas of weakness.
  - Establish how reassessment will occur (oral questioning, demonstration or role play).
  - Review consequences of failing to meet expectations and deadline.

- **Differential Diagnosis**
  - Provides a logical and well-supported differential diagnosis based upon sound understanding of conditions and information obtained during the examination

- Remediation Pathway:
  - Force the student to commit early in the case (after history) and at the end of the case to a differential diagnosis list.
  - Determine if the failure is knowledge-based deficiency or poor information gathering (refer to assessment categories above), or clinical reasoning weakness (cannot put the pieces together or see the whole picture).
    - Is the student modifying the differential diagnosis throughout the exam based upon the evolving results of examination elements?
    - What information is missing that is needed in constructing an accurate differential diagnosis?
  - Require the student to defend their differential diagnosis choices and reasoning. Encourage the student to ask questions.
    - Is the student able to prioritize differentials?
  - Help the student generalize learning to other cases and situations.
    - Is this case similar to any other cases?
    - Is the student able to apply previous learning to future cases?
- Measuring progress:
  - Set expectations and timelines for attaining competency in areas of weakness.
  - Establish how reassessment will occur (oral questioning, case reports).
  - Review consequences of failing to meet expectations and deadline.

- **Management**
  - Provides a logical and safe treatment & management plan that, when appropriate, is evidence-based

- Remediation Pathway:
  - Require the student to defend the chosen treatment option and potential benefits, along with the potential negative consequences.
  - Students should be able to explain the likely untreated course of the condition.
  - Students should be able to offer alternative treatments, or at least a plan "B" for patient's failure to respond to plan "A".
  - Determine if incorrect choices are knowledge-based deficiencies (refer to "knowledge" above).
    - Can the student explain the pathophysiology of the condition being treated?
    - Does the student have a solid understanding of pharmaceutical, optical, surgical, or other therapeutic mechanism, side effects?
- Measuring progress:
  - Set expectations and timelines for attaining competency in areas of weakness.
  - Establish how reassessment will occur (oral questioning, written assignment, case report).
  - Review consequences of failing to meet expectations and deadline

- **Documentation**
  - Provides accurate, complete, and meaningful documentation that complies with industry standards

- Remediation Pathway:
  - Reinforce and model good record keeping.
  - Require the student to explain the value of good record keeping and consequences of poor record keeping.
    - Discuss ethical, insurance, professional liability, and health care issues related to record keeping.
- Measuring progress:
  - Set expectations and timelines for attaining competency in areas of weakness.
  - Establish how reassessment will occur (chart review).
  - Review consequences of failing to meet expectations and deadline