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Pharmacy residents' barriers to scholarly pursuits

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Abstract

Objectives: This study examined barriers to pursuing scholarly activities among pharmacy residents.

Methods: Pharmacy residents of American Society of Health-System Pharmacists (ASHP)-accredited programs in the Southeastern region of the United States during the 2009–2010 residency cycle were invited to participate in a web-based survey to assess interests in and barriers to pursuing scholarly activities (e.g., peer-reviewed manuscript development). A 22-question, web-based survey instrument was developed and pilot tested to assess demographics, confidence, interest and intent in pursuing scholarly activities, and barriers to scholarly activity. The survey instrument was administered in April 2010, and respondents were given four weeks to complete. Descriptive statistics (e.g., frequency and median \pm IQR) were used to report respondent characteristics and identifiable barriers.

Results: A total of 209 out of 405 (52%) residents completed the survey. Respondents were primarily female (80%), under the age of 30 years (86%), and in a first-year residency program (75%). The majority of respondents (79%) intended on pursuing scholarly activities beyond their residency project. Lack of time was the most frequently reported and was ranked the most important barrier to pursuing scholarly activities. Lack of knowledge of the processes associated with scholarly activity and limited mentorship from residency preceptors were identified as barriers by 37% and 25% of residents, respectively.

Conclusions: Noteworthy barriers to pharmacy residents' pursuit of scholarly activity were identified including lack of time, mentorship, and knowledge of the process. Pharmacists involved in mentoring residents should facilitate opportunities for scholarly activities, including peer-reviewed publications.

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Keywords: Pharmacy resident; Post-graduate training; Scholarship; Peer-reviewed publications

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Background

As the accrediting body for post-graduate training in pharmacy, the American Society of Health-System Pharmacists (ASHP) requires documented completion of a residentled project.¹ The project is designed to provide residents the opportunity to develop a basic skill set related to the development, conduct, and completion of a project. Deliverables from a resident project may improve overall written and oral communication skills, and completion of a resident project can be valuable to both the resident and institution.² Many of these projects include original research, and the impact of the project can extend beyond those directly involved if results are disseminated through publication in a peer-reviewed journal.^{3,4} Additionally, scholarly publication of a resident's project will add to that resident's skill set.

The role of the pharmacist in research and scholarly activity has long been recognized.³ As such, professional pharmacy organizations have issued statements encouraging trainees seeking research-focused careers to begin early development and pursue advanced degrees.⁴ There is also support for residency programs to establish proposed standards and training modules for clinical research and pharmacy models.⁵ A mentored manuscript submission and publication experience during the pharmacy residency year is a tangible learning opportunity that can encourage future scholarly activities. Without that initial scholarly activity experience, it can be very difficult for former residents to decide to publish later without the guidance and mentorship offered by a residency program. Even if not all residents pursue publication in their future career, a residency experience with scholarly publication and dissemination is foundational. This is not unlike the movement to publish Doctor of Philosophy (PhD) dissertations and make them widely available for others to use.

Despite organization support and the benefits of resident scholarship, the publication rate of projects completed by pharmacy residents remains relatively low, especially compared to medical resident counterparts.^{6–13} Several barriers to scholarship from residency projects have been suggested, including the limited one-year or two-year time frame and the lack of resident training in study design, data collection, and data analysis.^{2,3} This lack of formalized training may also stem from some project preceptor's limited scholarship experience or a program's lower priority placed on scholarship.² Additionally, some project preceptors may not be expected to participate in scholarly activity as a part of their job responsibilities, as is required in many academic settings where scholarship is directly tied to promotion and/or tenure. However, data on barriers to project publication that residents perceive are lacking. These data can be helpful in identifying key objectives to include in the training on scholarship for residents.

In order to develop an improved model for training residents to successfully complete a pharmacy residency project from concept development to peer-reviewed publication, perceived barriers should be identified from a resident's perspective. This study aimed to identify perceived barriers to the pursuit of scholarly activity by pharmacy residents in the southeastern United States.

Methods

Design and overview

Current residents of ASHP-accredited pharmacy residency programs in the southeast United States (including Florida, Georgia, South Carolina, North Carolina, Alabama, Mississippi, and Tennessee) were invited to participate in an anonymous web-based survey distributed through Survey-Monkey[®] (Appendix I). This study was approved by the Institutional Review Board (IRB) at the University of South Carolina. All ASHP-accredited PGY-1 and PGY-2 pharmacy residents in the 2009-2010 residency cycle from the aforementioned states were eligible for participation. Since ASHP does not maintain a roster of current residents, a list of residents was created utilizing the Southeastern Pharmacy Residency Conference (SERC) database, which maintains a current resident e-mail list. Missing contact information was obtained through direct contact with the residency program director or representative as needed. Based on these rosters, a total of 405 pharmacy residents were eligible for study participation. The survey instrument was administered in April 2010 and a four-week deadline was given for completion. A reminder e-mail was sent three weeks after the initial mailing to encourage study participation.

Survey instrument

The survey instrument was collaboratively developed by all study investigators with the combined experience as a residency director, resident mentor, and/or research scholar. Study investigators also have published experience with survey methodology using a resident audience. Published literature was examined for validated survey instruments related to the current study, but provided no useful tools. The survey instrument was pilot tested among students, current residents, and faculty who were ineligible for study inclusion. Pilot testing resulted in only minor grammatical changes and established an estimated completion time for prospective study participants.

The survey instrument consisted of four sections totaling 22 questions: Section (1)-eight personal characteristics and academic-related questions including gender, age, current residency position (PGY-1 or PGY-2), type of residency program, location, affiliation with a college of pharmacy, institution type, and career plans after current residency completion; Section (2)-five questions related to anticipated scholarly activities during residency and level of interest; Section (3)-five questions related to confidence and motivation in seeking publication of scholarly activities; and Section (4)-four questions on identifying barriers and existing resources (Appendix I). Scholarly activities were defined as dissemination of residency project results in the form of a presentation at a conference (local, state, regional, or national), submission an abstract for peer-review to a professional meeting and creation of an oral or poster Download English Version:

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