

VIEWPOINTS

Knowledge, Skills—and Accountability?

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Since I started teaching 20 years ago, the educational emphasis has been on graduating students with the right knowledge, skills, and attitudes.¹ In the field of pharmacy over the years, more effort has been placed on fine tuning student knowledge and skills of to meet current and future practice needs.² To this end, curricula were modified to foster appropriate knowledge, for example by increasing the number of hours of therapeutics courses and, more recently, adding courses in public health or cultural competency. Introductory professional practice experiences (IPPEs) and Skills Laboratory courses were also introduced to fine tune skills required for future practice.¹ While the above curricula additions were shown to be keys to graduating students who could be successful on a health care team, pharmacy programs were still missing an emphasis on one major aspect to make this work: instilling accountability into programs to ensure students had a productive attitude toward learning and becoming a professional. The lack of accountability resulted in many issues such as a sense of entitlement³ among students and increased concerns by faculty members and administrators about more prevalence of academic and nonacademic misconduct.⁴⁻⁷

Accountability is synonymous with responsibility or answerability.⁸ Students and faculty members alike have to be accountable for their actions, and with the emphasis on personal and professional development in the Center for the Advancement of Pharmacy Education 2013 Educational Outcomes, accountability is an especially important goal for students.⁹ McGuire suggested that attitude is the most difficult thing to change in an individual,¹⁰ so pharmacy programs have to exert a more concerted effort to ensure a culture of accountability that may contribute to positive attitudes among students. That can be accomplished in a number of ways.

First, strategies should be implemented to motivate students to learn. We have all been faced with blank stares and uncomfortable silences from students after asking them concept questions on material from courses in prior or current semesters. So, how do faculty members prepare a curriculum and assessment activities to enhance true learning rather than the “cramp, pass, and dump” learning many of our students confess to adopting? Faculty

members can play a major part by being role models and demonstrating enthusiasm about what we do inside and outside the classroom. Faculty members can also make their discipline relevant to students and utilize active-learning techniques and a variety of teaching styles. Studies have shown that the intrinsic motivation of students is enhanced by instructor enthusiasm and teaching style.¹¹

Second, thought should be given to expectations of the students’ behavior in the nonacademic and academic settings in general, the whole curriculum, and individual courses. At all levels, students should be challenged to “examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.”⁹ Regarding non-academic expectations, to what degree do we hold students accountable for adhering to all published policies, meeting deadlines, coming to class on time, behaving appropriately in the classroom (eg, not surfing the web or checking social media), and abiding by the laws of the city, state, and nation? Simultaneously, how often do we evaluate student workload issues to ensure students are not under stress, assess that expectations and policies are clear and doable, and gauge whether support from faculty and administrators is available when needed? One academic expectation I struggle with is having students demonstrate in the classroom or in practice experience that they live up to the motto that they are the drug experts on a medical team. Moreover, how much should we allow them, as drug experts, to rely on electronic resources to find answers rather than their own acquired knowledge or skills?

Third, policies and procedures have to be well thought out so that both nonacademic and academic misconduct are dealt with in a fair and judicious manner. Such policies should be implemented consistently to ensure students are accountable for such behaviors even if that means, for example, they will not graduate within the typical time frame or be dismissed from the program. A self-assessment document available from the Accreditation Council for Pharmacy Education¹² allows one to track a college or school’s on-time graduation rates and academic dismissal percentages for the past 5 years compared to the national rate. Such rates are important to evaluate what if any changes are needed in the program; however, a rate higher

than the national one should not be looked at negatively if a rationale (eg, abiding by nonacademic and academic policies) is provided.

Finally, while we currently reward students for academic achievement, more emphasis should be placed on rewarding students for appropriate behaviors both in and outside the classroom. Administrators, faculty members, and staff who demonstrate respect in their interactions with students can go a long way in this regard.

As we prepare students in their didactic and practice experiences to enter the workforce, it is of utmost importance that they are equipped with appropriate knowledge and skills to care for their patients. More critically, we have to foster a culture of accountability in all aspects of students' lives so they will be more motivated and excited about continuing to learn, meeting expectations, and exhibiting positive attitudes and behaviors towards their profession, colleagues, and society at large.

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