Pharmacists’ views of preceptorship

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Abstract
Aims: To determine rural pharmacists’ attitudes towards being a preceptor.
Methods: A survey was undertaken before pharmacists commenced a preceptor education program. Pharmacist’s rated their attitudes and abilities as a preceptor using a 5-point Likert scale. Qualitative data from open-ended questions was analysed for themes.
Results: The pharmacists’ rating of their attitudes and abilities as a preceptor is presented as a mean score. The themes identified from open-ended questions included: reasons for being a preceptor; benefits and rewards of the preceptor role; challenges; personal strengths and weaknesses.
Conclusion: Pharmacist preceptors have a similar view of their role to preceptors in other professions. They identify a number of rewards of precepting and are aware of their limitations in the role. Awareness that these limitations can impact on the success of the learning experience led pharmacists to undertake the online Australian Pharmacy Preceptor Education Program.

Keywords: Pharmacist, pharmacist preceptor, preceptor, preceptor education

Introduction
Preceptors play an invaluable role in the education and development of health and other professionals (Mann, Holmes, Hayes, Burge, & Viscount, 2001; Yonge, Krahn, Trojan, Reid, & Haase, 2002). There are a myriad of definitions of the term “preceptor”, however, in this paper the term preceptor refers to a professional practitioner who facilitates another’s learning (Marriott et al., 2005). Pharmacists have been involved in preceptorship programs for some time, especially in terms of supervising pre-registration students. The importance of experiential placements to learning has been highlighted with their introduction into the undergraduate curriculum. Pharmacists are now more
aware of their role to facilitate learning and are consequently becoming aware of the needs of pharmacy students and the role the preceptor plays in their education as professionals.

Preceptorship is a model in which students who are undertaking experiential placements are assigned a professional who works in the professional setting (Mamchur & Myrick, 2003). Learning from this perspective derives from the theories of experiential learning that are predicated on concepts developed by Dewey (1938) and Kolb (1984), adult learning developed by Malcolm Knowles and others such as Bandura (1971) and Rogers (1951) as discussed in Rose and Best (2005) and Jarvis (2006). One traditional value of experiential learning is that students are taken out of their everyday university learning environment and placed into professional contexts where they can experience the realities of practice. Experiential placements are therefore designed as a learning experience whereby students are able to put theoretical knowledge into practice under the guidance of an experienced practitioner. Students are also able to develop their problem-solving skills, communication, and professional ethics (Dunn & Hansford, 1997). The strength of the preceptorship model as a learning environment centres on the professionals’ ability to address the difference between the theory learned in the classroom setting and practice in the professional setting (Landers, 2000).

Preceptors teach, counsel, inspire, serve as role models, and support the growth and development of an individual for a fixed and limited amount of time with the specific purpose of socialising the novice into the new role (Morrow, 1984; Atkins & Williams, 1995). Effective preceptors reportedly display key characteristics and skills. They are professionally competent and well organised, have well-developed interpersonal, teaching and evaluation skills, and are enthusiastic, patient, supportive, approachable, flexible and dynamic (Gignac-Caille & Oermann, 2001; Magnuson, Norem, & Wilcoxon, 2002; Riesenberg, Biddle, & Erney, 2001). The quality of the knowledge, skills and attitudes that health professionals develop through their education and experience is the cornerstone of high-quality, competent care.

Within the body of the preceptorship literature, preceptor’s commitment to the role is a recurring theme. It is reported that preceptor experience increases job satisfaction through professional recognition and the ability to share knowledge (Dibert & Goldenberg, 1995; Mann et al., 2001). Adopting a preceptorship role imparts benefits—preceptorship has been reported to be a potential inducement for staff recruitment, which is an important consideration, especially in rural areas (Hill & Lowenstein, 1992). Conversely, barriers (such as time, workloads and insufficient resources) and stressors (a succession of preceptorships, lack of support) may deter some pharmacists from accepting the role (Yonge et al., 2002).

Students have identified that the characteristics of the preceptor are of greater significance in enhancing their clinical experience and learning than the characteristics of the placement site (Riesenberg et al., 2001). Pharmacy students (and graduates) working in both hospital and community settings are dependent on quality preceptoring for their development into competent pharmacists.

For the pharmacy profession to further strengthen its development, it is crucial to put systems in place to educate preceptors to facilitate student learning. This can be achieved by facilitating a better appreciation of the positive outcomes of quality precepting while managing identified barriers. Though there are many pharmacists who possess the attributes that are desirable for quality precepting it is unfortunate that few choose to act as preceptors.

Face-to-face training courses for health professionals supervising students have been in existence for some years (Dalton & Walker, 2001). While pharmacy-specific programs have been developed for graduate preceptor education these are implemented at state levels and their details do not appear in the published literature. As a means of supporting pharmacist preceptorship practice at a national level, the Australian Consortium for Education of Preceptors developed, piloted and evaluated the Australian Pharmacy Preceptor Education Program, an online program suitable for national implementation (Marriott et al., 2005).

The Consortium is comprised of representatives from four Australian universities (Charles Sturt University, Monash University, Sydney University and the University of Tasmania) as well as two members co-opted for their expertise in preceptor education. The Australian Pharmacy Preceptor Education Program was developed with funding provided by the Rural and Remote Pharmacists Infrastructure Development Scheme and while it was designed specifically to suit the needs of rural practitioners, it is suitable for use by pharmacists practising in any setting.

Although there is much literature available that explores the precepting experience of nurses (Atkins & Williams, 1995; Dibert & Goldenberg, 1995; Coates & Gormley, 1997; Ohrling & Hallberg, 2001; Usher, Nolan, Reser, Owens, & Tollefson, 1999; Yonge et al., 2002), little is known of the way in which pharmacy preceptors view their role. While the value of research from other disciplines is acknowledged, the need to research preceptorship from the preceptors own cultural perspective has been identified by others (Ohrling & Hallberg, 2001). These expectations and characteristics derived from pharmacists, provide valuable background for educationists to design education and support programs that
Pharmacists' views of preceptorship

assist practitioners to develop expertise in facilitating rich and rewarding clinical experience for pharmacy students.

A component of research and evaluation of the 2005 program determined the views of Australian pharmacists’ precepting experience. The views presented here are those of pharmacists prior to their involvement in the piloting and evaluation of the Australian Pharmacy Preceptor Education Program, as reported through a semi structured questionnaire designed to explore pharmacists’ knowledge, skills and attitudes to preceptorship. The questionnaire was part of a wider evaluation of the program which involved feedback from preceptors via questionnaire about the program itself; general feedback from students about rural placements and the role of the preceptor; and feedback from preceptors via focus groups once they had completed the course and subsequently supervised a student. The aim of this paper, however, is to report the findings of Australian pharmacists’ views on the precepting experience.

Methods

Pharmacists who act as preceptors for students undertaking a rural placement from the four universities represented on the Consortium (Charles Sturt University, Monash University, Sydney University and the University of Tasmania) were invited to participate in the project. Those who agreed to undertake the Australian Pharmacy Preceptor Education Program were asked to complete a questionnaire prior to undertaking the program in which they rated their self-perceived abilities as a preceptor and their understanding of the learning needs of students. The questionnaire, which was distributed by post in August 2004, had to be completed and returned by post before the beginning of September 2004 when the program was made available to participants. To ensure a maximal response rate, each participant was sent two reminder letters. All participating universities gained approval from their relevant Standing Committee on Ethics in Research involving Human participants

Preceptors were asked to rate their confidence as a preceptor, their level of knowledge (as necessary for precepting), the influence of various factors on positive learning and their overall experience of being a preceptor. All of these items were rated on a scale of 1–5, one being the lowest score (very poor or lower level of acceptance), and five, the highest score (very good or higher level of acceptance). A mean score of all participants’ ratings for each statement was calculated for each statement.

A qualitative section was also included in the questionnaire and in this pharmacists were asked to comment on why they became preceptors, on their previous precepting experience and education, and on their experience with other undergraduate students. They were asked to comment on their role as a preceptor; their strengths, weaknesses, challenges and successes as preceptors; the rewards of precepting and the workplace resources available and used when precepting. Responses to qualitative questions were grouped into themes and a summary of the overall comments was made by two pharmacists who were independent of the researchers.

Results

Although 66 pharmacist preceptors were originally recruited only 56 completed the preliminary questionnaire and commenced the Australian Pharmacy Preceptor Education Program, giving a response rate of 85%. Individual, workplace, and education information about the participating preceptors was collected (Table I).

Fifty nine percent of the sample was male, with the majority (29) aged between 31 and 50 years. They were largely experienced practitioners with an average of 23 years in the workforce (range 2–54). Eighty two percent had been a preceptor for undergraduate students in the past, however only 21% had undertaken any education or training to equip them for the task.

Quantitative results

A 5-point Likert scale (with five being “excellent”) was used by pharmacists to self-rate their attitudes and abilities as a preceptor. The mean scores are presented in Table II and indicate that pharmacists rated their ability as preceptors reasonably highly.

Qualitative results

Reasons for being a preceptor. Preceptors reported that they valued the experience of having students on placement and derived satisfaction from helping them, as young professionals, grow in confidence and competence. This experience reportedly provided preceptors with personal satisfaction and opportunities for self-learning. The student–preceptor relationship facilitated this two-way learning. Some pharmacists stated that they became a preceptor because they were approached by the university or pharmacy board; others identified that they chose to precept for the specific benefits they anticipated would accrue from the experience such as acknowledgement of their precepting role by customers and the profession.

Benefits and rewards of being a preceptor. A range of benefits were identified by pharmacists as reasons for precepting. Most pharmacists reported that one of the
The main benefits of being a preceptor was an increase in knowledge; it was also seen to be a good way of improving skills. Preceptors believed that it helped to keep them up to date with current knowledge, both because of the need to ask questions of the student as well as to answer the student’s questions. This was illustrated with comments such as:

“[I enjoy] having a pharmacy student working with me, always asking questions, testing my knowledge, encouraging me to interact with other health professionals”

Preceptors enjoyed the opportunity to work with students, providing both personal and professional development and appreciated being involved with young, exciting and enthusiastic students from a diverse range of backgrounds. They also acknowledged that students were knowledgeable and able to demonstrate different ways of approaching issues. They appreciated the opportunity to:

“Keep up to date by “tapping into” new pharmacists with current learning”

The precepting experience was worthwhile when the students appreciated the time and effort invested in them and showed respect for the preceptor’s depth of experience. Preceptors also enjoyed the precepting role when students demonstrated they had learned something useful.

Preceptors identified the difficulty of attracting staff to rural areas and the consequent staff shortages. They felt that having a student was a good opportunity to attract graduates to their pharmacies to address shortages. They expressed a desire to share the experience of living in a rural environment as they felt that it was important to encourage students to consider future employment in a rural area in an attempt to address the shortfall of pharmacists in country areas.

“Wish to encourage students to experience country life and to encourage them to consider returning to the country (help shortage of pharmacists)”

Preceptors felt strongly about wanting to help students and to pass on their experiences. They felt rewarded by seeing students develop as pharmacists, gain confidence, put their knowledge into practice, and develop competence and potential. Increased student enthusiasm for the profession as a result of their placement was also rewarding. It was rewarding:

“To see a young pharmacist who has academic knowledge, gain some wisdom through my experiences and mistakes”

An important professional factor identified for accepting students was the opportunity to promote the profession. Preceptors felt a professional responsibility to “give something back” to the profession by involving themselves in the education of the next generation of pharmacists.

“Desire to pass on enthusiasm for our profession”

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<table>
<thead>
<tr>
<th>Criteria</th>
<th>Preceptor ratings of their own preceptorship.</th>
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<tbody>
<tr>
<td>Pharmacists’ rating of themselves as a preceptor</td>
<td>3.48 (1.05)</td>
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<tr>
<td>Attitude towards being a preceptor</td>
<td>3.79 (0.79)</td>
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<tr>
<td>Factors involved in a positive learning experience</td>
<td>5 = very important (Mean ± SD)</td>
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<td>Provision of an orientation to the workplace</td>
<td>4.34 (0.75)</td>
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<td>The preceptor’s expectations of the student are clear</td>
<td>4.34 (0.61)</td>
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<tr>
<td>Setting aside time for formal feedback and discussion</td>
<td>4.29 (0.71)</td>
</tr>
<tr>
<td>Opportunities for learning are identified</td>
<td>4.00 (0.71)</td>
</tr>
<tr>
<td>A variety of learning opportunities are made available</td>
<td>4.58 (0.53)</td>
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<tr>
<td>The student is encouraged to pursue own learning needs</td>
<td>4.30 (0.78)</td>
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<tr>
<td>The student’s questions are welcomed</td>
<td>4.88 (0.33)</td>
</tr>
<tr>
<td>Resources are made available to the student</td>
<td>4.63 (0.52)</td>
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<tr>
<td>Feedback is provided in privacy</td>
<td>4.54 (0.69)</td>
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It was felt that providing a successful experience for the student would also help to break down perceived barriers between city and country areas and possibly attract pharmacists to work in rural areas in the future.

“I have been very eager for students/graduates to experience working in a rural community as I have found being a pharmacist in this environment very rewarding professionally and financially”

**Important factors in a successful precepting experience.**
There were many factors relating to the preceptor and their workplace that were identified as contributing to a successful precepting experience. Common factors included the preceptor having time to fulfil their responsibilities in relation to both their pharmacy work and the student’s needs. Preceptors also identified as important having adequate resources such as a range of activities for the student to experience and a friendly and professionally stimulating environment.

“Allowing adequate time to fulfil my responsibilities.” and also “Having the time to spend discussing relevant issues”

“ensuring there are a range of activities for the student”

Interpersonal relationships, including maintenance of good rapport with the student and the ability of the student to provide feedback concerning their needs, were considered important by the preceptors.

“Good communication between mentor and student and being able to give feedback to students and also them back to you.”

Many respondents indicated the importance of regular, clear communication with the university. It was important for them to know what the university required of them and what the student’s needs were. It was also important for preceptors to know that if they had problems that they could not resolve with the student or placement they could contact the university.

“Having a guideline to follow for the students—knowing what is expected of me”

“A clear knowledge of what is expected and advice on what is required by the student”

When students report their experience was valuable in terms of learning outcomes the preceptors stated they feel rewarded and consider their preceptorship as successful. Preceptors commented on the importance of imparting knowledge to students, while identifying their own potential to learn from students. The need to refresh their knowledge to be a preceptor and the chance to learn from students were seen as opportunities for professional development.

“I want to feel that the students have gained something from the time spent with us.”

Critical factors in making the precepting experience successful were the student’s enthusiasm, willingness to learn and commitment to the placement: preceptors enjoyed enthusiastic students, and found poorly motivated students difficult to manage.

“Having an eager student who wants to be here”

A number of preceptors had experienced both extremes and commented on the effect this had on the precepting experience. The student’s level of knowledge was also a factor. Most preceptors found that students had a good level of knowledge; however, some identified a wide range of ability between students from the same year level.

**Strengths and weaknesses in preceptor ability.** Preceptors identified many perceived strengths and weaknesses in their ability to be a preceptor and these are summarised in Table III.
Some preceptors identified that their own personality traits affected their ability to supervise students, one describing himself as “pig-headed, arrogant, bad-tempered, old, tired (some of the time)”. The ability to give feedback in an appropriate environment and in a timely manner was seen as an important strength. When providing feedback, preceptors identified their strengths were providing constructive rather than critical feedback, providing balanced responses, honesty, fairness, approachability and good communication skills.

“I am patient and willing to spend as much time as is available to explain different concepts.”

Weaknesses preceptors identified included lack of confidence with their interpersonal skills that may have made the feedback less effective. They also identified their lack of both experience and knowledge of appropriate standards as weaknesses.

“Specific knowledge of some areas and understanding of learning processes students require”

“what is expected of me and my ability to meet these needs”

Challenges in precepting. The two biggest challenges preceptors reported were having sufficient time and knowledge to perform to the desired level. Many preceptors identified problems with having time to dedicate to a student while still managing the demands of their workplace. Preceptors were aware of the need to ensure that their own knowledge was up to date; they found difficulty in adjusting their interactions to the student’s ability and progress throughout the course.

“Balancing the running of the business with the needs of the student”

“Finding the right amount of time to satisfy both the student’s needs and my own expectations”

Mentoring to best support the personal development of students was considered a challenge. Preceptors identified the importance of being a positive role model and knowing how much autonomy to give the student.

“Building the confidence of the student and getting them to perform in the workplace—just like a coach”

Uncertainty in their ability to teach and in their level of knowledge were also considered challenges for preceptors, as was keeping students interested and motivated throughout a placement with consideration for their differing levels of expertise. Challenges were also presented in communicating feedback, relating to the student and resolving conflicts

“Having the knowledge to answer questions and the ability to involve the student”

The biggest student-related challenge for preceptors was engaging students who were uninterested or unmotivated to learn. Maintaining the student’s motivation was a challenge for some preceptors.

“Dealing with students who do not have the correct motivation.”

Resources required for precepting. Overwhelmingly, preceptors identified that it was critical to have sufficient time, but that time was a resource that was lacking. In addition, support and clear guidelines from the university were identified by many respondents as critical resources. Preceptors either needed or wanted more information and background about upcoming students, including what year of the course they were undertaking, an outline of what topics they had covered, what assignments they needed to undertake during their placement and other specific university requirements.

“Constant communication [is needed] with the teaching establishments as to what is required of both the preceptor and the student.”

Preceptors also identified the need for good information technology resources (including Internet access) and access to a range of texts and other information resources. Workplace issues included having sufficient staff to allow the pharmacist time to be with the student and a working environment that included a variety of services and learning opportunities.

Discussion

The pharmacy preceptors who participated in this study perceived a range of benefits arising from being a preceptor—benefits not only to themselves but also to the students they supervise and to the profession in general. These benefits included increased knowledge, the ability to “give something back” to their profession, and the ability to learn from their students. These motivations are also apparent in preceptors in other professions (Shamien & Inhaber, 1985; Coates & Gormley, 1997; Usher et al., 1999; Stone, Ellers, Holmes, Qualters, & Thompson, 2002).

Pharmacist preceptors rated most highly the importance of welcoming of student’s questions, the availability of resources and the provision of both an orientation and a variety of learning opportunities. Student enthusiasm and willingness to learn were also identified by preceptors as important contributors to a successful placement. The obvious growth in the student’s abilities and the appreciation shown by the self motivated and interested student were an enormous source of pleasure and job satisfaction to the preceptors. These rewards have also been recognised by nurses in their role as preceptors, but
research with nurses has also shown that an increase in job satisfaction may not be experienced if there is an associated increase in workload and lack of time for the student (Bizek & Oermann, 1990). The same findings were reflected in the challenges that pharmacist preceptors identified.

One of the main challenges identified by this group of preceptors was lack of time to spend with the student. This is a common challenge also voiced by preceptors in other disciplines when supervising a student (Coates & Gormley, 1997; Yonge et al., 2002) and is often considered to be a source of stress for the preceptor (Coates & Gormley, 1997; Yonge et al., 2002). Sources of stress for rural pharmacists include the lack of pharmacists willing to fill vacant positions leading to short-staffing, thus reducing the time available to spend with a student. Other sources of stress identified in the literature but not highlighted by participants in this study include the need for preceptors to undertake evaluation of the student, the continual “bombardment” of questions and being constantly under observation by students (Coates & Gormley, 1997; Yonge et al., 2002). An additional preceptor challenge identified in this study was the difficulty in providing motivation and maintaining the student enthusiasm.

The complexity of the relationship between a student and their preceptor can provide a challenge that relies on good interpersonal skills (Yonge et al., 2002). Fortunately one of the main strengths identified by preceptors in this study was their perceived good interpersonal skills. In addition, strengths they identified were enthusiasm for their profession as well as their knowledge and practical skills. Knowledge and skills of preceptors are commonly considered to be their greatest assets (Coates & Gormley, 1997; Mann et al., 2001).

Conversely, lack of professional knowledge, lack of formal training as a teacher and uncertainty of the Universities’ expectations were considered weaknesses by participants. It has been recognised by other groups that support from the educational institution is critical in maintaining a viable experiential program for students (Dibert & Goldenberg, 1995; Usher et al., 1999).

The participants who participated in this study had volunteered to undertake an educational program and it is therefore expected that they would have good insight into the benefits of undertaking a preceptor role and be highly motivated preceptors (Mann et al., 2001; Yonge et al., 2002). Therefore their views may not be representative those of the total population of pharmacy preceptors. Participants highlighted areas where they felt deficient and had concerns, most probably areas similar for all other preceptors or potential preceptors. All these issues have been addressed in the Australian Pharmacy Preceptor Education Program and the results of this study therefore supported the introduction of the program.

**Limitations of the research**

Although these findings are significant it must be acknowledged that, as with all research, there are limitations. There were 56 pharmacists who participated in the study. The small sample size is attributed to the questionnaire only being sent to those pharmacists who had volunteered to undertake a new online pharmacy preceptor education program. Nevertheless, although the sample was small the responses received indicated a uniformity of view. It is not the intention to generalise from these findings, however, it is argued that the small purposive sample and qualitative nature of the data allowed for rich descriptions of pharmacists views about preceptorship. Furthermore readers are encouraged to consider the transferability of the findings in relation to their own context.

The findings are unique in that they examine the views of pharmacist preceptors who are based in rural areas. They provide important insights into what rural pharmacists consider important aspects of experiential rural placements, of which there is a paucity of knowledge. Furthermore, the findings resonate with much of the existing knowledge about preceptors, across various disciplines, who work in metropolitan areas.

**Conclusion**

This paper contributes the pharmacists’ perspective of the experience of preceptorship to those of other professions. Pharmacists’ attitudes towards preceptorship indicate a strong commitment to the role and recognition of the personal and professional rewards it can bring. Pharmacist preceptors have a similar view of their role as do preceptors in other professions. They identify a number of rewards of precepting that may motivate them to undertake and continue in the role that could be publicised to encourage more pharmacists to undertake the preceptor role. Pharmacists are also aware of the limitations of the precepting role in terms of their own knowledge and skills, the time available for the student and support from the university but also in terms of student characteristics such as enthusiasm and self-motivation. Both sets of limitations can impact on the success of the learning experience. Being well prepared as a preceptor is seen as a mechanism to improve the experience for both parties and this supports the introduction of the Australian Pharmacy Preceptor Education Program.

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