



Short communication

Determining the utility of a student survey to provide valuable feedback on precepting skills of pharmacy residents

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Abstract

Purpose: American Society of Health-System Pharmacists (ASHP) defines pharmacy resident growth as preceptors as an objective for ASHP-accredited pharmacy residencies. ASHP recognizes instructing, modeling, coaching, and facilitating as precepting roles necessary for effective teaching. Currently, there is no standard, validated tool for pharmacy resident–preceptor evaluations. Student evaluations meet ASHP requirements for evaluating preceptor effectiveness. The purpose of this pilot study was to implement a process for utilizing student evaluations in developing and evaluating pharmacy residents as preceptors.

Methods: Pharmacy students that completed advanced pharmacy practice experiences (APPE) during 2010–2011 with pharmacy resident co-preceptors were included. SurveyMonkey™ links were provided to evaluate residents as co-preceptors for the APPE. Residents' evaluations were summarized and reviewed with them; residents were asked to complete resident response surveys and develop precepting strategies from the feedback.

Results: A total of 23 pharmacy student evaluations were completed for eight pharmacy residents, and eight residents completed the response survey. No residents received negative evaluations. All residents were recommended by the students to be future preceptors. Overall, 86% of the residents indicated the feedback was useful for preceptor growth and development. The students and residents mostly agreed on their abilities regarding modeling and coaching; their responses differed slightly regarding instructing and facilitating. Residents developed several tools to utilize for future precepting responsibilities and development based on their feedback. Preceptor training is noted as a desirable option.

Conclusion: Pharmacy student evaluation of pharmacy residents may be an effective method for obtaining feedback for residents on their precepting skills to foster preceptor development.

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Keywords: Pharmacy resident–preceptors; Preceptor development; Student feedback; Residency

Purpose

Pharmacy resident growth as preceptors is a component of the objectives for Postgraduate Year 1 (PGY1) and Postgraduate Year 2 (PGY2) residencies. American Society of Health-System Pharmacists (ASHP) Residency Outcome R5 states that residents should provide medication- and

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practice-related training, which can be in the form of precepting. ASHP standards currently require preceptors to demonstrate effectiveness in teaching. This can be accomplished through student evaluations. Instructing, modeling, coaching, and facilitating are four precepting roles that have been identified as necessary for effective teaching of clinical problem solving.¹ By 2020, the American College of Clinical Pharmacy's (ACCP) goal is for PGY1 residency training to be a minimum requirement for precepting pharmacy students.²

The vast majority of residency programs offer their residents the opportunity to precept or co-precept pharmacy students. Out of 543 pharmacy residency programs polled in one study, 198 programs responded to questions about precepting opportunities offered to residents. When the responses were stratified by the availability of obtaining teaching certificates, 96% and 89% of teaching certificate programs and non-certificate programs, respectively, offered precepting opportunities.³ In another case, a questionnaire distributed to preceptors and residents at a 473-bed academic medical center demonstrated that most PGY1 and PGY2 residents do not think they should serve as primary preceptors for pharmacy students. This is due to duty and time limitations of the residency year. Residents also stated they did not receive effective feedback on resident–preceptor development, which was in opposition to the preceptors' responses. Currently, there is no evaluation tool to assess pharmacy resident–preceptors.⁴ Student evaluations meet ASHP requirements for evaluating preceptor effectiveness, so student evaluations may function as a tool for feedback on resident–preceptor development.¹ Based on the prevalence of precepting in residency programs and the inadequate feedback provided to residents with regard to precepting skills, a student evaluation tool was developed to assess whether or not residents were effectively functioning in the four teaching roles: instructing, modeling, coaching, and facilitating. The purpose of this pilot study was to implement a new process for utilizing student evaluations in developing and evaluating pharmacy residents as preceptors.

Methods

This was a single-center, prospective study conducted on pharmacy residency rotations within a not-for-profit, community teaching hospital system in Greensboro, NC. Most rotations were completed within the main 536-bed teaching hospital and family medicine clinic affiliated with the hospital. Student feedback was utilized to evaluate the precepting skills of PGY1 pharmacy practice residents. The institutional review board (IRB) approved the study as designed.

Pharmacy students that completed an APPE with a pharmacy resident during the study period participated in this study, and consent was waived for participation. Pharmacy residents who acted as co-preceptors for a minimum of two student-months were included. Residents'

responsibilities as co-preceptors generally included rounding with students, responding to student questions, evaluating student projects, acting as a professional role model, and discussing their progress and performance with the primary preceptor. Exclusion criteria included residents without two or more student-months of APPE because confidentiality had to be maintained to allow the students' evaluations to remain anonymous. Students were not allowed to evaluate residents who did not serve as their co-preceptor on APPE during the study.

The evaluation was adapted from RxPreceptor™, the experiential management software used by the three local schools of pharmacy to evaluate students, preceptors, and precepting sites. The questions were structured to address the role of a resident as the co-preceptor. Evaluation criteria also aligned with ASHP's four precepting roles for effective teaching: instructing, modeling, coaching, and facilitating.¹ Each criterion on the survey was classified as evaluating either the residents' instructing, modeling, coaching, or facilitating abilities. An example of the evaluation completed by the students can be found in [Figure 1](#). Other data collected in the survey included the resident name, APPE calendar month, and the name of the hospital or clinic within the system where the student and resident were on rotation. Students were also asked to describe two or three ways that the resident excelled or could improve as a preceptor. In addition, students were asked if the resident should be recommended in the future as a preceptor to other students.

Once the evaluation items were developed, the information was formatted into SurveyMonkey™ so that students could easily access the evaluation tool and the data could be monitored and analyzed confidentially. The surveys were password-protected and only accessible to the co-investigators and Residency Program Director (RPD). The primary resident investigator was not permitted to view any specific data but was allowed to view the survey counts with either the co-investigators or RPD. Each resident had an individual survey built for them using the same format and criteria so their feedback could be individualized at the end. Two current pharmacy students and one former pharmacy resident and current preceptor piloted the survey process prior to implementation. Suggestions for improvement were considered and utilized if appropriate at that time. Based on the feedback from the pilot, the project was implemented to obtain student feedback on resident precepting skills. At the end of each APPE, an e-mail was sent to the students that were co-precepted by a resident in the hospital system during that month. The e-mail contained the individual survey links for each resident with directions on how to complete the process for their resident. Survey counts were monitored each month by the co-investigators to assess student compliance with the process, which was then reported to the primary resident investigator. Reminder e-mails were sent to students who had not completed their resident evaluation after one week elapsed into their subsequent rotation.

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