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Research Note

Preceptor's grading scale preference for student pharmacy practice experience and assessment of the common grading scale among US schools of pharmacy

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ABSTRACT

Introduction: The objective of this study was to gain an understanding of preceptors' grading scale preferences for introductory and advanced pharmacy practice experiences (IPPE/APPE). Secondarily, assess if there is a common grading scale for IPPE/APPE rotations among US pharmacy programs.

Methods: An online, 22-item survey questionnaire was sent to all preceptors at a fully accredited school of pharmacy. The survey instrument assessed preceptor attitudes toward the effectiveness of the primary grading scales, letter or pass/no pass. Demographic variables were also assessed, including gender, age, practice setting, years as a preceptor, and annual number of students precepted. In addition, a phone survey was conducted with all pharmacy programs in the United States at the time to assess grading scales used for introductory and advanced pharmacy practice experiences (IPPE/APPEs).

Results: Three hundred sixty-five preceptors responded to the survey questionnaire. Overall, preceptors had more favorable attitudes toward the letter grade system as opposed to the pass/no pass system, and when asked specifically which they preferred, approximately 70% preferred the letter grading system. The phone survey of different pharmacy programs grading systems revealed most use the letter grading system. Fifty-six of 87 responding schools (64%) reported use of a letter grading system, compared to 26 of 87 (30%) using a pass/no pass system and five using 'other variations' (6%).

Conclusion: The majority of preceptors preferred the letter grading system over the pass/no pass system. Familiarity with this system was a contributing factor, as a significant number of preceptors preferred the grading scale they had as a pharmacy student – the letter grade system. This trend mimics current pharmacy school's grading system, as approximately 2/3 currently use a letter grading system to evaluate IPPE/APPEs.

Introduction

Traditional pharmacy school programs are structured as four-year programs, with the first three years as didactic learning and the fourth year as advanced pharmacy practice experience (APPE) learning. As per the Accreditation Council for Pharmacy Education (ACPE) standards, pharmacy practice experiences are a required component and represent nearly one-third of most doctor of

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L.H. Varner et al.

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pharmacy (PharmD) curricula, consisting of introductory pharmacy practice experiences (IPPEs) incorporated into the first three years of the program, and the fourth-year is strictly comprised of APPEs.¹ However, ACPE does not mandate the specific structure and assessment for the various required and elective IPPE/APPE rotations. Thus, the experiences can vary from school to school in length, structure, and assessment method.

Overall, student competency is assessed on experiences via their ability to perform pharmacy operations, pharmacotherapy skills, communication skills, critical thinking, problem-solving skills, professionalism, interprofessionalism, and other various objectives specific to the experience type.¹ As students go through a variety of healthcare settings on these experiences, assessing their performance in an objective and consistent manner can be difficult. In most pharmacy programs, the above competencies are measured either by a letter grading (A, B, C, D, or F) or pass/no pass (P/NP) system. In addition, some pharmacy programs utilizing the P/NP system have added a third component, either high pass or honors-pass, as a means to differentiate students who exceed in meeting objectives.

There are pros and cons to each system. Assigning students a letter grade may help the grader distinguish an outstanding student from an average student. Furthermore, letter grades can aid as a progress gauge for underperforming students.² However, as letter grades are stratified, and students put more effort to get the best grade possible, this can cause competition and lead to student stress and anxiety.³ In the P/NP system, the student must be competent in all objectively measured areas to pass. The ability to distinguish an outstanding student from an average student may possibly decrease, but data suggests there are no major differences in objective measures of academic achievement for students under the P/NP system, compared to the letter grading system.² Moreover, research suggests P/NP grading may improve student motivation while performing clinical activities² and reduce the anxiety associated with grades for students while also allowing students to look into new courses or areas of interest without worrying about lowering their grade point average.^{3,4} As reported by Bloodgood et al.⁵ when a medical school changed their grading scale to a P/NP system, students had improved psychological well-being and showed no significant differences in performance in first and second-year courses, United States Medical Licensing Examination (USMLE) scores, or success in residency placement. A systematic search conducted by Spring et al.⁶ also found student well-being improved and objective academic performance was not affected by the P/NP grading system.

A literature search was conducted using Google Scholar, PubMed, Academic Search Premier, and MEDLINE, with the following terms: grading, APPE, IPPE, preceptor's perceptions, and attitudes. No published research was found comparing attitudes and preferences of the two in the pharmacy education setting outside of the study by Manning et al.² examining a change to P/NP for APPEs.² Thus, the objectives were to gain an understanding of the attitudes and preferences of the preceptors who grade pharmacy students on experiences as well as assess the current experiential grading practices among pharmacy programs.

Methods

The study was approved by the Philadelphia College of Osteopathic Medicine School of Pharmacy Institutional Review Board. The pharmacy school had 630 experiential sites and sent the questionnaire to 655 of its preceptors, of which 365 responded (response rate = 55.7%). The online, cross-sectional survey questionnaire consisted of 22 questions that focused on different constructs, such as preceptor attitudes, preferences, and demographics. Preceptor attitudes regarding the assessment of student performance, competence, and professionalism with the two grading systems as well as the overall effectiveness of the grading systems were evaluated using a seven-point Likert-type strongly disagree/strongly agree scale with four as the neutral option. Preceptor workload, as well as the efficiency of the E-Value system (www.e-value.net), was also assessed using this scale. The demographics assessed included age, gender, practice setting, pharmaceutical degree, years as a preceptor, number of students annually precepted, and how preceptors were graded as a pharmacy student. Other choice-based questions addressed the use of rubrics and a final dichotomous ("yes/no") question asking the preceptor's grading system preference.

Information for currently active preceptors for the School of Pharmacy was obtained through E-Value. An email with a link to the survey questionnaire was sent to preceptors in April 2016, and the survey closed in November 2016. Occasional reminder e-mails were sent to preceptors who had not completed the survey. Data and statistical analysis were conducted using SPSSv22. In addition to descriptive statistics on all questions, student's *t*-tests and chi-square analyses were used to compare various respondent categories on the constructs assessed. Given the multiple comparisons, a Bonferroni correction to the a-priori alpha level of 0.05 was made, making the level of significance 0.05/6 = 0.008.

In addition, a phone survey was conducted to identify current IPPE/APPE grading systems among US pharmacy programs. As of February 2017, there are 140 pharmacy programs in the US.⁷ However, at the time of study, 136 pharmacy programs were contacted and asked whether their grading scale for IPPE/APPE was a letter grade, P/NP, or some "other variation." Of the 136 schools contacted, 87 (64%) provided a response.

Results

The preceptors' demographics are summarized in Table 1. Overall, most were from a community (retail or independent) setting (53%), less than 45 years old (63%), have a PharmD as their terminal degree (58%), been a preceptor for \leq five years (47%), and precept \leq five students annually (63%). In addition, 53% of respondents have precepted both IPPEs and APPEs (38% APPE only and 9% IPPE only). When asked how the preceptors were graded when he or she was a pharmacy student, 74% of those who recalled (n = 261 / 353) had a letter grade system and 26% had a P/NP system (n = 92 / 353).

Overall, preceptors had more positive attitudes towards the letter grade system in terms of effectively assessing performance (M

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