

TTUHSC School of Pharmacy Office of Residency Programs

Resident Rounds Seminar Series

A. GENERAL STATEMENT OF POLICY:

The purpose of this School of Pharmacy Residency Program policy is to provide guidelines for residents in the SOP for completion of a residency seminar presentation. The purpose of the residency rounds seminar is to develop formal presentation skills, skills in literature summarization and analysis, and to develop a formal presentation suitable for use in job interview presentations.

B. MINIMUM REQUIREMENTS:

- a. A 30-45 minute presentation with powerpoint slides providing sufficient detail for a clinical pharmacist/resident level presentation
 - i. Presentation length varies depending on individual program director requirements
 1. General rule 30min for PGY1 residents and 45min for PGY2 residents
 - ii. Basic background information should be included on the disease process or topic of the presentation
 - iii. Emphasis on data summarization and analysis of the body of currently available evidence-based literature is provided (as opposed to critique of individual clinical trials alone). The resident's interpretation of this analysis should be included within the presentation and summarized in charts/graphs in the presentation and formal handout.
 - iv. Residents should draw sufficient conclusions and recommendations regarding the summary of the body of literature available on the topic.
 - v. An analysis/decision tree of therapies utilized should be incorporated into conclusions/recommendations (when applicable)
- b. A 10-15 minute question and answer period following the presentation will be allowed for audience & peer reviewer critique

C. PROCEDURES:

- a. Resident chooses a topic within the scope of their residency program
 - i. Residents are highly encouraged to use the same topic as their research project but it is not required
 - ii. Residents should choose topics of sufficient controversy or debate that are candidates for further publication in the medical literature (ie review article, editorial)
- b. Resident solicits a mentor to work closely with on the presentation
 - i. Residents are encouraged to solicit a mentor with expertise in the topic area
- c. The presentation should be reviewed prior to seminar date with mentor

- d. A formal handout of less than 20 pages, average 10-15 pages (references separate) should be prepared
- e. The seminar presentation should meet all of ACPE CE presentation requirements (<http://www.acpe-accredit.org/pdf/CRITERIA-2003.DOC> sections IV - Educational Program Development and VII - Evaluation)
- f. Formal learning objectives should be included (Bloom's taxonomy evaluation/analysis level).
- g. Formal peer review of the presentation should be performed
 - i. At least 2 weeks prior to the presentation, the resident should submit a working draft (as a minimum) of the seminar slides and formal handout to the seminar mentor
 - ii. At least 1 week prior to the presentation, the resident should solicit one practitioner to critique the presentation content and one practitioner to critique the presentation style
 - iii. Final copies of the seminar slides and handouts should be sent to these individuals at least 24 hours prior to the presentation
 - iv. It is discouraged to use the resident's primary mentor as the content or style evaluator for the seminar
- h. For selected PGY2 programs, a formal 30 minute verbal critique will occur after the presentation and initial Q/A period with the style and content graders
 - i. All residents are highly encouraged to attend (if possible) to participate in the learning process
 - ii. Pharmacists and other healthcare professionals are invited to attend to provide verbal feedback and comments
- i. Residents should perform a self-assessment evaluation of their performance during the resident rounds seminar series following completion of the final presentation
- j. Residents should review the comments/feedback from peer reviewers and audience with their program director within 2 weeks of seminar completion

ACPE REQUIREMENTS

IV. EDUCATIONAL PROGRAM DEVELOPMENT

Educational program development requires thorough advance planning. Means of determining educational needs of the target audience should be developed and used. Input from members of the target audience should be included in this process. Educational goals and learning objectives should be appropriate for the intended audience.

CRITERION 15 **Appropriate subject matter**

Continuing pharmacy education programs shall address topics and subject matter areas which are pertinent to the contemporary practice of pharmacy and are presented in a well-balanced manner.

Guideline 15.1

Topics and subject matter pertinent to the contemporary practice of pharmacy, as identified through an appropriate needs assessment process, include, but are not limited to: the social, economic, behavioral, legal, administrative and managerial aspects of pharmacy practice and health care; the properties and actions of drugs and dosage forms; the etiology, characteristics, therapeutics and prevention of disease states; the pharmacy monitoring and management of patient therapy; and other information unique to specialized types of the practice of pharmacy.

Guideline 15.2

In those instances where the topics or subject areas selected are not exclusively specific to pharmacy (e.g., personnel management, computer applications, communications, anatomy, etc.), the Provider should take appropriate steps to assure that the core content is explicitly related to the contemporary practice of pharmacy. Applicability to contemporary pharmacy practice may be accomplished through educational components such as case studies and examples of ways in which the information is applied to pharmacy practice, the development of supportive educational materials, and/or the use of interactive learning exercises in which participants have the opportunity to apply content to pharmacy practice situations.

CRITERION 16 **Educational needs assessment**

Continuing pharmacy education programs shall be designed to satisfy educational needs which have been determined to be appropriate for the targeted audience(s). Providers shall regularly assess educational needs and involve members of the intended pharmacist audience(s) in identifying their own continuing education needs.

Guideline 16.1

A balanced strategy for assessing educational needs should be used. Strategies for need assessment which involve prospective pharmacist participants in the process include, but are not limited to:

- (A) Periodic surveys of the targeted audience(s);
- (B) Establishment and use of an advisory/planning committee that includes representative members of the intended target audience(s); or,
- (C) Inclusion of an item or items in the Provider's program evaluation instrument(s) that solicit(s) participant's suggestions for future program topics.

Guideline 16.2

Additional need assessment activities and strategies which may promote balance include, but are not limited to:

- (A) Analysis of professional literature and trends in the profession, or,
- (B) Audits of professional practice to identify areas in need of strengthening.

CRITERION 17 **Non-commercialism**

All continuing pharmacy education programs should provide for an in-depth presentation with fair, full disclosure as well as objectivity and balanced. Appropriate topics and learning activities shall be distinguished from those topics and learning activities that are promotional or appear to be intended for the purpose of endorsing either a specific commercial drug or other commercial product (as contrasted with the generic product/drug entity and its contents or the general therapeutic area that it addresses), or a specific commercial service (as contrasted with the general service area and/or the aspects or problems of professional practice that it addresses). Wherever possible, objective sources of information should be cited.

Guideline 17.1

Continuing pharmacy education activities may be supported by funds received from external sources. Accredited Providers will be held responsible for the administration, content, quality, and integrity of all continuing pharmacy education activities.

Guideline 17.2

Accredited Providers are responsible for the quality, content, and use of instructional materials or post-program documents that are prepared with the support of outside organizations.

Guideline 17.3

Providers are expected to be rigorous in their efforts to assure that all educational programs and associated materials are free from promotional influence and/or content. Issues to be addressed include the following:

- (A) The use of written agreements when external support is obtained;
- (B) Appropriate disclosure of any significant relationship between funding organization(s) and program faculty;
- (C) The avoidance of promotional activities or materials as an integral part of the program or program materials or in any manner which interferes with or interrupts the educational activity;
- (D) Disclosure of limitations on information, including, but not limited to: data that represents ongoing research; interim analysis; preliminary data; or unsupported opinion. Also included are opinions or approaches to patient care that, while supported by some research studies, do not represent the only opinion or approach to patient care supported by research.

CRITERION 18 **Educational objectives**

Continuing education programs shall involve planning which includes written educational goals and specific learning objectives that are measurable and which may serve as a basis for evaluating the program's effectiveness.

Guideline 18.1

Educational goals and specific learning objectives should reflect the relationship of the program topic(s) or content to contemporary pharmacy practice.

Guideline 18.2

Educational goals should be developed early in the program planning process so as to enable them to provide guidance and direction for all subsequent program development including content, supplemental instructional materials, learning assessment activities, and program evaluation.

Guideline 18.3

Goals and objectives should be appropriate for the amount of time allocated to the program.

CRITERION 19 **Topic development**

Each continuing education activity shall be designed to explore one subject or a group of closely related subjects. If the activity involves multiple components, such as in a lecture series, all segments shall be devoted to integrally related subjects.

Guideline 19.1

Providers should seek to develop topically related and logically sequenced programs in an effort to provide opportunities for well-coordinated continuing education experiences.

CRITERION 20 **Instructional materials**

All supportive and supplemental instructional materials shall be suitable and appropriate, and shall be periodically reviewed to assure technical quality, timeliness and currency of content.

Guideline 20.1

A syllabus or other handout material providing a general outline of the continuing education presentation should be developed and made available to participants at each program offered.

Guideline 20.2

All supportive and supplemental instructional materials used (e.g., handouts, outlines, background materials, selected bibliographies, audiovisual aids, etc.) should be developed to enhance the participants' understanding of the topic(s) being addressed in the continuing pharmacy education program and to foster application to pharmacy practice. Bibliographies for additional reading and inquiry, as well as supplemental materials developed for future reference purposes are encouraged. Appropriate equipment and production facilities needed to assure the development of quality materials should be available and used.

VII. EVALUATION

Evaluation of continuing pharmacy education programs and assessment of participant learning are crucial for the maintenance and improvement of quality. Providers, as well as participants, should view evaluation as an essential element of continuing pharmacy education programs offered by the Provider. Providers are encouraged to share experiences with others in professional forums with a view toward the goal of collective improvement of continuing pharmacy education programs.

CRITERION 25 Learning assessment

Learning Assessment: An evaluation mechanism shall be provided at each program for the purpose of allowing all participants to assess their achievement in accord with the program's learning objectives.

Guideline 25.1

The evaluation mechanism should assess participant learning by ascertaining the level of fulfillment of the stated educational goals and specific learning objectives established for the program. Learning assessment activities should be considered integral components of the continuing education program and should be taken into consideration when determining the amount of credit to award.

Guideline 25.2

The results of this evaluation should be provided to the participants in an appropriate and constructive manner. This feedback should be provided with an indication of correct answers or solutions. Supplemental information, explanations, or discussions of answers and solutions are considered important and will be most useful if provided to participants immediately after completing learning-assessment exercises.

Note: Providing immediate feedback on post-tests by including the answers with the questions is not acceptable if post-testing is used as the sole basis for validating participation. If such dual utility is intended, the Provider should include the answers to only some of the questions, thereby assuring that the remainder serve the validation function.