

## Capstone for Impact Submission | GY2021

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**Project Title:** SOAP Presentations: A Re-vamped Near-peer TTC Session

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**Advisor Names(s):** Dr. Dan Cronin

**If this project can be continued by another UMMS student, please include your contact information or any other details you would like to share here:** This project will be continued, however, the succession plan has already been set in place.

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**Summary (~250-500 words):** Students each year transition from pre-clinical coursework to core clerkships in which they are expected to learn to be clinical students. For many students, the unknown of transitioning into a completely new learning environment causes some degree of anxiety and worry. Oral presentations are one component of clerkship year which can cause increased stress, particularly in the beginning of clerkship year. In order to formulate an effective oral presentations, students must learn to pre-round effectively. For my capstone project, I re-vamped a near-peer teaching session aimed at helping rising clinical students learn how to pre-round during their transition to clerkships course. In years prior, the session involved utilizing a printed HPI and formulating an oral presentation based on this information. Although still useful, this method did not address the challenge of finding the necessary information in the chart. The re-vamped session utilizes the MiChart Practice Environment to allow students to practice pre-rounding on a fictitious patient. Students are split into sessions based on their track and patients are designed to simulate a fictitious patient in the specialty of their first rotation. Facilitators of the session are M3 and M4 students, ideally those who are applying into the given specialty. They are provided with a general facilitator guide and a guide for their specialty based session. In addition, facilitators attend an informal training session to review the components of facilitation. The goal of the sessions is for students to learn specific tasks necessary for successful pre-rounding including (but not limited to) where to find vitals, where to find ins and outs and where to find and trend labs. In addition, the session is intended to provide students with a better understanding of pre-rounding and presenting overall.

### Methodology:

The evaluation form for the SOAP Presentations Session was completed via Qualtrics. We designed a pre/post survey intended to evaluate students' knowledge of pre-rounding tasks and perception of pre-rounding before and after the session. Participants were asked to respond "strongly agree, agree, disagree or strongly disagree" regarding their perceptions (anxiety and comfort) and knowledge of pre-rounding tasks. In addition, participants were asked to provide feedback on how to improve the session for the future. The survey was distributed by facilitators during the session and in a daily email from TTC administration.

### Results:

	Anxious before session	Anxious after session
Strongly Disagree	0%	3%

Disagree	3%	15%
Agree	52%	73%
Strongly Agree	45%	12%

	Comfortable before session	Comfortable after session
Strongly Disagree	42%	6%
Disagree	48%	64%
Agree	0%	33%
Strongly Agree	9%	0%

	Percent Agree- Before Session	Percent Agree- After Session
Where to find vitals	52%	94%
Where to find ins and outs	12%	79%
Where to find and trend labs	35%	85%
Order of presentation (SOAP)	56%	97%
How to organize the plan	29%	88%
Purpose of pre-rounding	58%	91%
Time to pre-round on one patient	21%	74%

**Conclusion (~250-500 words):**

Overall, the results indicate that the SOAP Presentations session increased the number of students who knew/understood key pre-rounding concepts and how to perform key pre-rounding tasks. 94% of survey participants reported knowledge of where to find vital signs after the session as compared to 52% before the session. 78% reported knowledge of where to find ins and outs following the session as compared to 12% prior to the session. 88% reported knowing how to formulate a plan after the session as compared with 29% before. The results also indicate a slight increase in the number of students who report feeling comfortable with pre-rounding following the session and a slight decrease in the number of students who report feeling anxious following the session. 42% strongly disagreed with feeling comfortable prior to the session vs. 6% following the session. 45% strongly agreed with feeling anxious prior to the session vs. 12% following the session. 90% either strongly disagreed or disagreed with feeling anxious prior to the session vs. 70% following the session. 97% either strongly agreed or agreed with feeling anxious prior to the session vs. 85% following the session.

We learned that a near peer pre-rounding session may improve comfort with pre-rounding tasks and concepts. The survey responses were limited by the small number of responses (35 students). Based on feedback and this significant limitation, the following need to be addressed to improve for next year:

- Clearly state session objectives to students.
- Include a more thorough training session for facilitators and standardize content covered in each session in order to better ensure quality across all groups.
- Consider including pre-work to minimize wasted time and/or extend session length to allow for completion of objectives.
- Improve distribution methods for the survey to improve participation.

**Reflection/Impact Statement:**

This CFI project was aimed at improving feelings of readiness among students entering the clinical environment specifically in regards to pre-rounding and preparing patient presentations for rounds. Overall, students reported feeling more competent at basic pre-rounding tasks following the session which includes finding vitals in the chart, finding ins and outs and where to find and trend labs. This likely provides benefit for the student on a few levels. First, it can reduce the amount of time needed to gather information and form a plan in the morning which could increase the amount of sleep the student was able to get, or increase study time outside of the hospital. In addition, improved competence in information finding may allow students to utilize more time earlier in their career to learn how to formulate plans and develop clinical thinking skills. It is possible that this could also benefit the residents that students work with. Specifically, residents may save time in the mornings with less questions regarding where to find information in the chart. This session will continue as it is scheduled annually during the Transition to Clerkships Course although this was the first year in the adapted form that utilized the practice environment. The main focus will be to continue to improve the session based on student feedback to make the session the most useful. It is likely that the continuation of sessions is largely dependent on the feedback these sessions receive. This session is embedded in the Near Peer teaching program, thus the student leadership who lead this group each year will likely take ownership over this session.