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Research Note

National preceptor development program (PDP) prototype. The third of a 3-part series

Craig D. Cox^{a,*}, Katrina Mulherin^{b,c}, Sheila Walter^d^a Texas Tech University Health Sciences Center School of Pharmacy, 3601 4th Street STOP 8162, Lubbock, TX 79430, United States^b New Brunswick College of Pharmacists, 1224 Mountain Road, Suite 8, Moncton, NB, Canada E1C 2T6^c Leslie Dan Faculty of Pharmacy, Toronto, ON, Canada^d Faculty of Pharmacy & Pharmaceutical Sciences, 3-287, Edmonton Clinic Health Academy, 11405-87 Avenue, Edmonton, AB, Canada T6G 1C9

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ABSTRACT

Introduction: Preceptor development is critical to successful delivery of experiential learning. Although many preceptor development programs exist, a more individualized approach to training is needed. To accomplish this a national preceptor development program should be considered based on the continuing professional development model. A detailed prototype for this program has been described.

Methods: In this final installment of the series, the twelve evidence-based recommendations from the first installment were utilized to construct a prototype for a preceptor development program. Over a three-month period, investigators experimented with different designs and models before approving the final prototype.

Results: The prototype took the form of an electronic learning platform. Several categories were integral to the design and included sections entitled preceptor spotlight, mentorship, global outreach, choose your own adventure, continuing professional development, feedback, virtual online community, highlights/advertisements, what's new, competency assessment, and frequently asked questions. A graphic was developed to depict the process by which a preceptor would navigate through the web-based learning platform.

Discussion: The authors purposefully maintained a creative and unlimited vision for preceptor development. This conceptual model is intended to spark discussion and augment, refine, or develop entirely innovative ideas to meet preceptor needs. Development of a preceptor development platform could foster improved competency performance, enhanced interest in learning, and promote continuing professional development.

Conclusion: With a greater focus on experiential education in pharmacy, the need for a national preceptor development resource is only expected to increase.

Introduction

Faculties in Canada are transitioning to the entry-level doctor of pharmacy degree.¹ This transition increases the time students are required to spend in experiential placements from 16 weeks (640 hours) to 40 weeks (1600 h).¹ Aside from addressing the quantity of preceptor and site needs to meet this demand, it will be equally important to develop training programs to ensure the quality of the preceptors. To prospectively address these needs, a Canadian Experiential Education (CanExEd) Project was conducted from 2014 to

* Corresponding author.

E-mail addresses: craig.cox@ttuhsc.edu (C.D. Cox), katrina.mulherin@utoronto.ca (K. Mulherin), swalter@ualberta.ca (S. Walter).<https://doi.org/10.1016/j.cptl.2017.12.003>

Table 1

Link of recommendations for preceptor development program (PDP) mapped to prototype design elements.

Evidence-based recommendations	Prototype design elements
1. The PDP should provide multiple media and mode options for attaining each competency.	The “Choose Your Own Adventure” and “Competency Assessment” sections will contain information about and links for programs of different media and modes.
2. The PDP should facilitate research and quality improvement data collection, analysis and reporting.	Ten recommendations on how data generated from the site could be used for research or quality improvement/assurance strategies has been provided in the discussion section of this manuscript.
3. A set of preceptor competencies (and initial preceptor capabilities) should be developed.	This is represented by the individual puzzle pieces, each representing one of the nine competencies.
4. A PDP should developed using adult educational theories (constructivist social theory) to inform chosen medium and mode such as: <ul style="list-style-type: none"> • Learning in social context • Continuing Professional Preceptor Development (CPPD) • Student feedback for preceptors 	The “Mentorship” and “Virtual Online Community” sections would provide the opportunity to learn in a social context. The CPPD process is foundational to a user's interface with the site. The “Feedback” section of the site would allow for student, peer, or administrative feedback to be provided.
5. A national PDP should serve as a single entry point for all Faculties' CPPD and be sufficiently adaptable to facilitate curricular variations in policy, assessment, educational principles and educational philosophy.	Variety of resources available on PDP would allow for individual preceptors to customize their experience. Each ExEd Program will be able to include content particular to that Faculty.
Other recommendations	Prototype design elements
6. Gamification of a learning platform should be trialed and researched as a viable means of increasing preceptor engagement in CPPD.	Preceptor ranking of “exceeds”, “meets”, and “below” expectations for each competency could serve as a starting point for preceptors to compare/ compete against other preceptors in the achievement of all nine competencies.
7. The PDP should be independently evaluated for efficacy and efficiency.	The ten recommendations provided for research and quality improvement/ assurance strategies would allow for this.
8. Perpetual resourcing is necessary for curating content and monitoring social learning networks on the PDP.	The “Global Outreach”, “Highlights and/or Advertisements”, “What's New”, and “Choose Your Own Adventure” sections would require constant review and updating. Staff specifically focused on this area would be required.
9. The PDP should enable preceptors to extract their CPPD as an ‘artifact’ for inclusion in their Provincial Regulatory Authorities’ (PRAs) proof of continuing competency for licensure.	Documentation of participation in CPPD process will occur through the CPPD section of website. The ability to extract reports would be expected.
10. Provincial Regulatory Authorities (PRAs) should phase in consistent regulation mandating preceptor training and education for pharmacists undertaking the role.	PRAs could be provided access to the website to monitor preceptor progress on documenting their CPPD.
11. Techniques known to increase preceptor retention should be integrated into the platform.	The “Preceptor Spotlight” and “Highlights and Advertisements” sections are designed to enhance site engagement.
12. A section of the PDP should be designed for practice site support staff.	Non-preceptors could also be directed to site to access resources to assist them in their supportive role of faculty and preceptors. Certificates of completion could be generated to highlight employee commitment to continuing development.

CPPD = continuous professional preceptor development.

2016 under the auspices of the Association of Faculties of Pharmacy of Canada (AFPC).² This project consisted of seven major priorities focused on different aspects of experiential education. The third priority primarily addressed best practices in preceptor development to establish/augment the qualities/abilities of preceptors and serves as the foundation for this three-part series.³⁻⁵ The first paper in the series (Part 1) provides an overview of the influential evidence and theory underpinning preceptor development and describes key components to consider when developing a preceptor development program (PDP). A series of 12 recommendations emanated from the research and can be found in Table 1. One of the recommendations was to establish preceptor competencies to provide the framework for describing the “ideal” preceptor. The second paper of this series (Part 2) outlines nine competencies, along with supporting performance indicators that could be used to assess preceptor competence. The authors deemed these competencies and performance indicators foundational to a comprehensive PDP.

In this final installment of the series, the 12 recommendations from Table 1 are used in constructing a prototype for a PDP. The integration of these recommendations into the PDP model is discussed. This conceptual model is intended to spark discussion and augment, refine, or develop entirely new ideas to meet the recommendations. The authors recognize to successfully create a PDP of this scope, additional stakeholder input, analysis of financial, personnel, and technological resources and a pilot study must occur prior to wide implementation. The authors purposefully maintained a creative and unlimited vision for preceptor development and the reader is encouraged to consider the model with an open-mind and consider a “perfect-world” scenario where no barriers exist. Once the “ideal” model has been designed, time can be spent prioritizing the most important and feasible components of the PDP.

Methods

A prototype for a national PDP was constructed. It was driven by three primary principles: (1) preceptor competencies and performance indicators would be central to all components of the program, (2) strategies for preceptor engagement would be critical for its success, and (3) the design must allow for quality improvement/assurance measures to ensure ongoing effectiveness of the final prototype.

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