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## Improving a Curriculum Through Incremental Changes Based on Programmatic Assessment Results

Batoul Senhaji-Tomza

*Touro College of Pharmacy, batoul.senhaji-tomza@touro.edu*

Suzanne R. Soliman

*Touro College of Pharmacy, suzanne.soliman2@touro.edu*

Paramita Basu

*Touro College of Pharmacy, paramita.basu@touro.edu*

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exam and was compared to the previous year's courses (control). Instructors completed pre- and post-surveys regarding training, experience, self-confidence and self-rated success in multiple-choice item writing. Item statistics were calculated for all items in the control and intervention sequences and compared using independent t-tests. Items were also classified into levels based on difficulty and discrimination, and distribution into these levels was compared between sequences with independent t-tests. **Results:** There was not a statistically significant difference between the control and intervention sequence items with regard to mean difficulty (86.3% and 84.4%) or discrimination (0.225 and 0.247), although item classification distribution did appear to change between the two. Subjective feelings of confidence and success in item writing increased between the pre- and post-surveys (6.0 to 8.1,  $p = 0.002$ ; and 6.4 to 7.9,  $p < 0.001$ , respectively). Confidence in personal ability to peer-review test items (6.7 to 8.4,  $p = 0.005$ ) and to implement a formal item evaluation process (5.5 to 7.1,  $p = 0.008$ ) also increased. **Implications:** Item statistics did not change significantly, but reviewed and edited items distributed more favorably into item statistic-based categories. This method of review positively affected instructors' perceptions of item-writing confidence and success and improved self-rated opinions of ability to edit items and train others to do so.

#### **Improving Interpersonal Communication Skills in Medical and Pharmacy Students Using an Interprofessional Blended Learning Course.**

Nicholas E. Hagemeyer, *East Tennessee State University*, Nasar Ansari, *East Tennessee State University*, Tandy Branham, *East Tennessee State University*, Daniel Rose, *East Tennessee State University*, Rick Hess, *East Tennessee State University*. **Objectives:** 1) To evaluate the impact of an interprofessional blended learning course on pharmacy and medical students' communication skills; 2) To compare pre- and post-course communication skills across cohorts. **Method:** Pharmacy ( $N = 57$ ) and medical ( $N = 67$ ) students enrolled in a required Communication Skills for Health Professionals course completed asynchronous online modules and face-to-face standardized patient interview sessions over the course of 1 semester. Students completed pre- and post-course objective structured clinical examinations with standardized patients and were evaluated by trained faculty using the validated Common Ground Instrument. Communication skill domains evaluated on a 1 to 5 scale included: rapport building, agenda setting, information management, active listening, addressing feelings, and establishing common ground. Nonparametric statistical tests were used to examine paired pre-/post-course domain scores within professions and pre- and post-course scores across professions. **Results:** Performance in all communication skill domains increased significantly for pharmacy and medical students ( $p$  values  $< 0.001$ ). Pre-course scores for the rapport building domain were significantly higher for medical students (median = 3;  $p < 0.001$ ); however, post-course rapport building scores were significantly higher for pharmacy students (median = 5;  $p = 0.006$ ). No additional significant pre- or post-course differences were noted across disciplines. **Implications:** The blended learning Communication Skills for Health Professionals course improved students' interpersonal communication skills across multiple domains. Fostering communication skill development in medical and pharmacy students could improve the extent to which future health care professionals engage in patient-centered communication.

**Improving a Curriculum Through Incremental Changes Based on Programmatic Assessment Results.** Batoul Senhaji-Tomza, *Touro College of Pharmacy-New York*, Suzanne Soliman, *Touro College of Pharmacy-New York*, Paramita Basu, *Touro College of Pharmacy-New*

*York*. **Objectives:** To describe implementation of incremental curriculum changes aimed at addressing identified gaps via subjective and objective programmatic assessment in a 2 + 2 curriculum. **Method:** After low first-time NAPLEX pass rates for two consecutive class years, subjective and objective assessment of a 2 + 2 curriculum was conducted. The curriculum was benchmarked to the other existing 2 + 2 program. Other assessments that occurred include: intensive course content review, course credit number versus instructional time audit, vertical and horizontal topical sequence revision in the clinical, basic sciences and social and behavioral course sequences; faculty/ student feedback and focus groups; outside experts and best practice consulting. **Results:** Instructional time was increased from 15 to 19 weeks to mirror the only successful 2 + 2 Pharm.D program. Discrepancies in instructional time versus credit hours were identified in four courses resulting in increased instructional times. Laboratory courses increased from sporadic lab meeting times to once weekly meetings times (three courses) resulting in further strengthening of the compounding curriculum. Nine new therapeutic topics introduced during years 3 and 4 were reinstated in the first two years. Topical clinical sequence was revised to integrate and harmoniously match the basic science curriculum. Social and behavioral course sequence was benchmarked to other pharmacy programs and re-sequenced and adjusted accordingly. **Implications:** Curricular assessment is valuable in addressing gaps and strengthening a curriculum. Further study is necessary to determine if the changes implemented are valuable and positively impact performance on first-time NAPLEX pass rates.

#### **Innovative Leadership and Diversity: A Multifaceted Approach to Achieving Diversity Outcomes.**

Carla Y. White, *University of North Carolina at Chapel Hill*, Victoria Hammett, *University of North Carolina at Chapel Hill*, Jessica M. Greene, *University of North Carolina at Chapel Hill*. **Objectives:** To explore the impact of leadership and organizational structure on achieving student diversity. **Method:** The Office of Innovative Leadership and Diversity was established to develop a sustainable infrastructure to advance diversity at a School of Pharmacy and is led by an Assistant Dean. The unit is accountable for developing a critical mass of diverse students; coaching senior leaders on diversity issues; engaging alumni and community partners; constructing cross-cultural curricular experiences, and disseminating best practices to achieve diversity and inclusion. **Results:** Currently, 83% ( $N = 517$ ) of the pharmacy student body is engaged in activities within the Office of Innovative Leadership and Diversity. Sixty percent of the PharmD program's underrepresented talent attended one or more programs and received mentoring and guidance through the Office prior to admission. The percentage of underrepresented students increased from 19% to 27%, since the inception of the Office. Cultural Competence Modules highlighting cross-cultural communication were implemented in the curriculum. The Office contributed to 18 publications and 72 presentations and is regarded as a leading, award-winning entity in advancing diversity across the health sciences. **Implications:** Pharmacy programs that have formalized a commitment in achieving student diversity through accountability and an organizational infrastructure may be better positioned to sustain a comprehensive, impactful approach in developing an inclusive educational environment and ultimately a diverse workforce.

**Investigation of Comparative Effectiveness Research (CER) in Asia, Europe, and North America.** Isha Patel, *Shenandoah University*, Jongwha Chang, *Samford University*, Rachel Rarus, *The University of Toledo Medical Center*. **Objectives:** Comparative Effectiveness Research (CER) is an important branch of pharmacoeconomics that systematically studies and evaluates the cost-effectiveness of medical