

Developing the Competent Practitioner: The Resident's Perspective

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In this issue of *CJHP*, Debra Moy and Emily Musing¹ report the results of a recent survey of 137 pharmacists who graduated from Canadian hospital pharmacy residency programs between 1998 and 2000. The survey consisted of a 57-item questionnaire to assess the learning needs of residents, and the results provide valuable insights for residency programs.

Currently, 26 accredited hospital pharmacy residency programs exist in Canada, providing up to 136 positions annually. (In Quebec, completion of a residency program leads to a master's degree in hospital pharmacy practice.) Several articles and editorials have documented the benefits of residency training to the trainees, the sponsoring pharmacy departments, other health care facilities, and society at large.^{2,3} Many hospital pharmacy departments list residency training as a "highly desirable", if not mandatory, prerequisite to employment in direct patient care positions. Yet in this era of increased demand for specialized training in patient care, there is concern that interest in residency training is declining. In an American survey conducted by Flaherty and others,⁴ 20% of specialty residency and fellowship positions were unfilled, and 70% of preceptors believed that there was a shortage of interested graduates. However, in Canada this year, the Canadian Hospital Pharmacy Residency Board (CHPRB) National Matching Service reported only one vacancy among accredited programs (note: Quebec programs were exempt from the National Matching Service).

Residency program administrators continue to examine barriers to and motivators for completing residency training. In a survey conducted by Bucci and others,⁵ residents indicated that financial issues and immediate job opportunities discouraged their colleagues from pursuing a residency. Conversely, the residents had entered their residency programs to "gain knowledge and experience", to learn about "new and challenging roles", and to gain "specialized training".

Program administrators continue their efforts to attract students to residency positions⁶ through increased stipends, moderate staffing requirements, and benefits such as paid time off, health coverage, and reimbursement for specific professional expenses. Although these incentives are helpful in attracting candidates, the best ambassadors for residency programs continue to be past residents. In the study conducted by Moy and Musing¹ and in other studies,⁷ residents have strongly conveyed the message that the program is a satisfying experience that they would highly recommend to others. Bucci and others⁵ supported the merit of residency program mentors by demonstrating that pharmacy schools that involve preceptors, residents, and fellows in didactic and clerkship training had more residency applicants.

Moy and Musing's survey,¹ which was designed to assess learning needs and the achievement of those needs through residency training, provides helpful information for existing programs. The respondents' perspectives on the value of the research project complement those of pharmacy directors.⁸ The desire that residents communicated for more (and higher-level) exposure to direct patient care, without lengthening the program, supports the current development of specialty residency programs in Canada. The minimum duration of 4 weeks for clinical rotations recommended by Moy and Musing¹ gives programs a guideline when determining rotation learning objectives. Residents have requested more structure and guidelines in areas such as project and practice management rotations, as well as the development of teaching skills. The latter request is logical, as residents look to their mentors and role models for direction and in turn need to develop their own teaching skills for future use. Preceptor development should be consistent and ongoing, as preceptors are the most valuable resource within a residency program. Preceptors must continue to strive for excellence in teaching skills, just as they strive for



expertise in their practice area. The CHPRB continues to develop and support preceptor training programs in Canada; in August 2003 many preceptors attended one such workshop at the CSHP annual general meeting in Newfoundland. All these aspects of residency training constitute a positive learning and working environment in hospital pharmacy. Successful recruiters will affirm Warren P. Kinsella's words: "If you build it [well], they will come".

References

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