

## Lessons Learned from Online Discussion

### Leadership Challenge #2: You want to develop a medical student ambulatory care rotation

Participants offered a wide-ranging set of recommendations that can be summarized in the outline below:

#### A. Consult with your partners and plan carefully

1. Define and agree on specific goals and expectations of the students, internists, and office staff. Possible goals include:
  - highlight the richness of the longstanding doctor-patient-family-community relationships
  - demonstrate the satisfaction of practicing IM; doing well by doing good
  - inspire each student to think about IM as a career
2. Review your office space, time, schedule, patient load, and staff support to be sure you can implement your plan.
3. Check your liability coverage to be sure student-centered activity is covered.
4. Decide if it is desirable or feasible to have students accompany you while on-call or making rounds.
5. Determine your partners' training needs, particularly with regard to giving constructive feedback and evaluating progress.
6. Decide what you want to get out of it. For example, clinical faculty appointments at some point ?

#### B. Contact the Clerkship Director at the local medical school

1. Determine whether or not they already have an established curriculum.
2. Find out how many students would be involved, what level they are, and if and when they are available.
3. Discuss students' housing and transportation needs.
4. Ask what resources the school will provide.

#### C. Develop your curriculum and implementation plan (refer to curriculum development guidelines from CDIM)

1. Identify the specific knowledge and skills the students should learn. Consider the RIME model:
  - R = reporting
  - I = integration
  - M = managing
  - E = evaluating/educating
2. Become familiar with or develop feedback mechanisms and evaluation tools for your partners, the students, and possibly office staff and patients.
3. Customize available feedback and evaluation tools to your particular practice.
4. Develop strategies to minimize student fear and discomfort with evaluation and feedback mechanisms.
5. Invite Clerkship Director to your office to review the plans
6. Consider additional reading: *Teaching in Your Office: A Guide to Instructing Medical Students and Residents*, by Patrick C. Alguire, MD, FACP, *Community-Based Teaching*, by Susan L. Deutsch, MD, and John Noble, MD, MACP

**D. Implement the Plan**

1. Structure office procedures to optimize learning.
2. Use sandwich approach (good news/bad news/good news) to delivering feedback to students.
3. Encourage students to give honest and open feedback.
4. Ban all partners' complaints about reimbursement and paperwork.
5. Consider disallowing student time off during rotation.
6. Time all evaluations close to the activity being assessed.
7. Collate feedback and provide final summaries to Clerkship Director.