

# Collaboration, Communication and Inquiry

AFPC Conference  
Niagara-on-the-lake  
June 2013

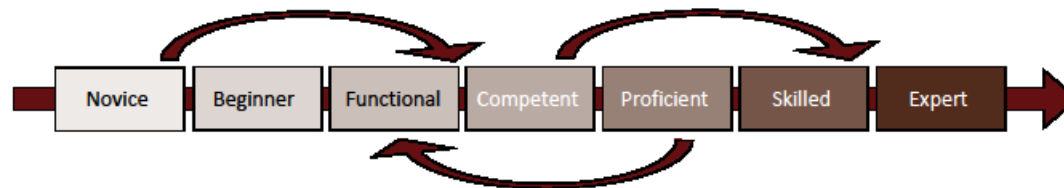
- In the fall of 2011, the Faculty formed a Program Evaluation Committee (PEC) to organize and coordinate program evaluation efforts, thereby developing a formal process and strategic framework for evaluating performance outcomes of the Faculty's undergraduate program.

# Strategic Framework

- For complex academic programs such as Pharmacy it is extremely helpful to have a conceptual framework to guide the evaluation process.
- The framework provides guidance in identifying the areas to evaluate, focusing the questions to ask and a context to revisit our key findings.

# TEACHING FOR EXCELLENCE

## THE DEVELOPMENT OF EXPERTISE



**CHANGES IN LEARNERS**  
 Isolated info/skills ... integration of info/skills ... more complex thinking/acting ... automatic/adaptive high level thinking/acting

**INSTRUCTIONAL FACTORS**

- Supportive Expert Teachers
- Task/domain specificity
- Focused deliberate practice over time
- Informative/accurate feedback
- Opportunity to correct errors
- Scaffolding of difficulty

**LEARNER ENGAGEMENT:**  
 Connected Learning

**PSYCHOLOGICAL FACTORS**

- Focus of attention
- Cognitive/personal style
- Motivation/belief
- Preparation
- Self Reflection
- Coping with stress

**CHANGES IN INSTRUCTORS**  
 Internal focus ... shift of focus towards students ... changes in approaches/practices ... consolidation of practice ... scholarship

**CULTURE**

**CONTEXT**

# Stage of Development

- Our initial priorities were (year 1):
  1. Analysis of our **ADMISSIONS PROCESS** because the developmental framework is based on the assumption that our students have the capacity to be successful.

## Highlights:

- Pre-pharmacy GPAs predict performance in the pharmacy program.
- Pre-pharmacy “core courses” further predict success.
- Scores on a written critical skills admissions essay predict written/verbal communication skills.

*(2 posters at AFPC 2013)*

# Stage of Development

- Our initial priorities were (year 1):
  2. Analysis of our **CURRICULUM MAP** because the developmental model indicates that a well structured, sequenced curriculum that provides opportunities for practice and feedback is critical for success.

## **Instructional Factors**

- Supportive Expert Teachers
- **Task/domain specificity**
- **Focused deliberate practice over time**
- Informative/accurate feedback
- Opportunity to correct errors
- **Scaffolding of difficulty**

# Curriculum Map Results



# Curriculum Map Results

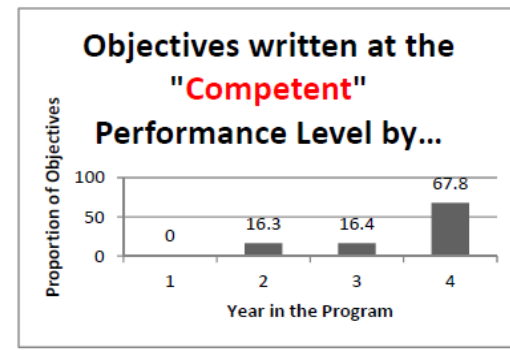
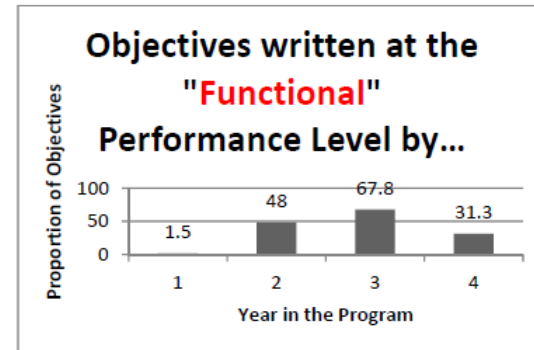
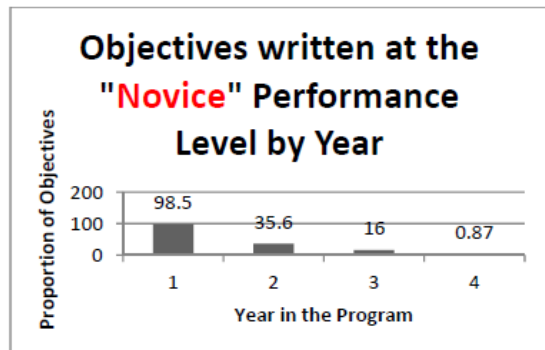
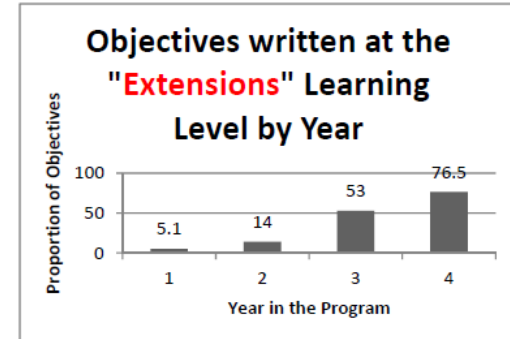
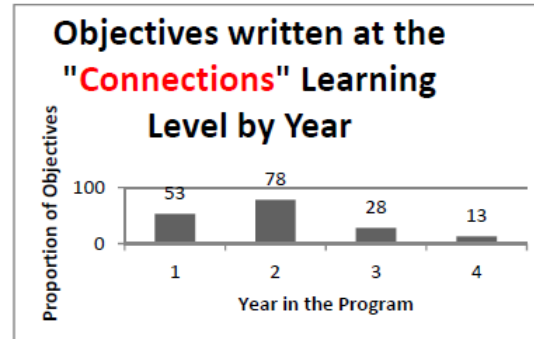
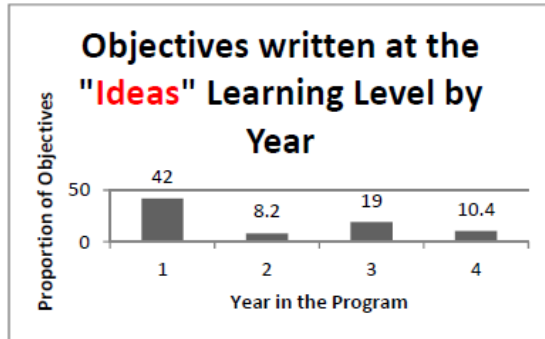
AFPC OUTCOME	U OF M WEIGHTING	PEBC BLUEPRINT	PEBC WEIGHTING
#1: Care Provider	35% (275/790)	#1 Patient Care	38%
#2: Communicator #5 Advocate	15.3%***	#5 Communication	20%
#3: Collaborator	7.7% (61/790)	#2 Collaboration / Team	7%
#4: Manager	4.3% (34/790)	#7 Management principles	3%
#6: Scholar	27% (216/790)	#4 Drug, Therapeutic, and Practice Information #6 Drug Distribution	22%***
#7: Professional	10.5% (83/790)	#3 Ethical / Professional	10%

Table 8.3 University of Manitoba and PEBC Outcomes Weighting Comparison

- Course objectives cover all AFPC Educational Outcomes.
- Course objective weightings center around “Care Provider” and “Scholar” highlighting an emphasis on pharmacy knowledge and its application to practice.
- Course objective weightings are consistent with the PEBC exam blueprint.



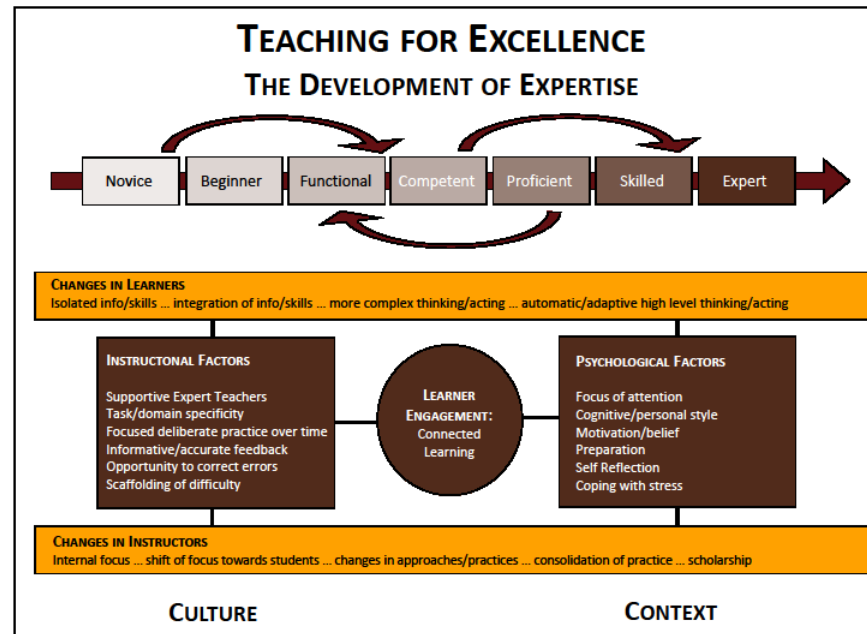
# Curriculum Map Results



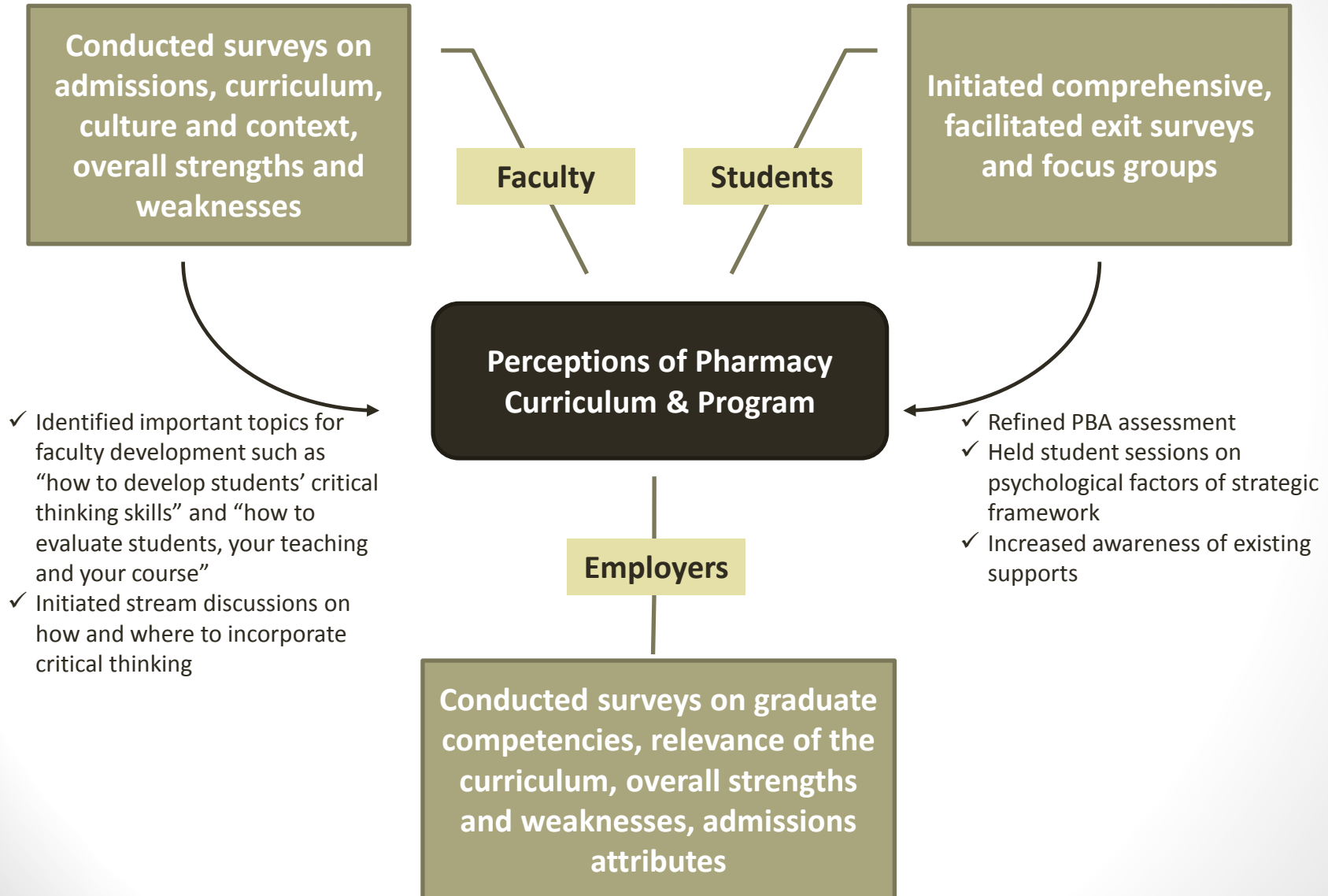
- Longitudinal progression in the learning and performance levels through the program is appropriate.

# Stage of Development

- Our initial priorities were continued and expanded (year 2):
  3. Analysis of **perceptions of the program** because teaching and learning occurs within the unique culture and context of our Faculty and teaching and learning is a reciprocal process.



# Data Collection, Analysis and Response



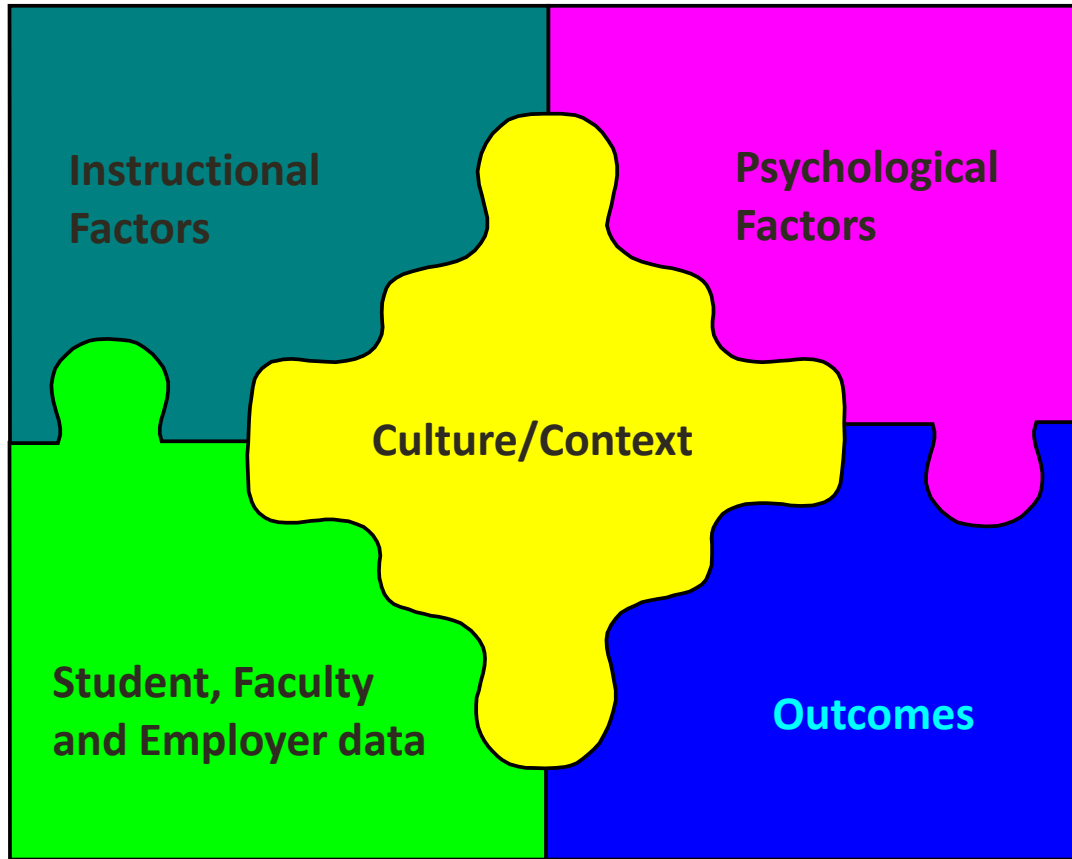
# Lessons Learned

1. **Broad buy-in** and support from faculty and staff and active involvement of the Dean's Office has been essential.
2. A **conceptual framework** has provided a research-based approach for evaluating the program, context for interpreting the findings and mechanism for making evidence-based decisions.
3. This **scholarly approach** has created a culture of inquiry for program evaluation which promotes continued quality improvement.

# Lessons Learned

4. A **collaborative approach** has engaged other individuals and committees to look at what is occurring and determine if improvements can occur from changing processes, curriculum, instruction or culture.
5. An **action-based approach** involving the collection, analysis and interpretation of information has led to important findings and recommendations for change.
6. Continuous, **broad communication** has been key in maintaining support for program evaluation and producing results.

# Next Steps



# Next steps

- Continue analysis of admissions process including assessment tools for critical thinking abilities to inform upcoming changes.
- Continue support for faculty development.
- Extend program evaluation to SPEP.
- Repeat student surveys/interviews, and others as needed.
- Disseminate relevant findings to a broader audience through presentations and publications.

# Continuous/Iterative Process

