

Precepting Tips and Tricks: Incorporating Learners into Workflow

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A pharmacist is a trusted health care professional who wears many hats, including, but not limited to, leader and teacher. As an educator, many pharmacists teach several different levels of learners including Introductory Pharmacy Practice Experiences (IPPEs), Advanced Pharmacy Practice Experiences (APPEs), Post Graduate Year 1 (PGY1) residents, and Post Graduate Year 2 (PGY2) residents. Often, the teaching component can be an added duty to an already overfilled schedule.

Purpose: Provide pharmacy preceptors ideas on ways to effectively and efficiently incorporate learners into the workflow. The following table will include ideas on how to incorporate learners into a preceptor's busy day to ensure a continued valuable learning experience, while providing preceptors with valuable time.

Co-precepting (precepting team of two to no more than three preceptors)	
- Ideal for - Multiple internal medicine services (ortho vs medical vs post-abdominal surgery, etc.) have the learner rotate through two or three of them during their rotation. - Specialty ambulatory precepting team where the resident rotates through several specialty clinics during their experience - Primary care clinics that serve different populations (example: urban vs rural) - Combining similar learning experiences where the area may only have one preceptor (example: Long Term Care and Home Care) - Faculty members with split appointments (example: learner spends half the week in clinic/on service with one faculty member during their clinic/service time and the other half with a second faculty member during their clinic/service time) - New preceptors wanting to gradually gain precepting experience	
Potential Benefits - Allows resident to maximize exposure to different services that may not be robust enough for individual experience / rotation or allows learner to experience similar service with a variety of populations - Allows preceptors to share the precepting load while still having the 'primary' preceptor to oversee the entire experience. - Share topic discussion burden (consider having each preceptor be an "expert" on one topic discussion that they lead every time with learners – this allows for the preceptor to only oversee updating one topic discussion annually or on a rolling basis)	Potential Limitations/Risks - Need for good communication between preceptors - Varying expectations of preceptors creating confusion for the learner - Need to verify meeting requirements of College of Pharmacy rotation requirements - One preceptor will need to serve as the preceptor of record which may create an unequal preceptor workload

Project Time

Project time = dedicated time for students to work independently, giving preceptors time to work on other tasks (patient care tasks, administrative duties, precepting responsibilities, etc.)

- Project time suggestions for students
 - o Education materials
 - o Research / early stages of quality improvement (QI) projects
 - o Formal presentation
 - o Drug information questions / responses
 - o Prepare for or follow-up on patient care activities (example: work up patients, finish progress notes)
 - o Participation in educational activities with learners (attend Journal Clubs, other student presentations, resident-led group topic discussions, etc.)
- Project time suggestion for residents, in addition to the student activities above
 - o Pre-rounding with student to prepare to lead rounds
 - o Create schedule for upcoming learner (PGY1 for student, PGY2 for student or PGY1)
 - o Feedback or evaluations

Resource: ASHP's busy day toolkit (<https://www.ashp.org/pharmacy-practice/resource-centers/preceptor-toolkit/student-specific-preceptors-resources/rotation-resources>)

Potential Benefits

- Giving learners project time eases their stress while also giving them time to contribute something to the department / service line / clinic / etc.
- Preceptors can use this time to catch up/complete tasks that are challenging to incorporate a student into

Potential Limitations/Risks

- Need to set clear expectations for students so time is best utilized
- May decrease opportunities for direct patient care if too much project time is incorporated
- Learner may perceive tasks assigned to be “busy work” – make sure to explain how their deliverables will be utilized

Incorporating the learner into pre-existing projects

Does the preceptor actively have a research project occurring that the learner could assist with?

- Data collection
- Give the learner the data set to have the opportunity to analyze the data
- Research journals that the project could be published in
- Review of Order Sets
- Help to draft a case report for publication

Potential Benefits

Potential Limitations/Risks

- Student gains experience in roles of the pharmacist outside of direct patient care
- May assist the preceptor in faster completion of projects
- May provide a publication opportunity for students

- Can be time consuming to onboard a student to a project and provide feedback on their work, may have limited benefit depending on the project given short duration of rotation

Leverage the Learner

- Allowing PGY1 to run service when has demonstrated competency, then preceptor has devoted time with APPE
- Allowing PGY2 to run service and precept, allowing preceptor time for indirect patient care needs
- Resident-led:
 - o Journal club / topic discussion
 - o New guidelines pertinent to your practice
 - o New trial publications pertinent to your practice
 - o Publications or topics you need to review for other projects or tasks
- Let resident know that they will be teaching preceptor (not busy work)

Potential Benefits

- Helps preceptor stay up to date
- Allows resident to take ownership of their own learning

Potential Limitations/Risks

- Need to set expectations for the resident, may require guidance if early in the residency year

Time Management in Precepting

- Eisenhower Matrix
 - o Help to prioritize tasks; time is a resource and you need to budget accordingly
 - o Help to determine if you 'teach on the spot' or defer teaching until later (end of day debrief, Friday feedback, etc.)
- Manage interruptions strategically
- Set daily goals with learner at the beginning of each day - divide tasks for the day (patient workup before rounds, clinic visits, consults, in-baskets, etc.) and discuss any learning activities scheduled for the day (topic discussion, journal club, presentations, etc.)
- Block teaching times (and communicate with learner)
- Three to four 10-minute scheduled check-ins instead of constant disruptions throughout the day
- Learners should use '3-before-me' rule, where they use three resources before asking preceptor

Need a check in to see how your department is doing with precepting? Use this ASHP resource to help incorporate evidence-based precepting strategies into your practice site (<https://www.ashp.org/-/media/assets/pharmacy-practice/resource-centers/preceptor-toolkit/Docs/The-Choice-Is-Yours-Choose-Your-Own-Adventure-Approach-to-Precepting-Dilemmas.pdf>)

Potential Benefits

- Allows for dedicated learner and preceptor work time
- Teaches learners ways to triage their own questions before asking for help

Potential Limitations/Risks

- May need to provide learner with list of activities to work on if they complete daily tasks early (example: fill the downtime rather than waiting for scheduled preceptor check-in)
- May need to provide guidance to the learner on appropriate times to interrupt the preceptor (example: urgent patient care issue) rather than waiting for scheduled check in

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2. Eisenhower Matrix. (2026, April 25) <https://www.eisenhower.me/eisenhower-matrix/>

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