

Efficacy of Designated Family Medicine Preceptors to Enable Students to Meet Program-Defined Learning Outcomes in Pediatrics, Women's Health, and Behavioral Health

Bailey Ambrosier,* Linda Pywell,* Christopher Thiel*

Faculty: LaDonna Hale

Department of Physician Assistant, College of Health Professions

INTRODUCTION: The WSU physician assistant (PA) program is a 26-month Master's program with 12 months of supervised clinical practice experiences. There is a national shortage of training sites particularly in pediatric, women's health, and behavioral health specialties resulting in widespread program citations from the national accrediting body. In Sep 2019, the requirement that preceptors be specialty board certified was changed to "preceptors who enable students to meet program-defined learning outcomes" (LOs), allowing some flexibility. Analyzing data from the graduating classes of 2017 - 2019, we identified those family medicine (FM) preceptors who best enable students to meet program-defined LOs within the shortage areas.

PURPOSE: Evaluate the effectiveness of designated FM preceptors to enable students to meet program-defined LOs within the shortage areas; and describe criteria to identify those FM preceptors.

METHODS: This retrospective study analyzed data from the WSU PA graduating class of 2021 (n=44). Outcomes for students assigned traditional preceptors (board certified specialty preceptors) vs. designated FM preceptors were compared including: nine different end-of-rotation assessments, four summative end-of-program assessments (including the national board exam), and student evaluations of preceptor.

RESULTS: There were no statistically significant differences in any of the end-of-rotation or end-of-program assessments for pediatrics, women's health, or behavioral health and no differences in student evaluations of preceptor for pediatrics or behavioral health. Two of the nine women's health student evaluation of preceptor questions favored the FM preceptors regarding opportunities to independently evaluate patients (3.5 vs. 4.9, $p < .001$) and opportunities to develop clinical reasoning and problem-solving (4.4 vs. 4.9, $p = .034$), 5-point Likert scale.

CONCLUSION: The lack of statistically significant differences detected indicates educational equivalency. Developing data-driven criteria to identify FM preceptors who enable students to meet LOs within preceptor shortage areas may be an effective way for PA programs to demonstrate compliance with accreditation standards while maintaining quality clinical educational experiences.