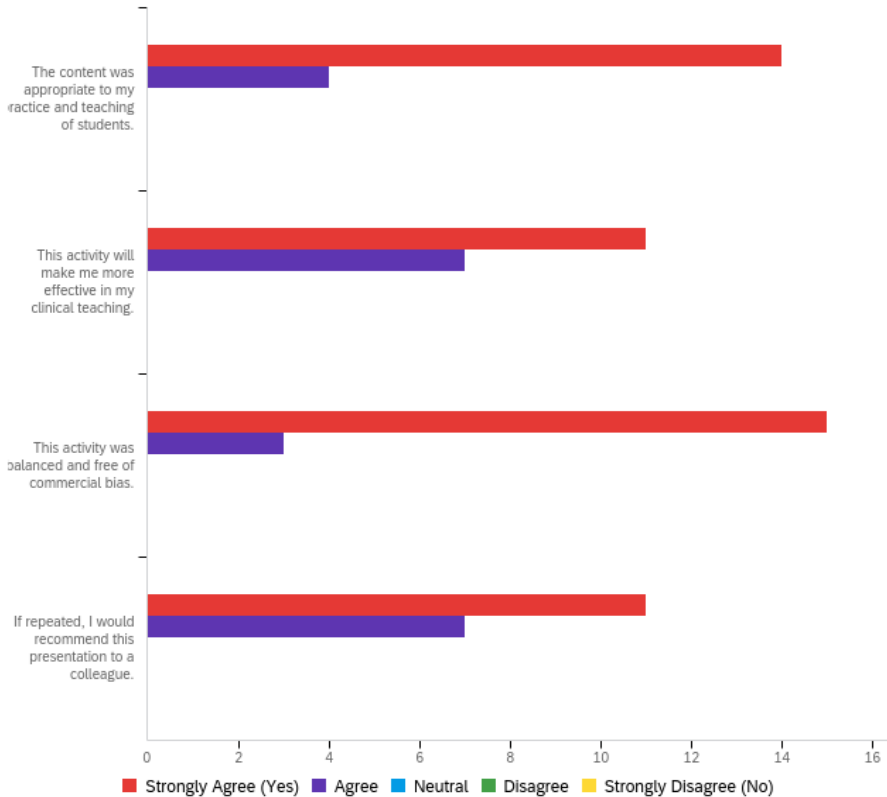


**DMU COM Clinical Affairs Educational Conference**  
**September 8<sup>th</sup>, 2020 • 12 – 4:30 pm**

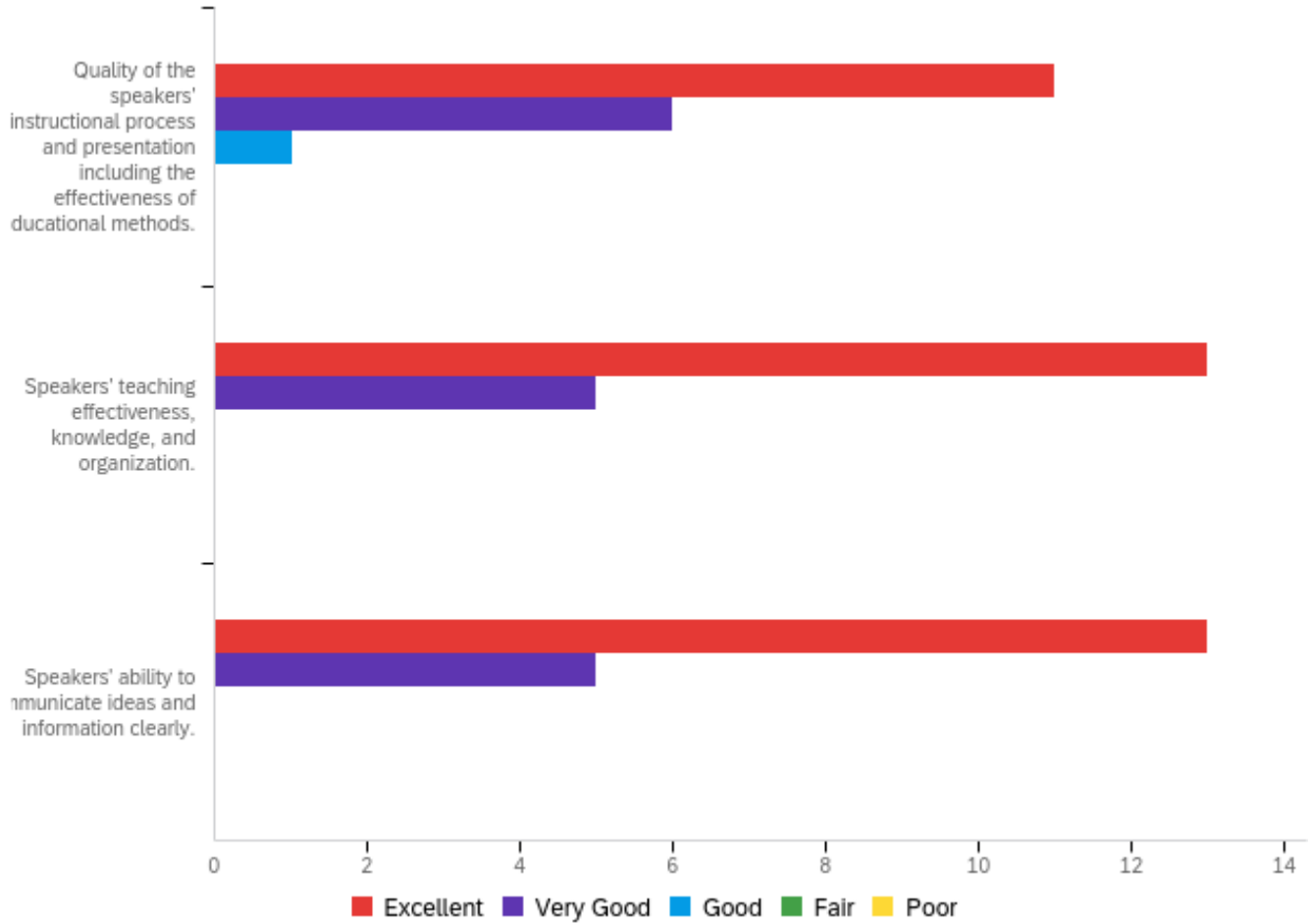
**EVALUATION SUMMARY**

**Q1 - Please indicate the extent to which you agree with the following statements:**



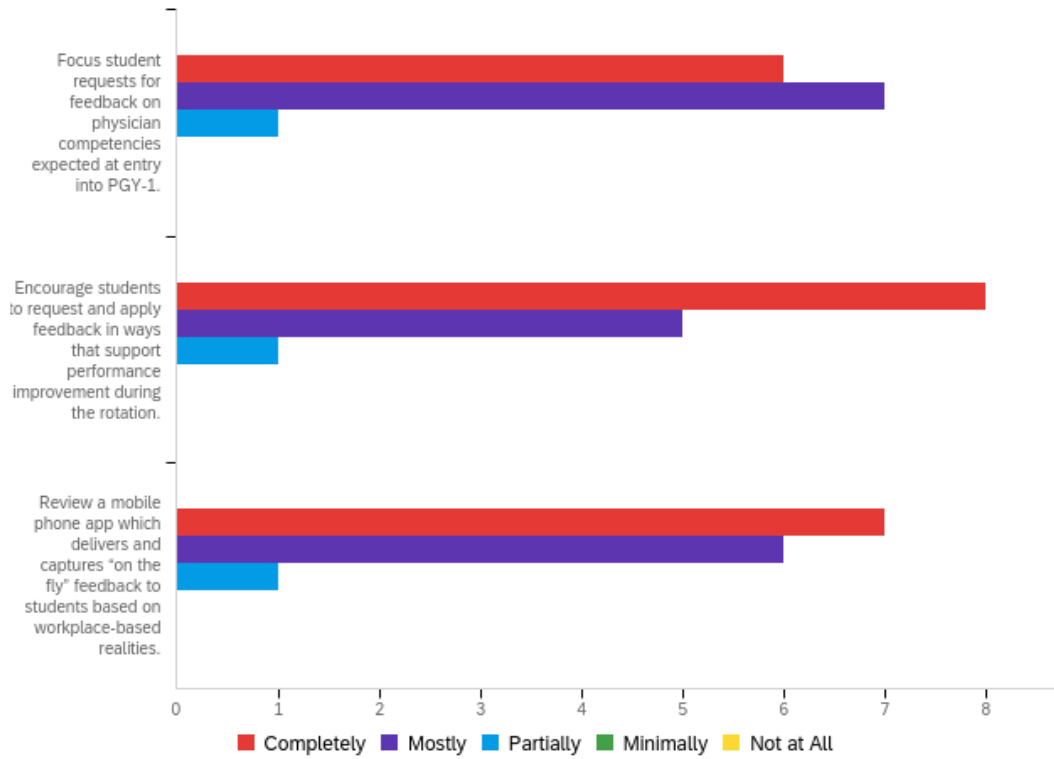
#	Question	Strongly Agree (Yes)	Agree	Neutral	Disagree	Strongly Disagree (No)	Total
1	The content was appropriate to my practice and teaching of students.	77.78% 14	22.22% 4	0.00% 0	0.00% 0	0.00% 0	18
2	This activity will make me more effective in my clinical teaching.	61.11% 11	38.89% 7	0.00% 0	0.00% 0	0.00% 0	18
3	This activity was balanced and free of commercial bias.	83.33% 15	16.67% 3	0.00% 0	0.00% 0	0.00% 0	18
4	If repeated, I would recommend this presentation to a colleague.	61.11% 11	38.89% 7	0.00% 0	0.00% 0	0.00% 0	18

**Q2 - Please rate the following:**



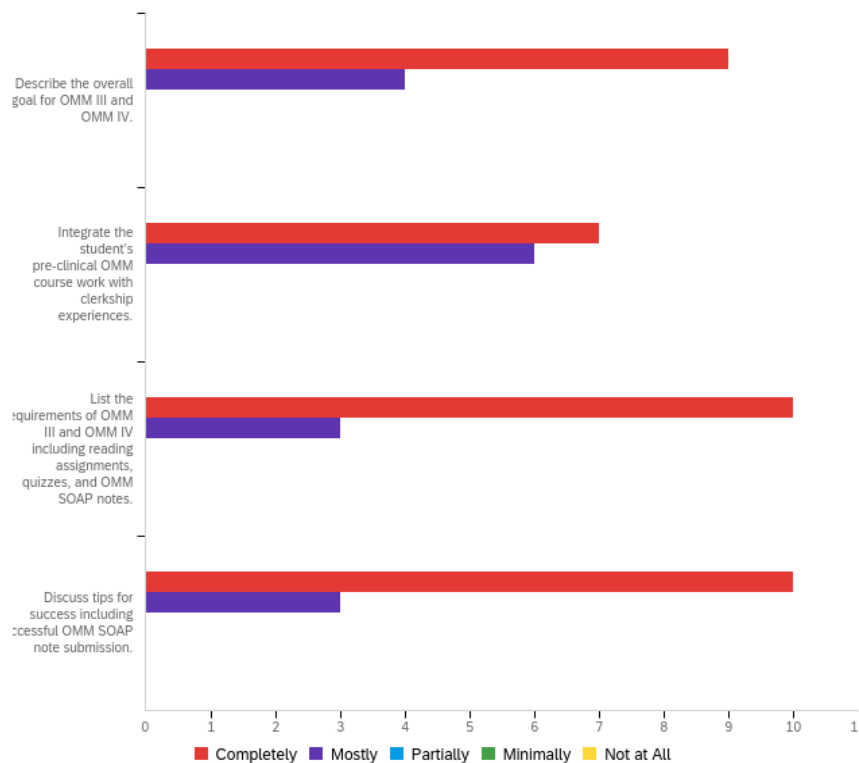
#	Question	Excellent		Very Good		Good		Fair		Poor		Total
1	Quality of the speakers' instructional process and presentation including the effectiveness of educational methods.	61.11%	11	33.33%	6	5.56%	1	0.00%	0	0.00%	0	18
2	Speakers' teaching effectiveness, knowledge, and organization.	72.22%	13	27.78%	5	0.00%	0	0.00%	0	0.00%	0	18
3	Speakers' ability to communicate ideas and information clearly.	72.22%	13	27.78%	5	0.00%	0	0.00%	0	0.00%	0	18

**Q3 - Related to Dr. Wimsatt's presentation, "Entrustable Professional Activities" did the activity meet your expectations in accomplishing the stated objectives?**



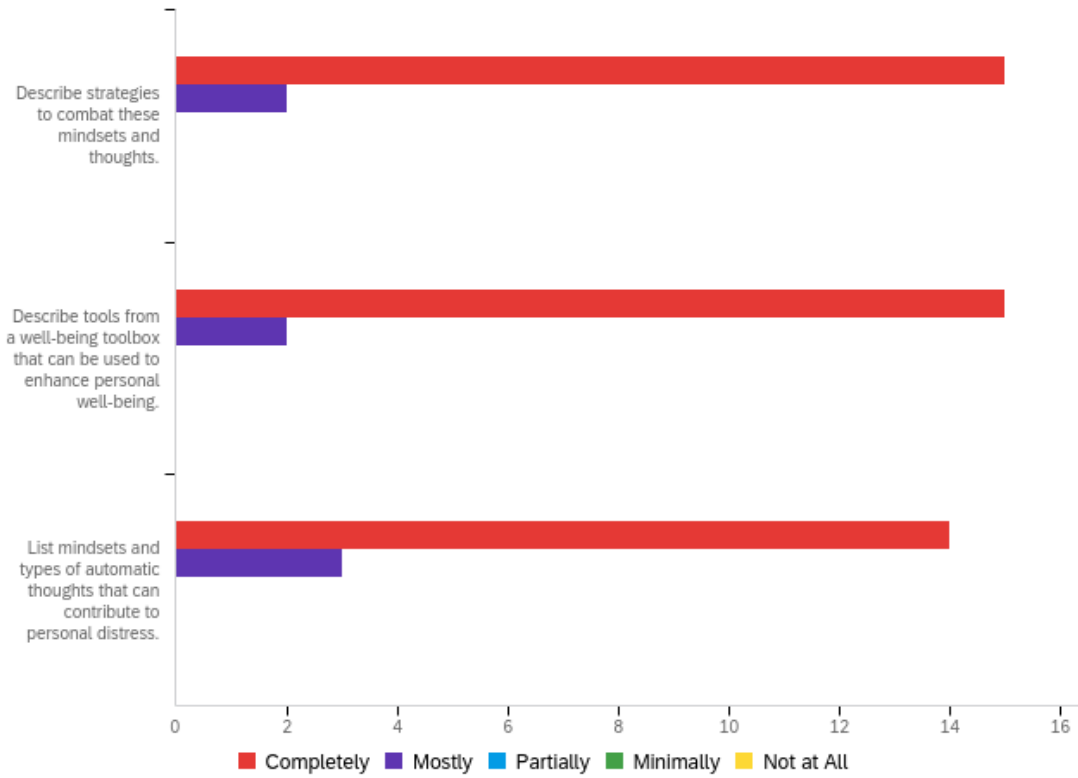
#	Question	Completely	Mostly	Partially	Minimally	Not at All	Total
1	Focus student requests for feedback on physician competencies expected at entry into PGY-1.	42.86% 6	50.00% 7	7.14% 1	0.00% 0	0.00% 0	14
2	Encourage students to request and apply feedback in ways that support performance improvement during the rotation.	57.14% 8	35.71% 5	7.14% 1	0.00% 0	0.00% 0	14
3	Review a mobile phone app which delivers and captures "on the fly" feedback to students based on workplace-based realities.	50.00% 7	42.86% 6	7.14% 1	0.00% 0	0.00% 0	14

**Q4 - Related to Dr. Lewis' presentation, "OMM Requirements During the Clinical Years" did the activity meet your expectations in accomplishing the stated objectives?**



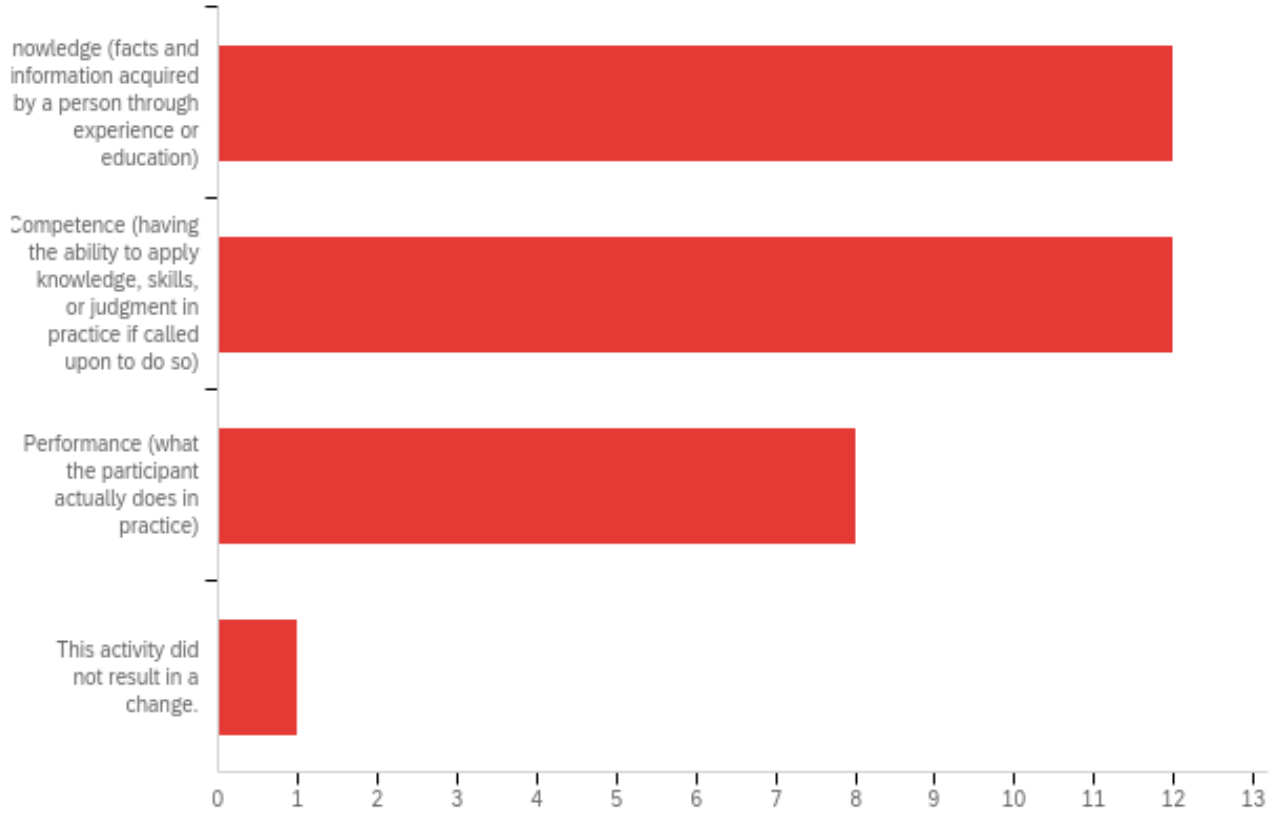
#	Question	Completely	Mostly	Partially	Minimally	Not at All	Total
1	Describe the overall goal for OMM III and OMM IV.	69.23% 9	30.77% 4	0.00% 0	0.00% 0	0.00% 0	13
2	Integrate the student's pre-clinical OMM course work with clerkship experiences.	53.85% 7	46.15% 6	0.00% 0	0.00% 0	0.00% 0	13
3	List the requirements of OMM III and OMM IV including reading assignments, quizzes, and OMM SOAP notes.	76.92% 10	23.08% 3	0.00% 0	0.00% 0	0.00% 0	13
4	Discuss tips for success including successful OMM SOAP note submission.	76.92% 10	23.08% 3	0.00% 0	0.00% 0	0.00% 0	13

**Q5 - Related to Dr. Slavin's presentation, "Learner and Faculty Well-Being: Finding a Path Forward" did the activity meet your expectations in accomplishing the stated objectives?**



#	Question	Completely	Mostly	Partially	Minimally	Not at All	Total					
1	Describe strategies to combat these mindsets and thoughts.	88.24%	15	11.76%	2	0.00%	0	0.00%	0	0.00%	0	17
2	Describe tools from a well-being toolbox that can be used to enhance personal well-being.	88.24%	15	11.76%	2	0.00%	0	0.00%	0	0.00%	0	17
3	List mindsets and types of automatic thoughts that can contribute to personal distress.	82.35%	14	17.65%	3	0.00%	0	0.00%	0	0.00%	0	17

**Q6 - This educational activity will result in a change in my (mark all that apply):**



#	Answer	%	Count
1	Knowledge (facts and information acquired by a person through experience or education)	36.36%	12
2	Competence (having the ability to apply knowledge, skills, or judgment in practice if called upon to do so)	36.36%	12
3	Performance (what the participant actually does in practice)	24.24%	8
6	This activity did not result in a change.	3.03%	1
	Total	100%	33

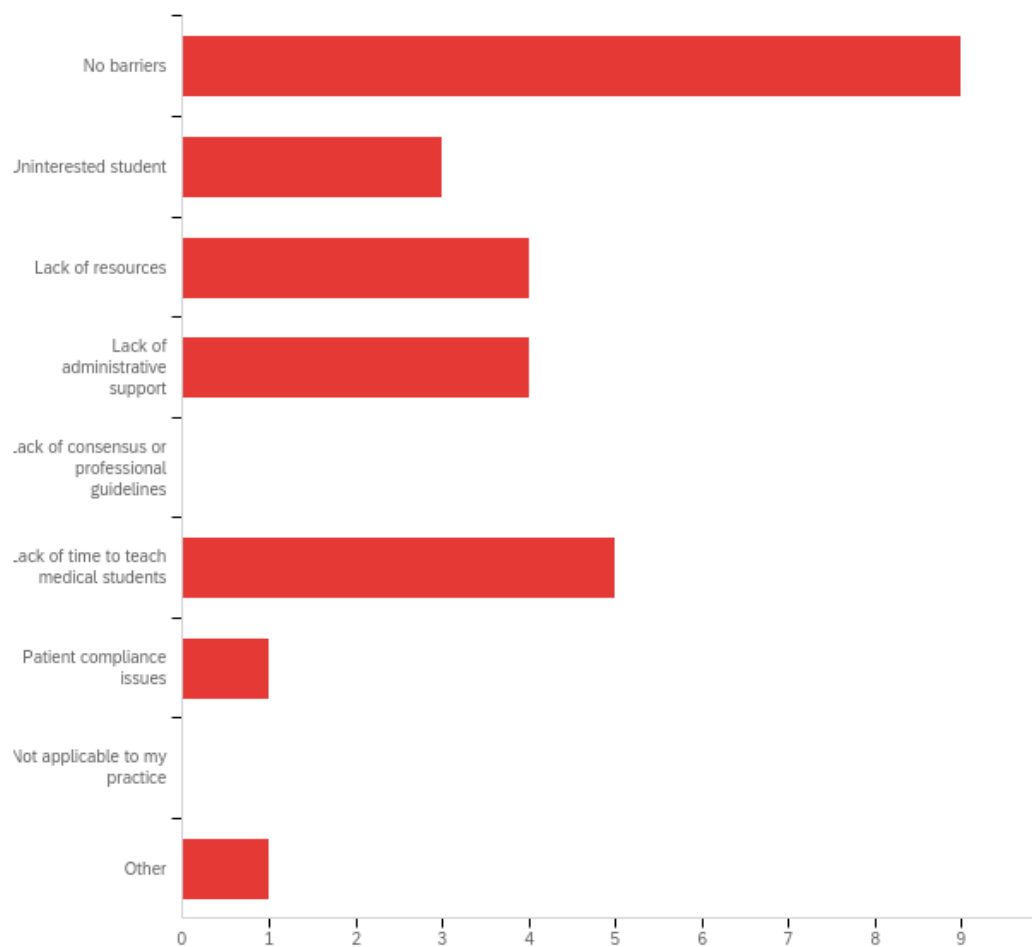
**Q7 - Please describe any 'pearls' or takeaway messages.**

- Be sensitive to mindsets students may have about themselves.
- Help them to improve in communication and gain confidence in their patient care.
- Burnout spectrum and keys to identifying "thought traps" that can spark discussion/sharing of experiences across medical education spectrum/medical practice to better support learners that I interact with in my practice.
- Love all the tips and tools that the speakers went over.
- We need more CME like this!
- The importance of students having the knowledge and cognitive tools early in their training (didactic and clinical) to avoid negative consequences later in their education and clinical/health care work and personal lives.
- Familiarity with EAP's.
- The Stanford duck.
- I'm not the exception but this is what we all do.
- Outcomes can be improved just by recognizing and naming my negative thought processes.
- When canaries in the coal mine start dying we don't teach them yoga!
- The biggest takeaway for me was the reframe of thinking about well-being/burn-out on a continuum vs. as a binary concept.

**Q8 - Please note any changes or improvements in your practice that you plan to make as a result of attend**

- Be more sensitive to each individual student's needs.
- Will discuss thought errors and work on "depersonalizing" mistakes so that my feedback is more objective and tangible 'you took a thorough history.'
- I am going to send some of the info to our wellness coordinator.
- Focus on EAP's and helping the students be successful in these areas.
- I've long been open with trainees about my own imposter syndrome and related processes; now I can add better strategies to deal with these and that research shows better outcomes.
- I'm looking into the books mentioned and revamping the orientation process for new Residents in regard to teaching about resiliency, well-being, and challenges in residency.
- Solicit feedback and set expectations.
- Understand their cognitive paradigms.

**Q9 - Please identify any barriers that you perceive in implementing these changes. Mark all that apply.**



#	Answer	%	Count
1	No barriers	33.33%	9
3	Uninterested student	11.11%	3
5	Lack of resources	14.81%	4
6	Lack of administrative support	14.81%	4
8	Lack of consensus or professional guidelines	0.00%	0
9	Lack of time to teach medical students	18.52%	5
10	Patient compliance issues	3.70%	1
11	Not applicable to my practice	0.00%	0
12	Other	3.70%	1
	Total	100%	27



**Q10 - How will you address the identified barriers in order to implement change?**

- Take small steps when able to make changes.
- Try to be more motivated myself to promote more interest in patient care.
- Breakdown the barrier teacher/ student to allow for a more student led approach to patient care.
- Well- hopefully find time to do things myself.
- I am not currently engaged in student clinical supervision but can implement in my student advising and other teaching opportunities.

**Q11 - Do you have any unanswered questions or additional comments?**

- I would like bibliography of the tools that Dr. Slavin references as well as copies of the tools.
- I look forward to the email with the forms/surveys.
- I miss the days of getting handouts with slides as this was one session I'd review several times over the next few years.
- No, I especially liked Dr. Slavin's presentation.

**Q12 - What topics would you like to see in upcoming preceptor development activities?**

- Moral injury vs burnout; yes, I personally DO need to work on my own negativities, etc., but how can I get the system around me to be more humane to students, residents, and faculty physicians?
- How to work with Admin in regard to increasing and ensuring their understanding of the Residency Clinic as a unique entity within the bigger system, resulting in better support in all areas.