Pharmacy Practice Experiences: Addressing the Needs of Challenging Learning Situations
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IPhA Patient Self-Management Programs

Disclosures
• Starlin Haydon-Greatting: “declare(s) no conflicts of interest, real or apparent, and no financial interests in any company, product, or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.”
• Kristin Weitzel: “declare(s) no conflicts of interest, real or apparent, and no financial interests in any company, product, or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria.”

The American Pharmacists Association is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

Learning Objectives
• Identify potential challenging learning situations that may arise when precepting pharmacy practice experiences.
• Explain the rationale for embracing diversity and providing accommodations that allow all student pharmacists the opportunity to meet expectations.
• Identify effective strategies for addressing student pharmacist’s individual needs (e.g., generational, cultural, religious, language).
• Illustrate effective ways to manage and resolve difficult learning situations between preceptors and students.

Question 1: Which of the following may cause communication difficulties with students?
• A. Cultural differences between students and patients
• B. Student and preceptor are close together in age
• C. Similar teaching and learning styles
• D. Precepting multiple students at one time

Target Audience: Pharmacists
ACPE#: 0202-0000-16-044-L04-P
Activity Type: Application-based
Question 2: The best way to help overcome the conflict between generations is to:

- A. Leave it be—the conflicts will work out on their own
- B. Spend time learning about your differences with the person you have the conflict with
- C. Arrange a field trip to a history museum to learn about other generations
- D. Hire an expert to create a conflict resolution encounter

Question 3: Cultural Diversity is:

- A. Always conscious and easily overcome through cultural competency professional development programs
- B. Well managed and competency is incorporated in all pharmacy learning environments
- C. Only affected by significant emotional events within a value system
- D. none of the above

Question 4: What precepting approach can help to prevent potential challenges?

- A. Maintain a positive, optimistic attitude towards problems
- B. Use a “wait and see” approach
- C. Look for red flags that might signal a problem
- D. Avoid addressing problems not caused by your rotation (e.g., student learning disability)

Question 5: Working together to find a quick, mutually acceptable solution is an example of:

- A. Collaborating
- B. Compromising
- C. Avoiding
- D. Accommodating

Challenging Learning Situations

- Exception rather than the rule
- May be a direct confrontation or a difficult-to-resolve situation
- Student OR preceptor factors can contribute
  - Knowledge/skill deficit
  - Inappropriate behavior
  - Personal issues
  - Attitude/motivation
  - Communication deficiencies
Examples
- Inappropriate learner interactions or communication with patients or other providers
  - Disrespect, inappropriate relationships, poor attitude
- Unmotivated learner
  - Incomplete assignments, tardiness, excessive absences, lying
- Dress code violations
- Stealing
- HIPAA violations
- Personal crisis or illness

Common Causes of Challenges
- Teaching/Learning Difficulties
  - Limited precepting skills or preparation
  - Inadequate learner knowledge or skills
  - Mismatched teaching/learning styles
- Personal
  - Attitude or motivation
  - Impaired or ill
  - Significant life event
- Communication
  - Generational or cultural differences
  - Students unskilled in communicating with patients or providers
  - Undiagnosed learning disability

Humans are Value Created
The Value System
- Age (Generation)
- Culture
- Gender Roles
- Ethnicity

Impactors Affecting Values
- Family
- Friends
- Religion
- Technology
- School
- Media
- Music
- Income
- Geography

Value Created Explained...
- Generations: “What you are is where you were when!”
- We are defined by our Values that are based on Culture, Age, Gender Roles and Ethnicity
  - Values are Imprinted: @ age 1-6 yo
  - Values from Modeling: @ age 7-12 yo
  - Values from Socialization: @ age 13-20+ yo
  - At age 10, 90% of our value system is set
  - At age 20, 100% of values are locked in for life
  - Only a Significant Emotional Event will alter our Values

Across the Generations
What makes a generation?
- A 20-22 year span
- Possess certain characteristics
- Includes noteworthy incidents
- Significate historical events
- Ripple effects
- Icons
- Persists across their lifetime
- Generalizations—not stereotypes

Each Generation:
- Reacts to the generation before them.
- Becomes a standard of comparison.
- Looks at the next generations skeptically.
- The “Cusps” have blended characteristics.

POLL: What is the make-up of the Audience?
- ACTIVITY: Raise your hands as we call out each generational classification:
  - What generations are you precepting now?
  - What generations are we providing care for?
    - Veteran 1901-1926
    - Silent 1927-1945
    - Boomer 1946-1964
    - Gen X 1965-1981
    - Millennials 1982-2005

Generations

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Current Age</td>
<td>Age 90+</td>
<td>Ages 71-89</td>
<td>Ages 52-70</td>
<td>Ages 35-51</td>
<td>Ages 11-34</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Descriptor</th>
<th>HERO</th>
<th>ARTIST</th>
<th>PROPHET</th>
<th>NOMAD</th>
<th>HERO?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key Characteristics</td>
<td>Patriotism, Disciplined, Frugal, Great Depression, WW II</td>
<td>Rebels w/o a cause, Korea, 1st Activists, Value clear authority, Company-man, Thrifty</td>
<td>Prosperity, TV, Vietnam, Space, Civil Rights, Cold War</td>
<td>Scandals, Divorce, Latch-key Kids, MTV, AIDS, Computers</td>
<td>Multi-culturalism, School violence, Mass media, Tech-savvy, Cell phones, 9/11</td>
</tr>
<tr>
<td>Belief</td>
<td>Loyalty</td>
<td>Idealism</td>
<td>Optimism</td>
<td>Skepticism</td>
<td>Realism</td>
</tr>
<tr>
<td>Communication</td>
<td>Linear</td>
<td>Linear</td>
<td>Semiformal</td>
<td>Irreverent</td>
<td>Real-time</td>
</tr>
<tr>
<td>Management Style</td>
<td>Military Chain of Command</td>
<td>Discussion, Inclusion</td>
<td>Change of Command</td>
<td>Self-command</td>
<td>Collaboration</td>
</tr>
</tbody>
</table>

Veterans/GI
- Also called “Traditional” or the “Greatest Generation”
- They saved the world and then built a new nation
- Strong value of family and community
- Limited resources lead to value of the common good
- Military influence
- Willing to help when ever needed
- Age of radio and air flight
- Grew up without refrigerators, electricity & air conditioning
- At 90+ years a diminishing population

Silent/Mature
- Grew up as seen, but not heard
- Penicillin discovered
- Korean and Vietnam War generation
- Evolved to become civil-rights and anti-war activists Big Band/Swing music—early rock & rollers
- Were the parents who divorced during the epidemic of the 70's & 80's
- Focus on discussion, inclusion and process
- Disciplined, self-sacrificing & cautious
- Avid readers, especially newspapers
Silents: What Can You Do?

- Organize materials in bullet/outline form
- Use at least 12 point type
  - This will help Boomers too
- Take your time through the important points
- Don’t assume that all are techno phobic
  - Fastest growing segment of the population using the Internet

Baby Boomers

- Prosperity of the post-WWII era
- First oral contraceptive
- Vietnam war: division of support—last drafted war
- New Luxuries—TV, car ownership
- The first Divorce generation
- Largest generation with > 77 million+
- ‘Rock & Roll’ music
- Optimistic, Driven & Competitive
- Women began working outside the home
- View career as a priority with sensitivity to status, position & experience

Boomers: What Can You Do?

- Give plenty of time for Boomers to practice new skills
- Do not generally like role-play exercises
- Like team projects where they can lead
- Organize materials with headings and relevant information underneath

Generation X

- Turmoil & scandal—Watergate, tripling divorce rate, deterioration of Social Security
- Less attention as kids (latch-key, divorce)
- Skeptical outlook, value independence & self-reliance
- Value lifestyle & family
- Limited devotion to work—Entrepreneurial
- Very individualistic, generally in demand & willing to change companies
- MTV and 1st Computers and games
- AIDS/HIV

Generation X Conflicts

- Vocation versus Day job
- Viewed as lacking commitment
- Want to work independently
- Lacks respect for authority—prefers hands-off style
- Motivation is dependent on individual determination of the value of the activity

Gen Xers: What Can You Do?

- Work/life balance is important
- Use pop-culture examples
- Give lots of individual attention
- Use most exciting material in short lectures (15-20 min)
- Use bullet points when giving info
- Use plenty of graphics and white space
Effective Strategies for Gen Xers

- Independent problem solvers
- Want to be recognized as individuals
- Self-starters
- Offer support & feedback without being controlling
- Seek comfort with those who share their own values
- Need non-judgmental sounding board
- Must be engaged to retain information

Millennials/ Gen Y/ Gen Me

- Also called “Nexters” or the Nintendo Generation or Gen@
- AZT (zidovudine), the first antiretroviral drug
- As Kids – Busy schedules of activities, technology & helicopter parents
- As Learner – Expect to be entertained, enjoy a team approach, value feedback & evaluation
- Faster computers, cell phones, social media
- School safety/violence
- The 9/11 generation
- Do not live to work

Millennial Characteristics

- Accepting of diversity
- Value self-fulfillment
- Loyal
- Community & group oriented
- Involves parents in decisions
- High student loan burden
- Want alternative work arrangements—virtual

Millennials as Students/Residents

- Prefer flexible hours
- Require minimal supervision
- Need of more formal mentoring
- Respects authority, positions & titles
- Value teamwork—work well in groups
- May be impatient
- May have trouble with interpersonal conflict
- Respond well to personal attention
- Appreciate structure—goals, steps, resources & information

Millennials as Students/Residents

- Expect to...
  - Be entertained
  - Share their ideas
  - Work as a group & collaborate
  - Engage in Active-learning
  - Not be embarrassed in front of their peers
  - Have real time answers (digital instant influence)
  - Have fun while learning

Millennial Conflicts

- Delayed adulthood
- High demand for feedback
- Socially bold, asks questions and offers opinions
- Impatient for advancement opportunities
- Desire to pursue multiple interests & careers
- Aspire to collaborate & make a difference
**Millennials: What Can You Do?**

- Give lots of activities with several steps
- Use the most up-to-date technology and references available
- Tie coursework or program goals in with economic gain
- Get creative (or allow them to get creative) with presentations, etc.
- Give reading materials for lectures or supplemental information

**Effective Strategies for Millennials**

- Structure—provide high & clear expectations
- Individual feedback
- Engage through technology [web based, social media, smart phones-when appropriate]
- Use groups & collaborative learning
- Active-learning [case presentations, role playing, Jeopardy]
- Entertaining & engaging
- Reflection

**Generation Z / Boomlets**

- Born after 2005 – in 2006 record number of births in USA
- 12 years and under-
- TV in their rooms, video games & cell phones early
- Never known the world without computers or cell phones
- Less interested in toys
- Stay tuned….or tune in

**ACTIVITY: Think-Pair-Share**

- Think about the following questions:
  - What is the easiest generation to precept/work with and why?
  - What is the most difficult and why?
- Share with the person sitting next or near to you.
- Be prepared to share your answers with the group.

**FYI: We’ve Created This!**

- Remember each generation influences & directs the next
- People complain about the Boomers, Xers, Millennials but we created the society that defines the values that shapes the environment in which each evolves
- Different is NOT “Bad”
- You have two choices:
  - Try to change “them” (how’s that working for you) OR
  - Try to understand “them.” “THEY” are NOT going away!

**U.S. Changing Demographics**

- Between now and the year 2050, almost 90% of U.S. population growth will come from Asian Americans, African-Americans and Hispanic-Americans.
- Today, people of color are already a majority in 48 of nation’s 100 largest cities.
- Today, four states have “minority majorities.” They include: California, Hawaii, New Mexico and Texas.
- Six other states: Maryland, Mississippi, Georgia, New York, Florida and Arizona have non-white populations around 40%.

### U.S. Trends in Immigration

- 1 of 10 global citizens today is a migrant.
- Immigration to the U.S. has tripled in the last 30 years.
- During the 1990s, the U.S. received over 13 million immigrants – the largest number in our nation’s history.
- There are 40 million foreign born in the U.S. today (13%)
- Significantly, most immigrants today no longer come from Western European nations with whom we have the most in common historically.


### U.S. New Cultural Influences

- Religion: Islam is now the fastest growing religion in the U.S.
- Language: Over 20 percent of Americans 5 years old and older speak a language other than English at home, with nearly half of those claiming to speak English less than “very well.”
- America is now more linguistically diverse than Western Europe.
- 43% of California’s population now speaks a language other than English at home. Four other states over 30%.


### Who is the current Student Pharmacist?

- As of Fall 2014, 63,927 students were enrolled in a Pharm.D. program

Source: [American Association of Colleges of Pharmacy](http://www.aacp.org/resources/research/institutionalresearch/Documents/Student%20Pharmacist%20QA-flyer.pdf)

### Who are You? Questions to Ask...

- What is Unconscious Bias?
- It is likely that I have unconscious biases about students, residents, patients (or others) based on their personal characteristics (race, ethnicity, culture, etc.)?
- So are we in complete control our decisions and behaviors?
- Are Medical Professionals (MDs, NPs, PAs, RNs, PharmDs) susceptible to unconscious biases?
New Research on Cultural Bias

- In the past, bias was regarded as aberrant, conscious and intentional.
- Today, we now understand that bias is normative, unconscious and largely unintentional.
- Social Cognition Theory establishes that mental categories and personal experiences become "hard-wired" into cognitive functioning. (i.e. learned from MI training)
- As a result, human biases can be seen as evolutionarily adaptive behaviors.

ACTIVITY: What is Culture?

- What is your ethnic culture or ethnicity?
- What is your racial identity?
- What is your nationality?
- How do your ethnicity, racial identity, and nationality differ from your students and colleagues?

Impact of Culture on learning

- Think about the way you view your world. What factors contribute to the lens you wear as you view the world?
ACTIVITY: Examine the list:
• Which factors do you share with your students and colleagues?
• In which ways do you differ from your students and colleagues?
• What have you learned about yourself as a result of defining your culture?
• What is your organizational culture? The culture of your workplace?

EXERCISE: Pair off with one another and use the Venn diagram:
• Write your name above one circle of the Venn diagram and your partner’s name above the other.

EXERCISE Part I:
• Fill out the Venn diagram with your similarities and differences. (i.e. if you are of different genders, your gender would go in the separate part of your own circle. If you share gender, your gender would be in the overlapping part of your circles.
• Fill in your Venn diagrams with as many aspects of your lives as time allows.

Are you in touch with your Diversity?
• The Diversity Thumball™ is a fun tool that tackles a difficult topic with smarts and sensitivity.

Diversity Thumball™
• Conversations about diversity and bias can be emotionally charged.
• The goal is to share experiences of feeling different or excluded and identify ways to create a more welcoming, diverse and compassionate community:
  - Critique ideas not people
  - Speak only for yourself
  - No personal attacks
  - Listen - make sure everyone feels heard and validated
  - Only one person speaks at a time
  - Use “I” statements
  - Agree to disagree, disagree without being disagreeable
  - Be positive and non-judgemental; open to new ideas

EXERCISE Part II:
• Please stand up & create groups of 10 or more so you can toss or pass the ball to each other;
• We are passing out the Diversity Thumballs™;
• The ball has 32 panels pre-printed with questions;
• Toss or Pass it around in a group and ask participants to share their reaction to whatever prompt lies under their thumb.
Cultural Competent Teaching/Learning

- Use tools to explore your own unconscious biases and open your mind
- Slow down, shift from “think fast” to “think slow”
- Strategies that may help make a difference:
  - Information – re: the psychological basis of bias
  - Motivation to change
  - Individuation – learning to see diverse others as individuals rather than as members of groups.
  - Direct contact with members of other groups.
  - Working together on teams, as equals, in pursuit of common goals.
  - Environment – display positive images from diverse groups.
- Explore 360 degree feedback from diverse students/colleagues/patients.
  [Reverse mentoring processes can also help.]
- Check personal behavior – Goal is acceptance not tolerance.

Strategies for Handling Difficult Learning Situations

- PREVENT problems before they occur
- IDENTIFY challenges early
- MANAGE problems effectively

“An ounce of prevention…”

- Foundational steps that should occur on every rotation
  - Communication
  - Expectations
  - Documentation
- Awareness of cultural/generational differences in learners
- Establishing an infrastructure for your teaching approach and actions
- Exploring your resources

Be aware of expectations

- What is expected of learners?
- What can you expect learners to know?
- What is your role in grade/evaluation determination?
- When should you contact program administrators if a problem arises?
- What is considered grounds for failure? What are procedures for instituting this?

Prevent Problems

- Communication is key
- At orientation
  - Set clear expectations for performance
    - Knowledge, skills, tardiness, absence, interaction with patients, staff, or preceptors, dress, etc
  - Review your expectations
  - Ask learner about their expectations (learning, personal, cultural, professional)
    - Look for “mismatches”
Detect Problems Early

- Similar to managing medical problems - look for red flags that may signal a problem down the road
- Maintaining an awareness that things can go wrong
- Can prevent problems or help to minimize the negative impact on you, your staff, and patients

Look for subtle signs of a problem

- Are you struggling to teach what you know how to do well in practice?
- Is the learner not communicating an understanding of the patient’s point of view?
- Is the learner progressing much slower than expected?
- Is the learner frustrating you because of his/her attitude, behavior, working long hours with little productivity, etc?

If you suspect something is wrong...

- Ask yourself:
  - Is the student’s action putting patients at risk?
  - Is the student’s action affecting relationships in your practice site?
  - Can the problem be solved during the rotation?
  - Is the problem beyond your control as a preceptor?
  - Does the problem have any legal implications?
- Take immediate action to contact the school, or college and protect patients, staff, and others as needed.

Difficult conversations

- Give the learner privacy and your undivided attention
- Ask for a third party to join you if needed
- Discuss issues as soon as possible after they are noted
- Make sure your feedback is:
  - Sensitive
  - Constructive
  - Objective
  - Performance-based
  - Equalized

“Optimism is the faith that leads to achievement; nothing can be done without hope.”

HELEN KELLER, Optimism
### Difficult Conversations

<table>
<thead>
<tr>
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<th>Objective</th>
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<th>Equalized</th>
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</table>
| "It may be helpful if..." 
"It appears that..." 
"It would be useful to..." 
"I'd like to suggest trying..." 
"Next time, I'd like you to try this..." | Identify solutions to the problem and develop a measurable plan for improvement. | Include a specific example of an action or behavior with documentation if possible. | Provide details about specific performances; focus on behaviors that can be changed instead of personal characteristics. | Balance positive and negative feedback; strengths and weaknesses |

### Conflict Resolution

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Definition</th>
<th>Likely Use in Precepting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competing</td>
<td>Doing whatever is necessary to &quot;win&quot;</td>
<td>When student's actions must be corrected for patient safety, provider relations, or to pass the rotation.</td>
</tr>
<tr>
<td>Collaborating</td>
<td>Working together to find a solution satisfying to both</td>
<td>When student can have a role in developing a plan or steps for improvement and accountability.</td>
</tr>
<tr>
<td>Compromising</td>
<td>Finding a quick, mutually acceptable solution</td>
<td>Agreement on an absence or make-up plan for last time due to illness.</td>
</tr>
<tr>
<td>Avoiding</td>
<td>Not immediately pursuing concerns or a conflict</td>
<td>Postponing an issue until a private discussion is possible. Caution: To tolerate is to teach.</td>
</tr>
<tr>
<td>Accommodating</td>
<td>Neglecting own perspective to satisfy another's concerns</td>
<td>Agreement to a request for an absence due to professional reasons in spite of its creation of additional work for preceptor.</td>
</tr>
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</table>

### Conflict Resolution

- Match the strategy to the situation
  - What are your priorities in resolving this issue?
  - How long do you have to resolve this situation?
  - How important is this issue?
  - How important is it that you maintain a close, supportive relationship with the student?
  - How much power do you have compared to the learner?
  - How does this issue impact the big picture of the rotation? Of the practice site?

### If Problems Persist...

- Stay in close contact with the School/College of Pharmacy
  - Is there a history of similar issues with the learner?
  - What are your options?
  - What action is appropriate for the situation?
  - What documentation is needed to fail the learner?
- Document a midpoint evaluation, each step of the problem, and any discussion regarding its progress and/or resolution.
- Communicate clearly with the learner regarding accountability and consequences.

### References:


### Reference:

- Stone, Jeff and Moskowitz, G.B., "Non-conscious bias in medical decision making: what can be done to reduce it?" Medical Education 2011:45: 768-776
Reference:

Key Points (Starlin’s)
- Bridging the generation gap requires us to realize that what works for our generation may not work for ALL generations.
- Adapt your precepting to meet the needs of culturally diverse learners.
- Place value on students/residents’ cultural diversity and find “common ground” to build a relationship.
- Preceptor experiences that impact diversified students/residents have 3 elements:
  - A healthy, trusting relationship with the preceptor
  - An interactive learning environment
  - Creativity and innovation to stimulate Active Learning

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