

**Interior Health Pharmacy Residency Program
Academic Half Day Program**

Resident-Led Academic Half Day: A Resident's Guide

November 2022



Overview

The Resident-Led Academic Half Day is an opportunity for residents to plan, develop and facilitate a case-based teaching session to an audience consisting of their fellow residents, with the support of a mentor. Through this process, the resident will gain experience and skill in creating an effective teaching plan. In addition, by leading this case-based session, the resident will also gain skill in the practice-based teaching method of facilitation. This guide is meant to provide residents with an overview of the Resident-Led Academic Half Day and to assist residents in preparing for their teaching session.

Relevant CPRB Standards and Requirements

Standard 3.5 Provide Medication- and Practice-Related Education

The resident shall effectively respond to medication- and practice-related questions and shall educate others.

3.5.2 The resident shall provide effective education to a variety of audiences (e.g., patients, students, other pharmacy residents, health care professionals, including students of those professions, the public and other stakeholders) and in a variety of instructional settings (e.g., seminars, lectures, case presentations, patient interactions).

- a) The resident shall create an effective training/teaching plan that enables successful delivery of instruction to and completion of learning goals by the learner, within the specific timeframe by:
 - Defining learning goals and objectives
 - Selecting the instructions format and instructional media
 - Communicating effectively with a variety of audiences
 - When appropriate, creating and carrying out an assessment plan that aligns with the learning goals.
- b) The resident shall promote a safe learning environment for the learner.

3.5.3 The resident shall demonstrate skill in the four roles used in practice-based teaching in a variety of settings which shall include patient-care settings:

- d) Facilitation.

Resident-Led Academic Half Day Goals

- To develop an effective teaching plan, including developing pre-session and session learning objectives, identifying two pre-readings and developing a case(s) on a therapeutic topic that provides the audience with the opportunity to demonstrate they have met the session objectives with the support of a mentor
- To facilitate a case-based session on a therapeutic topic to an audience consisting of fellow residents with the support of a mentor.

Timing and Audience

The Resident-Led Academic Half Day will take place between January and April. Residents will be notified of their topic, session date and mentor at the beginning of the residency year. Topics have been chosen to align with the core and/or elective direct patient care rotations that the resident has completed. The audience will consist of their fellow Interior Health residents. Residents will adhere to the Academic Half Day Guidelines for Session Facilitators for deadline for submission of session materials.

Format and Content

The Resident-Led Academic Half Day will be an interactive, case-based session of 2-3 hours in duration. The session will consist of 1-2 cases that allow the audience to gain familiarity with the therapeutic topic, including pathophysiology, risk factors/etiology, clinical presentation, goals of therapy and therapeutic approach. It will also provide an opportunity to discuss clinical controversies and clinical pearls in relation to the therapeutic topic.

This session is meant to be case-based. Therefore no slides are required.

The resident will work with their session mentor to develop the session outline, consisting of pre-session and session objectives, to identify a maximum of two pre-readings and to develop the case content.

Planning and Developing Your Session

1. Session Planning Meeting with Your Mentor

The resident is to contact their mentor at least 8 weeks prior to the session to schedule a session planning meeting. The purpose of the planning meeting is to narrow the topic of focus to something that is relevant, meaningful and doable during a 2-3 hour session and also to develop a work plan to develop the session materials. The resident should familiarize themselves with the disease state/therapeutic topic and brainstorm some potential areas of focus in advance of this introductory meeting to make the most use of the time. Beginning work on the session materials should occur **after** this introductory meeting once the area(s) of focus for the topic are determined.

2. Narrowing Your Therapeutic Topic and Determining an Area(s) of Focus

You have been provided with a broad therapeutic topic. It is not possible to cover all aspects of the disease state or therapeutics. Residents, therefore, will focus their session on 1-2 aspects of the therapeutics of the broad disease state that they consider important and then frame their case(s) around the pharmaceutical care process as it relates to the area(s) of focus of the disease state and particular therapeutic concepts, controversies and pearls related to the area(s) of focus. Your mentor will support you in narrowing your topic during the session planning meeting to help to focus your topic prior to beginning work on your session materials.

Example: Therapeutic Topic: Liver Cirrhosis Therapeutics

- Liver cirrhosis is a broad therapeutic topic, which there are multiple facets of the therapeutics, each having their own clinical presentation, therapeutic approach and evidence.

- Reflecting on the disease state and considering your audience will consist of your fellow residents, who will have likely cared for patients with liver disease and will likely have some familiarity with the topic, in discussion with your mentor, you decide to focus your session on:
 - Providing an overview of the general pathophysiology, etiology and risk factors, clinical presentation and general goals of therapy and general therapeutic approach of liver cirrhosis
 - Focussed discussion on clinical presentation, goals of therapy and therapeutic approach of ascites management and management of hepatic encephalopathy.
- Recognizing that there are many other aspects to the management of liver cirrhosis that could be discussed, such as SBP treatment and prophylaxis, variceal bleed treatment and prophylaxis, you decide to focus on two areas of the therapeutics that are most meaningful to the audience.

3. Pre-Session and Session Objectives

A session outline template has been provided to outline your pre-session and session objectives. Learning objectives should be structured as SMART objectives. SMART objectives are specific, measurable, attainable, realistic and timely and should focus on what your audience should be able to *do* after completing the pre-readings or participating in the session and should reflect the knowledge, skills and behaviours as they relate to your session focus.

Pre-session objectives focus on what your audience should be able to *do* prior to attending session by completing the pre-readings. Pre-session objectives typically focus on providing the audience with the opportunity to develop their knowledge as it relates to the disease state, which could include their knowledge of the general pathophysiology, etiology and risk factors, clinical presentation and overall therapeutic approach. When developing pre-session objectives, consider the knowledge that the audience would need to acquire and demonstrate to be able to be active participants in the session and to work through the cases.

Session objectives focus on what your audience should be to *do* after attending and participating in the session. Session objectives typically focus on integrating, synthesizing knowledge about the disease state, therapeutics and patient case and applying this to the aspects of the pharmaceutical care process including: goals of therapy, therapeutic alternatives, role of particular therapies, clinical controversies, designing a therapeutic plan and designing a monitoring plan.

4. Identifying Pre-Readings

Two pre-readings should be identified and will be provided to the audience one week in advance of the session. The pre-readings should provide the audience with sufficient background information on the disease state: pathophysiology, etiology and risk factors, clinical presentation, overview of therapeutics and clinical controversies so that the audience is able to prepare to be an active participant in the session. The pre-readings should provide the audience with the opportunity to achieve the pre-session objectives.

Pre-readings can consist of:

- High quality review article
- Chapter from a tertiary reference

- Clinical practice guideline
- Landmark study: you may decide to assign each audience member a landmark study and have the audience member read the study and present the PICO and major efficacy and safety findings as part of the session. This is a strategy that can be useful in providing your audience with the opportunity to gain familiarity with the primary literature related to the topic, without having them each read multiple studies.
- For large readings, you can denote the relevant sections/pages that you would like the audience to focus on based on the pre-session objectives.

5. Developing Your Case(s)

An example case has been provided to support you in developing your case(s). Depending on the topic, you may decide to have one case or two cases.

- In developing your patient case, you may decide to draw on clinical experiences and to develop a patient case that is reasonably complex to appear realistic, but without additional information that may complicate the case unnecessarily or detract from focusing on the session topic.
- The case should include relevant subjective and objective information to allow the audience to link the patient-specific information to the disease state.

Some tips for developing case questions

- The first few case questions often relate to foundation information about the disease state and often focus on what the audience would have learned from completing the pre-readings. The questions may focus on the definition of the disease, general pathophysiology, patient's etiology/risk factors, patient's clinical presentation, goals of therapy, as examples. This allows the audience to apply what they have learned from the pre-readings to the patient case.
- The remainder of the case questions can focus on the application of the pharmaceutical care process to creating a care plan for the patient case and discussing clinical controversies and pearls.
- Having one or two cases will depend on your topic and area(s) of focus. You may consider having one large case focussed on the main therapeutic issue, with probing questions as the case progresses to address additional therapeutic issues or controversies.
 - Example: In our liver cirrhosis example from above. You decided to focus your session on overview of liver cirrhosis and management of ascites and hepatic encephalopathy. You may decide to have one main case focussed on management of ascites and then have the case progress to developing hepatic encephalopathy and then have some focussed questions around the management of this condition, rather than having two larger separate cases.

In preparation for facilitating the session, you should answer the case questions. You will then refer to this information when facilitating the session.

6. Facilitating Your Session

You will be facilitating the session by leading the audience through the case questions and facilitating the discussion around each question. Your mentor will be present to support you and to provide clinical context as needed throughout the session. Discuss with your mentor some strategies that you can use to facilitate the session.

Some tips for facilitating the session:

- Begin the session by reviewing the session outline, session goal and session objectives. You can ask what the audience thought of the pre-readings. This can be helpful in getting feedback on the reading quality, but also can provide you with an idea of some areas that may be less clear to the audience, which can be addressed as part of the session.
- Set the stage and timeline. Take a break part way through the session.
- Ask if there is a volunteer to read the case. You will be doing a lot of talking. This also helps to engage the audience.
- Give the audience time to reflect on the case. Prior to starting with the first case question, ask the audience if there is anything unclear in the case. This could include an abbreviation that may be unclear as an example. Clarify these upfront is important in being able to link the disease state to the patient case.
- Use the case questions to elaborate on key concepts.
- Don't feel that you need to have all the answers. Your mentor is there to support you and you can also ask for input from other audience members. This increases discussion around the therapeutic issues. If an audience member brings up an issue that was unanticipated or controversial, use it as an opportunity for discussion by asking others what they think to gain additional insights.

Evaluation of Resident-Led Session

The session mentor and resident audience members will evaluate the resident using the Academic Half Day Session and Facilitator Evaluation that will be sent to the resident audience members and session mentor via one45. The session mentor will de-brief with the resident after the session. The evaluations will be compiled by the Program Coordinator and sent to the resident and session mentor after the session.