ABFM/STFM Precepting Performance Improvement Pilot Program

Questions for Final Report -- DRAFT

Number of medical students or residents who have been precepted to date by preceptors participating in this pilot:

- 1st year students:______
- 2nd year students: ____
- 3rd year students: ______
- 4th year students:_______
- Residents:______

Number of community preceptors (defined as teachers who practice off-campus and who do not have a primary appointment in your department or institution) who are currently participating or have completed their participation in this Precepting Performance Improvement Pilot Program:_______

Number of preceptors employed by your academic unit (department/program) who are currently participating or have completed their participation in this Precepting Performance Improvement Pilot Program:_______

Number of new preceptors you’ve been able to recruit or reengage due to this opportunity for ABFM performance improvement credit:_______

Taking into account the value of the performance improvement credit, rate the level of administrative burden to the academic unit (your department or program) in implementing this pilot:

____minor
____reasonable
____too much
Explain_____________________________________________

Taking into account the value of the performance improvement credit, rate your perception of the level of administrative burden to the preceptor in implementing this pilot:

____minor
____reasonable
____too much
Explain_____________________________________________

This program requires 180 1:1 contact hours between a preceptor and students. With regard to providing incentive for teaching and implementing a performance improvement activity, is that number of hours:

_____Not enough
_____About right
_____Too much
Explain_____________________________
In general, do you think preceptors involved in this project through your department/program improved their teaching performance/skills/knowledge?

__Yes
__No
Explain____________________________________________________

How many different performance improvement projects did you make available to your preceptors (count the number of different projects, not the number of preceptors who implemented them)?____________

Describe the performance improvement project you think worked the best:_____________________

What has been the biggest challenge of implementing this pilot project?____________

Do you plan to continue being a Sponsor of this ABFM performance improvement credit when this rolls out beyond the pilot project?

___Yes
___No
___Don’t know

What changes do you think ABFM should make to the program before rolling it out beyond the pilot?_____________________

Do you plan to present or publish the results of your participation in this Precepting Performance Improvement Pilot Program?
___Yes: Where?
___No

What advice do you have for departments and program who were not in the pilot project who will be Sponsors for the Precepting Performance Improvement Program in the future?____________

Any additional comments for ABFM, STFM, and/or future Sponsors?