

ACCP Academy Teaching and Learning Newsletter

Volume 3
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Editor: Thomas D. Zlatic, Ph.D.

Graduation

The first ACCP Academy graduation took place last fall in Anaheim, California, at ACCP's 2009 Annual Meeting. Graduates of both the Leadership and Management Certificate Program and the Teaching and Learning Certificate Program enjoyed a breakfast reception with Academy faculty and members of ACCP's leadership. Then-President John Murphy congratulated the graduates on completing the 28 hours of live coursework, developing and maintaining online portfolios reflecting on their coursework, and participating in mentor assessments along the way. The 21 graduates of the Teaching and Learning Certificate Program should be commended for their hard work and dedication to improving the education provided our students. In addition, ACCP extends sincerest thanks to the mentors, the faculty, and the ACCP Academy Teaching and Learning Certificate Program Director, Thomas D. Zlatic, Ph.D. For the past 3 years, Dr. Zlatic has led the program to what it is today. Almost 170 professionals are currently enrolled in this growing program.

Congratulations, graduates!

Elias Chahine, Pharm.D., BCPS
Roland N. Dickerson, Pharm.D.
Jennifer L. Donovan, Pharm.D.
Marty Lee Eng, Pharm.D., CGP, FASCP
Jennifer Siliven Hardesty, Pharm.D., BCPS
Jomy M. George, Pharm.D., BCPS
Abir O. Kanaan, Pharm.D.
Joel C. Marrs, Pharm.D.
April D. Miller, Pharm.D., BCPS

Julie A. Murphy, Pharm.D., BCPS
Phillip S. Owen, Pharm.D., BCPS
Rolee Pathak, Pharm.D., BCPS
Michael J. Peeters, Pharm.D., BCPS
Lori L. Schirmer, Pharm.D., BCPS, BCNSP
Kristine S. Schonder, Pharm.D.
Amy L. Seybert, Pharm.D.
Zachary A. Stacy, Pharm.D., BCPS
Tyan Frazier Thomas, Pharm.D., BCPS
Joseph P. Vande Griend, Pharm.D., BCPS
Craig B. Whitman, Pharm.D., BCPS
Nancy S. Yunker, Pharm.D., BCPS



Commencement Means "Beginning"

Congratulations to all recent graduates of the ACCP Academy Teaching and Learning Certificate Program. We hope your involvement with the certificate program continues, even though you have completed all requirements. In particular, we invite you to be a mentor for incoming registrants.

Some of you will recall how difficult it can be to find a mentor who is able and willing to provide

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Editor's note: The ACCP Teaching and Learning Academy Newsletter is a quarterly electronic publication initiated to publicize ACCP Academy updates, to provide resources and tips that can enhance teaching, and to serve as a means of exchange for those involved in the ACCP Academy Teaching and Learning Certificate Program (TLCP). You are invited to contribute by suggesting ideas for content and by providing short items of interest. Please send your suggestions and comments to Wendi Sirna, ACCP Project Manager, at wsirna@accp.com.

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feedback, particularly mentors knowledgeable in ability-based education. Now that you have gone through the program, practiced teaching and learning strategies in the classroom and clinic, and documented your work in your portfolio, you are in an excellent position to share your knowledge and experience with newcomers. If you would like to volunteer, please contact Tom Zlatic (tzlatic@stlcp.edu) or Wendi Sirna (wsirna@accp.com).

Spring Programming

The following programs are available for Academy credit at the 2010 Spring Practice and Research Forum. For complete meeting information, including online registration, visit www.accp.com/sf. Register before March 12 for maximum “early” savings!

Required Modules

Friday, April 23

8:00 a.m.–12:15 p.m.

Planning for Effective Teaching (module 1)

Sunday, April 25

2:30 p.m.–6:45 p.m.

Assessing Student Learning (module 3)

Reminder: Participants should complete portfolio assignments from previous symposia before attending the next one. Participants must have completed the prerequisite course, Basic Training for New Clinical Faculty and Preceptors, before receiving Academy credit for any other required modules.

Electives

Saturday, April 24

2:30 p.m.–4:30 p.m.

What’s New in Classroom Teaching

Monday, April 26

9:00 a.m.–11:00 a.m.

Interprofessional Education

The two TLCP electives focus on Trends and Innovations in Pharmacy Student and Resident Education. The ACCP Spring Practice and Research Forum Program Committee has organized both electives.



The first elective, What’s New in Classroom Teaching, will provide overviews on learning styles theory (Melody Ryan, Pharm.D., FCCP, BCPS), team-based learning (Stuart J. Beatty, Pharm.D., BCPS), and audience response systems (Jeff Cain, Ed.D.).

The second elective, Interprofessional Education, discusses the background and importance of interprofessional education (Susan Meyer, Ph.D.), incorporating interprofessional education into the classroom and experiential rotations (Sara P. Shrader, Pharm.D., BCPS), and ways in which to incorporate interprofessional education into other student-related activities (Amy V. Blue, Ph.D.).

Note: There are no prerequisites for electives.

Socratic Teaching in the Clinical Setting

John M. Burke, Pharm.D., FCCP, BCPS

Zachary A. Stacy, Pharm.D., BCPS

In Basic Training for New Clinical Faculty and Preceptors, offered at the ACCP Annual Meeting in Orlando last October, Jack Burke and Zack Stacy discussed methods to enhance students’ thinking skills in a clinical environment. Here, they expand on their discussion of Socratic questioning.

The challenge in effective teaching is getting students to think for themselves. Many times, teachers are inclined to focus on the transfer of knowledge. However, the JCPP Vision of Pharmacy is for pharmacists to be the health care professionals responsible for the rational use of drugs.¹ Pharmacists must not simply be a reservoir of countless facts, but must also be able to collect, interpret, and analyze information critically to optimize drug therapy. Socrates, the ancient Greek philosopher, taught his students to think by asking them questions. Socratic teaching can be an effective technique for engaging pharmacy students and teaching them to think.

A variety of methods have been labeled “Socratic.” However, the use of a series of questions to help the student discern understanding is essential. These questions must be well sequenced to build on each other logically. For students who are naïve about a subject, the questions may be leading and easily answerable.





For more sophisticated students, the questions can build on already acquired knowledge and understanding. In either case, Socratic teaching engages the student in an active dialogue. Simply asking a series of questions to painfully identify knowledge deficits is neither “Socratic” nor “teaching.”

The clinical setting is an ideal location for Socratic teaching.^{2,3} The small group allows the establishment of good teacher-student rapport and can minimize the pressure on the student. The preceptor can identify a student response and expose the unreasoned or underdeveloped logic. A patient-specific scenario provides an opportunity to develop connections between knowledge and application, basic and clinical sciences, and consistent and inconsistent data.

The potential benefits of Socratic teaching extend to the preceptor as well. Assessment is not necessarily the goal of Socratic teaching, but it can help identify areas of strength and weakness. Identifying areas of superficial understanding or misconceptions can help preceptors refocus their teaching efforts. Preceptors may even recognize deficits in their own understanding. Although a more in-depth understanding of a subject may be helpful in devising an effective line of questioning, the Socratic method does not assume the facilitator is the leading authority. In fact, Socrates maintained he was simply trying to understand the essence of the question. Consequently, students and preceptors can both cognitively grow from this process.

The Socratic method can be used to teach students at a variety of levels. Below is an example of a possible exchange between a student and preceptor. This particular example could occur with a student having little drug knowledge on an introductory practice experience or perhaps a student on an advanced practice experience.

Example:

Preceptor: Let’s talk about your patient’s drug therapy. Why is your patient on lisinopril?

Student: I am not sure.

Preceptor: Lisinopril is in what class of drugs?

Student: Uh, I think it is an ACE inhibitor.

Preceptor: What does that mean?

Student: It inhibits the action of angiotensin-converting enzyme.

Preceptor: What happens because of that inhibition?

Student: Well, it decreases the conversion of angiotensin I to angiotensin II.

Preceptor: So what happens to levels of angiotensin II?

Student: They are decreased.

Preceptor: What are the effects of angiotensin II and what would be the result of decreased serum levels?

Student: I don’t know.

Preceptor: Is angiotensin II a vasoconstrictor or a vasodilator?

Student: It is a vasoconstrictor.

Preceptor: So what is the effect of a decrease in vasoconstriction?

Student: Vasodilation. Ah, so that means that it would decrease blood pressure and be useful for the patient’s hypertension.

Preceptor: That is very good. Do ACE inhibitors have any other effects?

Student: Um. Yes, but I’m not sure what.

Preceptor: OK. Does angiotensin II have any effects on the adrenal gland?

Student: I think it stimulates secretion of aldosterone.

Preceptor: What effect would that have?

Student: It would decrease aldosterone-stimulated sodium and water reabsorption. So, that would also decrease blood pressure.

Preceptor: That’s great. Does the patient have any other indications that would benefit from a lowering of blood pressure?

Student: Heart failure.

Preceptor: That’s right.

¹ Joint Commission of Pharmacy Practitioners. Vision Statement 2015. Am J Pharm Educ 2005;69:Article 56.

² Fritts HW. Are we Socratic teachers? Trans Am Clin Climatol Assoc 1979;90:109–15.

³ Lewis DP. Using the Socratic method in office-based teaching. Fam Med 2004;36:162–3.

⁴ The Socratic method in medicine—the labor of delivering medical truths. Fam Med 2005;37:537–9.

It has always seemed strange to me that in our endless discussions about education so little stress is laid on the pleasure of becoming an educated person, the enormous interest it adds to life. To be able to be caught up into the world of thought—that is to be educated.

—Edith Hamilton

I Can't Believe They Did That!

Improving Student Professionalism in the Classroom and Clinic

Dana P. Hammer, Ph.D., R.Ph., M.S.
Andrew Berry, Pharm.D. Candidate 2010, University of Washington School of Pharmacy

For many faculty members, especially those less experienced, the topic of student behavior is especially important. If students behave disrespectfully in the classroom or at practice sites, faculty are often ill equipped to effectively handle these situations and prevent them from recurring. An educational session at the ACCP Annual Meeting in October 2009 addressed these issues. Participants were asked to read two articles before the session:

- Roth MT, Zlatic TD. Development of student professionalism. *Pharmacotherapy* 2009;29:749–56.
- American College of Clinical Pharmacy. ACCP Student Commentary. Tenets of professionalism for pharmacy students. *Pharmacotherapy* 2009;29:757–9.

Several themes were discussed during the 2-hour workshop.

• Professionalism defined

The core of professionalism is a sense of serving others – putting their needs above one's own. This mirrors the core of an individual's character – does he or she believe in and practice altruism? Much of the student behavior that faculty find of concern can better be described as a matter of civility; texting in class, arriving late to the practice site, and displaying other types of disruptive behavior are potentially reflections on one's character, but they do not encompass the entire set of attributes that describe professionalism. Thus, when devising strategies for handling and preventing certain behavior, one must be specific in describing that behavior because the corresponding strategies will differ. For example, having behavioral expectations for classroom behavior clearly described and discussed in class may help prevent disruptive behavior, whereas service-learning and volunteer opportunities may be more likely to help students develop altruistic traits.

Failure is instructive. The person who really thinks learns quite as much from his failures as from his successes.

–John Dewey

• Student perspectives on professionalism

Various barriers to developing professional behavior exist for both students and faculty. Students may be young and immature when entering pharmacy school. Even mature students may have very little experience working in a pharmacy setting, meaning they may not understand what it means to be a pharmacist, much less a professional. Faculty may not believe that professionalism is teachable, or they may believe that because students are in a professional program, they do not need to be “taught” professionalism. Some faculty and preceptors may not be positive professional role models. These are legitimate concerns, but developing professionalism remains an important part of pharmacy school, even if it is difficult to teach in a classroom setting or model at the practice site.

• Strategies for developing student professionalism

The more people are treated as objects and less as intelligent individuals, the less likely they are to behave professionally. If we treat students as individuals who will be future colleagues, they will be more likely to meet our expectations. Involve them in creating behavioral expectations for class and practice site syllabi – many of them will likely agree with you about what should be expected of them such as turning off cell phones in class, using laptops for note-taking versus using Facebook, and dressing professionally for the clerkship. Setting clear expectations for students is critical to avoiding misunderstanding and frustration. Faculty members should also conduct themselves professionally because students pay attention to and emulate the behavior of role models. Keeping students challenged and engaged also reduces disruptive behavior. For example, giving them cases in class to discuss among themselves and with the faculty member rather than lecturing the entire time and making sure they have individual responsibilities that engage them in pharmacist activities at the practice site rather than having them shadow another individual encourages student engagement and involvement. Many other professional activities can also develop aspects of professionalism – engaging students in health fairs, underserved experiences, political action in organizations, and other pro-pharmacy activities can help students develop positive professional behavior. Students should also receive constructive feedback



periodically on their development as professionals – typical course grades do not usually reflect this behavior. Positive behavior should be rewarded and negative behavior, penalized, for both students and faculty. Consider developing an award based on many criteria, the core of which could be service to others. Some schools have a student professionalism committee as a sounding board for peers as well as faculty; this committee can develop school-wide professionalism initiatives.

- **Many resources to help with student professionalism**

One excellent source is the APhA-ASP/AACP Toolkit on Professionalism for Students and Faculty, available at http://www.pharmacist.com/AM/Template.cfm?Section=Professionalism_Toolkit_for_Students_and_Faculty&Template=/CM/HTMLDisplay.cfm&ContentID=5415. Other references shared were as follows:

- APhA-ASP/AACP-COD Task Force on Professionalism. White paper on pharmacy student professionalism. *J Am Pharm Assoc* 2000;40:96–102.
- Stern DT, ed. *Measuring Medical Professionalism*. New York: Oxford University Press, 2006:19.
- Berger BA, ed. *Promoting Civility in Pharmacy Education*. Binghamton, NY: Pharmaceutical Products Press, 2003:71–90. Copublished as *J Pharm Teach* 2003;9:71–90.
- Berger BA, Butler SL, Duncan-Hewitt W, et al. Changing the culture: an institution-wide approach to instilling professional values. *Am J Pharm Educ* 2004;68:Article 22.
- Boyle CJ, Beardsley RS, Morgan JA, et al. Professionalism: a determining factor in experiential learning. *Am J Pharm Educ* 2007;71:Article 31.
- Duncan-Hewitt W. The development of a professional: reinterpretation of the professionalization problem from the perspective of cognitive/moral development. *Am J Pharm Educ* 2005;69:Article 6.
- Hammer DP, Berger BA, Beardsley RS, Easton MR. Student professionalism. *Am J Pharm Educ* 2003;67:Article 96.
- Hammer DP. Improving student professionalism during experiential learning. *Am J Pharm Educ* 2006;70:Article 69.

The take-home message from the workshop was that specific professional behavior should be well defined so that appropriate strategies can be devised to help develop that behavior. Participants were able to share their experiences with unprofessional behavior and then

discuss what changes they might make to their courses and rotations to prevent such behavior from occurring in the future and to develop positive professional behavior.

Nothing in education is so astonishing as the amount of ignorance it accumulates in the form of inert facts.

–Henry Adams

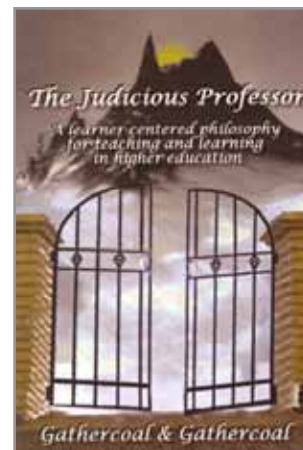
Learning Through Structured Reflection

The “Tomorrow’s Professor” blog hosts a wide variety of short articles related to teaching and learning. Those engaged in constructing portfolios or in teaching students who are keeping journals can get some insights from the entry titled “Learning Through Structured Reflection” (<http://tomprofblog.mit.edu/2009/11/10/981-learning-through-structured-reflection/>).

Teaching and Learning Titles at the Bookstore

The faculty members of the ACCP Teaching and Learning Academy have recommended a special package of books to complement your Academy studies. For a limited time, you can purchase these three books and receive special pricing:

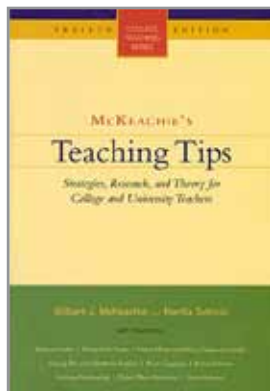
- *The Judicious Professor*, by Paul Gathercoal and Forrest Gathercoal—an examination and analysis of teaching at the college and university level, with a focus on the sharing of responsibility for teaching and learning between the professor and students. Through both theory and practical examples, the nature of the judicious professor is discussed and demonstrated.



ISBN: 1-880192-53-5; 2007; 228 pages; softbound

List Price: \$29.95

- *McKeachie's Teaching Tips: Strategies, Research, and Theory for College and University Teachers*, by Wilbert J. McKeachie, Sc.D., Ph.D., and Marilla Svinicki, Ph.D.—a handbook designed to provide helpful strategies for dealing with both the everyday problems of teaching at the university level and those that arise in trying to maximize learning for every student. The suggested strategies are supported by research and are grounded in enough theory to enable teachers to adapt them to their own situations. This 12th edition features coverage of updated technology in the “Technology and Teaching” chapter, which includes issues such as the use of PowerPoint slides, plagiarism, and effective Internet research.

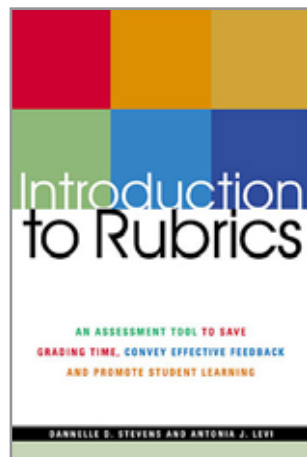


ISBN: 0-618-51556-9; 2006; 407 pages; softbound

List Price: \$64.95

- *Introduction to Rubrics: An Assessment Tool to Save Grading Time, Convey Effective Feedback and Promote Student Learning*, by Dannelle D. Stevens and Antonia Levi—You need rubrics if you find yourself repeating the same comments on

most student papers; you worry that you are grading the latest papers differently from the first; you are concerned about communicating the complexity of a semester-long assignment; you question the consistency of your and your colleagues' grading scales; or grading is taking up far too much time. Research shows that rubrics save professors' time while conveying meaningful and timely feedback for students and promoting self-regulated and independent learning.



ISBN: 1-57922-115-7; 2004; 112 pages; softbound

List Price: \$19.95

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American College of Clinical Pharmacy



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Spring Practice and Research Forum

Check out ACCP Academy programming; curricular track programming; PRN-developed, therapeutic-area focus sessions; satellite symposia; scientific poster sessions; networking forums; and more!

April 23–27, 2010 • Charlotte, North Carolina

Charlotte Convention Center
Hilton Charlotte Center City (headquarter hotel)
Marriott Charlotte City Center

Visit the ACCP Web site, www.accp.com, for complete meeting details.



13000 W. 87th St. Parkway, Suite 100 • Lenexa, KS 66215 • (913) 492-3311 • accp@accp.com