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Experiences in Teaching and Learning

Teaching and assessing clinical ethics through group reading experience and student-led discussion

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ABSTRACT

Background and purpose: Ethical decision-making is one of the foundational elements of responsible patient care, yet traditional didactic coursework often misses the nuances of specific situational aspects of ethics as well as the impact of individual patient experiences on their perspective related to health care. The purpose of this study was to assess the impact of a clinical research ethics elective course involving a group reading experience and facilitated discussion on student decision-making and perspective on questions related to ethics.

Educational activity and setting: The elective was offered to second-year pharmacy students and was designed to teach ethical concepts within the framework of a group reading experience employing active learning through facilitated student-led group discussion. The book chosen was The Immortal Life of Henrietta Lacks by Rebecca Skloot. Students were assessed pre- and post-course using ethical scenarios (framed as "yes/no" questions) covering a wide range of topics, as well as over their familiarity with and confidence in making decisions related to ethical topics using a five-point Likert scale.

Findings: Sixteen students were enrolled in the course, with 14 (87.5%) completing all pre- and post-course assessments. There were no statistically significant changes in the proportion of students answering "yes" or "no" to the scenarios from pre- to post-course, though there were several items in which responses "shifted," meaning students switched answers from pre- to post-course. Overall, students showed significantly more familiarity with the topics covered after the course versus before (p < 0.05), also reporting improved confidence (p < 0.05) in making decisions related to the topics. The per-student analysis also showed significant changes in overall confidence and familiarity (p < 0.05).

Summary: Through the course, students showed increased familiarity with the history of clinical research and ethical topics discussed as well as improved confidence in making decisions related to clinical ethics. This type of course design provided a strong environment for discussion and group learning.

Background and purpose

Ethical decision-making is critical to the provision of modern patient-centered care. Many of the educational outcomes from the 2013 Center for the Advancement of Pharmacy Education (CAPE), which are also the first four standards of the Accreditation Council for Pharmacy Education Standards 2016, focus on the pharmacist as a caregiver who prioritizes patients' needs and makes decisions with the best interests of the patient in mind. Additionally, practice-ready pharmacists should be sensitive to the effects that cultural differences and other social determinants of health have on the development and implementation of plans for a patient's

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health and wellness.

ACPE Standards 2016 detail ethics as a topic to be included in the required curriculum in the social/administrative/behavioral sciences area of Appendix A, defining it as the "exploration of approaches for resolving ethical dilemmas in patient care, with an emphasis on moral responsibility and the ability to critically evaluate viable options against the needs of patients and other key stakeholders." To date, no in-depth analysis has been published detailing the ways pharmacy programs incorporate ethics, though individual descriptions of pedagogical modalities to teach ethics to pharmacy students have been published. He Sullivan University College of Pharmacy, ethics is taught in the required curriculum primarily in the first year (PY1) pharmacy law and ethics, communications, and research design courses, as well as the longitudinal progressive patient care lab courses that students take each quarter of the didactic curriculum (PY1 and second year [PY2]). Multiple elective courses map to the ethics topic of Appendix A, including geriatrics, wilderness medicine, a journal club elective, as well as the clinical ethics course described here.

Discussion-based learning is a type of learning in which communication among learners is used as a teaching modality. ^{10–12} This methodology is often used in combination with other strategies such as case-based or problem-based learning, using the discussion element as a means of increasing student engagement with the material. ^{10,13} Engaging learners in the process is a critical aspect of active learning, as well as holding learners accountable for the information. ¹⁴ Debates, a formalized form of group discussion with assigned roles attempting to "sway" or persuade others, have also been used and described in the literature. ^{10,13,15–17} However, debates are often designed to have a "vote" or decision made (often by the class as a whole or a neutral third party) for one side or the other. While this concept may fit well into some clinical controversies, formulary decisions, or even public health policy, the topics involved in ethical decision-making often do not mesh with the debate leading to decision model. The "grey areas" of clinical practice often preclude such concrete decisions, particularly in judging or evaluating past decisions made by others.

The Immortal Life of Henrietta Lacks¹⁸ by Rebecca Skloot is a nonfiction book published in 2009 detailing the life of Henrietta Lacks, a poor, African-American woman living in Virginia during the mid-20th century. She was diagnosed with cervical cancer and treated at Johns Hopkins University Hospital in Baltimore, Maryland. During her time in treatment, several samples of cells from her cervical cancer were taken without her consent and assessed for viability in creating an "immortal" cell line (one that would not die of natural senescence), something that had not been accomplished as of Henrietta's lifetime. Researchers were able to culture her cells, and significant scientific advances were then made possible, including development and testing of the polio vaccine, development of the vaccine against cervical cancer, and many others.

This book was chosen for our clinical ethics elective course as it provides both a compelling, relatable story to the reader, as well as a strong framework for group discussion built around this group reading experience. Other nonfiction books with similar subject matter and approach to narrative storytelling could be chosen in place of the one chosen for this course. To date, however, there has not been an evaluation of a group reading experience and discussion as a pedagogical method to teach clinical ethics, with evaluation of the effect on ethical decision-making and student confidence related to those decisions. We hypothesized that students would have increased confidence in their ability to make decisions as well as increased familiarity with the topics covered by the course.

Educational activity and setting

Sullivan University College of Pharmacy is a three-year accelerated doctor of pharmacy (PharmD) curriculum in which the students receive two years of didactic education (combined with longitudinal institutional and community introductory practice experiences [IPPEs]), followed by a final year of advanced pharmacy practice experiences (APPEs). Our institution is on the quarter system, and each quarter consists of 10 weeks of coursework, one week of finals, and a two-week break between quarters for the first two years. As a part of program requirements, students take at least eight credit hours of elective coursework over the first three didactic quarters of PY2 (each elective is two credit hours).

Course design

The clinical ethics elective course is a two-credit-hour course offered beginning in Summer (first) quarter 2014 to PY2 students in our program. The course met for 10 weekly class sessions of two hours each, with no class or final exam during the eleventh and final week of the quarter, as shown in the course syllabus attached as Appendix A. The course was designed to teach ethical research concepts within the framework of a group reading experience employing active learning through facilitated student-led group discussion.

The first week of the course was devoted to orientation to the way class would run each week and an overview of basic biomedical ethics concepts, such as the principles of autonomy, beneficence, nonmaleficence, and justice. Also in the first week, students were assigned a specific topic discussion to lead (with two to three topics per week) based on themes in those sections of the book (outlined in Table 1). These group discussions began in the second week of the course. To lead the group discussions, students were instructed to create a list of questions to ask the group and provide background reading if needed on the topic prior to class. Leadership of the topic discussion was evaluated by the course instructor on a 65-point scale including the quality of the comments, reference to resources or documents, and active listening (see "Topic Discussion Rubric" in Appendix A).

Students were assigned chapters of the book to read prior to class each week, and were quizzed on the contents of those chapters prior to starting the discussion. As discussed by Persky and Pollack, ¹⁴ holding learners accountable for the information is a critical aspect to ensuring productive learning sessions. The correct answers to the quiz were reviewed immediately following administration to ensure that students were equipped with similar baseline knowledge about the book chapters prior to the group discussion.

After the discussion, in between each weekly class, students were asked to write a 200- to 500-word reflection over the topics

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