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Research

Essential information for mentoring students interested in residency training

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Abstract

Background: Residency training programs have become increasingly competitive. It is difficult to mentor residency applicants without knowing factors used to select a resident.

Objective: To identify factors used by residency directors in selecting a pharmacy resident.

Methods: A survey was disseminated electronically to 1047 residency program directors in May 2012 that assessed factors in the residency application process. The survey included questions regarding grades, letters of recommendation, letters of intent, pharmacy pathways, and the interview. Two electronic reminders were sent to nonresponders approximately one week apart from the initial request.

Results: One hundred sixty-nine survey instruments were returned for a response rate of 16.1% with 70.4% of respondents being in the Postgraduate Year 1 (PGY1) Pharmacy residency programs. The interview was ranked as the most important factor in the residency process (67%). Letters of recommendation (9%) and letters of intent (4%) were the second and third factors. Eighty-four percent of respondents identified clinical preceptors as the preferred writer for letters of recommendation. Most institutions (59.8%) use a grade point average (GPA) cut off, with 79% preferring a GPA of greater than 3.0 on a 4.0 scale. Finally, pass–fail grades were viewed unfavorably compared to those on a grading scale (53.7%).

Conclusion: Numerous factors are considered by pharmacy residency directors when selecting an applicant. Any faculty who provides mentoring needs to be aware of these factors to assist applicants in the process of securing a residency position. Assistance with the interview process and instruction on writing letters of recommendation and intent are desirable.

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Introduction

Postgraduate pharmacy residency training has been around since the 1930s with hospital management internships. Over time the title has changed, but the premise remains the same, to further the education of the clinical

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pharmacist. Pharmacists seek postgraduate training for numerous reasons, including the opportunity to expand one's knowledge and skills beyond that of the entry-level doctor of pharmacy degree and the possibility that this training may be a future requirement for direct patient care.^{2,3} In 2005, the American Society of Health System Pharmacists (ASHP) established accreditation residency standards that were implemented to ensure consistency and to differentiate postgraduate year one (PGY1) and postgraduate year two (PGY2) residencies.

Over the past 20 years, there has been an increase in the number of residency programs and graduates from

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ASHP-accredited programs, but more recently, the process of obtaining a residency position has become highly competitive. From 2011 to 2012, there was a 13% increase in candidates seeking a PGY1 position. There may be several reasons driving this increase. In 2006, the American College of Clinical Pharmacy (ACCP) recommended that all pharmacists involved in direct patient care be residency trained. In 2007, ASHP outlined a vision that all health-system pharmacists receive this training. The timeline for this to be implemented is the year 2020. Another factor may be the concern that the workforce is saturated in certain areas of the nation. Graduates may feel they need postgraduate training to compete in a saturated job market.

The development of new PGY1 programs does not match the increase in student interest in residency positions. In 2012, there were over 3700 applicants participating in the ASHP residency matching program for PGY1 residencies, with only 61% of those applicants matching to a program nationwide. There were only 145 PGY1 positions that were not filled during the match. At the authors' institution, approximately 30% of the graduating student body applies for a PGY1 residency annually and roughly 62% of students match with a program, similar to the national match rate.

Faculty members have a responsibility in mentoring students in all aspects of the profession and practice of pharmacy, including how to best prepare them to become competitive PGY1 applicants. Efforts to prepare mentees may be anecdotal in nature and based on presumed factors such as grades and leadership roles. Students and faculty have expressed an interest in knowing factors and experiences associated with previously successful PGY1 applicants. With this in mind, the authors performed a literature search to identify if there have been any publications on the factors used by residency programs when selecting a pharmacy resident. At the time of the literature search and survey administration, no publications were found.

The purpose of this study was to identify factors and the desired qualifications that program directors use in their selection of a pharmacy resident (i.e., ranking an applicant). Furthermore, the authors were interested in exploring the criteria that residencies are employing for differentiating between candidates, specifically measures such as examining advanced pharmacy practice experiences (APPEs) of the applicant, preferred sources of letters of recommendation (e.g., internship employer, APPE

preceptor, and pre-pharmacy instructor), and the grade point average cutoff, if used, to eliminate applicants.

Materials and methods

A cross-sectional survey was developed specifically for this study. The survey instrument was created using survey software (Vovici 6, Herndon, VA; Table 1). A list of specifications was used to define the domains and the respective item sampling process. The list was comprised of common factors included in the residency application process such as grades, letters of recommendation, and the interview. Eight APPEs commonly requested at the author's institution were selected for ranking by the residency directors. This list is by no means inclusive of potential APPEs available and the only APPE required at the author's institution, included in this survey was drug information. Items pertaining to pass-fail APPEs and various pharmacy pathways (e.g., campus, distance, and satellite) were also included in the survey because these factors and their effect on securing a residency position have been debated by the faculty at the authors' institution. There were 20 questions included in the survey, that took an estimated ten minutes to complete (Fig. 1).

The survey was pilot tested by one psychometrician and four pharmacy educators from the authors' program with experience in survey development and postgraduate training, respectively. The purpose of this pilot phase was to test the adequacy of the instrument to meet the stated goals and to improve the internal validity of the survey. The pilot group identified ambiguities and difficult questions. They determined the time required to complete the survey and whether the timeframe was reasonable and assessed whether each question gave an adequate range of responses. Changes made as a result of pilot testing included survey format, question format, and item content.

Surveys were disseminated electronically to 1047 ASHP-accredited residency program directors (627 PGY1 and 420 PGY2) in the United States in May 2012. Contact information was compiled using the listing in the ASHP residency online directory. Two electronic reminders were sent to nonresponders approximately one week after the initial request. Survey responses were exported to an Excel spreadsheet before analysis via IBM SPSS Statistics, version 18.0.2 (IBM SPSS, Chicago, IL). Descriptive analyses were conducted on the data. The

Table 1 Specifications for the residency director survey

Residency domain	Survey item	Question type
Program demographics	1, 2, 17, 21, 22, 23, and 24	Multiple choice and open ended
Letters of recommendation	3, 4, 5, 6, 7, and 8	Multiple choice and open ended
Applicant interview	8, 19, and 20	Open ended and ranking
Grade Point Average (GPA)	9, 10, and 11	Multiple choice and open ended
Preferred applicant experiences	12, 13–16, and 18	Ranking and multiple choice

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