

Teaching and Mentorship: Invaluable Contributions to the Profession

James E. Tisdale

I am a transplanted Canadian who has resided in the United States for nearly 16 years. I came here to pursue my Doctor of Pharmacy degree and, for a variety of professional and personal reasons, elected to stay here to pursue my career. Nonetheless, I remain a Canadian citizen and in fact work within a 10-minute drive of the Canadian border. I have many great friends here in the States whom I value tremendously and with whom I share a healthy degree of between-nation respect (which, of course, didn't stop me from pumping my fists exuberantly in the air and performing a wild-eyed happy dance in front of my best American friends after the Canada–USA gold medal Olympic hockey game earlier this year).

I recently had the happy privilege of returning home not once, but twice within a fairly short period. I attended the CSHP Professional Practice Conference in Toronto in February and, a little over a month later, the Western Branches' Banff Seminar, which was preceded by a brief visit to the Capital Health Authority in Edmonton. During these trips, I spent time talking with friends, colleagues, mentors, and former coworkers and students. It was a great opportunity for me to catch up on the state of pharmacy practice, education, and research in Canada, all of which are clearly strong. It was also a great chance to get reacquainted with old friends. In particular, I found myself ruminating on the benefits and rewards of teaching and mentorship.

During my visits to Canada, I was able to talk to numerous former students, Canadians who came here to Wayne State University to pursue their Doctor of Pharmacy degrees and who subsequently returned home to practise. I vividly remember many of these individuals when they first started the PharmD program, very inexperienced and unsure of themselves. Many are now prominent pharmacists regionally and some are known across Canada. All are experiencing impressive levels of

success, in positions such as director of pharmacy, clinical coordinator, clinical specialist, and assistant professor. Many have become nationally known clinical experts in drug therapy, many are publishing in prominent journals, and many are making tremendous contributions to the profession. Now, I certainly can't pretend that these former students are successful because of me. Indeed, most would likely point out that they are successful in spite of, not because of, the instruction that I provided! (One former student helpfully boosted my ego by reminding me of the time that I lectured to his class for 2½ hours with my fly open. Another did the same by failing to recognize me, despite having graduated less than 4 years ago.) Overall, though, I couldn't help but feel an enormous sense of institutional pride at the successes of our former students and personal pride in having played a role in their training and mentoring. I was reminded that teaching and mentoring are among the most important and rewarding contributions that we can make to the profession.

Hospital pharmacists are increasingly busy, trying to do more and more with fewer and fewer resources. Nevertheless, I encourage hospital pharmacists — indeed, all pharmacists — to continue to participate in experiential training of pharmacy students in university-based training programs and during their completion of internship requirements for licensure. Serving as a preceptor is one of the most important contributions that you can make to the profession and to the care of



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patients. The students whom you help to train will soon be independently providing pharmaceutical care, and the quality of the care that they provide will reflect the quality of the experiential training that they have received. Although participating as a preceptor for pharmacy students can be time-consuming, new models of experiential training now under development may alleviate some of these time issues. One such program, developed at Henry Ford Hospital in Detroit, is modelled after medical residency programs, in which students provide direct patient care. In this model, institutions reap the benefits of expanded clinical pharmacy services through the use of students, and pharmacist-preceptors may experience reductions in clinical workload as a result of the presence and activities of students. Regardless of the training model used, experiential teaching can be among the most rewarding roles in which you can serve, particularly as you watch former students go on to achieve substantial levels of professional success.

In addition to teaching students, you can make an invaluable contribution to the profession by serving as a mentor to a colleague. I had the opportunity to talk with two of my early mentors during my travels, and I hope that I was able to impress upon them the importance of their role in guiding and shaping my career. Everyone needs a mentor, whether in the very early stages of one's career, in mid-career, or in the later stages. At any stage of your professional life, you can serve as a mentor to students, by providing them with academic or career counselling and guidance. If you are in

mid-career or you are a senior pharmacist, you can provide an invaluable professional service by mentoring more junior colleagues. Mentorship can take many forms, including simply being available to answer questions, guiding someone through professional situation(s) that they have not previously experienced, or providing career counselling.

Take the time and the opportunity to serve as a professional mentor for someone. If you don't have one, seek out a mentor for yourself. Like teaching and precepting, serving as a mentor may prove to be among the most rewarding aspects of your career, and you will be able to watch with pride as students and individuals for whom you served as a mentor progress through their own careers, knowing that you had some small role in their development and success.

Now, I have to go to meet with some students on the patient care unit. Better check my fly first. . . .

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