Experiences in Teaching and Learning

Combining rhetoric and role-play to introduce and develop patient presentation skills in third year pharmacy students

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ABSTRACT

Background and purpose: To implement a mock rounds activity designed to introduce and develop patient presentation skills in pharmacy students.

Educational activity and setting: The sample population included third-year pharmacy students enrolled at the University of New Mexico (UNM) and Virginia Commonwealth University (VCU) during Fall 2011, 2012, and 2013. A mock rounds activity was developed and implemented in the Pharmaceutical Care Lab setting. Students were assigned an infectious disease case and asked to create an assessment and plan to present orally to an acting preceptor in a small group laboratory setting. Summative assessment of student performance was evaluated using a standardized rubric.

Findings: A total of 621 students (VCU: 371; UNM: 250) from both universities participated in the mock rounds activity. Data was collected using the rubric. Students scored highest in the areas of respectfulness (94.8% exceeds expectations) and completion time (86.9% exceeds expectations). The lowest ratings were in the areas of logical flow and organization (73.7% exceeds expectations) and ability to answer preceptors' questions (73.3% exceeds expectations).

Discussion and summary: A simulated mock rounds activity enabled students to practice patient case presentation skills and receive summative feedback prior to Advanced Pharmacy Practice Experiences.

Background and purpose

Upon entering advanced pharmacy practice experiences (APPEs), pharmacy students are expected to orally present patients to a preceptor or team in a proficient manner to communicate clinical information. Despite this expectation, patient presentation skills are difficult to teach in the didactic portion of the pharmacy curriculum because students may not have experienced clinical patient care or observed patient presentations prior to APPEs. Numerous questions exist surrounding the most effective instructional design, the appropriate curricular placement, and the most effective assessment strategy for patient presentation skills prior to APPEs.

In medical education, patient presentation education has been effective when incorporated into the clinical reasoning portion of

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the curriculum.[1] In addition, both rhetoric and role-playing have been shown to be effective in teaching communication skills.[2] Rhetoric, is defined as a "skill in the effective use of speech."[3] The rhetorical model divides communication into four categories: the message, the audience, the purpose, and the occasion.[4] These four constructs apply to patient presentations in medicine because they create a persuasive dialogue about the patient between the presenter and the audience.[2]

An analysis of rhetoric and patient presentation skills was evaluated in a descriptive study by Lingard and Haber[2] in a group of third-year medical students on a general medicine service. The investigators found a disconnect between the perceived purpose of the patient presentation between students and preceptors. Students perceived the patient presentation in a legalistic manner as a rigid, inflexible "data-storage" and delivery mechanism that was either done correctly or incorrectly. Contrastingly, medical instructors viewed the presentation as a flexible communication mechanism that was rhetorical or sensitive to context. This difference led to mutual frustration. Students became frustrated that although they were doing the presentation "correctly," the instructors seemed dissatisfied. Instructors felt frustrated because they perceived that students did not understand what was "pertinent" to the patient.[2] This study demonstrates the need to include a rhetorical aspect when teaching how to orally present patients to avoid frustrations and to incorporate context and pertinence into the training of students.

Role-play as an instructional method has been well studied in education literature.[5–7] Role-play brings an authenticity to an activity by combining a realistic problem with a contextual mechanism for students to work to solve the problem. Role-play engages students on an emotional level due to the simulation of a realistic problem, develops social interaction skills as students try different methods of communication, and stimulates both the motor and cognitive areas of the brain that leads to the development of multiple intelligence angles. Based on these benefits of role-play in educational environments, application of this instructional method to patient presentation skills seemed like a natural step in introducing and developing this skill in pharmacy students.

The best manner to introduce and develop patient presentation skills in pharmacy students has not been well-studied. Unlike medical students who begin interacting with patients and other healthcare professionals during the first year of their medical education, pharmacy students often do not interact with patients or a healthcare team until their APPEs. Therefore, pharmacy instruction on patient presentation skills should include didactic knowledge, opportunities for performance and observation, and feedback for reflection and improvement. Within the pharmacy curriculum, the teaching environment that most lends itself to addressing patient presentation skills is a pharmaceutical skills or care lab because that setting simulates healthcare environments specific to pharmacy, provides an area to introduce and develop skills in a formative manner, and divides students into smaller groups to facilitate individualized feedback and instruction.

As an assessment and feedback tool, rubrics have been utilized in activities on patient presentation skills in pharmacy education.[7] Using rubrics for assessment and the principles of clinical reasoning, rhetoric, and role-play to introduce and develop patient presentation skills into the curriculum at two institutions, a collaborative mock rounds activity was developed incorporated into the third-year pharmaceutical skills lab curriculum at both the University of New Mexico College of Pharmacy (UNM COP) and Virginia Commonwealth University School of Pharmacy (VCU SOP). Faculty at both universities collaborated on curriculum development and implementation of the activity. Instructors designed an approach to address both effective communication and transmission of information and rhetorical considerations.

Objective

The objective of this study was to implement a mock rounds activity designed to introduce and develop patient presentation skills in pharmacy students in two Pharmaceutical Care Lab (PCL) settings at VCU SOP and UNM COP over multiple years from 2011 to 2013. This study was determined to be exempt from review by the institutional review boards at both institutions.

Educational activity and setting

Mock rounds design

The mock rounds activity was a collaborative effort between UNM COP and VCU SOP. The sample population included all third-year pharmacy students enrolled at the UNM and VCU during Fall 2011, 2012, and 2013. A mock rounds activity was developed and implemented in the PCL setting. This activity was designed for a laboratory setting, as small groups are best for simulating the mock rounds environment.

The UNM COP pharmacy practice skills lab is a two-credit course. It is the fifth installment in a six-semester practice-based laboratory course sequence. The UNM COP laboratory course is divided into three, two-hour lab sections with one common hour or lecture time once weekly. Each lab section contains 28–30 students. Participating faculty at UNM included the course coordinator and post-graduate year 1 (PGY1) and post-graduate year 2 (PGY2) residents from the three local hospitals in UNM.

VCU SOP pharmacy practice skills lab is a one-credit course. It is also the fifth installment in a six-semester practice-based laboratory course sequence. The students are divided into two-hour lab sections offered three different times per week with one common hour or lecture time once weekly. The three lab sections on the main campus in Richmond had between 32–42 students, while satellite campuses in Fairfax had 13–24 students and Charlottesville, the newest distant campus that opened in Fall 2012, had eight and then three students. The Fairfax and Charlottesville lab sections overlap with two of the labs at the main campus. Participating faculty and residents at the VCU Richmond campus included the course co-coordinators, clinical pharmacists, PGY1 residents, and PGY2 residents. At the Fairfax satellite campus, PGY1 residents acted as the preceptors; however, they had oversight from a clinical pharmacist who was also present throughout the entire activity. At the Charlottesville satellite campus, a clinical