



**AACP Conference Workshop  
PEP SIG Program  
Co-sponsored by Community-Campus Partnerships  
Health (CCPH)  
Pharmacy and Service-Learning Workgroup  
Tuesday, July 22, 2-5pm**

**Presenters**

*Mike Brown, University of Minnesota  
Christine Catney, University of Iowa  
Gayle Cochran, University of Montana  
Carolyn Ford, Hampton University  
Susan Gust, community-partner  
Catherine Jarvis, University of Colorado  
Kevin Kearney, Massachusetts College of Pharmacy  
Janelle Krueger, Auburn University  
Patricia Lind, University of Minnesota  
Lisa Margulis, Cooperative Feeding Program  
Ruth Nemire, Nova Southeastern University  
Jeri Sias, University of Texas  
Wynefred Schumann, Wayne State University*

**ACCP Conference Workshop  
PEP SIG Program**

Co-sponsored by Community-Campus Partnerships Health (CCPH)  
Pharmacy and Service-Learning Workgroup  
Tuesday, July 22, 2-5pm

**Service-Learning Concepts & Tools for Pharmacy Education**

**Content Description:**

*Service-learning* is a structured learning experience that combines community service with preparation and reflection. Students engaged in service-learning provide community service in response to community-identified concerns and learn about the context in which service is provided, the connection between their service and their academic coursework, and their roles as citizens. Based on ACCP members' experiences and case examples, this seminar was designed for academic administrators, faculty, staff and community partners who have implemented service-learning pharmacy courses or programs who seek to deepen their knowledge of implementation, evaluation, and sustainability.

**Expected Outcomes:**

After attending this seminar, participants will be able to:

- Describe how service-learning can be a strategy to advance strategic goals of the school and the discipline of pharmacy.
- Identify & implement strategies to sustain and institutionalize service-learning in pharmacy education.
- Identify common challenges & solutions to implementing and sustaining service-learning programs in pharmacy education.
- Identify effective methods for assessing service-learning outcomes for faculty, student, community, and institutional stakeholders.
- Identify models of faculty and staff development for implementation at home institutions and community-based organizations.
- Identify and implement important service-learning components into new or existing courses or programs.

**Agenda – PEP SIG Program – Tuesday, July 22, 2-5pm**

2:00-2:10pm -- **Welcome & Overview**

*Ruth Nemire, Nova Southeastern University*

2:10-2:40pm -- **Service-Learning in Pharmacy Education – Setting the Context**

*Speaker: Patricia Lind, Univ of Minnesota*

2:40-3:40pm – **Case Examples from ACCP Members**

*Christine Catney, University of Iowa and Catherine Jarvis, University of Colorado*

3:40-3:50pm – **Break**

3:50-4:20pm -- **Facilitated Roundtable Discussions**

- **Cultural Competency**  
*Facilitators: Jeri Sias, University of Texas and Carolyn Ford, Hampton University*
- **Service-Learning from the Student Perspective (outcomes)**  
*Facilitators: Gayle Cochran, University of Montana; Patricia Lind, University of Minnesota; and local student(s)*
- **Service-Learning from the Community-Partner Perspective**  
*Facilitator: Susan Gust, community-partner*
- **Reflection --Incorporating reflection into service-learning courses**  
*Facilitator: Janelle Krueger, Auburn University*
- **Reflection – Using electronic document systems for formal reflection components**  
*Facilitator: Mike Brown, University of Minnesota*

- **Outcomes & Evaluation in service-learning**  
*Facilitator: Kevin Kearney, Massachusetts College of Pharmacy*
- **Developing service-learning partnerships**  
*Facilitators: Lisa Margulis, Cooperative Feeding Program and Ruth Nemire, Nova Southeastern University*
- **Promotion & Tenure for service-learning faculty**  
*Facilitator: Catherine Jarvis, University of Colorado*
- **Perspectives for and from Deans and Administrators**  
*Facilitator: Wynefred Schumann, Wayne State University*

4:20-4:50pm -- **Reflective Seminar**

: *Facilitators: Lisa Margulis, Cooperative Feeding Program; and Ruth Nemire, Nova Southeastern University*

*All participants: Reporting and discussing the roundtable sessions and the earlier presentation(s)*

4:50-5:00pm -- **Resources & Wrap up**

*Ruth Nemire, Nova Southeastern University*

\*\*Participants will receive handouts that include presenter biosketches, presentation slides, case examples, and service-learning resources

Contact person (logistics/workgroup liaison):

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CCPH Pharmacy/SL Workgroup members --involved in current calls, previous calls, or previous workshops unless requesting that their name be removed.

**Barbara Brandt**, Univ of Minnesota; **Christine Catney**, Univ of Iowa; **Gayle Cochran**, Univ of Montana; **Cindy Coffey**, Mercer Univ; **Carolyn Ford**, Hampton Univ; **Catherine Jarvis**, Univ of Colorado; **Kevin Kearney**, Massachusetts College of Pharm; **Janelle Krueger**, Auburn Univ; **Monina Lahoz**, Massachusetts College of Pharm; **Patricia Lind**, Univ of Minnesota; **Soni Peters**, Midwestern Univ (Arizona); **Ruth Nemire**, Nova Southeastern Univ; **Paul Freyder**, Salvation Army Pittsburgh; **Lisa Margulis**, Cooperative Feeding Program/Nova SE Univ, **Wynefred Schuman**, Wayne State Univ; **Jeri Sias**, Univ of Texas; **Rachel Vaughn/Sarena Seifer**, CCPH.

**Service-Learning Concepts and Tools for Pharmacy Education**  
**Tuesday, July 22<sup>nd</sup>**  
**2:00 pm-5:00 pm**

**Speaker Biosketches**

**1) Michael C. Brown, University of Minnesota College of Pharmacy**

Dr. Brown is an Assistant Professor in the Department of Pharmaceutical Care and Health Systems at the University of Minnesota College of Pharmacy. He is co-director of the Early Pharmacy Education with Community Teachers (EPhECT) service-learning experience, which was awarded AACP Innovations in Teaching Award in July 2002. Dr. Brown's primary teaching responsibilities include the second professional year of the Pharmaceutical Care Learning Center (including EPhECT), drug literature evaluation, and the recent addition of pharmaceutical calculations. His scholarly interests include: 1) developing, utilizing, and evaluating technology, including Internet-based technology, as a tool for enhancing learning, assessment, and feedback, 2) using technology to minimize administrative workload in education, 3) implementing and evaluating service-learning, and 4) enhancing student outcomes assessment. Dr. Brown's practice interests focus on management of chronic cardiovascular conditions and smoking cessation.

**2) Christine Catney, The University of Iowa**

Christine M. Catney is Director of The University of Iowa College of Pharmacy Teaching Center. Christine received her B.S. in pharmacy from the St. Louis College of Pharmacy and Pharm.D. and M.A. (instructional design) degrees from The University of Iowa. She is engaged in faculty development as well as curriculum development and assessment. She helped design the community service introductory practice experience at UI and has been involved in designing and implementing other experiential learning projects at the UI College of Pharmacy, including a collaboration between pharmacy students and substance abuse counseling students in community pharmacies. In 2002 she was a participant in the CCPH Introductory Service-Learning Institute.

**3) Gayle Cochran, University of Montana**

Gayle Hudgins Cochran, Pharm. D., is Professor of Pharmacy Practice and Director of Experiential Education at the University of Montana School of Pharmacy & Allied Health Sciences. She has been involved with service-learning for several years in a variety of courses including Public Health in Pharmacy, Orientation to Pharmacy, and Geriatric Practicum. As a service learning mentoring fellow for the Montana Campus Compact, she has spent the last year working with faculty throughout Montana who are implementing service-learning in their courses. During the last academic year, she worked with the UM Office for Civic Engagement to reactivate workshops for faculty interested in service-learning on that campus. She has attended both the Introductory and Advanced Service-Learning Workshops of the Community-Campus Partnership for Health.

**4) Carolyn Ford, Hampton University College of Pharmacy**

Carolyn Ford is an Associate Professor and Chairperson in the Department of Pharmacy Practice at the Hampton University School of Pharmacy. She is a graduate of Florida A&M University College of Pharmacy with a BS degree in 1978 and a Pharm.D. degree in 1980. She completed a postdoctoral fellowship at Ohio State University and Columbus Children's Hospital in the area of pediatric pharmacokinetics/pharmacotherapy. She worked at the Miami campus of Florida A&M University of seventeen years before accepting the challenge to develop a new School of Pharmacy at Hampton University.

Her pediatric clinical practice in Miami was based at the University of Miami/Jackson Memorial Hospital, one of the largest county hospitals in the nation. It was during this time that she developed a strong interest in caring for underserved patients. One of the most notable experiences was the involvement of her students with providing care to homeless patients living in shelters and outdoor environments such as “under the bridge” in downtown Miami.

Dr. Ford has continued her interest in this area at Hampton University. She has developed an elective course entitled Health Disparities and Service Learning. The majority of eligible students have elected to take this course. The student response was so positive that many of the students from subsequent classes have decided to take this course. Dr. Ford has also formed partnerships with several free clinics and community health centers around the Hampton Roads area.

**5) Susan Gust, Community Activist, Minneapolis, MN**

Susan Ann Gust: community activist, mother, grandmother and small business owner of 27 years of a construction management company. Susan enjoys an active civic and professional life that merge her passion to make the world a better place by assisting in bringing people together of different cultural and class backgrounds to work collaboratively towards that goal. Her work in construction and economic justice led to her founding the ReUse Center in Minneapolis. Currently through her business, she and her husband are facility managers of a 100 year old building that houses a family violence prevention program. Susan is also CO-coordinator of an initiative called GRASS Routes (Grassroots Activism, Sciences and Scholarship). This initiative on the U of M campus assists in the forming, mentoring and sustaining of community-university partnerships. Her civic work includes co-founding and serving on the Phillips Neighborhood Healthy Housing Collaborative and the board of Community University Health Care Center community clinic.

**6) Catherine L. Jarvis, University of Colorado**

Catherine L. Jarvis is the Assistant Dean for Student and Professional Affairs at the University of Colorado School of Pharmacy and a Clinical Pharmacist with the nutrition support service at the University of Colorado Hospital. Catherine received a BA in biochemistry from Northern Michigan University and a Pharm. D. from the University of Michigan. She completed a specialty residency in Nutrition Support Pharmacy Practice at the University of Colorado and is currently pursuing a Master's in Education with an emphasis on Information and Learning Technologies. Her areas of practice and research include nutrition support, service-learning, and curriculum development and assessment.

**7) Kevin Kearney, Massachusetts College of Pharmacy and Health Sciences**

Kevin Kearney is the Director of Service Learning and Associate Professor of Biochemistry at the Massachusetts College of Pharmacy and Health Sciences (MCPHS), School of Pharmacy-Worcester. He has held these positions since the Worcester campus of MCPHS opened in 2000. He teaches Biochemistry, Nutrition and Service Learning, and co-teaches a Health Literacy course. Through the Colleges of Worcester Consortium, he co-teaches a course in College Teaching for graduate students from Worcester Polytechnic Institute and Clark University. He recently received the MCPHS Trustees' Award for Teaching Excellence. He serves on the boards of Rebuilding Together Worcester (a housing rehabilitation organization), the Ecotarium (a science/ecology museum) and the Notre Dame Club of Worcester County, and on the Distribution Committee of the Greater Worcester Community Foundation. He received his Ph.D. in biochemistry from Yale University, and M.Th. and B.S. degrees from the University of Notre Dame.

**8) Janelle L. Krueger, Auburn University School of Pharmacy**

Janelle Krueger is an Assistant Clinical Professor and Coordinator of the Early Experiential Learning Program at Auburn University School of Pharmacy. A native of Wyoming, she obtained her pharmacy degree from the University of Wyoming. She then completed a two year pharmacy practice residency at the University of Kansas Medical Center in Kansas City, Kansas and a Master's degree in Hospital Pharmacy at the University of Kansas. She joined the faculty at Auburn in 1998 to help develop and coordinate an innovative experiential program in which all students are placed in the community longitudinally throughout the first three years of their pharmacy education. The program purposely does not place students in pharmacies or hospitals in order to emphasize the fact that pharmaceutical care can be provided in any environment. Janelle participates in a campus wide group to promote and encourage other faculty to include service-learning in their courses and is interested in issues related to service-learning, experiential education, student leadership and professionalism, rural health, and women's health. Prior to joining the faculty at Auburn, she served in a management position for four years at Kino Community Hospital, Department of Pharmacy, in Tucson, Arizona.

**9) Patricia Lind, University of Minnesota College of Pharmacy**

Patricia Lind is currently the Director of the Pharmaceutical Care Learning Center at the University of Minnesota College of Pharmacy. Ms. Lind holds both a Bachelor's in Pharmacy and a Master's in Social and Administrative Pharmacy from the University of Minnesota. She joined the faculty in 1998 to continue the development of the Pharmaceutical Care Learning Center that was opened in 1994. IN this position, Patricia is the course director for the first year pharmacy students and is co-director of EPheCT (Early Pharmacy Education with Community Teachers), a longitudinal service-learning experience for first and second year pharmacy students. Prior to her work at the College of Pharmacy, she worked as a pharmacist in the community, long-term care, and hospital pharmacy in rural Minnesota.

**10) Lisa Margulis, Cooperative Feeding Program**

Lisa A. Margulis is a graduate of Tulane University and received her Masters in Social Work from Boston University. Her extensive studies also include a year of international study at Israel's Hebrew University. Currently, she is involved as a Clinical Affiliate Instructor at Nova Southeastern University where she assists advanced degree students with their off campus studies. Drawn to the issue of domestic and international poverty, Lisa has traveled to such countries as Indonesia, Nepal, and India in search of answers and solutions. She has observed first hand how poverty is accepted or rejected by various cultures. She currently serves as the Director of Social Services for The Cooperative Feeding Program of Ft. Lauderdale, Florida and also as an officer on the Board of Love Thy Neighbor, a provider of emergency services for the homeless. Lisa spearheaded Broward County's homeless census and coordinated a community wide Hunger Banquet. She is the recipient of a number of awards and honors for her commitment to the issues of hunger and poverty. Lisa was honored with a Heart of the Community award from Volunteer Broward as well as Nova Southeastern University's Student Choice Award for the Class of 2003.

**11) Ruth E. Nemire, Nova Southeastern University College of Pharmacy**

Dr. Nemire graduated from Ohio Northern University in Ada, Ohio, with a BS in Pharmacy and Theatre. She then went on to work as a clinical pharmacist in a long term facility for people with developmental disabilities and mental retardation and in the ambulatory setting for the Veterans Administration clinics in Toledo, Ohio for several years prior to returning to school for a graduate degree. In 1990, she left the fulltime work force to get a Doctor of Pharmacy degree from the University of Toledo. She then completed a two-year fellowship at the University of Miami in the Department of Neurology, specializing in Epilepsy. From there travels and work took her to Texas Tech University in Lubbock, as an Assistant Professor of Neurology and Director of the Center for Neurology Studies. In the times between schooling, fellowships, and faculty positions, Ruth has done such things as medical writing, consulting, and

managed care. She is now, finally settled in Ft. Lauderdale, Florida to teach at Nova Southeastern University and continue a practice at the South Florida Epilepsy Society. Her current position is as Director of Clinical Education for Nova Southeastern University's College of Pharmacy.

In Dr. Nemire's spare time, she directs or acts in local theatre companies; she is the advisor for the NSU Theatre club. Her involvement in the community goes beyond her commitment to service-learning on the NSU campus. She is involved in community projects such as the HS band booster program. She is the Vice President of The Global Awareness Institute, a non-profit organization to promote sustainable development in the Peruvian Rain Forest.

**12) Jeri Sias, University of Texas**

Jeri Sias is a Clinical Assistant Professor with the UTEP/UT-Austin Cooperative Pharmacy Program in El Paso. She completed her PharmD at the University of Kansas and an Ambulatory Care Pharmacy Residency at the Ohio State University. Her current teaching interests include developing Spanish language materials for pharmacists and coordinating service-learning. Current research involves evaluating smoking cessation rates on the US-Mexico border.

**13) Wynefred Schumann, Wayne State University**

As a former hospital pharmacy director, Wynefred directed beta test site for ATC 212 and the successful development of technician certification, program and textbook leading to the national examination. She has worked in college administration for more than a decade in an urban university located at an academic medical center with nine major health programs granting certificates, BS, MS, Pharm, and PhD. She currently teaches a Service Learning elective, Advanced Health Care Topics (a business plan application for clinical services) and is partnering to develop a new elective focusing on the uninsured. Wynefred is currently chair of AACP Pharmacy College Admission Test (PCAT) Advisory Board, a member of Pharmacy Technician Certification Board (PTCB) and a member of the AACP planning committee for 2004 meeting American Association of Medical Colleges Professional Development Conference for Financial Aid Professionals.

**Service-Learning Concepts and Tools for Pharmacy Education**

**Case Examples from AACP Members**

**PEP SIG Workshop  
AACP Annual Meeting  
July 22, 2003**

## **Service-Learning Concepts and Tools for Pharmacy Education**

### **Case Examples from AACP Members**

**Facilitators: Catherine Jarvis, Christine Catney, and  
CCPH Pharmacy Service-Learning Workgroup Members**

**PEP SIG Workshop  
AACP Annual Meeting  
July 22, 2003**

This workshop session is an opportunity for participants to discuss examples of community service or service-learning projects or courses that have been implemented in schools and colleges of pharmacy.

These examples were submitted to workshop planners in response to a call for case scenarios. They are intended only to provide a context for discussing the following:

- Developing and implementing a new service-learning program.
- Transforming a community service program into service-learning.
- Developing strategies to assess student learning.
- Developing strategies to assess how service-learning helps community partner organizations attain their service objectives.

Workshop facilitators are grateful to the following individuals and programs for contributing case scenarios for this discussion:

Nancy Mason, PharmD  
College of Pharmacy  
University of Michigan

Connie Kraus, PharmD  
School of Pharmacy  
University of Wisconsin

Emily Sundet  
Jay Currie, PharmD  
Christine Catney, PharmD  
College of Pharmacy  
University of Iowa

Jennifer A. James, PharmD  
School of Pharmacy  
University of Connecticut

## Principles of Good Practice for Combining Service and Learning<sup>1</sup>

“The Principles of Good Practice for Combining Service and Learning is the product of a two-year process by experienced practitioners to articulate what they learned and discovered to be the best practices for combining community service with student learning and development. Finalized in the spring of 1989 at the historic Wingspread Conference, hosted by the Johnson Foundation, the Principles represents the collaborative effort of more than seventy-five national and regional organizations committed to community service and experiential education. The Principles have since been regarded as the foundation for all effective service-learning programs by schools and campuses across the nation.

### An effective program

1. Engages people in responsible and challenging actions for the common good.
2. Provides structured opportunities for people to reflect critically on their service.
3. Articulates clear service and learning goals for everyone involved.
4. Allows for those with needs to define those needs.
5. Clarifies the responsibilities of each person and organization involved.
6. Matches service providers and service needs through a process that recognizes changing circumstances.
7. Expects genuine, active, and sustained organizational commitment.
8. Includes training, supervision, monitoring, support, recognition, and evaluation to meet service and learning goals.
9. Insures that the time commitment for service and learning is flexible, appropriate, and in the best interests of all involved.
10. Is committed to program participation by and with diverse populations.”

Honnet, E.P., and S.J. Poulen. (1989). Principles of Good Practice for Combining Service and Learning, a *Wingspread Special Report*. Racine, WI: The Johnson Foundation, Inc.

During this session, you will be asked to participate in discussion of one group of cases.

- Cases #1 and 2 are intended for participants who are considering whether to implement service-learning, who are in the early stages of developing a service-learning program, or who want to improve or transform an existing community service program.
- Cases #3 and 4 are intended for participants who are currently involved with a service-learning program and want to develop assessment strategies.

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<sup>1</sup> Text on this page quoted from <http://www.ohiou.edu/commserv/servlern/practices.htm> Accessed 6/28/03. A detailed explanation of the principles is available on the Johnson Foundation web site: Principles of Good Practice for Combining Service and Learning. <http://www.johnsonfdn.org/principles.html> Accessed 6/28/03.

Case #1:  
Design and development of a service-learning course

Case #1: A program contemplating a service-learning program

Scenario	Program design elements
<p>“We are interested in using this concept [service-learning] in the first year of our pharmacy program. It would need to serve as the "experiential" part of our curriculum during that year, as well as convey the benefits inherent in volunteerism or service provision. We have struggled with whether the students need to be in a health care environment to meet this goal, or whether working in a soup kitchen, for example, would give enough benefits with regard to students experiencing other cultural or socioeconomic situations as well as the need for empathy and tact in communication skills.”</p>	<p><u>Place in curriculum:</u></p> <ul style="list-style-type: none"> <li>• “We are interested in using this concept in the first year of our pharmacy program. It would need to serve as the ‘experiential’ part of our curriculum during that year...”</li> </ul> <p><u>Learner characteristics:</u></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> year PharmD program students</li> </ul> <p><u>General instructional goals and objectives or intended learning outcomes:</u></p> <ul style="list-style-type: none"> <li>• To “convey the benefits inherent in volunteerism or service provision”</li> <li>• To enable students to experience “other cultural or socioeconomic situations”</li> <li>• To enable students to appreciate “the need for empathy and tact in communication skills”</li> </ul> <p><u>Service environment and context:</u></p> <ul style="list-style-type: none"> <li>• Undecided. “We have struggled with whether the students need to be in a health care environment to meet [goals], or whether working in a soup kitchen, for example, would give enough benefits.”</li> <li>• “Should the service-learning experience be required of all students?”</li> </ul> <p><u>Learning outcomes assessment plan:</u></p> <p><u>Pharmacy SL contribution to community partner’s service delivery:</u></p>

Refer to the Principles of Good Practice for Combining Service and Learning.

**Keeping these principles in mind, what are your group’s suggestions for designing this school’s service-learning program?**

Case #1  
Notes

How can the Principles of Good Practice for Combining Service and Learning guide the design of this school's service-learning program?

Case #2:  
Design and development of a service-learning course

Case #2: A program contemplating a transformation of an existing program

Scenario	Program design elements
<p>The first of three introductory practice experiences (IPE) at our college is a volunteer experience in the community. IPE I is intended to expose students to the array of patient and public health needs in the community, observe health professionals applying knowledge in a patient care context, apply clinically oriented knowledge to real world settings, develop a sensitivity to the need for caring and lifelong learning, grow professionally as a pharmacist in training and prepare for Advanced Practice Experiences.</p> <p>The experience must involve interaction with people and involve some aspect of human health, although it need not necessarily occur in a health care setting. This experience is a minimum of twelve hours in the community service activity that must occur over a minimum of six volunteer sessions. In addition, students participate in four discussion sessions. Students may complete IPE I during either the Fall or Spring semester of the P1 year. Students receive a pass/fail grade based on completion of all requirements, including submission of 75-150 word reflective diaries and participation in discussion sessions.</p>	<p><u>Place in curriculum:</u></p> <ul style="list-style-type: none"> <li>• “The first of three introductory practice experiences (IPE)”</li> </ul> <p><u>Learner characteristics:</u></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> year PharmD program students</li> <li>• Students complete during either the fall or spring semester</li> </ul> <p><u>General instructional goals and objectives or intended learning outcomes:</u></p> <p>“IPE I is intended to...”</p> <ul style="list-style-type: none"> <li>• “Expose students to the array of patient and public health needs in the community”</li> <li>• [Enable students to] “observe health professionals applying knowledge in a patient care context”</li> <li>• [Enable students to] “apply clinically oriented knowledge to real world settings”</li> <li>• [Enable students to] “develop a sensitivity to the need for caring and lifelong learning”</li> <li>• [Enable students to] “grow professionally as a pharmacist in training”</li> <li>• [Enable students to] “prepare for Advanced Practice Experiences”</li> </ul> <p><u>Service environment and context:</u></p> <ul style="list-style-type: none"> <li>• A volunteer experience in a community service activity. The student must find an agency or activity that “must involve interaction with people and involve some aspect of human health, although it need not occur in a health care setting.”</li> <li>• This experience is a minimum of twelve hours that must occur over a minimum of six volunteer sessions.</li> </ul> <p><u>Learning outcomes assessment plan:</u></p> <ul style="list-style-type: none"> <li>• Students receive a pass/fail grade based on completion of all requirements, including submission of 75-150 word reflective diaries and participation in four discussion sessions.</li> </ul> <p><u>Pharmacy SL contribution to community partner’s service delivery:</u></p> <ul style="list-style-type: none"> <li>• Unknown</li> </ul>

Refer to the Principles of Good Practice for Combining Service and Learning.

**Keeping these principles in mind, what are your group’s suggestions for transforming this program from volunteering to service-learning?**

Case #2  
Notes

How can the Principles of Good Practice for Combining Service and Learning guide the transformation of this program from volunteering to service-learning?

Case #3  
Designing assessment strategies

Case #3: A program that wants to know whether students are learning and meeting intended educational outcomes

Scenario	Program design elements
<p>“We have had a required Service Learning experience for our first year Doctor of Pharmacy students for the past 6 years. Our students work with a number of different community partners and spend 30+ hours over the fall and spring semesters with their clients/organizations. We currently ask our students to keep a journal of their experiences and write a paper describing these experiences and what they are learning that can be applied in their future careers. We also have two one-hour discussion sessions where we meet in small groups. The first session is devoted to students sharing a little about their site, the client/s with whom they interact, etc. In the second session we break the discussion session into even smaller groups of students who are working with similar types of clients(children, elders, etc) and have them construct a "letter to home" describing what they have learned from the experience. In turn, each smaller group presents the letter to the rest of the class looking for themes.”</p>	<p><u>Place in curriculum:</u></p> <ul style="list-style-type: none"> <li>• Experiential practice during first year</li> <li>• Program has been running 6 years</li> </ul> <p><u>Learner characteristics:</u></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> year PharmD program students</li> </ul> <p><u>General instructional goals and objectives or intended learning outcomes:</u></p> <ul style="list-style-type: none"> <li>• To increase comfort and skill in communicating with patients/clients</li> <li>• To gain an understanding of the patient’s client’s perspective of health, social, economic, and psychological needs</li> <li>• To reflect upon the service-learning experience and how it relates to future pharmacy practice</li> <li>• To learn about the availability of community resources</li> </ul> <p><u>Service environment and context:</u></p> <ul style="list-style-type: none"> <li>• Twenty-six community partners</li> <li>• Students choose general type of site and are assigned by school.</li> <li>• Each student performs 30 hours of service.</li> </ul> <p><u>Learning outcomes assessment plan:</u></p> <ul style="list-style-type: none"> <li>• Journal</li> <li>• Paper</li> <li>• Two, one-hour discussion sessions               <ol style="list-style-type: none"> <li>1. First session is about sharing site.</li> <li>2. Second session is constructing a “letter to home” describing what they have learned from the experience.</li> </ol> </li> </ul> <p><u>Pharmacy SL contribution to community partner’s service delivery:</u></p> <ul style="list-style-type: none"> <li>• Unknown</li> </ul>

Refer to the Principles of Good Practice for Combining Service and Learning.

**How can this program use these principles to guide the design of service-learning assessment strategies?**

Case #3  
Notes

How can this program use the Principles of Good Practice for Combining Service and Learning to guide the design of service-learning assessment strategies?

Case #4  
Designing assessment strategies

Case #4: A program that wants to know whether students are learning and meeting intended educational outcomes

Scenario	Program design elements
<p>“The first professional year students are required to participate in 12 hours of longitudinal volunteer service as part of their introductory practice experience course. The two intended service learning objectives are 1) The student will be introduced to the concepts of caring and social support, and 2) The student will identify the role of volunteer organizations in meeting human service needs of their community. Students are assigned to small teams who they share at least five reflective journal entries with via WebCT, submit a report which includes a reflective two- page essay and attend one class discussion of the challenges and successes encountered during the semester. These activities have been offered for the past two years and are generally well received, however a few students each semester have reported the activity felt like baby-sitting or manual labor without real purpose. Contract grading is employed to stimulate participation in all activities and ensure minimal competency is met. We would like to know how to design activities to ensure student learning will occur and how to improve our assessment methodologies.”</p>	<p><u>Place in curriculum:</u></p> <ul style="list-style-type: none"> <li>• Experiential practice during first year</li> <li>• Program has been running 2 years</li> </ul> <p><u>Learner characteristics:</u></p> <ul style="list-style-type: none"> <li>• 1<sup>st</sup> year PharmD program students</li> </ul> <p><u>General instructional goals and objectives or intended learning outcomes:</u></p> <ul style="list-style-type: none"> <li>• The student will be introduced to the concepts of caring and social support</li> <li>• The student will identify the role of volunteer organizations in meeting human service needs of their community</li> </ul> <p><u>Service environment and context:</u></p> <ul style="list-style-type: none"> <li>• Students choose general type of site and are assigned by school.</li> <li>• Each student performs 12 hours of service.</li> </ul> <p><u>Learning outcomes assessment plan:</u></p> <ul style="list-style-type: none"> <li>• 5 reflective journal entries shared with small team of pharmacy students</li> <li>• Reflective 2-page essay</li> <li>• One class discussion session</li> </ul> <p><u>Pharmacy SL contribution to community partner’s service delivery:</u></p> <ul style="list-style-type: none"> <li>• Unknown</li> </ul>

Refer to the Principles of Good Practice for Combining Service and Learning.

**How can this program use these principles to guide the design of service-learning assessment strategies?**

Case #4  
Notes

How can this program use the Principles of Good Practice for Combining Service and Learning to guide the design of service-learning assessment strategies?

Case Discussion  
Wrap-up Notes

**Service-Learning Concepts and Tools for Pharmacy Education**

**Facilitated Roundtable Discussion Handouts**

**PEP SIG Workshop  
AACP Annual Meeting  
July 22, 2003**

**Service-Learning in Pharmacy Education**  
AACP Conference Workshop--PEP-SIG Program  
Co-sponsored by Community-Campus Partnerships for Health (CCPH)  
AACP/CCPH Pharmacy and Service-Learning Workgroup  
July 22, 2-5pm

**Roundtable Discussion: Incorporating Reflection into Service-Learning Courses**

Facilitator: Janelle L. Krueger, Auburn University Harrison School of Pharmacy

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To ensure that students learn from their experiences and make connection to didactic material, reflection is a vital component for any experiential activity, particularly service-learning.

Reflection can be facilitated through several mechanisms: verbal discussions, journals, summative papers, letters to self or home to parents, portfolios, performances, etc.

*Experiences at Auburn University Harrison School of Pharmacy:*

- Since 1997, Auburn students have participated in longitudinal introductory practice experiences (IPEs) during the first three years of the curriculum. These IPEs take place in a community-based setting and are based on a service-learning framework. Students meet weekly with a community resident or at a community-based agency to provide basic pharmaceutical care and to serve as an additional health resource.
- Opportunities for reflection:
  - a. Written reflections following patient encounters are one component of required student documentation (in addition to periodic progress notes). Students submit reflections and other documentation to two faculty members who serve as mentors to a team of approximately 14 students. Mentors review student documentation and provide written feedback or verbal feedback during weekly team meetings.
  - b. Team meeting verbal discussions
  - c. Debriefing Paper. At the conclusion of each semester, students write a paper that challenges them to think about their experiences in a more global nature. Specifically, they must reflect back on the semester as a whole, instead of week by week. Topics for P1, P2 and P3 students differ and are designed to allow students to relate their experiences to other coursework or pharmaceutical care principles.
- During the initial years of the program, students' weekly reflections usually lacked appropriate depth and failed to include any impact the visit had upon them personally or professionally (i.e. primarily descriptive). Based upon these observations, we identified a need to: 1) improve students' abilities to critically reflect upon and learn from their experiences and 2) provide further guidance for faculty mentors when reviewing and providing feedback on student reflections.
- A two-part plan was implemented to improve students' reflective abilities:
  1. Based upon a review of the service-learning literature, a new model for written reflections was introduced to all first, second and third-year students--The What?, So What?, Now What? Model (1). (See Appendix A)
  2. Reflection skills were reinforced through a collaborative project in the Pharmacy Communication course required of all first year students. The IPE course continued to require weekly submission of reflections to each student's faculty mentor following every patient encounter. (See Appendix B)
- Within the Communication course, reflections from all P1 students were reviewed. Faculty members were copied on feedback provided to their service-learning students to reinforce reflection expectations and to promote consistency.

- Outcomes:
  1. Reflection is often a skill minimized or overlooked by students. By reinforcing reflection in two concurrent courses the importance of this skill was highlighted and allowed students additional opportunities for improvement.
  2. With the added emphasis of reflection in the Communication course and the new method for guiding student reflections, the majority of faculty mentors noticed that:
    - P1 reflections were generally more detailed, thorough and emotionally expressive when compared to those submitted by P2 and P3 students (who did not receive this emphasis in previous years).
    - P1 reflections submitted post-intervention were of higher quality than reflections submitted by P1 students in previous years.
    - The quality of P1 reflections was maintained the following semester even though the intervention in the Communication course was complete.

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## **Appendix A. Guidelines for Documentation & Reflections**

*Note: The following is an excerpt from the IPPE Manual which guides students in writing reflections.*

### **Reflective Entries**

Reflection is an essential part of service-learning and any experiential training experience. One will never grow as a person or as a professional without reflecting upon your experiences. The highly individualized learning that will take place while you are in the community setting requires time to think about the experiences you are having, how they relate to what you are learning in school, and how you will apply what you have learned to future practice experiences. One useful way to keep track of your thoughts, experiences and what you are learning is to keep a reflective "journal" of your activities. *All students involved in the PPE program will record reflective comments after each weekly visit to their site/patient.*

### **Guidelines for Writing Reflective Entries**

#### **The What? So What? Now What? Model (1)**

A true reflection contains three components: 1) a descriptive component in which the events are described, 2) an examination component in which the event(s) are explored and feelings/reactions are discussed, and 3) a contemplative, planning component where plans are made for future encounters. The questions listed under each of the three categories below may help get you started on making reflective entries as you think about your experiences. Do not try to answer every question and avoid organizing your responses by answering the questions in the order they appear on the list. Choose the questions that have the most relevance to your site experience, and more importantly, come up with questions of your own.

#### **What? (Describe)**

What happened at the site/during your visit? Describe your experience. What did you do there? What people did you interact with? What did the patients/clients and staff do? What were their roles? What happened? What did the site look like? Sound like? Smell like? Size? Condition? What did the clients look like? What did the staff look like? What was said? What were the activities? Who participated? Who did not? What were the interactions between the staff and clients? What problems arose? What successes did you have? How do the clients respond to the staff? When did you arrive and leave? What compliments did you give? What compliments did you receive?

#### **So What? (Examine)**

What was the significance of the visit (either this single visit or all of your visits)? What are your positive and negative feelings about the site, the people, and the experience? How did you feel about your experiences? What was the best thing that happened? The worst? Were you offended by anything? Were you puzzled by anything that happened? What lifted your spirits? In what did you take the most pride? What have you learned about the site and/or the people? What are the similarities and differences between you and your patient(s)? How did you respond internally to the setting? How did you respond to the clients' appearance? To their behavior? What did you think of the staff? What past memories were evoked by your site experiences? Were your preconceptions about the site confirmed?

What did you not expect? Was there one person who stands out in your memory? Did you feel useful or in the way?

Were there any moments of failure, success, indecision, doubt, humor, frustration, happiness, or sadness? Do you feel your action had/has any impact? What more needs to be done? What did you learn that enhances your classroom instruction? What skills & knowledge learned in the classroom did you use/apply at your site or when interacting with your patient? Were there any skills or knowledge you lacked? How can you get the needed skills? Has your experience complimented or contrasted with what you are learning in class? How?

What are the most significant events that took place? Why did events at the site happen the way they did? Could they have been prevented or changed? What could have been done differently or better? What could have been said or done to improve the situation? Were your feelings at the site appropriate? What values were important in what took place? Yours? Others? What are the reasons people come to the site? Are their expectations being met? What motivates the staff to work at the site? How do you explain suffering in terms of your philosophical or religious beliefs? Do you think the clients are mostly responsible for their problems? Do laws need to be changed? Did you change or grow as a result of your experience? What skills have you improved? Did you communicate effectively with clients/patients and staff? What changes would you make if you were in charge?

What did you learn about yourself? Do you have more/less understanding or empathy than you did before? How would you feel if you were the client? The staff member? In what ways, if any, has your sense of self, your values, your sense of “community”, and your self-confidence/self-esteem been impacted or altered through this experience? Has your experience challenged any stereotypes or prejudices you have/had? Any realizations, insights, or especially strong lessons learned or half-glimpsed? Have you given enough, opened up enough, cared enough? How have you challenged yourself, your ideals, your philosophies?

#### **Now What?** (Contemplate & Plan)

Based on your experiences to date, what is your plan for the next visit? What will you do to avoid problems encountered previously? What insights did you gain that might assist you in your career? Is there something new and creative you will try to improve your performance? Is there anything you need to discuss with the site preceptor? Do you need to do any reading or research? How can you make your interactions with the staff more productive? What will you do about biases and prejudices that limit your effectiveness? What skills will you practice? What will you do to improve communication skills? What is the connection of this experience to your future? What impact does this experience have on your everyday life? Will your experiences change the way you act or think in the future? What did the experience add to your knowledge about community involvement, citizenship, and civic responsibility? What is the relationship of this experience to the “big picture” (e.g. societal changes)? How is the site or patient you work with impacted by what is going on in the larger political/social sphere?

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### **Appendix B. PYPC 5040 Pharmacy Care Systems – Reflections Assignment Directions**

1. The purpose of this assignment is to teach you how to write effective PPE reflections. The assignment is worth 10% of your grade in PYPC 5040. Both of the reflections that you turn in for this class will also count as part of the reflections you are required to turn in for PPE (introductory Pharmacy Practice Experiences).
2. You are to follow the instructions given to you in class (and follow the handout) to e-mail your reflections each week you make them. You will e-mail a total of 2 reflections. You will receive feedback on reflections 1 and 2 from Dr. Berger, Mr. Felkey, or Ms. Krueger. It will be up to you to incorporate the suggestions/feedback into future reflections, or contact Dr. Berger, Mr. Felkey, or Ms. Krueger to find out more about what you need to do to improve (if necessary). *Note: Points will be deducted for grammar and spelling errors.*

3. You will e-mail both of the required reflections to EITHER Dr. Berger, Mr. Felkey, or Ms. Krueger and COPY these reflections to your PPE mentors (use the cc on your e-mail). You AND your mentors will receive the feedback we provide on the two reflections. This feedback will let them know what we expect of you. Your mentors will also receive a copy of the handout you receive in class so they know what to expect

**Grading Criteria: (Note: More explicit criteria was given, but condensed here for space)**

**What?/DESCRIBE – 15 points**

**So What?/EXAMINE – 55 points**

**Now What?/CONTEMPLATE & PLAN – 30 points**

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Reference:

- (1) Olson, R., Bush, M., "Reflection and service-learning," in *A Guide for Developing Community-Responsive Models in Health Professions Education*, (edits Seifer, S.D, Conners, K.M.), Community-Campus Partnerships for Health., San Francisco CA (1997) p.31.

Additional resource:

Eyler, J., Giles, D., Schmiede A. *A Practitioner's Guide to Reflection in Service-Learning*, Vanderbilt University, Nashville TN (1996).

## Service-Learning at the Massachusetts College of Pharmacy and Health Sciences-Worcester

The Massachusetts College of Pharmacy and Health Sciences, located in downtown Worcester, Massachusetts, benefits from and contributes to the community where we are located. We contribute to the community through a variety of service activities, and through these service activities our students learn from and about the community.

MCPHS-Worcester offers the professional part of the Pharm. D. curriculum – the equivalent of the third through the sixth years of the degree program, though in an accelerated three-year curriculum. Many of our Service-Learning (SL) activities are not specifically health care-related; most of the professional health-care training takes place in other parts of our curriculum. However, we believe that as a result of their participation in the SL activities, our students will be better trained to be community-based pharmacists.

All students enrolled in the Pharm. D. program at MCPHS-Worcester are required to enroll in an introductory Service-Learning course in the fall of their first year in the program, and as part of this course they engage in community service (at least two hours per week), and are encouraged to continue this community involvement beyond that. The students work at schools, with various community-based programs for youth, with senior citizens in a variety of settings, at soup kitchens and homeless shelters and at free medical clinics. One purpose of this program is to introduce the students to the local community by involving them in service work with a variety of institutions. Additionally, through seminars at the college, which include speakers from various local organizations, students reflect on and learn from this work. Thus, the students contribute to, and learn from and about, the local community. (The syllabus for this course can be seen at the CCPH website.)

Beyond the introductory Service Learning course, students also engage in various other SL work in the local community. For example, in the winter of 2003, several students worked with students at a local high school, with pharmacies and with AIDS Project Worcester on health literacy projects (studying and improving the readability of health care information, and increasing the literacy of health care consumers). In the spring, as part of a Nutrition course, some students carried out optional nutrition education projects at schools and a day-care center.

We are currently studying our Service-Learning program, to assess its educational outcomes. This work is currently funded by an internal faculty development mini-grant, and we have applied for additional funds to continue our ongoing assessment efforts.

During the 2002-2003 academic year, MCPHS-Worcester is pleased to have an AmeriCorps VISTA (Volunteer in Service to America) working with us to improve and expand our community engagement activities. This program was funded through a grant from the Massachusetts Campus Compact.

For further information, contact Kevin R. Kearney, Assoc. Prof. of Biochemistry and Director of Service Learning (508-890-8855 x1905; kkearney@mcp.edu).

Service Learning  
(WPS 350)  
(Tu 8:00-10:00a.m., Tu 10:00a.m.-Noon, Th 9:00-11:00a.m.)

Fall 2002

Prof. Kevin R. Kearney  
Phone: 890-8855 x1905  
E-mail: kkearney@mcp.edu

Office: Room 519  
Office Hours: MW 3:00-4:30 p.m.

Course Assistant : Kristin Howard (Room 514, x1913, kristin.howard@mcp.edu)

The late Professor Robert Chalmers of the Purdue University School of Pharmacy wrote:

“Traditionally, a pharmacist’s primary role has been dispensing medications and providing counseling. We have not been engaged in a caring relationship with patients, nor have we felt the same responsibility for outcomes as other health professionals. The field of pharmacy now plans to make a more meaningful contribution in our changing health profession; our pharmacists must be trained to get more involved with patients. Service-Learning gives students greater insights into patients and patient care.”

Service-Learning is what its name indicates: a program in which the participants perform service work and actively learn from it. If we do not do concrete work that meets others’ needs, it is not really service. If we do not learn from it, at worst it may be a distraction or at best it may help someone else, but it is not educational. In this program our goal is to do both: to provide service and to learn from it.

A growing number of educational institutions have service-learning programs. It can be argued that such programs benefit any student, as well as the people (s)he serves. This course at MCPHS-Worcester is based on a conviction that service-learning is equally important, if not more important, for anyone who aspires to become a member of a health-care profession, such as pharmacy.

With this in mind, the objectives for each student in this course are:

- Provide a concrete service to one or more individuals and to the institution, organization or agency where the service is rendered. (Set and achieve goals.)
  
- Develop interpersonal skills (e.g., listening & hearing, communicating) through the relationships developed in your service work.
  
- Develop an understanding of what it means, in this service work, to care for and be responsible for others.
  
- Develop a better understanding of the individuals and population served, especially with regard to those factors that affect their health and their health-care needs.
  
- Develop social analysis skills related to your placement site. (Do you observe things [behaviors, systems, etc.] that need to be changed? How would one go about changing them?)

### ***Fieldwork Placements***

Based on preferences indicated prior to enrollment or during Orientation, Service-Learning placement assignments are announced by the first day of classes.

All students should contact their placements as soon as possible and arrange to visit the sites during the first week of classes. At this visit, students and their site contacts should agree on a schedule for their service-learning work. Each student should spend at least two hours each week at their placement site while classes are in session at MCPHS. (Students should discuss our quarter schedule with their site contact, noting that we have a Thanksgiving recess from Nov. 17 through 25 and that the last day of classes is Dec. 7.)

At your first visit, each student should:

- (1) learn as much as possible about the placement and their needs, and
- (2) discuss and reach agreement on concretely what she/he will do at the site (e.g., tutor 4 students, or visit three patients, or do intake interviews for all clinic patients arriving when you are on duty) and when she/he will do it (e.g., every Tuesday from 10 a.m. to noon).

Following the first visit, and no later than Friday, October 4, students must complete, sign, have a contact person at the placement site sign, and return to Dr. Kearney, a Service Learning Agreement.

Please note that our requirement is that each student do two hours of service work each week during the fall quarter, but there is no law against doing more than two hours per week or extending your work beyond the end of the quarter. Note that once you commit to your placement site, people will depend on you. It is then essential that you be there every week, unless serious circumstances (such a serious illness) prevent you. If for such reasons you are unable to visit your placement in a given week, you must notify your contact-person in advance; this is part of being a responsible professional. If you enjoy the service work you do, you may very well want to continue it, for example, through the rest of the academic year; but this is optional.

### ***Classroom component at MCPHS***

All SOP-W students will also participate in two hours per week of classroom work at the College. The registrar will assign each student to one of the three classroom sections of the course; assignments will be by Learning Groups.

Tentative class schedule:

<u>Week of:</u>	<u>Topic</u>
<b>Sep. 23</b>	<b>Class 1: Survey; Introduction; discuss case studies; Mass. MedLine speaker</b>
<b>30</b>	<b>Class 2: Discuss Reading #1; speaker</b>
<b>Oct. 7</b>	<b>Class 3: Discuss Reading #2; speaker</b>
<b>14</b>	<b>Class 4: Discuss Reading #3; speaker; assign presentation groups; Journals</b>
<b>21</b>	<b>Class 5: Discuss Reading #4; speaker</b>
<b>28</b>	<b>Class 6: Discuss Reading #5; speaker, final guidelines for presentations</b>
<b>Nov. 4</b>	<b>Class 7: Student presentations and discussion</b>
<b>11</b>	<b>Class 8: Student presentations and discussion</b>
<b>18</b>	<b>Class 9: Student presentations and discussion</b>
<b>25</b>	<b>[Thanksgiving Break]</b>
<b>Dec. 2</b>	<b>Class 10: Student presentations and discussion; wrap-up</b>
<b>9</b>	<b>[Final Exam Week]</b>

Requirements:

- Regular attendance and performance of service work
- Regular class attendance and participation in discussions
- Assignments as noted below

Assignments:

- ◆ Readings will be assigned, and there will be a brief written assignment about each.
- ◆ Journal:
  - All students must purchase and use a MCPHS-SOP-W Service Learning Journal (from Tatnuck Bookseller).
  - The first entry in the journal should list the name of the placement site, the name of and contact information for the primary contact-person at the site and the date of the first visit to the site (which should be during the week of Sept. 23-27).
  - Every time a student visits her/his placement site, she/he should write an entry in the journal describing:
    - what work was done (as concretely as possible),
    - what was learned,
    - any significant successes or problems,
    - reflections on issues raised by the visit, and
    - any other noteworthy comments.
  - Journals will be collected periodically and reviewed, at pre-announced times.
- ◆ During the second half of the course, students will give presentations, in groups, about their Service Learning work. An outline of each student's presentation must be submitted at the time of the presentation.

Course Grade:

<b>Attendance &amp; service performance at placement site</b>	<b>25 points</b>
<b>Site work "Above and Beyond"</b>	<b>5 points</b>
<b>Journal</b>	<b>15 points</b>
5 1-2-page written assignments	25 points
Class attendance and participation	10 points
Presentation about fieldwork (including outline)	<u>20</u> points
<b>TOTAL</b>	<b>100 points</b>

**Students with Disabilities**

Students with documented disabilities who wish to request reasonable accommodations under Section 504 of the Rehabilitation Act and the Americans with Disabilities Act should contact Kristine Souza, Associate Director of Academic Support Services at (508) 890-8855 x1908 or through e-mail at ksouza@mcp.edu to discuss the accommodations process.

Bibliography (not required unless otherwise noted)

Connors K. and Seifer S., "Service-Learning in Health Professions Education: What is Service-Learning, and why now?," in *A Guide for Developing Community-Responsive Models in Health Professions Education*

Eyler J. and Giles D.E. (1999) *Where's the Learning in Service-Learning*, (Jossey-Bass, San Francisco, CA)

Indritz M.E.S. and Hadsall R.S. (1999) "An Active Learning Approach to Teaching Service at One College of Pharmacy," *American Journal of Pharmaceutical Education* 63, 126-131

Jacoby B. and Associates (1996) *Service-Learning in Higher Education*, (Jossey-Bass, San Francisco, CA)

Murawski M.M., Murawski D. and Wilson M. (1999) "Service-Learning and Pharmaceutical Education: An Exploratory Survey," *American Journal of Pharmaceutical Education* 63, 160-164

Rhoads R.A. (1997) *Community Service and Higher Learning: Explorations of the Caring Self*, (State University of New York Press, Albany, NY)

Seifer S.D. (1998) "Service-Learning: Community-Campus Partnerships for Health Professions Education," *Academic Medicine* 73, 273-277

Zlotkowski E. (ed.) (1998) *Successful Service-Learning Programs: New Models of Excellence in Higher Education*, (Anker Publishing Co., Inc., Bolton, MA)

**American Association of College of Pharmacy (AACP)  
Community-Campus Partnerships for Health (CCPH)  
Tuesday, July 22, 2003**

**Perspectives for and from Deans and Administrators**

**Wynefred Schumann, MS, FAASCU**

Assistant Dean Student and Alumni Affairs and Associate Professor Clinical  
Eugene Applebaum College of Pharmacy and Health Sciences<sup>2</sup>  
Wayne State University, Detroit, Michigan

**Biographical Sketch:**

As a former hospital pharmacy director, I directed beta test site for ATC 212 and the successful development of technician certification, program and textbook leading to the national examination. College administration for more than a decade in an urban university located at an academic medical center with nine major health programs granting certificates, BS, MS, Pharm, and PhD. Currently teaching Service Learning elective, Advanced Health Care Topics (a business plan application for clinical services) and partnering in a new elective focusing on the uninsured. Currently chair of AACP Pharmacy College Admission Test (PCAT) Advisory Board, member of Pharmacy Technician Certification Board (PTCB) and AACP planning committee for 2004 meeting American Association of Medical Colleges Professional Development Conference for Financial Aid Professionals [w.schumann@wayne.edu](mailto:w.schumann@wayne.edu).

**Definition:**

*Service-learning combines service objectives with learning objectives with the intent that the activity changes both the recipient and the provider of the service. This is accomplished by combining service tasks with structured opportunities that link the task to self-reflection, self-discovery, and the acquisition and comprehension of values, skills, and knowledge content.*

**Service-learning at Eugene Applebaum College of Pharmacy and Health Sciences:**

Doctor of Pharmacy (PharmD), Physician's Assistant Studies (PAS), and Clinical Laboratory Sciences (CLS) participate in service-learning education in varying degrees. PAS focuses on more community service, PharmD provides didactic, experience, reflection and academic summary and CLS introduces didactic information to graduate students. Assessment is based on pre- and post-test designed by R. Chalmers, plus written evaluation of the course.

**Advantages of Service Learning Courses in a Doctor of Pharmacy Program**

- Student growth in aspects of patient care
- Student exposure to cultural competency
- Reflection exercise valuable in all courses
- Wealth of pharmacy literature (e.g. Nickman, Lamson, Chalmers, etc)
- Wealth of research
- Wealth of websites (<http://www.servicelearning.org>)
- Application of early experiential experiences

**Points to Ponder for Deans and Chairs**

- Course preparation time
- Agency **contacts**
- Agency **contracts**
- Monitoring student participation
- Lack of educational experience for faculty
- Lack of time in PharmD curriculum

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<sup>2</sup> College name officially changed in October 2001.

Fall 2001 Special Topics in Community Pharmacy (PPR 5700)  
*Service Learning 2 credits*

Wednesday 1:25 pm to 3:00 pm

Faculty: Wynefred Schumann, MS, FAASCU, Associate Professor (Clinical)

[w.schumann@wayne.edu](mailto:w.schumann@wayne.edu)

143 Shapero Hall 313.577.1719

Office Hours Tuesday, 9 am to 11 am (others by appointment)

**Lecturer: William Vanderwill, MSW, ACSW**

***"Experience is not what happens to a man;  
It is what a man does with what happened to him."***

## **Aldous Huxley**

### 1. *Course Objectives*

- **Define service learning, reflection**
- **Recognize the importance of community service to understand future patients**
- **Be more aware patient's need for social support**
- Involve students in relationship across human differences
- Enable students to learn about people who will later be seen in a professional setting
- Provide mutually-fulfilling experience where pharmacy students learn and teach
- Provide opportunity for students to reflect on experience on a weekly basis
- Prepare written account of experience at end of semester.

2. ***Course Philosophy. This professional elective provides two academic semester credits and introduces students from pharmacy and allied health to a reciprocal arrangement in which students and community members become learners and teachers, and the servers are served. In this course, students in professional academic programs are oriented to community service in an academic setting.***

3. ***Required Readings are assigned as necessary.***

4. ***Academic Dishonesty. In any instance of academic dishonesty occurring in this course as defined in Section 3.0 of the University Student Due Process Policy, the provisions of 10.1 of the Policy will be implemented as follows: The grade for the course will be reduced to an "E." In addition, charges MAY be filed, as provided for in Section 10.2 of the Policy, which may lead to further sanction up to and including expulsion from the College or University.***

5. ***Non-Discrimination of the Handicapped. In accordance with the Federal requirement of the Rehabilitation Act of 1973, there shall be no discrimination on the basis of handicap in Wayne***

State University's programs, operations and activities, in the hiring, terms of, and condition or privileges or employment or any matter directly or indirectly related to such employment, or in the admission, education or treatment of students.

6. *Equal Opportunity Statement.* Wayne State University is an equal opportunity affirmative action institution and is committed to a policy of non-discrimination and equal opportunity in all of its operations, employment opportunities, educational programs and related activities.

7. *Grading Reporting and Scale:*

96 - 100	A
91 - 95	A-
87 - 90	B+
81 - 86	B
79 - 80	B-
77 - 78	C+
70 - 76	C
61 - 69	D
≤ 60	E

30% Final Paper

30% Team Visitations

25% Reflective Seminar Participation

15% Written or Electronic Journal

8. *Service Learning Class Policies and Guidelines*

8.1. *Purpose: Students are considered volunteer service providers of the agency or clinic and will be subject to the Professional Pharmacy Curriculum Guidelines and those of the agency for these reasons:*

- Assure optimal service for the patient/client
- Be prepared for unusual or emergency situation involving the patient/client.
- Ensure appropriate confidentiality of information that the student acquire with the client/patient
- Protect the student from exceeding the bounds of expertise in providing service.

8.2. *Health Status: Student will meet Professional Pharmacy Curriculum Guidelines.*

8.3. *Professional Conduct and Dress Code: Student must determine and follow the guidelines of the Agency and the Professional Pharmacy Curriculum Guidelines. Pharmacy student who desire to establish a supportive, yet professional relationship with patient should exercise their best judgment in personal conduct to contribute to that goal.*

8.4. *Confidentiality: Information about patient/client, their care plans and personal information is privileged in nature. Students must maintain the confidential nature of this information. Students will professionally communicate with colleague students, faculty members and agency staff. The student's must refer to the patient/client in their weekly journal record with initials instead of the patient/client's full name.*

- 8.5. **Transportation:** *The student is responsible to provide his/her own transportation to the patient/client site. Additionally, the student will not transport the patient/client under any circumstances.*
- 8.6. **Visitations.** *Each student will self-select a visitation partner to meet with a person associated with a social services agency. The student team will visit with the person two hours each week. Each student will maintain an individually written or electronic journal and meet every other week with students, faculty and agency representatives to discuss the experience, gain assistance, and reflect on the progress and mutually fulfilling experience.*
- 8.7. **Reflection Seminars:** *The purpose of these seminars is to define the outcome of each visit with the patient/client where students have the opportunity to observe and communicate with patient/clients without the purpose of providing expert (pharmacist) information (i.e. as in patient counseling).*

**Community service, in itself, can be meaningful, pointless, or harmful. Reflection is the key to getting meaning from your service experience. Reflection is a process by which service-learners think critically about their experiences. Reflection can happen through writing, speaking, listening, and reading about the service experiences. It is important because learning happens through a mix of theory and practice, thought and action, observation and interaction. It allows students to learn from themselves. Some ideas to consider in these seminars:**

- Define a caring individual
- List the characteristics of a caring individual
- Do you believe you model your behavior as you describe a caring individual?
- Do you have goal(s) that you set for yourself as a member of the Service Learning class?
- How do you think the patient/client views the time that your team spends with him/her?
- Describe challenges you might face in these visitations.
- List those characteristics that you have in common with the patient/client.
- List those characteristics that may differ from the patient/client.
- How do you think you gain a better understanding of the person's values and beliefs that you are serving?

8.8. **Journals (electronic):**

8.8.1. **A few tips for keeping a great journal:**

- Journals are snapshots (not literally) filled with sights, sounds, smells, concerns, insights, doubts, fears, and critical questions about issues, people, and, most importantly, you.
- Honesty is the most important ingredient to successful journals.
- Write freely. Grammar and spelling are not stressed in your journal writing.
- Write an entry after each visit. If you cannot write a full entry, jot down random thoughts, images, etc. that you can and expand into a colorful verbal picture a day or two later.
- A journal is not a work log of tasks, events, times and dates

8.8.2. **Structuring Your Writing:**

- Use the journal as a time to meditate on what you've seen, felt, and experienced, and which aspects of the volunteer experience continues to excite, trouble, impress, or unnerve you.
- Do not simply answer the questions listed below, but use the questions as a diving board to leap from into a clear or murky pool of thought.
- Use the attached questions to keep your writing focused.

## The Three Levels of Reflection<sup>3</sup>

### 1. The Mirror (A clear reflection of the Self)

- Who am I? What are my values?
- What have I learned about myself through this experience?
- Do I have more/less understanding or empathy than I did before volunteering?
- In what ways, if any, has your sense of self, your values, your sense of "community," your willingness to serve others, and your self-confidence/self-esteem been impacted or altered through this experience?
- Have your motivations for volunteering changed? In what ways?
- How has this experience challenged stereotypes or prejudices you have/had? Any realizations, insights, or especially strong lessons learned or half-glimpsed?
- Will these experiences change the way you act or think in the future?
- Have you given enough, opened up enough, cared enough?
- How have you challenged yourself, your ideals, your philosophies, your concept of life or of the way you live?

### 2. The Microscope (Makes the small experience large)

- What happened? Describe your experience.
- What would you change about this situation if you were in charge?
- What have you learned about this agency, these people, or the community?
- Was there a moment of failure, success, indecision, doubt, humor, frustration, happiness, or sadness?
- Do you feel your actions had any impact?
- What more can you do?
- Does this experience compliment or contrast with what you are learning in class? How?
- Has learning through experience taught you more, less, or the same as the class?
- In what ways?

### 3. The Binoculars (Makes what appears distant, appear closer)

- From your service experience, are you able to identify any underlying or overarching issues that influence the problem?
- What could be done to change the situation?
- How will this alter your future behaviors/attitudes/and career?
- How is the issue/agency you are serving impacted by what is going on in the larger political/social sphere? What does the future hold?
- What can be done?

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<sup>3</sup> Mark Cooper. Reflection: Getting Learning Out of Serving  
<http://www.fiu.edu/~time4chg/Library/reflect.html> on September 4, 2001.

## 2001 Special Topics in Community Pharmacy (PPR 5700)

Wednesday, 1:20 pm to 3:00 pm

### Course Outline

- September 5**            **W. Schumann.** Introduction to course syllabus; define service in terms of companionship, family relief, mentor, tutor, recreation, transpiration; Service Learning pre-test.
- September 12**            **W. Schumann.** Define learning in terms of disabilities and disease, diversity, communication and listening skills, caring and empathy, importance of community service and social service.
- September 19**            **W. Schumann.** Selection of two-person visitation teams
- William Vanderwill, MSW, ACSW: Overview of Aging:** General information, phenomenological worldview; human diversity; dynamics of the aging family; social problems facing the elder populations.
- September 26**            **William Vanderwill, MSW, ACSW:** Building a Relationship: Empathic understanding; communication skills; protocol for home visiting; supportive interventions; life review; life validation
- October 3**                **William Vanderwill, MSW, ACSW: Human Services:** Medication assistance Michigan Emergency Pharmaceutical Program for Seniors (MEPPS); Pharmaceutical Research and Manufacturers of America (PhRMA), Detroit Agency on Aging, etc.
- October 10**                Team two-hour visitation #1; weekly electronic journal #1 - no class
- October 17**                Team two-hour visitation #2; weekly electronic journal #2; Reflection Meeting A
- October 24**                Team two-hour visitation #3; weekly electronic journal #3 - no class
- October 31**                Team two-hour visitation #4; weekly electronic journal #4; Reflection Meeting B
- November 7**                Team two-hour visitation #5; weekly electronic journal #5 - no class
- November 14**                Team two-hour visitation #6; weekly electronic journal #6; Reflection Meeting C
- November 21**                Team two-hour visitation #7; weekly electronic journal #7 - no class
- December 28**                Team two-hour visitation #8; weekly electronic journal #8; Reflection Meeting D
- December 5**                Service Learning post-test; review of final paper
- December 12**                Final evaluation paper deadline

**Pre-Service Learning Questionnaire** (adapted from R. Chalmers)  
Submitted by Wynefred Schumann, Wayne State University

Name: \_\_\_\_\_ WSU ID \_\_\_\_\_

Below are several statements that concern your feelings about patient, the health care system, and the profession of pharmacy. Please answer each item by circling your response based on the following scale.

SA = Strongly Agree  
A = Agree  
N = Neither agree nor disagree/undecided  
D = Disagree  
SD = Strongly disagree

Question	SA	A	N	D	SD
1. I am uncomfortable speaking with someone of a cultural background different than my own.	SA	A	N	D	SD
2. As a pharmacist, I would be uncomfortable providing services to someone of a cultural background different from mine.	SA	A	N	D	SD
3. In the US, too much attention is focused on the special needs of people from different cultural backgrounds.	SA	A	N	D	SD
4. Pharmacy schools should require coursework that focuses on cultural diversity.	SA	A	N	D	SD
5. It is important for pharmacists to speak a language other than English.	SA	A	N	D	SD
6. I am uncomfortable speaking with someone of a race different than my own.	SA	A	N	D	SD
7. As a pharmacist, I would be uncomfortable providing services to someone of a race different than my own.	SA	A	N	D	SD
8. In the US, too much attention is focused on the special needs of racial minorities.	SA	A	N	D	SD
9. Most elderly people are as easy to understand as younger people.	SA	A	N	D	SD
10. Most elderly people are set in their ways and unwilling to change	SA	A	N	D	SD
11. Most elderly people make me feel uncomfortable.	SA	A	N	D	SD
12. Most elderly people tend to be irritable and grouchy.	SA	A	N	D	SD
13. I am uncomfortable speaking with an elderly person.	SA	A	N	D	SD
14. As a pharmacist, I would be uncomfortable providing services to an elderly person.	SA	A	N	D	SD
15. In the U.S. too much attention is focused on the special needs of the elderly.	SA	A	N	D	SD
16. Pharmacy schools should require coursework that focuses on the needs and treatment of the elderly.	SA	A	N	D	SD
17. I am uncomfortable speaking with someone who is extremely poor or on welfare	SA	A	N	D	SD
18. As a pharmacist, I would be uncomfortable providing services to someone who is extremely poor or on welfare.	SA	A	N	D	SD
19. People on welfare do not want to work	SA	A	N	D	SD
20. People often are on welfare primarily because they expect the government to provide for their needs.	SA	A	N	D	SD

21. People often are on welfare primarily because of circumstances beyond their control	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
22. People often are on welfare primarily because they lack the training or education necessary to improve their lives.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
23. People who are on welfare do not like being dependent on government assistance.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
24. In the U. S. too much attention is focused on the special needs of the poor.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
25. I am uncomfortable speaking with someone who is disabled.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
26. As a pharmacist, I would be uncomfortable providing services to someone who is disabled.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
27. In the U. S. too much attention is focused on the special needs of the disabled.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
28. To understand someone's attitudes and behavior, you must understand their personal history or background.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
29. All people are basically the same.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
30. It is important for pharmacists to understand their patients' family circumstances and social environments.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
31. It is important for pharmacists to understand their patient's economic circumstances.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
32. As a pharmacist, I would be uncomfortable working in a nursing home.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
33. As a pharmacist, I would be uncomfortable working in a mental health facility.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
34. As a pharmacist, I would be uncomfortable working in a substance abuse treatment facility.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
35. As a pharmacist, it will be important for me to have a job that emphasizes helping people.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
36. As a pharmacist, it will be important for me to have a job that allows me to interact with people.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
37. Health professionals are too interested in "curing" and not concerned enough about "caring."	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
38. Volunteering time to people in need helps individuals be more patient with others.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
39. Volunteering time to people in need helps individuals better understand social problems.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
40. Volunteering time to people in need helps individuals better understand how social service agencies are organized.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
41. Volunteering time to people in need helps individuals be less judgmental about other people.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
42. Volunteering time to people in need helps individuals avoid stereotyping groups of people.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
43. Volunteering time to people in need helps individuals identify areas where they need to change or learn more.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
44. Volunteering time to people in need helps individuals feel that they can make a difference in other people's lives.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
45. It is important for pharmacists to be involved in providing community health education programs.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>
46. It is important for pharmacists to volunteer their services at community health clinics.	<b>SA</b>	<b>A</b>	<b>N</b>	<b>D</b>	<b>SD</b>

47. It is important for pharmacists to be involved in civic groups.	SA	A	N	D	SD
48. It is important for pharmacists to be involved in professional pharmacy organizations.	SA	A	N	D	SD
49. It is important for pharmacists to be familiar with community resources (e.g. support groups) that are available for patients and their families.	SA	A	N	D	SD
50. The social services that patients receive may be more important to the success of their treatments than the medical service that they receive.	SA	A	N	D	SD
51. The social support that patients receive from friends and family may be more important to the success of their treatments than the medical service that they receive from health professionals.	SA	A	N	D	SD
52. The social support that patients receive from health professionals may be more important to the success of their treatments than the medical service they receive from those professionals.	SA	A	N	D	SD
53. If I understand the needs of the people I work with, I will be better able to demonstrate caring.	SA	A	N	D	SD
54. I consider myself to be a caring individual.	SA	A	N	D	SD

The following questions are demographic in nature and will assist in classifying your responses.

55. Are you... \_\_\_\_\_ Female? \_\_\_\_\_ Male?

56. What year are you in pharmacy school? \_\_\_ 1<sup>st</sup> year \_\_\_ 2<sup>nd</sup> year \_\_\_ 3<sup>rd</sup> year \_\_\_ 4<sup>th</sup> year

57. Please indicate the amount of your professional practice experience to date in each of the following areas:

Independent Community Pharmacy Weeks	None	___ Years	___ Months	___
Chain Community Pharmacy Weeks	None	___ Years	___ Months	___
Hospital Pharmacy Weeks	None	___ Years	___ Months	___
Other (please describe) _____ Weeks	None	___ Years	___ Months	___

58. Please indicate the amount of your volunteer experiences or community services to date:  
(please list the sites)

_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks
_____	None	___ Years	___ Months	___ Weeks

59. Please list your membership and offices held in any professional organizations (e.g. ASP, Kappa Psi, Rho Chi, Michigan Pharmacists Association, etc.)

Organizations	Offices Held
_____	_____
_____	_____

**Service-Learning Concepts and Tools for Pharmacy Education**

**Additional Resources and References**

**PEP SIG Workshop  
AACP Annual Meeting  
July 22, 2003**

## Service-Learning in Pharmacy References

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## NATIONAL RESOURCES FOR SERVICE-LEARNING AND COMMUNITY-CAMPUS PARTNERSHIPS

This resource list is a “work in progress.” If you are aware of helpful resources that are not listed here, please let us know. Please email your suggestions to Rachel Vaughn at [rvaughn@u.washington.edu](mailto:rvaughn@u.washington.edu) or fax them to Rachel’s attention at 206-685-6747.

### **ORGANIZATIONS**

#### **Community-Campus Partnerships for Health**

[www.ccph.info](http://www.ccph.info)

Community-Campus Partnerships for Health is a nonprofit organization that fosters partnerships between communities and higher educational institutions, including service-learning partnerships. CCPH’s organizational members include community agencies, health departments, colleges, universities, health professional schools, government and philanthropy. CCPH0 members include community leaders, academic administrators, faculty and students. They are working toward a number of shared goals, including:

- Incorporating service-learning into the education of all health professionals
- Recognizing and rewarding faculty for community-based teaching, research, service
- Developing partnerships that balance power and share resources among partners

CCPH sponsors conferences, training institutes, a Mentor Network of trainers and consultants, to assist communities and higher educational institutions in developing and sustaining partnerships. CCPH also publishes resource guides, articles and online resources, including the biweekly online newsletter *Partnership Matters*.

#### **Campus Compact**

[www.compact.org](http://www.compact.org)

Campus Compact is the only national higher education organization whose primary purpose is to support campus-based public and community service. The Campus Compact network includes 22 state-based Campus Compacts, and the Campus Compact National Center for Community Colleges based at Mesa Community College in Arizona. In addition to the work done at the national level, these affiliates serve as key liaisons to school systems, and higher education, community-based and government organizations, as well as provide area member colleges and universities with hands-on assistance, workshops, and conferences.

#### **Western Region Campus Compact Consortium**

<http://www.ac.wvu.edu/~wrccc/>

The Western Region Campus Compact Consortium is a four state coalition of ninety-two college and university Presidents and Chancellors that seeks to increase campus-wide participation in community and public service and to integrate service-learning as a valued component of higher education.

The members of the Consortium are committed to enhancing student and institutional responsibility, citizenship, leadership and awareness of community assets and issues, while reinvigorating higher education’s concern for improving the quality of life in our society.

The Western Region Campus Compact Consortium serves as a liaison and consultant among both campuses and community based organizations interested in forming partnerships toward positive community, faculty, student, staff, administration and program development.

### **Educators for Community Engagement (Previously known as the Invisible College)**

<http://www.selu.edu/orgs/ic/>

Educators for Community Engagement is a national organization dedicated to service-learning. Members include university faculty and staff, community partners, and students working toward a common goal of increasing the practice of service-learning across the United States.

### **National Society for Experiential Education (NSEE)**

<http://www.nsee.org/>

NSEE is a national resource center that promotes experienced-based approaches to teaching and learning. The Web Page includes background information on the organization, membership information and ordering options for its publications.

### **Break Away**

<http://www.alternativebreaks.com/>

Break Away's Mission is to promote service on the local, regional, national and international levels through break-oriented programs which immerse students in often vastly different cultures, heighten social awareness and advocate life-long social action. Break Away envisions a not too distant future, where quality alternative breaks will be as much a part of the college experience as going to class. Students will walk away with a redefined sense of community and a lifetime commitment to social action. Available resources include: training, technical assistance, website with examples and links to resources

### **Campus Outreach Opportunity League**

[www.cool2serve.org](http://www.cool2serve.org)

A non-profit organization that helps college students start, strengthen, and expand community service programs on their campuses.

### **Council for Independent Colleges (CIC)**

[www.cic.edu](http://www.cic.edu)

Two separate CIC initiatives promote service-learning in higher education.

## **ON-LINE CLEARINGHOUSES AND RESOURCES**

### **Service-Learning Home Page**

<http://csf.colorado.edu/sl/>

The purpose of this site is to serve as a virtual guide to, and library of, service-learning. It's primary focus is service-learning in higher education. The primary components of the site are a Guide to College and University Service-Learning Programs, Courses and Syllabi the Service-Learning Discussion Group archives the Guide to Service-Learning Organizations, Networks, Venues and Resources the online library of Service-Learning Syllabi (by discipline).

### **The National Service-Learning Clearinghouse**

[www.servicelearning.org](http://www.servicelearning.org)

Home of the National Service-Learning Cooperative Clearinghouse adjunct ERIC Clearinghouse on Service-Learning. The site contains searchable databases on current events, past events, literature and programs. Resources include frequently asked questions, a listServ, bibliographies, monographs, newsletters, state reports, videos, publications list.

## **EPICENTER – Effective Practices Information Center**

<http://www.nationalservice.org/resources/epicenter/>

Epicenter, the Effective Practices Information Center, is an online database of effective practices for national service programs.

## **UCLA Service-Learning Clearinghouse**

<http://www.gseis.ucla.edu/slc/>

The UCLA Service-Learning Clearinghouse Project is housed in the UCLA Graduate School of Education and Information Studies Department, within the Higher Education Research Institute. Funded by the Corporation for National Service and the University of Minnesota National Service-Learning Clearinghouse, the UCLA Service-Learning Clearinghouse Project's mission is to provide resources and support to Learn and Serve America Higher Education grantees and subgrantees, as well as the higher education service-learning field at large. This web site contains information and resources focusing on Faculty Issues, K- H Partnerships, Assessment and Evaluation, Training and Technical Assistance, and Service-Learning Research.

## **On-Line Resources**

CAMPUS COMPACT: 4<sup>TH</sup> OF JULY PRESIDENT'S DECLARATION, CAMPUS ASSESSMENT

<http://www.compact.org/advancedtoolkit/defining.html>

COMMUNITY-CAMPUS PARTNERSHIPS FOR HEALTH : PRINCIPLES OF PARTNERSHIP

<http://futurehealth.ucsf.edu/ccph.html>

NATIONAL ASSOCIATION OF STATE UNIVERSITIES AND LAND GRANT COLLEGES: REPORT ON THE ENGAGED INSTITUTION

<http://www.nasulgc.org/publications/publications.asp>

UNITY COLLEGE: BENCHMARKS FOR AN ENGAGED CAMPUS

<http://www.unity.edu/ServiceLearning/default.htm>

UNC-CHAPEL HILL: REPORT ON EDUCATION FOR CIVIC RESPONSIBILITY

<http://www.unc.edu/chan/intclim/chapV.htm>

EVERGREEN COLLEGE: THE ENGAGED CAMPUS REPORT AND RECOMMENDATIONS

<http://www.evergreen.edu/user/csldtf/report.html>

MIDDLEBURY COLLEGE: BENCHMARKS FOR THE ENGAGED CAMPUS

<http://www.middlebury.edu/~vcc/definition.htm>

UNIVERSITY OF MARYLAND: ESTABLISHING BENCHMARKS FOR THE ENGAGED CAMPUS

<http://www.inform.umd.edu/CSP/engagedcampus.html>

METROPOLITAN UNIVERSITY: THE ENGAGED CAMPUS

<http://www.metrostate.edu/ccbl/CCBLengCmp.htm>

UNIVERSITY OF UTAH: BUILDING AN ENGAGED CAMPUS – A FOUR YEAR PLAN TO STRENGTHEN COMMUNITY PARTNERSHIPS AND SERVICE-LEARNING AND ENCOURAGE COMMUNITY-BASED SCHOLARSHIP

<http://www.saff.utah.edu/bennion/plan.htm>

## **TRAINING AND TECHNICAL ASSISTANCE RESOURCES**

### **CCPH Mentor Network**

<http://www.futurehealth.ucsf.edu/ccph/mentor.html>

Community-Campus Partnerships for Health's Mentor Network of trainers and consultants is available to provide service-learning presentations, faculty development workshops, strategic planning and other resources to assist health professional schools and faculty in implementing service-learning. For more information or to schedule a workshop or consultation, contact Rachel Vaughn at 206-543-8010 or [rvaughn@u.washington.edu](mailto:rvaughn@u.washington.edu)

### **CCPH Introductory and Advanced Service-Learning Institutes, Discipline-focused Service-Learning Institutes**

<http://www.futurehealth.ucsf.edu/ccph/servicelearning.html>

Participants work with mentors and colleagues from across the country. National experts in service-learning pedagogy and health professions faculty who have incorporated community service into their courses share program models and reflect with institute participants on the integration of community service, scholarship and teaching. A unique and effective aspect of the Institute's approach is inclusion of the mentoring model—participants work in small groups and as individuals with mentors to further shape their own action plans for developing service-learning curricula. Past institutes drew faculty from medicine, dentistry, nursing, pharmacy, public health, physician assistant, pre-health professions and social work programs.

### **AAHE-Campus Compact Consulting Corps**

[www.aahe.org](http://www.aahe.org)

The AAHE-Campus Compact Consulting Corps was established to assist colleges and universities in becoming more effective proponents of social and civic engagement. Designed to serve as a major disciplinary and regional resource to service-learning faculty and engaged campuses, the Corps will provide on-campus technical assistance and professional development for interested institutions. Members of the Corps are available for consultation beginning October 2000. For more information or to schedule training contact Teresa Antonucci, AAHE program manager, at (202) 293-6440, ext. 783, or [tantonucci@aahe.org](mailto:tantonucci@aahe.org).

## **JOURNALS FOR PUBLISHING ARTICLES ON SERVICE-LEARNING**

### **Michigan Journal of Community Service Learning**

<http://www.umich.edu/~ocsl/MJCSL/>

The MJCSL is a national, peer-reviewed journal for college and university faculty and administrators, with a 26-member editorial board drawn equally from both the University of Michigan and from other institutions of higher education around the country. The Michigan Journal addresses two goals: first, to provide a venue to intellectually stimulate educators around the issues pertinent to academic service-learning, and second, to provide a venue to publish scholarly articles specifically for a service-learning audience. As a side benefit, the journal brings academic legitimacy to academic service-learning.

### **Journal of Public Service and Outreach**

[http://www.uga.edu/~jpsa/index\\_2.html](http://www.uga.edu/~jpsa/index_2.html)

The first interdisciplinary journal "dedicated to the third mission of the academy." Covering topics such as service-learning, economic development and urban outreach.

## **ELECTRONIC DISCUSSION GROUPS**

**WRCCC list serve.** To subscribe e-mail to [listproc@lists.wvu.edu](mailto:listproc@lists.wvu.edu) with a one line message as follows:sub wrccclist Firstname Lastname

**CCPH service-learning listserv.** To subscribe, email to [ccph@itsa.ucsf.edu](mailto:ccph@itsa.ucsf.edu)

**CCPH membership listserv.** For CCPH members only. To subscribe, send an email to [ccph@itsa.ucsf.edu](mailto:ccph@itsa.ucsf.edu)

**Service-learning listserv.** To subscribe, send the message: subscribe service-learning to: [majordomo@csf.colorado.edu](mailto:majordomo@csf.colorado.edu)

## **FUNDING**

### **Corporation for National Service**

AmeriCorps program

<http://www.nationalservice.org/partners/become/ Americorps.html>

Learn and Serve America: Higher Education

<http://www.cns.gov/learn/index.html>

Learn and Serve America supports service-learning programs in schools and community organizations that help nearly one million students from kindergarten through college meet community needs, while improving their academic skills and learning the habits of good citizenship. Learn and Serve grants are used to create new programs or replicate existing programs, as well as to provide training and development to staff, faculty, and volunteers.

## **AWARDS**

### **Partnership Awards**

<http://futurehealth.ucsf.edu/ccph/awards.html>

The Community-Campus Partnerships for Health Award recognizes exemplary partnerships between communities and higher educational institutions that build on each other's strengths to improve health professions education, civic responsibility, and the overall health of communities through strategies such as promoting service-learning in health professional education, conducting community-based participatory research, and/or building broad-based community partnerships. Please contact Stacy Holmes, Program Coordinator, [slholmes@u.washington.edu](mailto:slholmes@u.washington.edu)

### **Faculty Awards**

#### **Ernest A. Lynton Award for Faculty Professional Service & Academic Outreach**

[www.nerche.org](http://www.nerche.org)

This annual award recognizes a faculty member who connects his or her expertise and scholarship to community outreach. The recipient of the award will be selected according to the following criteria:

- 1) demonstrates sustained effort in outreach and professional service;
- 2) utilizes innovative and imaginative approaches;
- 3) has an institutional impact (through teaching, program development, faculty and student participation); and
- 4) can show evidence of external success (through scholarly output, community impact and/or student learning).

The award is presented at the American Association for Higher Education's (AAHE) Annual Forum on Faculty Roles and Rewards.

### **Thomas Ehrlich Award**

<http://www.compact.org/awards/ehrllichaward2001.html>

The recipient of the Thomas Ehrlich Faculty Award for Service-Learning receives \$2,000 and national recognition at the Invisible College Gathering. Presidents may nominate one full-time faculty member from his or her institution whose work in service-learning meets the following criteria:

- Evidence of innovative ways of employing a reflective teaching methodology to connect community and public service experience with academic study.
- Published community-based action research, scholarship on the pedagogy of service-learning, or research on the impacts of service-learning on students, campuses, or communities.
- Demonstrated leadership that promotes service-learning on one's campus, within higher education, or in one's discipline, and efforts aimed at redesigning curriculum and faculty development.

### **Student Awards**

Secretary's award for health innovations

[www.aacn.nche.edu](http://www.aacn.nche.edu)

The U.S. Department of Health and Human Services (HHS), in collaboration with the Federation of Associations of Schools of the Health Professions (FASHP), gives annual awards to innovative student-led health promotion or disease prevention projects. The Secretary's Award for Innovations in Health Promotion and Disease Prevention recognizes forward-thinking proposals by health professions students and generates creative strategies for addressing goals outlined in HHS' Healthy People 2010: Understanding and Improving Health. Now in its 19<sup>th</sup> year, the annual award honors entries from students across the country enrolled in FASHP-member colleges or universities who are studying allied health, chiropractic, dentistry, health administration, health education, medicine, nursing, optometry, osteopathic medicine, podiatric medicine, pharmacy, public health, and veterinary medicine.

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### **FELLOWSHIPS**

#### **CCPH FELLOWS**

<http://www.futurehealth.ucsf.edu/ccph/fellows.html>

Community based professionals, academic administrators, and faculty with significant knowledge and expertise in building and sustaining service-learning, community based participatory research, and community-campus partnerships are encouraged to contact Rachel Vaughn at [rvaughn@u.washington.edu](mailto:rvaughn@u.washington.edu)