

Draft ASHP Statement on Precepting as a Professional Obligation

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1 **Position**

2 The American Society of Health-System Pharmacists (ASHP) believes that all pharmacists have a
3 professional obligation to serve as preceptors to students and postgraduate trainees in the
4 experiential setting. ASHP encourages pharmacy practice leaders, practitioners, postgraduate
5 trainees, and faculty members to embrace the responsibility to precept learners to advance
6 pharmacy practice and patient care. ASHP urges all pharmacists to accept this responsibility,
7 develop themselves as preceptors, and commit time and resources to precepting.

8 ASHP encourages pharmacy practice leaders to create a culture of teaching and
9 learning, integrate precepting as a practice philosophy, and support the integration of learners
10 into services and scholarly work. Pharmacy leaders and administrators, colleges of pharmacy,
11 faculty, and preceptors have a responsibility to foster and support the development of the
12 precepting skills of all pharmacy practitioners and postgraduate trainees, facilitate the
13 development of practice models that provide regular opportunities to precept learners, and
14 encourage all pharmacists to precept in practice.

15 **Background**

16 New pharmacy graduates pledge to use their knowledge, skills, experiences, and values to train
17 the next generation by taking the Oath of a Pharmacist.¹ The apprenticeship model of see one,
18 do one, teach one is grounded in centuries of tradition across many healthcare disciplines.
19 Current apprenticeship models, such as the Cognitive Apprenticeship Model, not only
20 encourage the development of observable skills but also critical thinking skills that are
21 fundamental to contemporary practice.²

22 The evolution of our current pharmacy education system and apprenticeship models
23 requires preceptor supervision during experiential learning rotations and postgraduate training.
24 Precepting consists of providing a learner with practical experiences in a practice setting in
25 which they can develop and apply principles of pharmacy practice. Preceptors serve vital roles
26 by providing mentorship, coaching, assessment, and feedback to learners. Experiential learning
27 and postgraduate training teach more than just clinical skills, promoting skills in
28 professionalism, communication, teamwork, interprofessional collaboration, leadership, time
29 management, and professional values as well as facilitating the development of professional
30 identity.³

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31 Experiential learning is fundamental to the application of knowledge and skills gained
32 during didactic curricula.^{3,4} To determine if students are practice ready, many colleges of
33 pharmacy (COP) are implementing entrustable professional activities (EPAs), units of work
34 students should be able to independently perform at graduation.⁵ EPAs take input from
35 preceptors to assign a degree of trust in student competence. While mastery of EPAs can begin
36 in the didactic curricula, these activities cannot be adequately replicated in the classroom;
37 therefore, they should be fully elucidated and evaluated in the experiential setting.⁴ Likewise,
38 postgraduate programs require qualified preceptors to provide appropriate training,
39 supervision, and guidance to all postgraduate trainees as they progress toward competence.^{6,7}

40 Preceptors are necessary to ensure learners attain the desired level of competency for
41 practice; however, a dearth of preceptors has been a long-standing problem. Experiential site
42 and preceptor capacity are frequent concerns of experiential education directors.⁸ There are
43 several contributing factors to this persistent preceptor shortage. First, COP must adhere to the
44 Accreditation Council for Pharmacy Education (ACPE) accreditation standards, which require
45 enough preceptors to deliver and evaluate students in the experiential setting.⁹ Between 2000
46 to 2020, there was over a 70% increase in the number of COP, and since 2013, there has been a
47 65% increase in postgraduate training programs.¹⁰ Furthermore, preceptors of postgraduate
48 trainees require advanced training and/or experience to meet postgraduate training
49 standards.^{6,7} These requirements and expansion of programs may limit the number of
50 experiential sites or individuals available to precept at any given time, which will worsen
51 without all pharmacists accepting precepting as a professional obligation. Within the challenges
52 of our ever-evolving healthcare system, preceptors are needed now more than ever. Their
53 contributions not only help continue the rich tradition of pharmacists as one of the most
54 trusted healthcare professionals, but also bring value to healthcare institutions, learners, and
55 patients.

56 **Value of precepting**

57 The value of precepting is immense. A vast amount of literature demonstrates mutual benefit
58 for learners, preceptors, healthcare institutions, and patients.^{3,11} Ultimately, a synergistic
59 relationship among stakeholders can improve patient care by aligning the goals of COP,
60 learners, preceptors, and healthcare institutions and embracing precepting as a practice
61 philosophy.¹² Additionally, when learners are used as pharmacist extenders, clinical productivity
62 increases, personal and professional growth ensues, and institutional metrics improve.^{3,11}

63 **Value to learners.** Preceptors are often one of the most influential teachers that
64 learners experience as part of their training. They significantly influence learners' professional
65 identity formation through role modeling and socialization as learners internalize and
66 demonstrate the values and behaviors of pharmacists. Preceptors significantly impact learners'
67 career choice and trajectory, personal and professional development, involvement in

68 professional advocacy, and participation in scholarly activities.³ Learners also benefit from
69 networking with various professionals in their interprofessional practice experiences. When the
70 Layered Learning Practice Model is used, learners are exposed to peer teaching and learning
71 and gain foundational precepting skills to incorporate into their future precepting practices.
72 Postgraduate trainees practice clinical precepting with supervision from a more seasoned
73 practitioner, which allows for supervised autonomy and valuable experience needed to become
74 preceptors themselves.¹³

75 **Value to preceptors.** There are tangible values for preceptors who incorporate both
76 students and postgraduate trainees into experiential learning opportunities. Incorporation of
77 learners as pharmacist extenders helps preceptors expand their clinical services to patients and
78 allows them to accommodate more learners. Incorporating learners also allows preceptors to
79 increase scholarly activities. Preceptors have ample opportunities to collaborate with learners
80 for presenting and publishing abstracts, posters, and manuscripts as experiential educators.³
81 These partnerships can help advance preceptors' research goals while developing learners'
82 scholarly skills. Preceptors can leverage journal clubs, journal scans, or presentations on
83 upcoming literature or clinical topics to maintain an updated knowledge base. Precepting is a
84 professionally rewarding experience to influence future pharmacy clinicians and leave an
85 enduring legacy on the future of the profession.³

86 **Value to healthcare institutions and patients.** The literature is rife with evidence of the
87 benefits of learners to healthcare institutions. Utilization of learners at healthcare institutions
88 improves institutional metrics by expanding pharmacy services and advancing research agendas
89 and dissemination rates.^{11,14} For example, literature has shown tangible benefits of learners
90 when they participate in taking medication histories, optimizing transitions of care, performing
91 discharge counseling, practicing medication therapy management, and administering
92 immunizations.¹¹ Participation in these activities has resulted in the prevention of medication
93 errors, decreases in medication costs, increased patient interventions and encounters, and
94 decreased pharmacist-to-patient ratios.^{11,15} Finally, trainees often apply for positions within
95 their training institution, creating a pipeline of future employees.

96 **Responsibilities of stakeholders**

97 Positively impacting patient care is the shared vision of learners, preceptors, healthcare
98 institutions, COP, and professional organizations, and preceptors are necessary to achieve that
99 goal.¹² Preceptors provide the most valuable aspect of pharmacy education as they empower
100 learners to independently apply their knowledge and skills in real-world situations. When
101 rotations are thoughtfully designed, students, preceptors, healthcare institutions, and
102 ultimately patients benefit.³

103 **Preceptor development.** Preceptors have diverse learning needs and preferences, and
104 healthcare institutions vary in development resources available to preceptors. It is imperative

105 that professional organizations, COP, and healthcare institutions collaborate to provide
106 preceptor development resources in a variety of media and formats and promote a culture of
107 teaching and learning. As such, the continual professional development of preceptors is a
108 shared responsibility among these entities.

109 Professional organizations play a pivotal role in the development of precepting
110 standards and preceptor development resources. ASHP and ACPE provide guidance on the
111 standards and requirements for preceptor training and development.^{6,9} Professional
112 organizations should collaborate with preceptors, healthcare institutions, and COP to provide
113 practical and contemporary preceptor development resources and programming to meet the
114 standards. These organizations are equipped to spotlight best and contemporary teaching
115 practices and practice models of their diverse members.¹⁶ Professional organizations are also
116 positioned to advocate for the importance of precepting and preceptor development to
117 pharmacists and healthcare institutions.

118 In addition to providing preceptor development resources to meet individual and group
119 preceptor development needs, COP can assist in the creation, research, and dissemination of
120 best practices in precepting and innovative practice models to spur the development of
121 others.¹² Schools also aid in the development of preceptors and healthcare institutions through
122 sharing de-identified aggregate feedback from learners, quality assurance programs, and in the
123 acknowledgement of quality precepting through recognition programs.¹⁶

124 Support from healthcare institutions for precepting as a practice philosophy and
125 preceptor development is critical to the development of the next generation of pharmacists,
126 with particularly emphasis on the well-being of busy preceptors who are balancing clinical,
127 professional, and precepting responsibilities. This responsibility includes providing financial
128 support to attend preceptor development offerings, protected time to precept and attend
129 training and development programs, and access to development resources. Practice and
130 research models that integrate learners and leverage them to extend pharmacy services should
131 be encouraged and highlighted. The expectation of precepting as a practice philosophy should
132 be included in role descriptions and performance appraisals to encourage and recognize
133 effective precepting. Examples of competency areas on performance appraisals include
134 commitment to precepting, advocacy for the profession, communication and collaboration,
135 qualities of the learning environment, use of teaching and learning strategies that develop
136 clinical reasoning and other skills, and feedback and assessment practices of learners.^{17,18} These
137 competencies may also serve as a framework for self- and peer assessment that are essential to
138 professional development as well as guide preceptor development plans.^{17,19,20}

139 Preceptors should approach precepting with a commitment to lifelong learning and
140 continual personal and professional growth. Strategies to implement this philosophy include
141 Continuing Professional Development (CPD) and the Self-directed Assessment Seeking (SDAS)
142 approaches. In CPD, learning needs are identified through self-assessment and reflection;

143 specific, measurable, achievable, relevant, time-bound (SMART) goals are developed to meet
144 learning needs; the effectiveness of the plan is assessed; and learning applied to teaching
145 practices.^{19,20} Recognizing the limitations of self-assessment alone, the SDAS performance
146 improvement process involves seeking feedback and assessment from external sources such as
147 peers and learners, self-reflecting to identify areas of strength and growth, and developing a
148 plan for improvement.²¹ Development plans may include preceptor development offered
149 through written, online, on-demand, live, and other resources. Postgraduate trainees and
150 students also have important roles in preceptor development through provision of constructive
151 and professional feedback on learning experiences and precepting practices.

152 ***Incorporating precepting into practice.*** Serving as a liaison between classroom
153 education and practical application, preceptors are role models for the practice of pharmacy
154 and share the art of the profession with learners. Preceptors are vital to modeling
155 professionalism, communication, and application of skills and knowledge through advising,
156 mentoring, and providing feedback during thoughtfully designed experiential learning.
157 Additionally, throughout postgraduate training, it is imperative that trainees not only learn to
158 effectively precept, but to employ those skills by becoming preceptors themselves following
159 completion of postgraduate training. All pharmacists with practice experience, even those
160 without postgraduate training, have an obligation to the profession to be preceptors.

161 Preceptors have a responsibility to be involved not only in training learners, but also in
162 the continuous quality improvement process of the training. Both COP and postgraduate
163 trainee programs have set standards for continuous quality improvement. ACPE 2016 Standard
164 20 requires that COP solicit preceptors for continuous quality improvement of educational
165 programs, especially in experiential learning, and ASHP standards require that preceptors are
166 involved in an ongoing, formal postgraduate trainee annual program evaluation.^{6,7,9} These
167 efforts ensure that experiential learning for both students and postgraduate trainees remain
168 parallel with contemporary practice. Preceptors and learners are vital to these quality
169 improvement processes to ensure patient care and outcomes and institutional metrics are
170 optimized.

171 Finally, preceptors are encouraged to document the value of precepting as a practice
172 philosophy, the value of learners as pharmacist extenders, and the impact of learners on
173 patient outcomes through scholarly work. As precepting is incorporated into daily practice, this
174 scholarly work reflects contemporary practice, documents value to other healthcare
175 institutions, provides a framework for the development of effective precepting, and encourages
176 other healthcare institutions to embrace precepting as a professional obligation. Disseminating
177 both positive and negative outcomes as scholarly work is vital to optimizing outcomes for all
178 stakeholders, most importantly patients.

179 **Conclusion**

180 ASHP believes precepting students and postgraduate trainees is the professional obligation of
181 all pharmacists to advance pharmacy practice and improve patient outcomes. All pharmacy
182 stakeholders play a vital role in embracing precepting as a practice philosophy and supporting a
183 culture of teaching and learning in the experiential setting. Professional organizations, COP, and
184 healthcare institutions should encourage pharmacists and postgraduate trainees to develop
185 precepting skills and provide formal precepting training and opportunities for development.

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