What skills do we need to develop in our students and how might be go about doing this?

Zubin Austin BScPhm PhD
University of Toronto
Why is this an important question?

• Changes in the essential nature of what a “pharmacist” is and does
• Legislative evolution in scopes of practice
• Broader social and health system changes
• A nagging sense that we haven’t “done right” by our students, our profession
The Variables

- Learners: demographics, interests, motivations, needs, demands
- Environment: cultural norms, social trends
- Societal expectations: patients, allied health professionals
- System issues: legislation, finances, structure
- Technology: instantaneous access to information and its impact on judgment and wisdom
How do professionals learn to be professionals?

- Learning of knowledge, skills and attitudes is shaped by profession-specific socialisation practices.
- A system that incorporates media, teachers, parents, the playground, etc.
- What is the role of the “teacher” in professional development?
How Doctors Think - Groopman

The cognitive-developmental pathway of physicians:

• Reasoning from first principles
• Application of rules
• Pattern recognition
Pattern Recognition

• What is expertise in clinical work?
• Advantages: speed, confidence, 95% accuracy
• Disadvantages: speed, confidence 95% accuracy
• Where does reflection, self-improvement, professional evolution fit?
In the footsteps of Flexner....

• Why are health professions taught in a university?
• Why is “science” at the core of university-based health professions?
• How did the evolution from “character” to “characteristics” to “competencies” occur?
Character to characteristics to competencies

• A major shift in the way we think about professionals

  Professional = a man of great character who therefore must be competent

  vs.

  Professional = a person who displays the right characteristics by proving his/her competence
Foucault and the shifting discourses that affect our thinking

“Madness”

18th century = spiritual possession
19th century = criminal deviance
20th century = biochemical abnormality
21st century = simple variation
The shifting discourses of competency

“Competency”

Patients: affable, available
Professionals: no errors, ever
Regulators: no complaints
Lawyers: peer-referenced
Educators: measurement
We can teach but what will students actually learn?

Today, in pharmacy education:

- competency/outcomes oriented
- emphasis on reliable and valid measurement to prove to ourselves/others that “learning” has actually occurred
- a culture of “assessment as proof or learning”
Where do we go from here?

What skills do we need to develop in our students and how do we go about doing this?