

Desirable Traits of Hospital Pharmacy Preceptors and Residents

Zahra Kanji, Don Hamilton, and David Hill

INTRODUCTION

The British Columbia Hospital Pharmacy Residency Program has been in existence since 1970. It has expanded since its inception and now encompasses 7 hospitals, which offered a total of 17 residency positions during the 1999/2000 residency year. The program receives approximately 45 applications annually.

The screening process to identify the best candidates includes an evaluation of the applicant's academic transcripts, résumé, and letter outlining his or her future goals; an evaluation of documentation from references; and a personal interview. Although the hospital residency coordinators may each have their own specific criteria as to the most desirable traits for students accepted as residents at their institutions, the attributes that characterize an "ideal" resident have not been generally agreed upon. We took advantage of an opportunity to receive feedback about the traits of an ideal resident from a group of hospital pharmacy residency preceptors (including coordinators).

In the 1997/98 residency year, 4 of the 14 residents in the British Columbia Hospital Pharmacy Residency Program did not complete the program. A task force, consisting of a director of pharmacy, the chair of the British Columbia Hospital Pharmacy Residency Coordinators Committee (BC HPRCC), a member of the Faculty of Pharmaceutical Sciences at the University of British Columbia, and one additional coordinator, was set up to examine more closely the reasons for this unexpectedly high level of withdrawals and to search for issues or practices that might be corrected. Although each unsuccessful case was unique and preceptorship was not identified as a major reason for failure, the task force felt that preceptors have a significant effect on the motivation and success of a resident while he or she is in the program, and more information on preceptorship was felt to be necessary. A questionnaire for residents

was created to determine their opinion about the traits apparent in outstanding hospital pharmacy preceptors.

The purpose of conducting the 2 independent questionnaires was to identify desirable traits of hospital pharmacy residents to assist in the resident selection process and to identify desirable traits of hospital pharmacy preceptors to help improve the quality of resident teaching and supervision in each hospital.

METHODS

Desirable Traits of Residents

During a session at a preceptor workshop on September 18, 1998, hosted by the BC HPRCC, attendees were asked to list the qualities they felt were important in a resident. No guidance was provided as to how to identify or characterize these qualities. The sample consisted of approximately 40 hospital pharmacy preceptors, who formed 7 groups with 4 to 6 individuals per group. The groups were allowed 15 min to brainstorm and prepare a list of qualities to share with the other workshop participants.

The qualities listed by the hospital pharmacy preceptors were categorized under the following headings: leadership, quality, initiative, productivity, knowledge and ability to learn, teamwork, independence, communication, adaptability and flexibility, dependability and reliability, maturity, judgement, attitude, and tolerance of ambiguity. These qualities and characteristics refer to terms used on the form completed by external references as part of the review process for applicants to the British Columbia residency program.

Desirable Traits of Preceptors

A questionnaire composed of 5 open-ended questions was created (Table 1). These questions were



Table 1. Survey To Determine Traits that Residents Consider Desirable in a Preceptor

Describe the attitudes of the best preceptor(s) that enhanced or facilitated learning during your residency rotation.

How did this preceptor motivate you to learn?

What were some things this preceptor did that other preceptors did not do? (You may wish to identify how this preceptor did things differently to maximize the experience or minimize the trauma during the rotation.)

Given that no one is perfect, can you think of other traits or actions that could make the preceptor even better?

Have you additional comments about residency rotations to emphasize significant contributions to a positive rotation? (May relate to any aspect: preparation, orientation, contact time, evaluation, role modelling, etc.)

formulated by the task force in conjunction with the BC HPRCC with the intent to draw out the traits of preceptors that pharmacy residents valued. The questionnaire was mailed in April 1998 to a sample of 34 recent British Columbia residents, consisting of 12 residents who had entered programs in the 1997/98 residency year and the 22 graduates who could be contacted from the 2 immediately preceding years. These residents were selected because of their recent involvement in the program, which was thought to ensure a higher likelihood of their being able to recall their experiences with preceptors. Questionnaire recipients were informed that the questionnaire was anonymous. Recipients were asked only to identify the year in which they graduated from the residency program and the hospital from which they graduated.

Because the questions were open-ended, multiple responses to many questions were received, and there was a considerable amount of repetition. To organize the responses, 3 standardized headings were created after initial analysis: feedback, structure, and attitude and traits.

RESULTS

Desirable Traits of Residents

For each heading, the number of desirable attributes identified by the preceptors is given in parentheses: independence (11), knowledge and ability to learn (10), dependability and reliability (9), attitude (8), maturity (7), communication (6), teamwork (6), productivity (6), adaptability and flexibility (4), initiative (3), leadership (0), quality (0), and tolerance of ambiguity (0).

Desirable Traits of Preceptors

There were 16 respondents (47%) to the questionnaire for residents. Four respondents were from the 1995/96 residency year, 7 from the 1996/97 residency year, and 5 from the 1997/98 residency year. The respondents represented all 7 British Columbia hospitals that offer residency programs, and all respondents had successfully completed their residency.

Although numerous responses were received, there were recurring themes under each of the 3 headings, regardless of the question asked. The residents expressed a desire for continual feedback from preceptors, both positive and negative, and wanted such feedback to be offered respectfully. Structured rotations with realistic expectations were identified as good learning environments. The ability of a preceptor to be a good role model and to lead by example was a motivator for residents. A preceptor's attitude toward the resident and toward teaching appeared to be a critical determinant in the success of a rotation. Residents valued not only the knowledge that preceptors had to offer, but also their enthusiasm, dedication, and ability to share that knowledge in a friendly and encouraging way.

DISCUSSION

Desirable Traits of Residents

The information obtained from the preceptors enabled us to identify the attributes of a resident that are regarded highly in the British Columbia Hospital Pharmacy Residency Program. This information is of value not only to residency coordinators, who are responsible for choosing the residents for their institution, but also to students applying for residency positions. The coordinators can determine whether an individual has the attributes that they deem most important for their institution and how much of a potential problem will be posed by a student's lack of any of the attributes.

Desirable Traits of Preceptors

The residents' questionnaire identified information that might enable hospital pharmacy residency preceptors to recognize residents' perceptions of the key qualities of a preceptor and the teaching approaches that can be followed for successful rotations. A limitation of this survey is the small number of people to whom the questionnaires were sent and the low response rate. Although the questionnaires were anonymous, responders were asked to identify the year and hospital

from which they graduated; the fear of being identified and perhaps of retribution might have deterred some from responding. Those residents who did respond had numerous comments, many of which were remarkably consistent.

Comparison with Previous Studies

This information was gathered in an attempt to identify the desirable qualities of preceptors and residents. Although the negative features would be expected to be opposite to the attributes identified here, undesirable traits were not the focus of this work, and a closer analysis of such attributes may be necessary.

Because the questionnaire tools have not been validated and because of the subjective nature of the data collected, conclusions based on this data should be drawn with caution. The findings of this study are, however, similar to the findings in the medical and nursing literature on preceptorship.

In a survey of 182 senior medical students and medical residents, 4 characteristics of ambulatory care teachers best predicted overall teaching effectiveness: actively involving the learner, communicating expectations for student performance, stimulating student interest, and demonstrating patient care skills.¹ The most important characteristics of medical teachers, identified in open-ended comments by medical students and residents, were broad medical knowledge base, enjoyment of teaching and patient care, demonstration of concern for patients, being personable and approachable, demonstration of respect for others, and enthusiasm. These comments are very similar to those of the residents in the study reported here.

A survey of 32 nursing preceptors and 40 undergraduate nursing students revealed that preceptors' and students' rankings of 15 factors identified in the literature as being important in the development of a successful learning partnership were virtually opposite.² The 15 factors were knowledge of objectives, knowledge of course plan, clinical competence, communication skills, attitude toward teaching and learning, flexibility, knowledge of the preceptoring process, motivation, consistency of student-preceptor assignment, ability to give and receive criticism, workload expectation, adequate unit staffing, professionalism, self-confidence and assertiveness, and compatibility. Whereas students ranked knowledge of the preceptoring process and compatibility as the 2 most important factors, these factors were least important to the preceptors. Preceptors ranked the ability to give and receive constructive criticism and clinical competence as the most important

factors, whereas students ranked these as the 2 least important factors. Despite the discrepant rankings, many of the factors identified as important to the learning relationship overall were also identified in the survey reported here.

Conclusions

The information gathered in this study will assist directors, coordinators, preceptors, and residents in the British Columbia Hospital Pharmacy Residency Program to recognize what preceptors feel are desirable traits in a hospital pharmacy resident and what residents feel are desirable traits in a hospital pharmacy preceptor. Among the most frequently identified desirable attributes in a resident were independence, knowledge and ability to learn, dependability and reliability, attitude, and maturity. Preceptors can provide an optimal learning environment and enhance a resident's learning experience by providing regular feedback to the resident, both positive and negative, by creating an appropriately structured rotation with realistic expectations, and by exhibiting respect and understanding toward the resident.

References

1. Irby DM, Ramsey PG, Gillmore GM, Schaad D. Characteristics of effective clinical teachers of ambulatory care medicine. *Acad Med* 1991;66:54-5.
2. Byrd CY, Hood L, Youtsey N. Student and preceptor perceptions of factors in a successful learning partnership. *J Prof Nurs* 1997;13:344-51.

Zahra Kanji, BSc(Pharm), PharmD, is Pharmacotherapeutic Specialist — Critical Care and Residency Coordinator, Department of Pharmacy, Lion's Gate Hospital, and Clinical Assistant Professor, Faculty of Pharmaceutical Sciences, University of British Columbia, Vancouver, British Columbia.

Don Hamilton, BSc(Pharm), is Clinical Coordinator and Residency Coordinator, Department of Pharmacy, Children's and Women's Health Centre of British Columbia, and Clinical Assistant Professor, Faculty of Pharmaceutical Sciences, University of British Columbia, Vancouver, British Columbia.

David Hill, EdD, FCSHP, is Associate Professor of Pharmacy Practice, Faculty of Pharmaceutical Sciences, University of British Columbia, Vancouver, British Columbia.

Address correspondence to:

Dr Zahra Kanji
Department of Pharmacy
Lion's Gate Hospital
231 East 15th Street
North Vancouver BC
V7L 2L7
e-mail: zkanji@nshr.hnet.bc.ca

