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Research Note

Survey of faculty workload and operational characteristics for academic drug information centers

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ABSTRACT

Introduction: A survey of drug information specialists from academic drug information centers in the United States was conducted to identify faculty workload, operational characteristics of the center, and contribution of those faculty and centers to pharmacy education.

Methods: A 32-item survey was administered to drug information specialists and pharmacy college/school deans. Faculty workload items included age, credentials, training, and responsibilities. Center operational items identified clients, number of requests, staffing structure, and funding source. Pharmacy education items included number and type of students training at the center as well as drug information's role in the curriculum. Participants were also asked to identify recent and anticipated changes as well as predict future challenges for academic drug information centers.

Results: The survey achieved a response rate of 81% from eligible institutions. The typical drug information specialist is between 31 and 50 years old, in a clinical track faculty position, and has an average of 13 years of drug information experience. Academic drug information centers are generally funded by the institution, open five days a week, and serve a variety of clients including the lay public. The average drug information specialist teaches one didactic course and is a preceptor for 17 advanced practice experience students, and 15 introductory practice experience students.

Conclusions: Drug information specialists and centers play an important role in pharmacy education. Results of this survey could assist in the creation of benchmarks for academic drug information faculty and centers in terms of workload, resource allocation, and promotion.

Introduction

The University of Kentucky established the first drug information center (DIC) in 1962.¹ The model spread and became a cornerstone of pharmacy practice over the following decades. While DICs can be found in a variety of settings, including health care institutions, managed care organizations, and pharmaceutical industry, it is clear that academic DICs located at colleges/schools of pharmacy are unique in that they provide onsite training for future pharmacists in both didactic and experiential settings.^{2–4}

Pharmacy faculty staffing DICs are often referred to as drug information specialists for their ability to formulate drug information responses efficiently using reliable resources.² While most clinical pharmacists also answer drug information requests and utilize drug

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information resources to varying degrees, drug information specialists are distinct.⁵⁻⁷ Many of these specialists have advanced post-graduate drug information education in the form of residencies or fellowships.

Numerous surveys have been conducted on the status of DICs in the United States.⁸⁻¹⁰ One of the most recent surveys conducted by Rosenberg et al.¹⁰ in 2008 identified 89 centers nationwide. While the number of DICs in the United States have decreased from a peak of 127 centers in 1986, surveys have reported an increase in the complexity and amount of time needed to answer requests, as well as an increased role in the training of health care practitioners.^{10,11} Additional concerns facing DICs over recent years have been focused upon quality improvement, including formation of request databases as well as the promotion of the service to health care practitioners and the general public.¹²⁻¹⁵

Little research has focused upon academic DICs located within colleges/schools of pharmacy. After 50 years, one of the most successful academic DICs, the University of Iowa's Drug Information Service, closed in 2014.¹⁶ Many administrators and faculty were left wondering, what is the future of academic DICs? Previous surveys have focused on DICs in located in hospitals, clinics, pharmaceutical industry, or that are freestanding.⁸⁻¹⁰ More research is needed on the utility of academic DICs and their relevance to pharmacy education.

The purpose of this study was to identify drug information specialist's faculty teaching workload and to assess academic DICs' operational characteristics, including funding, staffing structure, request volume, reported recent and anticipated changes, as well as predicted future challenges.

Methods

Eligible participants for the survey were drug information faculty working in accredited pharmacy programs. Survey participants and DICs were identified using an email list created by a manual review of accredited program websites as well as a listserv from the American Association of Colleges of Pharmacy (AAPC).

A unique 32-item survey was developed and received exemption status from relevant Institutional Review Boards. The survey assessed basic demographic data, teaching workload, and DIC operational characteristics such as funding, staffing, and operating hours. Questions were created by three pharmacy faculty and were pilot tested by two additional faculty.

The survey was administered via email using web-based survey software to drug information specialists, health science librarians, and pharmacy Deans during Fall 2015 with two reminders sent two weeks apart. There was no incentive for the survey. All responses, including those from participants of schools without a DIC, were recorded. Responses from librarians and administrators assisted in identifying whether the school had a center. For a DIC to be included as an active center, it needed to be staffed by at least one person, open at least one day a week, and located on the pharmacy campus. Responses from drug information specialists who worked at a center off-campus (such as in a hospital or health system) were excluded from DIC operational characteristics.

The following groups of questions were included in the survey: demographics; workload; DIC operational characteristics; and recent or predicted changes and challenges. Demographic and workload questions encompassed age, formal education in drug information/library science, credentials, certifications, years of experience, professional memberships, academic line (lecturer, clinical faculty, tenure-track/tenured faculty), department affiliation, and workload (teaching, scholarship, and service responsibility distribution). DIC operational questions included staffing structure, operating hours, client base, request volume, funding source, recent changes, and perceived challenges.

Survey results were collected and blinded using the online survey tool and analyzed using spreadsheet software. Duplicate responses from the same institution were excluded, with data from the drug information specialist being included in lieu of the librarian or administrator (i.e. Dean or department chair).

Results

The survey had 117 total responses from administrators, faculty, librarians, and drug information specialist faculty. Responses represented 110 unique, accredited pharmacy institutions within the United States to yield a response rate of 81% of eligible institutions.

Twenty respondents explicitly stated that their institution did not offer formal drug information services. Of those responses, half ($n = 10$) stated they utilized drug information resources for scholarly or educational purposes while three others stated drug information services were provided by a hospital or health system rather than within the academic institution.

Forty-four percent of respondents were drug information specialists ($n = 51$) who were actively engaged in teaching drug information within their pharmacy program. Thirty-two percent of total respondents practiced at an active DIC within a college/school of pharmacy ($n = 38$). These responses from drug information specialists and academic DICs are the focus of this study's assessment.

Drug information faculty demographics

Of the 51 responses from faculty drug information specialists, most drug information faculty fell within the age ranges 31-40 years (33%) and 41-50 years (24%). However, 16% of respondents were less than 31 years of age, and 10% were more than 60 years. Gender and ethnicity were not assessed.

Average years of experience were 10 years in academia, 13 years in drug information, and 17 years in the pharmacy profession. All respondents had either a bachelor's or doctor of pharmacy degree while three (6%) also earned a Master of Business Administration; 15 respondents (29%) had a Board of Pharmacy Specialties board certification as a pharmacotherapy specialist (BCPS).

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