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Currents in Pharmacy Teaching & Learning

Currents in Pharmacy Teaching and Learning 5 (2013) 276-282

http://www.pharmacyteaching.com

Research

Four years of experiences of a joint school of pharmacy and school of education pharmacy residency teaching certificate program for affiliated residency programs

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Abstract

Purpose: To describe four years of experiences of a joint school of pharmacy and school of education pharmacy residency teaching certificate program (PRTCP) for affiliated residency programs and evaluate the impact on teaching abilities and confidence.

Methods: Descriptive data was collected based on observations of the authors for four residency classes from 2007 to 2011. The PRTCP provided formalized training in teaching through multiple requirements including: pedagogy seminars, didactic experiences, small group facilitation, experiential education, teaching philosophy statement development, and teaching portfolio development. The program included residents from small affiliated residency programs (three or fewer residents per program) based at nonacademic institutions along with new faculty and residency preceptors. After four years, graduates were surveyed one time through SurveyMonkeyTM for demographic data and to assess self-perceived teaching abilities and confidence.

Results: Of the 25 previous residents, 17 completed the survey. Prior to the PRTCP, respondents had a median score of three (out of five) in teaching skill and ability, compared to a median score of four after completing the requirements. Likewise, respondents had a median score of two in confidence as a teacher, compared to a median score of four after completing the requirements. When asked if the PRTCP had been beneficial professionally, 94% of participants responded as "agree" or "strongly agree." The majority noted precepting as the most common teaching experience in practice, followed by small group facilitation, classroom lectures, and in-services.

Conclusions: A joint school of pharmacy and school of education PRTCP program has increased resident-perceived teaching abilities and confidence.

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Keywords: Pharmacy residency teaching certificate program; Pharmacy residency; Teaching skills

Introduction

Pharmacy residency teaching certificate programs (PRTCPs) have emerged over the past decade as a component of many pharmacy residency programs.^{1–4} The

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overall purpose of these programs is to provide a more formalized way of developing and solidifying pharmacy residents' teaching skills and experiences. Components addressed in PRTCPs have varied among programs. Generally, programs have consisted of a lecture series on various teaching topics and experiences in the didactic and experiential settings. 1-4 Other programs have also incorporated other experiences, such as small group or laboratory facilitation and development of a teaching portfolio. 1-2,4 Several institutions with formal programs

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have described their components and documented outcomes in the literature, although many other formal and informal programs exist.⁵

Many factors have resulted in the emergence of PRTCPs over the past decade.¹⁻⁴ One such factor was the lack of formal feedback and instruction given to residents on teaching. Most pharmacy residency programs focus on clinical practice and patient care, with less emphasis on teaching and research. According to the American Society of Health-System Pharmacists (ASHP) residency accreditation standards, a postgraduate-year-one (PGY1) resident should obtain effective instruction in didactic and experiential teaching.⁶ The need for pharmacy educators will likewise continue to increase in the future as new pharmacy schools are developed and existing pharmacy schools increase class size. According to the 2002 American Association of Colleges of Pharmacy (AACP) Task Force on the role of colleges and schools in residency training, minimum requirements for pharmacy faculty positions should include residency training or equivalent experience.8 Therefore, some new pharmacy faculty members have not been adequately trained for the responsibilities of didactic or experiential teaching, which may significantly impact the quality and delivery of instruction.^{9,10} In addition, candidates for pharmacy faculty positions from other schools of pharmacy may be graduating from programs that offer a PRTCP, so a competitive advantage may be gained by completing a PRTCP. According to Ratka et al., the majority of pharmacy residents will not go into an academic position upon graduation, but many will take positions in the practice setting with teaching responsibilities for students and residents.¹¹ PRTCPs can thereby give practitioners the knowledge and skills necessary to perform in this role.4 Additionally, these programs have become a means of recruitment of pharmacy residency candidates that many students may seek.2-4

In 2007, Shenandoah University's Bernard J. Dunn School of Pharmacy and the School of Education and Human Development collaborated in the development of a formalized PRTCP. Prior to 2007, small group facilitation, didactic teaching, and experiential teaching were being accomplished informally. All pharmacy residency programs affiliated with the school of pharmacy were eligible to participate in the PRTCP. These programs were based at a community hospital, Veterans Affairs hospital, two community pharmacies, and an ambulatory care pharmacy practice. New faculty and other nonaffiliated regional residency programs had also participated in the program, including another community hospital. The program was optional for each participant based on the individual's interests and career goals. The overall goals of the program were to: (1) provide formalized training in didactic and experiential teaching through multiple experiences, and (2) to strengthen residents' teaching skills regardless of the future practice setting.

The formal PRTCPs that have been described in the literature are primarily based at larger academic institutions and medical centers and administered primarily by pharmacists. ^{1–5} This manuscript describes four years of experiences of a collaborative PRTCP between a university's schools of pharmacy and education that was administered to multiple affiliated, nonteaching institution-based residency programs. Additionally, the program graduates were surveyed to gather feedback and determine the value of the PRTCP.

Methodology

The inception of a formal PRTCP has allowed for pharmacy residents to gain the skills, abilities, and knowledge in teaching. The program was designed to emphasize core concepts of pharmacy education in a variety of teaching experiences. There were six components for the PRTCP: pedagogy seminars, didactic experiences, small group facilitation, experiential education, teaching philosophy statement development, and completion of a teaching portfolio. A certificate was awarded upon successful completion of all components. Descriptive information regarding skills, abilities, and confidence was collected and reported for each residency year (2007–2011).

Pedagogy seminars

Pedagogy seminars consisted of 12 lectures (1.5 hours in length) given in conjunction with the school of pharmacy and school of education and human development. With the two schools, the rank of the facilitators ranged from assistant professor to professor. Among all facilitators, the extent of involvement included creation of topics, organization of dates, and collaboration during the seminar for the topic. Over the past four years, the topics and related textbook were modified based on the residency classes' input. The biggest change was the schedule of pedagogy seminars, which were originally provided in monthly discussions from August through May. For the most recent year, Table 1 provides a list of the pedagogy seminars. These seminars occurred from August to November in the evenings after daily residency responsibilities. The purpose

Table 1 Pedagogy seminar series topics

Program overview/requirements
Writing a teaching philosophy
Teaching theories, methods, philosophies
Active learning/case-based/facilitation
Learning objectives/lecture preparation
Course development/syllabus preparation
Test writing/assessment
Technology/distance education
Student issues
Lecture practice/critique exercise
Academic life
Experiential teaching

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