

Chapter 6.

Taking a Coach Approach to Precepting

A. Definitions and Distinctions

Preceptors, mentors, and coaches have a lot in common. Each is interested in the development of individuals. *Preceptor* is defined as an *instructor, teacher, and tutor*. We typically find preceptors associated with academic settings. That is, a student will work with a preceptor in a setting outside the classroom in a work environment. A *preceptor* usually has knowledge or expertise in a specific content area. In the case of the preceptor for students in the area of Health Systems Management, three areas of expertise are implied: health, systems, and management. The preceptor also has experience in the organization and an awareness of the cultural and political climate.

Mentor is defined as a wise and trusted *counselor*. Typically, *mentor/mentee* or *mentor/protégé* relationships are found in business settings within the same company or between a junior and senior person in industry. While a *mentor* may be an expert resource, the expertise might be regarding the political environment of a company as well as a specific body of knowledge. A *mentor* will help individuals select experiences that facilitate growth and learning. They will also "open doors" for people; that is, help individuals new to an organization or new to an industry gain entry into places the individual may not have access to on their own.

Coaches on the other hand work with individuals and teams in a different way. They need not be content experts. *Coaches* are not teachers in that their primary role is not to be expert sources and give answers; and, *coaches* are not mentors in that their primary role is not to "show the ropes" to their clients. Rather, *coaches* help individuals deepen their learning about themselves; identify gaps between where they are and where they want to go; design steps to forward their actions; and, build in accountability along the way.

Students often consult with their preceptor to "get advice" about what to do in a given situation. The preceptor can "tell" the student what to do; can "give advice" about several approaches and let the student decide to take it or not; or *coach* the student to think through the situation and find their best answer. Sometimes "telling" and "giving advice" is exactly what is needed. But most of the time taking a "*coach approach*" helps the student find the richer answer and facilitates deeper learning.

Coaches typically are neither mentors nor preceptors. However, preceptors and mentors should possess *coaching skills*. The intention of this chapter is to introduce preceptors to coaching and skills that will allow them to take a "coach approach" in their preceptor role.

A Bit More On Coaching

The International Coaching Federation has adopted a philosophy and definition of coaching for professional coaches.

International Coaching Federation Philosophy and Definition of Coaching

Philosophy

The International Coach Federation adheres to a form of coaching that honors the client as the expert in his/her personal and/or professional life and believes that every client is creative, resourceful, and whole. Standing on this foundation, the coach's responsibility is to:

1. Discover, clarify, and align with what the client wants to achieve.
2. Encourage client self-discovery.
3. Elicit client-generated solutions and strategies.
4. Hold the client as responsible and accountable.

Definition

Professional Coaching is an ongoing partnership that helps clients produce fulfilling results in their personal and professional lives. Through the process of coaching, clients deepen their learning, improve their performance, and enhance their quality of life.

In each meeting, the client chooses the focus of conversation, while the coach listens and contributes observations and questions. This interaction creates clarity and moves the client into action.

Coaching accelerates the client's progress by providing greater focus and awareness of choice. Coaching concentrates on where clients are today and what they are willing to do to get where they want to be tomorrow.

Similar to a coach and his/her client, a preceptor and student create an ongoing partnership for a period of time during which the preceptor can support the student to deepen their learning, improve their performance, and enhance their quality of (student) life in the clinical setting. The preceptor focuses on helping the student gain clarity around their learning goals and design actions to achieve them. They (coaches and preceptors) do this through asking questions, skillful listening, observations, and providing direct honest feedback. Creating awareness, exploration of new perspectives and giving challenges further enhance learning opportunities.

This chapter introduces skills that facilitate dialogue, personal learning and commitment to action. While these are not the only competencies and skills utilized by professional coaches, they are basic to a coaching relationship. These skills are: listening, asking powerful questions, creating accountability,

affirming, challenging, and putting it all together in a coaching conversation utilizing a model adapted from one developed by John Whitmore in his classic book, Coaching for Performance (1998).

B. Coaching Skills

1. The skill of listening

The ability to listen is important for everyone but critical for the preceptor taking a "coach approach". In coaching, listening is a key skill in the coaches' toolbox. Listening should not be confused with hearing. Hearing is a physiological function; listening is an interpretive one. When we assess that a communicator is giving a mixed message, we give the following weight to these sources: 7% to the words; 38% to the tone of voice; 55% to the body language. In other words, body language is more influential in our interpretation of a message than are the words. Assuming, of course, that we are "listening" to it.

While Chapter 3 offers some tips on listening techniques, in this chapter we create awareness on how we listen. Based on the work of Whitworth, et al, (1998) there are several levels of listening.

Level One: In level one listening, your attention is on yourself. You hear the words that are being said but you are thinking about what they mean to YOU. Or, you find you want more details. When listening at level one you are listening TO what the student is saying. Whitworth refers to it as internal listening.

Sometimes, level one listening is OK. For example, when you want directions; when you are ordering in a restaurant; when you are receiving instructions. It is OK for the student to be at this level. In fact, we want them to be focusing on themselves. But the preceptor needs to be listening deeper. It is up to the preceptor to have enough self-awareness to know when this is happening.

Here is an example of how level one might sound:

Preceptor: "How was your clinical experience this morning?"
Student: "I had a terrible morning. The staff was late; my presentation got started 15 minutes after the scheduled time; I had to rush through the most important parts; I felt like I did a really bad job."
Preceptor: "How many staff attended?"
Student: "It started with 8 and ended up with 15. So not everybody heard the parts I did give."
Preceptor: "That happened to me one time. I never even completed half the talk I prepared. It is so frustrating."

In this situation, the preceptor was listening. She even expressed some sensitivity to what the student must have felt. However, her thoughts were on her own experience and did not support the student's learning.

Level Two: In this level of listening, the preceptor takes his or herself out of the picture and is only concerned with the student's story. Whitworth refers to this level as "focused listening." The preceptor is totally with the student and their words; not thinking about the impact on themselves. The

preceptor asks questions and is listening FOR what the student is saying. Sometimes the message is not in the words, but between them.

The preceptor will best serve the student by slowly and calmly asking questions in a non-judgmental way; questions that help the student gain a deeper understanding of the situation and their reaction to the situation. The dialogue might go something like:

Preceptor: "How was your clinical experience this morning?"
Student: "Terrible. Half the staff was late due to an emergency and I only gave half my prepared presentation."
Preceptor: "How important was it that everyone was there? At least you were able to practice presenting your material."
Student: "Yes, but I wanted the staff to learn something too."
Preceptor: "How else might you help them learn?"
Student: "I could offer a make up session."
Preceptor: "Anything else?"
Student: "I can create a handout with the pertinent facts."

In this situation, the preceptor followed the student's lead by focusing on what was important to the student--staff learning--not what might have seemed important--low attendance.

Level Three: At level three the preceptor is not only listening to the words, and for the message, but is also aware of all you can observe with your senses: what you see, hear, smell, and feel; emotion, body language, tone, energy, and your intuition. Stories have two components: content and feelings. The real message emerges in how the student is telling the story. On the surface the student may make light of an incident; but, underneath they are scared, frustrated, and/or worried about a mistake. The preceptor may have a "feeling" that the story is really about something else. It is important to acknowledge those feelings and sometimes speculate as to what could be the possible force behind the scenario. A possible level three conversation might go something like this:

Preceptor: "How was your clinical experience this morning?"
Student: "Terrible, only half the staff showed up for my presentation."
Preceptor: "You did get to practice your presentation."
Student: "I know and that was good; but not everybody got to hear it. That really disappointed me."
Preceptor: "What's that about? I get the sense you are pretty upset about that."
Student: "It's just that the room was half-empty and it felt incomplete."
Preceptor: "What was incomplete?"
Student: "I guess I felt I could not be successful unless the room was full and all the staff attended. Now, on reflection, that had nothing to do with my presentation. And, I got great feedback from those who were there. I'm glad I'm seeing that distinction. Maybe my morning was not so terrible after all. I feel much better about it."

In this scenario the preceptor was tuned in to the emotion or feelings the student expressed about the situation and created questions that took the conversation down a different path.



2. The skill of asking powerful questions

Questions are a powerful coaching skill. In fact, they are at the core of a good coaching conversation. The idea behind questions is to get people to think and go deeper. "Telling" an answer to a question or asking closed questions saves people from having to think. Asking open-ended questions causes them to think for themselves. However, the way we ask a question not only produces different answers but elicits various emotional responses.

In coaching, the skill of asking questions is important because it creates awareness and responsibility. Generally, people ask questions to get information (What is for breakfast?); or to resolve an issue (How do I do this?); or to seek advice (Should I hire the cheaper or more experienced vendor?). In coaching with students, the answers are secondary to the student's line of thinking. The answer does not have to be totally complete or correct. It simply provides the preceptor with information for follow-up questions.

How do we ask effective questions? Here are some general rules.

- Ask open-ended questions. (What did you notice?)
- Make them simple and short. (When will you do it?)
- Use interrogative words. These are words that seek to quantify or gather facts. For example, what, when, who, how much, how many. "Why" is discouraged because it often makes the student feel defensive. "How" questions get to analytical thinking. John Whitmore suggests rather than "Why", ask, "What were the reasons for...."? And how questions as "What are the steps...?" These words evoke more specific, factual answers.
- Focus on detail: After asking the big broad questions (How was your presentation?) continue asking for more detail. (What part seemed most interesting to the audience? What did you notice

about their attention? When did you feel confident in your ability? What was most difficult for you? What would make it easier next time?)

- Create space for the question to land: Ask your question and be quiet. So often, we ask a question; explain what we really meant; and ask another question. The student cannot listen to the question if you are asking another. By being quiet, the question gets to "land" and the student can take it in and reflect. Sometimes the question is more important than the answer.
- Listen, listen, listen and be attentive to answers: You will know what question to ask next, simply by listening to what the student has to say in answer to your questions.

Preceptor: "What was most difficult for you?"

Student: "Trying to remember the content without any notes. I get so nervous."

Preceptor: "How does being nervous affect you?"

Student: "It makes things worse because I forget more."

Preceptor: "When was a time when you did not forget?"

Student: "When I practiced out loud for several days."

Preceptor: "What technique did you use to practice this time?"

Student: "Oh, I see. I did not use that approach. Had I used what worked for me before, I would not have felt this way. I can do a better job next time."

In the above dialogue, the preceptor created awareness in the student by asking what worked in the past. Responsibility was created when the student recognized they did not do something that worked for them before; and, they can choose strategies to help themselves not be nervous.

Other scenarios:

Asking students questions that allow them to be part of the solution also creates responsibility. (For example, "What are some possible solutions to this dilemma?" "Which one do you want to try?" "How will you move forward?" "When will you complete the project?") In this scenario, the student has built the solution and defined the timeline. That creates responsibility!

Asking, "What did you like best about the article" opens the door to a conversation. Or, "What aspects of the article did you find most helpful for our meeting today" will take the student down a mental path of analysis and application. Your question compels the student to think about the article, the learning points derived from it, and how the information can be applied.

3. The skill of affirming or acknowledgement.

Acknowledgment or "acknowledging" your students is a way of helping them know themselves, gain self-awareness, and gain confidence. In the context of coaching, to acknowledge is to let the student know that you know who they are. It is affirming them in terms of who they had to be in order to accomplish something. It is not a compliment. A compliment is about what they did. For example, "Good job on creating the work schedule for next week ahead of schedule." This does not say anything about what the student values. An acknowledgement might sound like, "You really had to work hard to get that schedule right." You are acknowledging the student to BE a hard worker. Using the same situation, you might affirm the student by acknowledging their creativity. "I want to

acknowledge the creativity you demonstrated in putting together the schedule. Every patient will get the care they need."

Acknowledging is more than your opinion: "The way in which you delivered the message to the family was clear and sensitive." This message, while a compliment, is your opinion of what the student did.

An acknowledgment would be: "It took courage for you to deliver such bad news." You are affirming the student's courage. You are acknowledging them for being a courageous person.

Another example:

Student: "Maybe I should not have corrected Mary. I did it in a respectful way, and was direct in what I thought would lead us to an undesirable outcome. I felt like I looked like a know it all."

Preceptor: "You could have handled that situation in many ways. What you did was stand up for what you thought was right, and, you did it in a professional manner. I want to acknowledge you for being so committed to doing what you thought was right and getting the job done correctly. That's who you are."

Student: "Yes, that is right! After all, in this case it is important to get the job done right the first time around so we don't waste time later."

In the above dialogue, the preceptor is acknowledging the student for her values of commitment and accuracy.

When we acknowledge a person it is usually about their values and who they are rather than something they have done. The values might be around taking a risk, honesty, excellence, collaboration, etc. Sometimes students don't even see who they are. Acknowledging them helps them to see their inner strengths in a way they might have missed. Of course the acknowledgment has to be genuine and true. It must be an authentic acknowledgment or it will not go deep enough. The deeper learning or self-awareness that comes from an acknowledgement helps the student see him or herself in a way they might otherwise have missed.

In Laura Whitworth's (1998) book on co-active coaching she states that there are two parts to every acknowledgment. Delivering the acknowledgement and noticing the impact on the client. That is, to make sure that the acknowledgment was truly on target, notice the student's reaction. You will know you found the right description of who they had to be in that situation. It is enormously moving for students to be seen and known in this way. That is the power of acknowledgment.

C. The Coaching Conversation

1. The G R O W Model

Sometimes it's just easier to give the answer. However, investing a little time in a structured conversation helps the student learn to coach him or herself and saves time for the preceptor in the future because the student's learning is deeper. One mental outline that has proven effective for coaching conversations is the GROW Model developed by John Whitmore and discussed in his book, Coaching for Performance.

The letters **G R O W** stand for goal setting, reality checking, options, and what is to be done.

Goal is referring to goal setting for the conversation as well as goals for the short and long term future. What does the student want to accomplish?

Reality refers to exploring the current situation. What does the student know? What does he/she need to learn? In what time frame? What is their current experience?

Options refers to exploration of alternative courses of action.

What is the student willing to do, by when, and how? This is the opportunity for the preceptor to make a request and the student to make a commitment.

Sample Case Conversation:

Situation: Student Nora Elvidera is meeting with her preceptor for the first time in her clinical setting for the Health Systems Management Program. Her preceptor is expecting Nora to talk about what project she wants to lead over the next three months. Nora is feeling overwhelmed by the number of opportunities available and is not clear on what she wants to do. Using the GROW Model, here is one possible conversation between the preceptor and Nora.

Preceptor: **(GOAL SETTING)**

“Welcome to our agency, Nora. We are all looking forward to working with you. First of all, I'd like to ask you what you would like to get out of our meeting today?”

Student: “ Well, I would really like to leave with some clarity around my leadership project.”

Preceptor: “ What kind of projects have you been thinking about?”

Student: “That's the trouble. There are so many interesting things to do here, I don't know which one to select. I'd like to focus on project management. I have identified five projects that are scheduled to start in one month.”

Preceptor: **(REALITY CHECKING)**

“What do you know about project management?”

Student: “I have taken one course. Also, last summer I led a small project for a community group that focused on the purchase of 10 computers for the agency. I coordinated the purchase, installation, and education components.”

Preceptor: “What skills do you want to develop over the course of the semester?”

Student: “I want to learn how to manage a complex project; and, I would like to do it in the area of change management and information systems.”

Preceptor: **(OPTIONS AND ALTERNATIVES)**

“What do you see as options for yourself?”

Student: “Three of the five projects are computer related. So that might narrow the list”.

Preceptor: “What else do you need to know?”

Student: “I don't know much about the other two. I guess I need to explore them.”

Preceptor: “What information do you need to be able to make a decision?”

Student: “I need to know their focus, expected outcomes, and projected end dates.”

Preceptor: “Anything else?”

Student: “Yes. I'd like to know who is currently scheduled to be on the project or if I can create my own project team? And, I would like to know the expectations for completion. Now that I think about it, I see that what is important to me is leading the project from start to finish and being able to create the team. That is the experience I really want even more than the computer focus. I know a lot about computers but it is the project management piece that is the new learning for me.”

Preceptor: **(WHAT IS TO BE DONE?)**

“So what do you see as your next steps?”

Student: “I will make an appointment with the managers who are responsible for the projects and find out which ones meet my criteria. Then I'll make a decision about which one will provide me with the most learning opportunities. I'll get back to you within the next week to commit to one for the semester.”

Preceptor: “Great! See you in one week.”

While this situation is not necessarily critical, it demonstrates how the model can be used to help the student think through the situation and come up with their own best answers. Other questions the preceptor might consider asking in the REALITY section include: “What barriers might get in your way?” “How do you see yourself handling them?” “What other options do you have for moving forward?” In the future the student can use the GROW model to self-coach her way through a situation or problem.

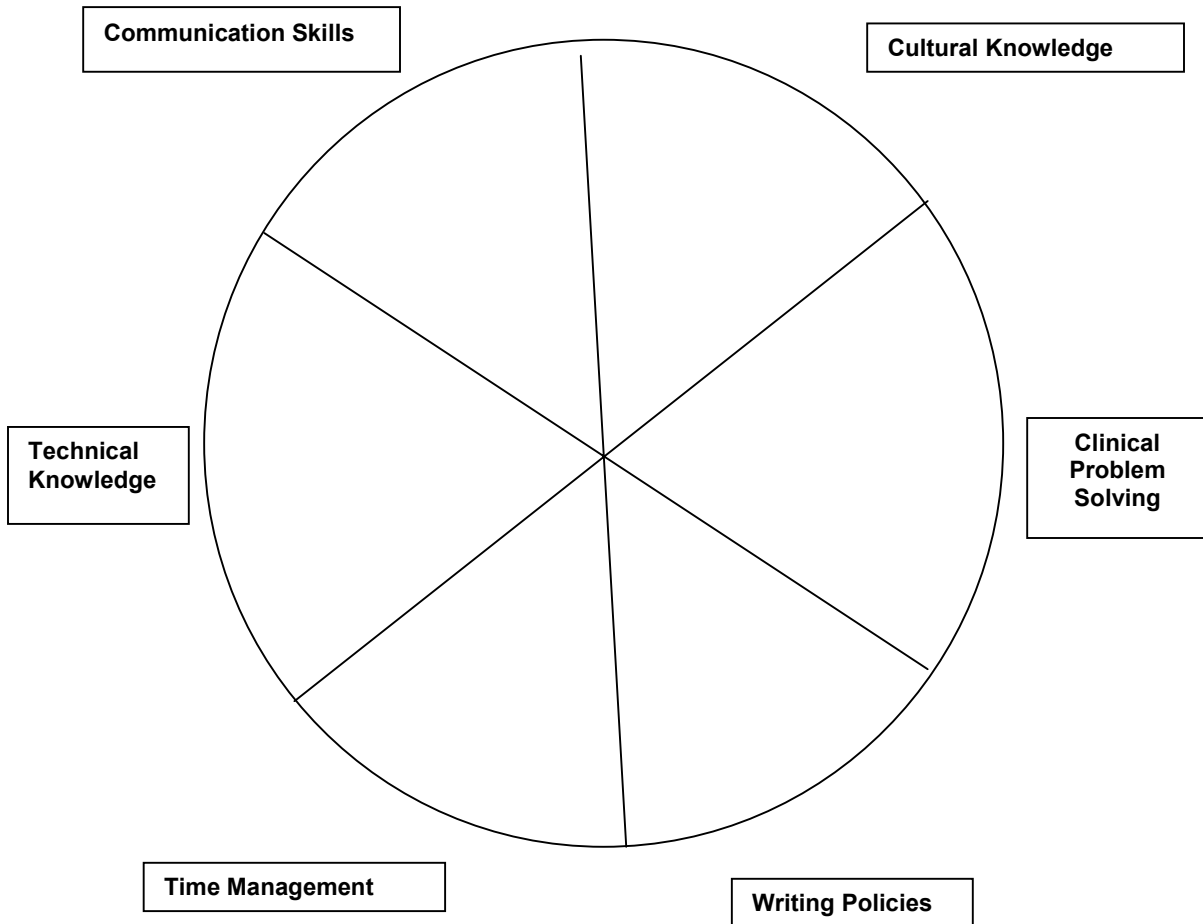
This model is not the answer to all student questions. Sometimes the student simply needs a straight answer to keep going on a project. However, when the student is stuck and there are many ways out of the muck, this exploratory model provides a framework for gaining new perspectives on an approach to take.

D. Satisfaction Wheel: A Tool to Facilitate Conversation and Assess Satisfaction

Tools are useful ways keep the focus on an issue or problem rather than the person. A template can be used to create a tool for a special or unique situation. Such a tool is the balance wheel. Balance wheels provide a visual for the preceptor and student to assess how satisfied the student is with his/her progress towards a particular project goal. The wheel can also be used to assess satisfaction with competencies that are required for successful completion of a particular clinical/administrative internship.

A sample wheel is found in the figure below. This particular wheel represents some of the competencies the student should master while in the clinical setting. For example, clinical competencies for this semester might include: communication skills, delegation, clinical problem solving, writing policies, time management, and technical knowledge. The preceptor would use the wheel in conversation with the student. Dialogue is facilitated when the preceptor asks the student to rate his/her satisfaction or progress for each competency.

Student Self-Assessment Health Systems Management Clinical



Think of the center of the wheel as being one (1) which means you are completely unsatisfied. The outer edge of the wheel is a ten (10) which represents complete satisfaction. Assign a number to each competency which represents your personal level of satisfaction with each competency. If you rated yourself a 5, you might be indicating you needed more work in this area. After assigning a number to each competency, select one area of focus for a coaching conversation.

After the student rates herself on each competency, a coaching conversation can occur which will facilitate the student's being able to create an action plan. Using the GROW Model described above, the following is a conversation the preceptor might have with the student around competencies, using the balance wheel as a focus.

Preceptor: **(GOAL)**

"Which of these areas would you like to focus on today?"

Student: "I'd like to talk about delegation. I rated myself a five in that area."

Preceptor: **(REALITY)**

"What does a five look like?"

Student: "I find that I don't trust other people to follow through so I keep all the work to myself and I'm getting overwhelmed."

Preceptor: "What else is going on in terms of delegation?"

Student: "Well, I gave one of the new staff a report to key into the computer; and, it wasn't anything like what I wanted."

Preceptor: "Is there anything else?" (It is important to be patient with this stage of the conversation to give the student time to think about all the issues that might be involved.)

Student: "One other time I delegated an assignment to a new person and they did it entirely wrong."

Preceptor: "So what would it take for you to rate yourself a 10 in the area of delegation?"

Student: "I would feel comfortable about giving work to the right people. I would also trust that it was going to get done correctly and on time. I would not have so many things on my own plate; and, others would be learning new skills because of the opportunity I gave them to grow through being involved in new projects."

Preceptor: **(OPTIONS)**

"That's a great description of delegating appropriately. So given that you feel you are at five (5) today; and you are clear on what a 10 looks like, what are some things you could do to take a step towards a ten and get to a six (6)?"

Student: "I suppose I could just keep all the work myself. Then I would know it was done exactly as I wanted it. But that doesn't address delegating, does it?"

Preceptor: "And, how would that be helping your state of overwhelm? What else might you do?"

Student: "I could give work only to experienced people."

Preceptor: "OK, what else?"

Student: "I could give better instructions with the work."

Preceptor: "Is there anything else?"

Student: "I suppose I could find out what the person knows before I actually ask them to do a task."

Preceptor: **(WHAT WILL YOU DO?)**

"That's great. You have identified some good options. Which one(s) would you would like to try?"

Student: "I have a new project starting tomorrow. I think I will ask the new staff group who has an interest in this area? Then I'll find out what she actually knows about the topic. Once I know that, I can give her the appropriate amount of information to be successful. And the best part is she will be clear on what I expect as an outcome."

Preceptor: "When will you let me know how it is going?"

Student: "How about one week from today? I'll do an assessment of the project, give the student feedback, and then I'll meet with you at this same time."

Preceptor: "Great! I'll look forward to it. Feel free to call on me if I can help you again."

(Accountability has been built in to the conversation with the student telling the preceptor how she will be accountable).

In summary, the role of preceptor is complex in that they really serve as teacher, mentor, coach and colleague. Effective preceptors not only possess excellent clinical and administrative knowledge, but they are savvy enough to navigate the political and cultural waters of an organization. Coaching skills that facilitate the student's learning and action have been described and are offered as an enhancement to their existing competencies.

Many students end up getting jobs in the clinical setting where they studied during their clinical course. Now the preceptor may serve in the role as mentor. That is, no grades are assigned and the relationship is more collegial than teacher/student. As students move into the "real world of work" they continue to need support and development. The transition from preceptor to mentor can be seamless if the relationship has been professional and collegial from the beginning. It is still important to utilize the coaching skills learned above while designing the new relationship. Identifying learning objectives and agreeing on how the ongoing relationship will look will enhance the mentor/ protégé experience.

Some students will want to identify new mentors after they graduate as a way of furthering their learning and gaining new perspectives on their clinical specialty. Current preceptors can and should be a source to help the student make new internal and external connections for this purpose. Like a preceptor, the mentor is a wise and trusted counselor with rich and deep experience to draw upon. And like a coach, the mentor creates an environment for their protégé that is built on openness and trust, and, helps people believe in who they are and to believe in their possibilities.