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Opinion

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Preceptors guidance in students' self-reflection: An invaluable contribution

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Abstract

A main goal of the curricula for doctoral degrees in pharmacy is for students to develop their ability to self-assess, ensuring that they become lifelong learners and competent practitioners. Reflection has a role in the process of good quality learning and in the development of professional behaviors. Although the reflective process is unique and belongs to the one engaged in reflecting, in the pharmacy curricula, reflection is incorporated as a deliberate process. In addition, reflection is an affective activity in which emotion has a crucial role. The active involvement of preceptors in the reflective processes of their students is also fundamental and invaluable. A conceptual model of reflection as it pertains to the experiential practices in the field of pharmacy is presented. An explanation of the level of reflection to qualify the by-product of student's reflections is also presented. Based on various models of reflection, examples on how to foster reflection using questioning and prompting are discussed.

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Introduction

Much has been written about the subject of reflection, its relevance to the learning process, and its relation to professional practice. In 1983, when Schön¹ published his book on the reflective practitioner, the subject of reflection as it pertains to professional practice gained momentum. For more than 30 years, researchers have presented numerous propositions on reflection. There is consensus on the importance of practitioners' exercising reflection, gaining awareness of their competency, and practicing continuous improvement. In other words, practitioners are expected to be responsible for their own lifelong learning.

One of the goals of a curriculum for a doctoral degree in pharmacy is for students to develop their reflection skills and to become lifelong learners and competent practitioners.

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Such curricula establish necessary competencies, which are developed through courses and supervised practice experiences. These practice experiences offer certain opportunities for reflection in authentic practice scenarios that help validate what was learned in class. Professors, peers, preceptors, patients, and health care practitioners are examples of external sources by which student performance gets validated. By providing feedback, these external sources provide evidence of how well-prepared students are to become practitioners.

There are mutual benefits for both pharmacy schools and the preceptors who collaborate with those schools. Practice sites and pharmacists benefit from the assistance given by the schools of pharmacy in developing their clinical services and, sometimes, by being remunerated monetarily; pharmacy schools benefit by having adequate practice sites for students needing to complete their mandatory experiential rotations. Other benefits for the pharmacist participants include job satisfaction related to being a preceptor, being professionally challenged, and having a sense of giving back to the profession, to their alma mater, or both.^{2,3} In the

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same way, the active participation of the preceptors in the development of future practitioners is invaluable to the pharmacy schools and their students. Preceptors are the ones who are present in real-life contexts, enabling them to offer students ample opportunities to exercise reflection and to learn to assess their performance during and after their practice activities. Reflecting on one's practice experience enhances the learning process by providing meaning to that experience. Reflection on practice experiences contributes also to an individual's professional development by cultivating that individual's professional identity and by fostering the evolution of the patient-clinician relationship. Equally, students perceive that having adequate clinical experiences is a key to developing the ability to reflect.^{4,5} Reflection is a skill that can be learned through social interactions. Students value the interactions with their preceptors as being an important part of their development as reflective practitioners.6

This essay sets down a compilation of data for preceptors, especially for new preceptors who have chosen to collaborate on the development of future practitioners and who wish to contribute to the pharmacy profession. It provides concepts and practical knowledge regarding the process of reflection and its implications in terms of student development while said students practice at the sites of the participating preceptors. Furthermore, the intent of this article is to provide guidance on how to prompt and trigger the students' reflection process. This document is the product of an evaluation of numerous articles on self-reflection, reflection, and self-assessment published in different types of medical journals for physicians, nurses, and other health care professionals since 2000. Other publications pertaining to the field of pharmacy were also evaluated, especially those that describe the experiential practices of students as well as their use of reflection. We will start by defining self-reflection, noting how it differs from self-assessment, and then we will expand on the conceptualization of self-reflection and its application to practice scenarios. All the while, we will incorporate examples and practical tips for preceptors.

The difference between self-assessment and self-reflection

The terms "self-reflection" or reflection and "self-assessment" have frequently been used interchangeably. Even though self-assessment and self-reflection are both thought of as abilities, they are not the same. 6.7 Self-assessment is considered to be more of an external mechanism for judging personal knowledge and skills, while self-reflection is considered to be more of an internal process that fosters a better understanding of the world or a particular situation. 7.8 There is a dynamic relationship between the two terms: The ability to self-assess depends upon the ability to reflect, while the ability to reflect requires accurate self-assessment. 6

Self-assessment does not have a universal definition, and many studies have applied the term self-assessment when in reality their subject of interest and discussion has been self-reflection. What clearly distinguishes self-assessment from self-reflection is that self-assessment is the ability to critically observe one's behavior using references to reorient future behaviors. Assessments can be performed on oneself, or by others, but as a guided process, self-assessment is dependent on external sources to provide feedback and information. In the clinical environment, practitioners measure their performance against criteria provided by outside sources, such as practice standards, evidence-based practice, protocols, and feedback from mentors or peers.

Self-assessment is a competency that is considered critical in pharmacy students. The expected behaviors and learning goals included in pharmacy curricula in the United States are those contained in the Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree published by the Accreditation Council for Pharmacy Education (ACPE), which provide specific statements that detail required competencies and competent behaviors. As stipulated in Guideline 11.1 of the Standards 2011, schools and colleges of pharmacy should encourage and assist students to assume responsibility for their own learning, including self-assessment of their knowledge, skills, attitudes, and values and their achievement of desired competencies and outcomes. 10 The process of self-assessment must include an analysis of one's behaviors in reference to the learning goals and desired behaviors included in the pharmacy curricula.

There is a lack of clarity when defining self-reflection as it appears in the literature; terms such as "self-monitoring," "selfregulation," "reflection-in-action," and many others are used interchangeably. 11 Reflection is the preamble to selfassessment. Reflection can be defined as a mental process, which is usually triggered by a perplexing or an "ill-structured" situation. 1,6 In a given student's practice scenario, such a situation could be, for example, an unknown adverse effect reported by a patient. In this situation, the student might find himself or herself lacking the knowledge needed to manage the adverse event, which would ideally lead to information seeking, but which could also lead to feelings of uncertainty regarding his or her knowledge. Reflection can also be considered a state of mind in which, without a particular purpose, the mind wanders and an idea arises. 12 Differently from the above scenario, after seeking information and understanding the cause of the adverse effect, the student's preceptor can help initiate a conscious and deliberate process aimed at exploring and at elaborating that student's understanding of himself or herself and the situation encountered. 13 The outcome of the reflection process can be a new understanding of the situation at hand, an awareness of how emotions are involved in the situation, some form of action, or the recognition that further exploration and learning are called for.^{6,12}

Despite its importance, self-reflection alone is not necessarily conducive to an effective assessment of oneself.^{7,13} For example, some pharmacy students who were asked to

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