Effective Student Evaluations: What to Do and How to Say It

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Disclosure

- I have no financial relationship with pharmaceutical companies, biomedical device manufacturers, or distributors, or other whose products or services may be considered related to the subject matter of my presentation.
Objectives

• Recognize the benefits of completing student evaluations
• Explain how to prepare for a student evaluation
• Describe how to conduct an honest and constructive evaluation
• Identify common pitfalls to avoid during the evaluation
Why do we dread giving student evaluations?

Study finds that basically every single person hates performance reviews

The Problems with Evaluations

According to Preceptors…

• Take too long to write
• Students only want good news
• Doesn’t improve performance

Pharmacy Students say…

• Never get one or it’s late
• All checkmarks and no examples
• No guidance about what to do differently
The Purpose of Performance Evaluations

- GIVING Feedback
- RECEIVING Feedback

Engagement Regarding performance & development
Evaluations

• When done correctly
  – Better rotation performance
  – Higher student and team morale
  – Positive influence at your workplace

• Evaluating the quality of the student’s work
  – Discussing your assessment
  – Listening to the student’s assessment

• Completed
  – Mid-point
  – End of the rotation
  – Follow up as needed
Mid-Point Evaluation: It’s Critical

- Can improve rotation
  - Performance
  - Experience
- Includes
  - Student self assessment
  - Preceptor assessment
    - What does the student do well?
    - Where are there opportunities to improve?
  - High achievers
    - Extra topics or assignments that could be completed?
  - Low performers
    - Opportunity to document concerns
- Customize the rotation for the student
  - Discuss the rotation
    - Do they need additional resources, time etc.?
Before the Rotation...

• What will you evaluate
  – What are your expectations?
    • What should the student be “doing” while on your rotation
  – What is on your syllabus?
    • You may be surprised
  – Applied competencies are broad in scope
    • What specific activities will you associate with these competencies?
  – Be transparent
    • Share your expectations as well as what will be evaluated
    • First day of the rotation
  – Customize the experience
    • Does the student have their own goals for the rotation?
    • Should it be added to the evaluation?
Rotation Competencies

Retrieve, analyze, and interpret the professional, lay, and scientific literature to provide drug information to patients, their families, and other involved health care providers.

Maintain awareness of evidence-based information resources, and use principles of evidence-based medicine to assess information needs, formulate focused queries, acquire the best available evidence, evaluate the evidence and communicate it to the appropriate provider.

Provide information regarding disease prevention and detection.
Provide information regarding prescription medications and products.
Provide information regarding non-prescription and herbal products.
Identifying Activities To Evaluate

• Maintain awareness of evidence-based information resources, and use principles of evidence based medicine….
  – When asked a drug information question, ensure the student understands the question, selects the appropriate references, formulates a search strategy that will answer their question, summarize the data and give a recommendation

• Provide information regarding prescription and non-prescription medications
  – Provide medication information to patients and care givers that describes how/when to take their medications, accurate discussion of side effects described at an appropriate level
Identifying Activities To Evaluate

• Direct patient care: learn to manage complicated patients who have multiple health issues with a focus on supportive care
  – Learn how to collect and organize data
  – Apply the patient information to problem list
  – Set appropriate therapeutic goals
  – Assess patient progress towards their goals
  – Redesign goals as necessary
  – Summarize the patient information for the preceptor
Discuss the Role of the Student

• Medical team and staff
  – Pharmacists, nurses, technicians, physicians, mid-level providers

• Benefits
  – Consistent expectations
  – Students understand accountabilities
  – Additional source for obtaining feedback
Preparing for an Evaluation: Gathering Information

- Direct observation
- Keep notes
  - Request informal feedback from staff
    - Specify what topics to cover
- Give students regular feedback
  - Spontaneous
  - Scheduled
  - Develops trust, cooperation
  - Prevents surprises during the evaluation
Student Self-evaluation

• Evaluation process
  – Not a passive recipient
  – Advanced notice
  – Time to consider their own performance

• Expectations
  – Areas of strength and uncertainty
  – Develop goals for the rotation/future rotation
  – Feedback about the rotation
    • What do they enjoy the most?
    • What would they like to see changed?
Evaluating Student Performance

- Review your data and notes
  - Has the student excelled, met expectations?
  - Activities/areas for improvement?
- Assess results
  - Focus on behaviors/activities
    - Go back to your syllabus
  - Don’t “grade” personalities
    - Most students are “nice people”
  - Use examples to support assessment
Evaluating Performance: Other Attributes to Consider

- **Initiative**
  - Demonstrate ambition?
- **Ability to ask questions**
- **Cooperation and teamwork**
- **Communication skills**
  - Work effectively with professionals and patients?
- **Focus**
  - Prioritize job duties?

- **Productivity**
  - Meet deadlines?
- **Knowledge**
- **Reliability**
  - Consistently demonstrate dependability and competence?
- **Improvement**
  - Have you seen improvement in areas since the mid-point evaluation?
The Preceptor’s Role and Student Performance

• Have you provided the student with…
  – Adequate training, resources?
  – Clear expectations and detailed directions?
  – Set realistic deadlines and established clear priorities?
  – Tried to motivate?
  – Been too hands-off, providing insufficient feedback?
  – Been too involved?
    • Not allowing the student a chance to succeed independently
Document your Assessment

• Don’t be constrained by a form
  – Adapt it and use narrative to tell your story
  – Observations, comments and examples are more useful than numerical ratings
    • Include attachments if easier
  – Associate conclusions to data
    • Number of patient counseling episodes
    • Number of drug information questions answered
Document your Assessment

• Look back at the assigned activities
  – How did they perform?
    • Include details on what you observed
  – The impact on your team

• Neutral facts
  – Avoid judgments

• Let’s practice
  – “Theo doesn’t care about his patients, he won’t take
time to tell them about their medications ”
    • Characterizes Theo, rather than his behavior
  – “Theo is great with patients!”
    • Does not tell Theo what he does well
  – Suggestions?
Watch Out For…

- **The Halo Effect**: Allowing one good aspect of a person’s character or performance to influence the entire evaluation.
- **The Horns Effect**: Allowing one negative aspect of a person’s character or performance to influence the entire evaluation.
- **Partial Rating**: Basing the rating on the most recent period of time, not the total evaluation period.
- **Similar to me**: Evaluating more favorably those who are similar to the rater.
- **Favoritism**: Evaluating friends higher than other students.
Watch Out For…

- Evaluation inflation
  - Student being evaluated
    - Loss of full potential, professional development, motivation
  - Other students on rotation
    - Communicates that people are not held fully accountable or that there is preferential treatment
  - Preceptor
    - Effectiveness, management decisions
  - Overall performance of work group
Conducting the Meeting: The Preparation

• Schedule it in advance
  – First day of the rotation

• Choose a convenient time
  – Avoid high volume times, lunch time

• Neutral location
  – Private and free from distractions
    • Your office?

• Content
  – Discussed at the beginning of the rotation
Conducting the Meeting: Set the Right Tone

- Establish rapport
  - Limit distractions: cell phones, computer notifications

- Discuss the purpose of the meeting
  - How the student can best meet goals

- Student self-appraisal
  - Active listening
  - Paraphrase

- Taking notes
  - Important during the mid-point
  - Record: key points and phrases, points of disagreement
  - Goals for remainder of rotation
Conducting the Meeting: Student Performance

• Frame feedback to reach goal-related outcomes
  – “You need to improve your pharmacokinetic skills”
  – “Theo, an important part of this rotation is to provide pharmacokinetic consults. I would like you to become more familiar/comfortable with the calculations, providing a dosing recommendation and monitoring recommendations”

• Include what modifications are to be made to achieve these goals
  – “To give you more exposure to pharmacokinetic consults each of our pharmacists will call you when they are consulted for aminoglycosides or vancomycin”
Conducting the Meeting: Student Performance

• Focus on the performance, not the student
  – “You don’t seem dedicated to learning about vancomycin PK”
  – Character attacks – offers no ideas for change, puts the student on the defensive

• Neutral language
  – Do not express judgment, anger, contempt
  – “You do not participate in our group discussions”
  – I have noticed you have been quiet during our group discussions, why is that?”

• Be selective
  – Don’t recite every shortcoming
Recognizing Strong Performance

- Concentrate on their strengths
  - Celebrate the successes

- Discuss specific examples
  - Highlight the most noteworthy
  - “Theo took extra time to help a patient with many chronic medications to develop a medication plan and taught her how to fill her pill box. This patient appreciated his help and he demonstrated a commitment to helping his patients”

- Areas for improvements
  - Likely acknowledge themselves
  - “What would you like to work on for the rest of this rotation or in your next rotation”? 
  - “What activities would you like to continue to practice?”
Addressing Inadequate Performance

• Identify early in the rotation
  – Knowing your own expectations
  – Immediate informal feedback
  – Be specific
    • Use activities and expectations discussed on first day
  – Develop a formal action plan
    • Update regularly
    • Weekly

• Communication with the College
  – As soon as possible
  – Confidentiality
Addressing Inadequate Performance

- Before the mid-point or final evaluation
  - Be prepared
  - Bring notes
    - Keep yourself on task
  - Let the student know they are expected to self-evaluate
- During the evaluation
  - “Tell me about your performance during this rotation”
    - Listen
    - Paraphrase to ensure understanding
    - It’s not personal
Addressing Inadequate Performance

• Now it’s your turn….
  – Start with areas of agreement from self-evaluation
  – Give them credit for good performances
    • Use specific examples
  – State concerns precisely
    • “Your approach to patient education is of serious concern”
    • Specific examples
    • Neutral language, just the facts

• Avoid the “sandwich technique”
  – Positive, negative, negative, positive
  – Lacks consistent message
    • May provide false encouragement
Addressing Inadequate Performance

- Be sure to include
  - Why it is important to address these issues
  - Consequences for no improvement

- If they argue...
  - Successful performance on other rotations
  - They were not aware they were not meeting expectations
    - Acknowledge facts may not have been presented clearly in previously
    - Reemphasize current performance was not an acceptable level

- Yes, this can be uncomfortable
  - Being honest helps the student improve
  - “Sugar coating” may confuse your message
Addressing Inadequate Performance

- Plan for correction
  - Wait until end of evaluation
  - Incorporate into discussion
    * Can be encouraging to the student
- Give the student time to reflect
  - Expect some silence
- Summarize the discussion
  - Specific action plans
  - When to expect more feedback
  - Consequences for not addressing areas of improvement
- Documentation
  - Each sign the evaluation and/or action plan
Establishing the Next Steps

- Mid-point: goals for the remainder of the rotation
  - Students should participate
  - High performers: consider career ambitions
  - Performance issues: specific areas to address
    - Be realistic with your remaining time
    - Set clear goals/expectations
    - When will you follow up?

- Final evaluation: goals for new rotations
  - Give confidence
    - Better understanding of their strengths
  - Identifies goals for upcoming rotations
  - Valuable feedback for the college
Monitor Progress and Follow Up

• Frequent interactions with the student
  – Progress towards goals
    • Obstacles for the students?
    • Need additional resources?
  – Reinforce learning points
  – Supports continued growth
  – Establishes partnership

• Include all students
  – High and poor performers
Critique Your Evaluation Approach

- Practice, practice, practice
- Self reflection
  - Preparation process
  - Open communication?
  - Feedback clear and specific?
  - What would you do differently?
- Final evaluation: solicit feedback
  - Was the mid-point helpful?
  - Did the feedback help you understand how to improve?
  - What would you have done differently?
Marsha and Jan are two pharmacy students on your hospital rotation. Both have been with you for almost two weeks. You have been preparing for the mid-point evaluation. You have noticed:

- Marsha is pleasant and maintains a positive attitude. She enjoys talking to patients, she has performed 5 discharge counseling sessions, 7 pharmacokinetic consults, 15 medication history consults. Marsha is efficient, her work is detailed oriented and her consults are accurate with professional wording. Two patients had expressed to you that they enjoyed speaking with Marsha about their medications.
Student Case (con’t)

• Jan has been quiet and performs tasks only when directed to do them. She has only performed 3 pharmacokinetic consults, 1 discharge counseling and 6 medication history consults. While Jan is quiet, her pharmacokinetic recommendations are solid, but Jan struggles with documentation and using professional terminology. In her discharge counseling session her medication information was correct, but Jan did not look at the patient or the family during the session and only looked at her notes.
Mid-Point Evaluation

• What feedback do you give to Marsha?
  – What goals can you set for the remainder of the rotation?

• What feedback do you give to Jan?
  – What goals can you set for the remainder of the rotation?
Additional Resources