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Review

Preceptor tips for navigating generational differences with introductory and advanced pharmacy practice experience students

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Abstract

Ideally, precepting during introductory and advanced pharmacy practice experiences should be tailored to meet the individualized needs of learners. Understanding generational similarities and differences that exist between both learners and educators will facilitate meaningful interaction and improve learning outcomes. A common pitfall among preceptors is to judge the values of their pharmacy learners based on the stereotypes of the generations. This tends to be more evident when the preceptor's generation differs from the generation of the learner. The following article describes generational attributes that influence experiential learning with general tips for how preceptors can use this information to enhance their interactions with learners. By comparing and contrasting the predominant generations in the current pharmacy education landscape (Baby Boomers, Generation X, and Millennials), the article will demonstrate how multi-generational interactions impact pharmacy education. As Millennials are the majority of experiential learners, the focus will be on their learning preferences and how preceptors can help engage these learners. Practical advice and tools on engaging Millennial learners will be reviewed. Case vignettes will demonstrate how to identify ways to tailor precepting to meet the needs of the learner, avoid common pitfalls, facilitate meaningful interaction, and, ultimately, improve learning outcomes.

Keywords

Education, Pharmacy; Students, Pharmacy; Internship, Nonmedical; Preceptorship; Learning; Intergenerational Relations; Age Factors; United States

INTRODUCTION

A common pitfall among pharmacy preceptors is judging the values of their pharmacy learners based on stereotypes of the learners' generation, especially if the preceptors' generation differs from the learners. Generational similarities and differences between learners and preceptors may influence communication styles, which may inhibit meaningful interaction, hinder learning and performance improvement, and create frustration. Better understanding these similarities and differences can facilitate better interactions and improve learning outcomes. The following article describes generational styles in the workplace including general tips for how preceptors can use this information to enhance their interactions with learners.

Review of generational differences

Generations are defined as cohorts of people who are

similar in age and have shared similar experiences. A person's birth year indicates which generation he or she is a part of. Differences between generations are assumed to be the by-product of unique historical circumstances and events or shared experiences at similar ages, particularly during a time when individuals are in the process of forming opinions.¹ These shared experiences create similarities among people in terms of their attitudes and behaviors, especially work-related.¹ People born at the end of one generation or at the beginning of the next may have characteristics of both generations. There are currently five living generations in the workplace. The Veterans were born before 1946, the Baby Boomers born 1946-1964, Generation X born 1965 to 1980, Millennials (Generation Y) born 1981 to 1996, and Generation Z born 1997 to 2012.¹ Broadly in the current pharmacy education landscape, three generations are predominant: Baby Boomers, Generation X, and Millennials (Table 1).²⁻⁴

Generations in the workplace

Sometimes older generations view younger generations negatively, most recently Millennials.⁵ A shift in the education mindset from relying on generational stereotypes to focus on differences in skills such as communication and technology will prevent generalizations and misconceptions, ultimately, leading to enhanced learning. Preceptors can focus on the: learning strategies, micro-learning, and instructional alignment.⁶⁻⁸ Preceptors can also consider modifying their communication style when engaging with individuals from different generations.

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Table 1. Key Characteristics of Baby Boomers, Generation X, and Millennials^{2,4}

Baby Boomers	Generation X	Millennials (Generation Y)
<ul style="list-style-type: none"> • Huge demographic • First generation to grow up on television • Civil unrest/gender revolution 	<ul style="list-style-type: none"> • Sandwich generation (between Boomers and Millennials) • Development of the computer • Latch key kids 	<ul style="list-style-type: none"> • Largest generational cohort • Poor economy • Influenced by technology

Communication with Boomers, Gen Xers, and Millennials

Recognition of communication preferences amongst the generations will allow for meaningful interactions between the preceptor and the learner, especially during an introductory pharmacy practice experience (IPPE) and advanced pharmacy practice experience (APPE). See Table 2.^{9,10}

Engaging Millennial Pharmacy Students on IPPEs and APPEs

Multi-generational learning occurs daily in pharmacy practice. The following suggestions, the Six R's of Engagement, are offered to help pharmacy preceptors engage Millennial IPPE and APPE pharmacy students.^{11,12}

1. Research-based Methods. Millennials prefer being taught with evidence-based active learning, otherwise interest shifts quickly. Therefore, preceptors should lecture less and use multimedia more (e.g., video, audio, images) when conducting topic discussions. Preceptors can also use peer learning activities since Millennials are good team players.¹³ Activities such as Team-based Learning, clickers and/or audience response systems, patient simulation exercises, and games have gained in popularity.¹⁴⁻¹⁸

2. Relevance. Learners now can "google" anything (e.g., doses) and may not value learning information for information's sake. Preceptors should shift from disseminating information to helping learners identify how to apply and retain information and emphasize relevance and importance of information. Relevance is an important concept related to motivation theory (attention, relevance, confidence, satisfaction).¹⁹ It is important that preceptors articulate the relevance of learning activities.

3. Rationale. Baby Boomers were raised in an authoritarian manner and readily accepted hierarchy. In contrast, Millennials were raised in a non-authoritarian manner and were offered equal say in family decision making. As a result, Millennials may want preceptors to provide rationale for policies and assignments to increase compliance but preceptors should be cautioned that this may lead to academic entitlement.²⁰ However, there is evidence that providing rationale for post-graduate training may increase pursuit.²¹ Overall, preceptors should consider the pros and cons for providing a rationale for assignments so that learners do not view assignments as "busywork".

4. Relaxed. Millennials prefer a less formal, "laid-back" learning environment, and prefer informal interaction with peers and preceptors. One informal learning strategy preceptors can use is to create a Facebook group page with guest experts and peers to post on pharmacy related topics.²² However, preceptors are encouraged to make participation in the Facebook group voluntary. Another option preceptors can use to create a relaxed atmosphere is to have students call preceptors by first name. However, this may not be favored by all.

5. Rapport. Millennials are relational and are accustomed to being central to their parents' lives and having adults in their lives show interest in them. As such, this generation may want preceptors to show the same interest. Millennials may be more engaged when preceptors connect with them on a personal level. Student-faculty contact is an effective teaching principle.²³ As a result, Millennials may want to be connected on social media platforms in order to build rapport; however, there are legal and ethical issues regarding social media use in pharmacy education.²⁴ Preceptors may witness e-professionalism transgressions and questions can arise about how to uphold the school honor code. Preceptors should consider the pros and cons of "connecting" with learners on social media and perhaps explore other rapport building opportunities.

6. Responsive. Students need multiple opportunities to practice skills and receive feedback. Faculty, standardized patients, and peers are commonly used to practice techniques and provide feedback. Rubrics offer a consistent and structured way to provide feedback. For example, virtual patient activities with rubrics and feedback enhanced student performance when completed before mock clinic visits.²⁵ Therefore, preceptors should be intentional about delivering feedback and establish with the learner the preferred frequency of feedback.

Implementation of the Six R's into IPPEs and APPEs

The following scenarios describe common communication challenges among generations during IPPEs and APPEs and offer solutions to improve the learning experience and outcomes.

Scenario 1. The preceptor receives an introductory email from an IPPE learner addressing the preceptor by first name and primarily written in "text speak".

Table 2. Key Communication Styles of Baby Boomers, Generation X, and Millennials^{9,10}

Baby Boomers	Generation X	Millennials (Generation Y)
<ul style="list-style-type: none"> • Phone and talking • Be open and direct (without using controlling language) • Be aware of body language ("show me" generation) • Respect that they may be guarded when communicating (do not push it) 	<ul style="list-style-type: none"> • Email (limit in-person meetings and calls) • Be direct and use less formal communication modes • Share information and strive to keep them in the loop 	<ul style="list-style-type: none"> • Quick sound bites of regular information (text, instant message) • Foster collaboration (social network generation) • Use action words and challenge them • Be conscious of not talking down to them (or giving this perception) • Use humor and create a fun learning environment



Suggested engagement techniques: The relaxed nature of the email needs to be addressed with the learner. Consider inviting the learner to meet to build rapport and offer mentoring. This is an opportunity to teach the learner when a more relaxed versus more formal manner of communication is more acceptable; a first-time introduction to a preceptor favors formality. Use the time to coach the learner through an exercise of how to appropriately draft or reply to an email, providing feedback throughout the process (responsive). Finally, consider a patient simulation exercise whereby the learner must make the initial contact with an elderly patient to verify his/her upcoming appointment time. Reflect on the preferred method, via verbal telephone reminder or text message (research-based and relevance).

Scenario 2. On the first day of the Ambulatory Care APPE, the learner admits to not being interested in the experience as the learner already has a job arranged in the community setting. The learner states intent to do well, but only to pass because “P=PharmD”.

Suggested engagement techniques: Building a rapport with the learner is key in this scenario. Try to convey the relevance and importance of each learning opportunity. While the overall goals of this rotation may not be in line with the learner’s goals, the preceptor may emphasize the importance of being open-minded and finding opportunities to reinforce pharmacy practice, problem-solving, and interprofessional communication skills regardless of practice setting (rationale). The conversation should also help the learner identify opportunities for growth that can be applied to the community setting and help the preceptor tailor the rotation to the learner’s professional goals. Finally, the relaxed tone and perhaps too “honest” nature of the learner’s comments may be addressed. A tactful way to approach this is to state some expectations and the level of formality that is expected on the rotation, as well as how often feedback will be provided. Provide the learner with feedback (responsive) that the learner’s comments may be perceived as off-putting.

CONCLUSIONS

In summary, whether working with IPPE or APPE learners, two-way communication between the preceptor and the

learner (regardless of generations) is key to building the relationship. Consider these four tips when refining the experiential learning process.

Tip 1. Set the stage. Incorporate an “ice breaker” activity on the first day of the rotation whereby both the preceptor and learner share what generation they are classified as, which generation they most associate with, and which generation they find most challenging to communicate with.

Tip 2. Use technology to foster communication and reflection. Prior to the start of the rotation, email or text the e-link to a relevant professional development article (such as this one) or a YouTube video that reflects on generational differences and similarities.

Tip 3. Be proactive versus reactive. In order to prevent an awkward moment or challenging communication scenario, use the pre-reading or pre-viewing assignment as a brainstorming activity for solutions using the Six R’s as a guide. Both the preceptor and the learner can share their reflections and then come to a mutually agreeable approach to improve communication.

Tip 4. Determine a mutual method of communication. Incorporating the first three tips should invite a discussion on the preferred method of communication between the preceptor and the learner. This systematic approach may increase “buy in” and promote a partnership. Both parties should hold each other accountable to agreed-upon communication practices.

Generations communicate to maintain relationships. The preceptor and the learner should be aware of their generational preferences and biases in order to promote the best learning environment for all.

CONFLICT OF INTEREST

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