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Short communication

Developing the reflective practitioner: what, so what, now what

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Abstract

What: Critical reflection is a skill that should be taught in didactic courses, practiced in various classroom settings, and subsequently refined in the experiential curriculum by all health professions students. In order to accomplish this, faculty and preceptors need adequate preparation to appropriately guide and evaluate students as they develop critical reflective skills. *So what:* The reader will learn and understand the steps required and the integration into the curriculum needed to ensure that student pharmacists have adequate preparation and practice in this skill. Examples from various colleges and schools of pharmacy are provided to give the audience ideas on how to incorporate this skill into didactic, introductory pharmacy practice experiences (IPPE) and advanced pharmacy practice experiences (APPE). In addition, effective assessment and feedback strategies for this affective skill are discussed.

Now what: As the United States health care system's demands on the profession of pharmacy continue to grow, pharmacists can be trained to become self-directed, lifelong learners. The cognitive and affective domains within our curriculum must be taught and nurtured to the same extent as the hard sciences. Beginning this training early in the profession will facilitate students' development into practitioners who utilize the continuous professional development (CPD) module of practice. © 2015 Elsevier Inc. All rights reserved.

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Introduction ("WHAT")

"Reflective learning" is not a new concept; it is an ageold learning method posited on inductive processing. For example, watch a young child trying to put a square peg in a round hole. After a few attempts, the youngster develops a testable theory based on his/her own empirical evidence. According to the Merriam-Webster dictionary, the word

http://dx.doi.org/10.1016/j.cptl.2015.06.014 1877-1297/© 2015 Elsevier Inc. All rights reserved. "reflection" is derived from the Latin root reflectere, meaning an "act of bending back."¹ Building on this root definition, J.R. Kidd and Malcom Knowles, both major pioneers in adult education and self-directed learning, remind us that the acquisition of knowledge is an internal change process that mirrors (reflects back) and builds on the learner's life experience. It follows then that the primary purpose of education is not "teacher telling" (transmitting what is known) but is rather the development of skills of inquiry (i.e., reflection and exploration).^{2,3} This exploration and reflective approach builds on the work of innovative researchers and noted scholars such as John Dewey (educational theorist); Donald Schon (philosopher educator); and

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Kurt Lewin, Chris Argyris, and David Kolb (organizational and behavioral change researchers).⁴ Promotional efforts to incorporate these reflective skills are now emerging across a variety of health professions in undergraduate, postgraduate, and continuing medical education, according to a systematic review by Mann et al.⁵ Their literature review suggests that reflection may enhance and improve the quality of learning, especially experiential learning. Mann et al. conclude that if these associations can be clarified, it is plausible that health care practice and patient care may benefit. Agreeing with this conclusion, Sandars, in his guide for using reflective learning in medical education, foresees a variety of positive outcomes and applications in self-directed learning and the development of professional expertise and therapeutic relationships. While empirical evidence is not yet available to suggest that this metacognitive process directly improves patient care, he concludes that the care itself can improve.⁶ Observing this growing adoption of reflective learning across the professional landscape, Tsingos et al. propose that pharmacy education is yet to utilize reflective learning due to its emphasis on cognitive knowledge and skill mastery coupled with a lack of appropriate teaching resources, a structured framework, and implementation guidelines.⁷ In addition, skills related to reflective practice can aid graduates in continuous development or CPD (continuous professional development), defined as "the lifelong process of active participation in learning activities that assists individuals in developing and maintaining continuing competence, enhancing professional practice and supporting achievement of career goals."8 This article shares current resources, frameworks, and reflective learning tools that are presently being used in pharmacy education and utilizes an experiential learning format, beginning with experience (the "What"), reflection (the "So What"), and application (the "Now What").

Current applications ("SO WHAT")

Learner preparation

For health professional students to become reflective practitioners, they must first become reflective learners. Reflective learning is defined as "the process of internally examining and exploring an issue of concern, triggered by an experience, which creates and clarifies meaning."9 In order for this level of learning to occur, students must develop critical reflection, which is a metacognitive process "that occurs before, during, and after situations with the purpose of developing greater understanding of both the self and the situation so that future encounters with the situation are informed from previous encounters."⁶ Early introduction of these techniques in the college of pharmacy curricula, affording practice, appropriate mentoring, and feedback throughout, will allow students to move to this level of reflective ability.¹⁰ The heavy emphasis on fact-based science courses that are typical in pre-pharmacy curricula leaves little room for critical reflection, which may result in a tendency toward self-evaluation rather than critical reflection and introspection. Students do not easily adapt to reflection as habit.¹¹ While there are several published models that highlight the processes required to teach critical reflection, we aim to provide examples from multiple colleges of pharmacy, with the goal of providing faculty and administrators with key approaches and examples for incorporating a practice of reflective learning.

The process of developing into a critical reflective practitioner is a learned skill that requires appropriate instruction. The steps involved include establishing a framework, setting goals and expectations, allowing for multiple practice opportunities, and assessment of student work through feedback from faculty/preceptors. Providing students with a structured framework or guide allows them to gain confidence in the skill set and achieve the full benefit of the activities upon which they are reflecting, and it is a basis for future development.¹² There are many models or frameworks described in the literature.^{13–15} While there is no "right" framework, it is important to carefully consider each model and choose the one best suited to learners' needs. The chosen model should be introduced to learners in a formal way, through structured frameworks and supportive assessment tools, beginning with the concept of reflection and its importance to practice.

While gaining knowledge, students must also understand the goals and expectations of reflective activities. These should be connected to and synergistic with the course work or experiences in which the reflective activity is assigned.^{11(p3)} Faculty should clearly articulate these connections to promote student acceptance of reflective activities early in the skill development process, and it is associated with greater effort in the future.¹⁶ This also avoids students perceiving reflective work as an add-on or afterthought.¹¹ One way this can be accomplished is by creating an in-class activity that allows students to review and critique past reflective works completed by their peers. The context, as well as the goals of the written work, should be framed for the peer editors. In small groups, the students read, discuss, and determine the quality of the provided examples. For learning purposes, students can compare and contrast two different works: one that would be written at the level of habitual action (not acceptable) and the other that is a critical reflection (acceptable). Educational opportunities can also be offered through internet-based training. Students are provided an online, case scenario builder model requiring them to respond to prompting questions about the work/case as sections are presented. The student must critique the work before moving on to the next task. Both methods live or online, can achieve a similar outcome.

The expectation for reflective learning activities within the curricula of colleges of pharmacy should be to move students from novice to competent status, offering multiple opportunities to practice this skill. The ultimate goal is to provide a solid foundation for development into lifelong Download English Version:

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