Learning professionalism through practice exposure and role models

How do pharmacy students learn professionalism? Ellen Schafheutle and colleagues from the Workforce Academy and the National Primary Care Research and Development Centre in Manchester are trying to find out.

In recent years, the pharmacy profession has increasingly engaged in a debate about professionalism, what it means in a pharmacy context, how it can be nurtured among students and practitioners alike, and how it can be supported over the course of a pharmacist’s career. However, given the lack of empirical evidence about professionalism in pharmacy, we have looked to medicine, which has led the way in both debate and investigation about professional values and behaviours in modern day healthcare. In parallel with similar developments in the US, the medical profession in the UK underwent considerable consultation to reach a definition of modern medical professionalism as “a set of values, behaviours and relationships that underpin the trust the public has in doctors.”

In pharmacy, no such overarching definition is available, but some attempts have been made at least to describe elements or attributes of professionalism, which are often broken down into values, attitudes or behaviours. Most of the literature stems from the US, where the focus has been more on how students learn professionalism during their undergraduate education, rather than on how this continues to develop among the pharmacist’s career. However, given the lack of empirical evidence in pharmacy and the difficulties professionals face in defining professionalism, what it means in a pharmacy context, and how it can be nurtured among students and practitioners alike, and how it can be supported over the course of a pharmacist’s career, Ellen Schafheutle and colleagues from the Workforce Academy and the National Primary Care Research and Development Centre in Manchester are trying to find out.

In order to nurture professional values and practice exposure and role models in pharmacy, it is important to understand what aspects of professionalism in practice are valued by pharmacists, patients and the public alike. To address this, the Pharmacy Practice Research Trust commissioned a series of studies to investigate three different areas: teaching and assessment of professionalism in pharmacy education, patient-centred professionalism among newly registered pharmacists and contextualising professional pharmacy practice teaching or had a wider curriculum overview. The interviews aimed to find out where in the curriculum the staff saw professionalism being taught or addressed. EIS also facilitated two focus groups with between five and eight fourth-year MPharm students in each of the three schools, to find out where and how they felt they learnt professionalism.

A flavour of what we found

Something that struck us early on in this study was the difficulty both students and teaching staff had in defining professionalism in pharmacy in the abstract sense. What they found somewhat easier to describe were examples of good or bad professionalism, both in terms of attitudes and behaviours. Examples of attitudinal attributes of professionalism included altruism, duty of care, empathy, honesty, integrity, accountability and excellence. Behavioural attributes were also mentioned and they included taking responsibility for one’s actions in terms of learning, communicating sensitively and respectfully, putting others’ needs first, being non-judgemental in one’s evaluations, being approachable, having a positive attitude and being respectful to others.

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actions and communication, being punctual and dressing appropriately.

Following these early discussions with students and staff, what became apparent was the extent to which fourth-year students based their descriptions of experiences of professionalism on practice rather than on what they had experienced or learnt in the academic environment. Furthermore, not only were these practice experiences gained outside the school environment, they were gained through vacation and part-time jobs that students had organised outside their MPharm courses.

Teaching staff recognised the importance of such practice exposure and all three schools had also incorporated community and hospital pharmacy visits or placements into their curricula. Both staff and students regarded these as important for supporting students’ learning of professionalism. However, they also recognised the limited availability of placements organised by the schools in the current set-up, and the logistical availability of placements organised by the Pharmacy Practice Research Trust. The above summary only gives a flavour of the potential role models.

Nevertheless, even though non-pharmacists and other pharmacist academics were seen, to an extent, as having a role to play in the students’ development of their professionalism, this role appeared to be limited. However, there was one group of teaching staff who were clearly recognised by students as role models, who were imparting professionalism learning that was closely linked to practice. These were pharmacists who retained an element of patient-facing practice in either hospital or community. They were usually teacher practitioners or teaching fellows, and they were influential and respected for teaching and role modelling that was very much grounded in current practice.

Discussion

The above summary only gives a flavour of what emerged from the study. We focused on practice exposure and the importance of role models here, but there are many other aspects that are important to explore and analyse further. For example, what kinds of things can be provided within the academic environment to support positive professionalism learning and development effectively? What happens, for example, if students’ practice experience is bad or provides them with poor role models? Is there a role for teaching staff in schools of pharmacy to support students in managing their experiences, by providing guidance and feedback on what constitutes good or bad professionalism, thus supporting them to form their own ideas of professionalism?

Also, if a definition or description of professionalism (or its elements) is still rather difficult and elusive, can professional attitudes and behaviours be assessed? Or should they be assessed? What form of assessment can and should such assessments take? Is professionalism learning about a process that requires support and thus makes formative assessment more appropriate? Or should we, at some point, aim to assess professionalism in a summative way? And, if so, would we expect to fail some students on their (poor) professionalism? It may be that this debate will move forward following experience with the code of conduct for pharmacy students that was introduced last year, and fitness-to-practice procedures that are due to be in place in all schools from September this year.

Nevertheless, our study clearly shows the importance of practice exposure and experience in supporting students’ learning of professionalism, which is something that only fully comes into play in the practice context.

However, practice placements continue to be rather limited as part of the MPharm course, with students often relied on to organise their own work experience. Since they are then outside university control, there may be concerns over quality control and consistency of students’ practice professionalism learning. The insights from this study thus add to the current and ongoing debate in pharmacy education about integration into a five-year programme spanning both academic and practice learning.

Furthermore, and recognising the importance of practice for professionalism learning, it will be important to understand how professional attitudes and behaviours are affected once students enter practice. This will, at least in part, be addressed in another PPRT-funded study that we are currently undertaking at the University of Manchester. It explores how early career pharmacists learn and develop professionalism during their pre-registration year and beyond, and focuses in particular on tutors and support staff as potential role models.

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References


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