

## Workshops

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## Education day

### Edu Workshop 01

#### ENHANCING THE VALUE OF EXPERIENTIAL LEARNING: APPLYING GUIDED REFLECTION

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Introduction: Pharmacy curricula worldwide have largely evolved to accommodate the conceptual shift from product -orientation to patient-orientation. This has necessitated the development of innovative teaching and learning methodologies. The experiential learning paradigm applies equally to undergraduate and continuing professional pharmacy education.

According to Kolb, experiential learning is a cyclic progression from the actual experience of the learning activity to conceptualization and active experimentation through effective reflection.<sup>1</sup> Typically personal reflection is utilized by an individual as a tool to concretise both theoretical and experiential learning, and various reflection activities are recognized, including reflective journaling, directed writing, portfolios or personal narrative. <sup>2</sup> While personal reflection has the potential to encourage deep reflection, the inherent danger is that the outcome is little more than a log of events.

Reflection allows for a critical synopsis of the learning activity and links this activity to both the learner's core academic knowledge and his/her personality, value system and opinion. This connection between the learning activity and the learner's individuality is made by way of a constructed, intentional, structured process, which is the guided reflection. Reflection that is guided is thus also values-based, personal and critical. The facilitators' personal experience with curriculum-based service learning activities of undergraduate pharmacy students seems to indicate that guided reflection, where members of the group had varied experiential learning experiences, allowed for the attainment of deeper levels of reflection.

Aim of the workshop: The workshop is designed to give participants the opportunity to describe the components of an experiential learning scenario (real or simulated) and to conduct hands on group guided reflection. Three specific approaches to guided reflection will be introduced, viz. Helping, fixing or serving<sup>3</sup>, Reciprocal service and learning, and Critical incident reflection.

Learning objectives: After attending the workshop, the participants should be able to:

- Understand the components of experiential learning
- Recognize service learning as a specific form of experiential learning
- Differentiate between various approaches to guided reflection
- Participate in a group guided reflection session for the purpose of intentional consideration of experiential/service learning

Description of workshop activities:

1. Introduction: Participants, background and expectations (10 min)
2. Plenary: Conceptual framework and context of experiential learning incorporating service learning. Facilitators to share their personal experiences (10 min)
3. Group activity: Forming discussion groups for the purpose of sharing or creation of experiential learning scenarios. Recording specific information on the components of the scenario on provided template. (25 min)
4. Plenary: Concepts and context of reflection. Introduction to guided reflection, specifically to approaches based on Helping, fixing or serving, Reciprocal service and learning, and Critical incident reflection (20 min)
5. Group activity: Application of selected guided reflection (30 min)
6. Report back from each group and discussion (45 min)
7. Summation (10 min)

References

1. Kolb D. Experiential learning: experience as the source of learning and development. In Bheekie A, et al. Service-learning in pharmacy (SLIP). South African Pharmaceutical Journal, 2007. 73(8): p. 18.
2. Hatcher JA, Bringle RG. Reflection Activities for the College Classroom. Indianapolis, Indiana; Centre for Service and Learning; 2001.
3. Remen RN. Helping, fixing or serving. [http://www.soulflares.org/index.php?main\\_page=document\\_general\\_info&products\\_id=327](http://www.soulflares.org/index.php?main_page=document_general_info&products_id=327) [Accessed 7 May 2009]

### Edu Workshop 02

#### DEVELOPING A PUBLIC HEALTH CURRICULUM: WORKING TOWARDS LOCAL NEEDS

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#### Introduction

Worldwide a number of public health issues will continue to challenge governments, such as pandemics, access to quality medicines and their rational use. Within specific countries public health issues may include serious burden of specific disease states, such as HIV and diabetes, structural challenges such as access to medicines, emergencies supplies or other complications such as counterfeit medicines. As international organisations such as FIP work towards global recognition of the role of pharmacy (1), pharmacy itself needs to be involved in public health policy and healthcare delivery. Public health roles of pharmacists need to be considered both as a function of everyday pharmacy services as well as expert roles in policy development and service planning and delivery. In order for this to be possible, pharmacy educators need to prepare future pharmacists with a sound background in public health policy and practice, with explicit consideration of the role of pharmacy. Many pharmacy schools and colleges have already begun to see public health as a key curriculum issue and use it as a foundation consideration for all aspects of practice rather than teach it in isolation from practice elements. For example, the US Accreditation Council for Pharmacy Education includes competencies for pharmacy graduates with respect to public health (2), and schools of pharmacy such as the Faculty of Pharmacy and Pharmaceutical Sciences at Monash University, have well developed programmes for undergraduate and postgraduate students.

#### Aim of the workshop

To explore current practice in school of pharmacy with respect to the teaching of public health, and to begin to explore the development of a generic, public health, undergraduate pharmacy curriculum which can be adapted to meet local needs. In order to explore some of the difficulties of teaching this subject, small groups in this workshop will use some potential tools and techniques, which might be useful when considering curriculum design. These might include group/audience response systems (e.g. electronic voting, coloured cards, etc), mind mapping, other active learning methods as well as some traditional methods.

#### Learning Objectives

Participants will:

- Increase their own awareness of the issues for pharmacy in the context of public health practice
- Learn about the practice of colleagues internationally
- Explore, through discussion of local public health needs, the possibility of a common public health pharmacy undergraduate curriculum

- Develop ideas for local delivery of such a curriculum
- Explore issues relating to the delivery of a public health pharmacy curriculum in the context of large class sizes.

#### Description of Workshop Activities

- Introductory presentation – why public health pharmacy and what is currently being taught?
- Small group work – what are your local public health issues?
- Small group work – what is the current and potential future role for pharmacy in public health?
- Short presentation - what do we need to teach – development of a core curriculum?
- Small group work - development of a core curriculum

#### References

1. International Pharmaceutical Federation (FIP). 2020 Vision: FIP's vision, mission and strategic plan. 2008 <http://www.fip.org/files/fip/strategic%20plan%20o%20annexes.pdf>
2. Accreditation Council for Pharmacy Education, Accreditation standards and guidelines for the professional program in pharmacy leading to the doctor of pharmacy degree. Chicago: Accreditation Council for Pharmacy Education; 2006:1-74

### Edu Workshop 03

#### A PHARMACY GAME: EXPERIENCING THE POSSIBILITIES OF AN ACTIVE AND REFLECTIVE LEARNING STYLE

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#### Introduction

There is a growing interest in education innovation in schools of pharmacy and medicine. The growing role of the clinical and community pharmacists in pharmaceutical care is an important incentive to start innovations. Not only the content of the curriculum has been changed, also learning methods were renewed and tested. Pharmacy students worldwide need life long learning skills to face new challenges of their profession. Therefore they need to experience active learning styles and reflective learning during their university training.

In 3 faculties of pharmacy in both the Netherlands (Groningen, Utrecht) and Belgium (Brussels) a pharmacy game called GIMMICS 1 was designed to teach students integrated knowledge on practical pharmacotherapy and pharmaceutical care, as well as social, communication and managerial skills in a controlled setting. A game simulates the real life situation since students feel more responsible for their activities and they have to face the consequences. This is a major difference compared with classic communication skills training. Furthermore, highly demanding and responsible tasks can be practised without real harm done. This is a limitation in a real practical training such as bedside teaching.

Groningen University (NL) has already been using this teaching model for a decade. In schools for management a 'management game' is an accepted teaching method, in professional education like schools for pharmacy or medicine gaming is regarded as a new approach.

In this workshop we would like to enhance active learning and reflection by the participants themselves. They will experience the possibilities of gaming in their own teaching environment. May the best team win!

#### Objectives

1. To learn more about the experiential learning theory (Kolb 19842) and its application on the teaching method of gaming
2. To experience the possibilities of gaming in a pharmacy setting.
3. To identify successful determinants of the Dutch-Belgium gaming and apply to different context.
4. To design a model for pharmacy gaming applicable worldwide

Activities (2 hours minimum, preferable 2,5-3 hours)

A. Trio presentation on theory and practice about the pharmacy game GIMMICS in the Netherlands and Belgium, using Kolb's (1984) experiential learning cycle.

B. Mini game: participants are divided into small groups and act like pharmacy students: They are responsible for their own pharmacy. They have to design a management plan and will be confronted with routine activities (prescription processing, patient visits) long

lasting projects and incidents. Some activities are initiated by the 'game coaches' and others by the participants themselves. At the end of the game there will be a winner (see example: [www.gimmics.nl/groningen](http://www.gimmics.nl/groningen) -> klassement).

C. Reflection on the learning process. What did the participants learn from this experiment?

D. New groups are established and essential determinants of pharmacy gaming are used to build a new model which is applicable worldwide.

#### References

- 1 van der Werf JJ, Dekens-Konter J, Brouwers JRBJ. A New Model for Teaching Pharmaceutical Care Services Management. Pharmacy Education 2004; 4(3/4):165-169.
- 2 Kolb DA. Experiential Learning: Experience as the source of learning and development. 1984.
3. [http://www.gimmics.nl/info/gimmics\\_algemeineinfo.html](http://www.gimmics.nl/info/gimmics_algemeineinfo.html)

#### Edu Workshop 04

Cancelled