STUDENT LEADERSHIP

Guiding Principles for Student Leadership Development in the Doctor of Pharmacy Program to Assist Administrators and Faculty Members in Implementing or Refining Curricula

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Objective. To assist administrators and faculty members in colleges and schools of pharmacy by gathering expert opinion to frame, direct, and support investments in student leadership development.

Methods. Twenty-six leadership instructors participated in a 3-round, online, modified Delphi process to define doctor of pharmacy (PharmD) student leadership instruction. Round 1 asked open-ended questions about leadership knowledge, skills, and attitudes to begin the generation of student leadership development guiding principles and competencies. Statements were identified as guiding principles when they were perceived as foundational to the instructional approach. Round 2 grouped responses for agreement rating and comment. Group consensus with a statement as a guiding principle was set prospectively at 80%. Round 3 allowed rating and comment on guidelines, modified from feedback in round 2, that did not meet consensus. The principles were verified by identifying common contemporary leadership development approaches in the literature.

Results. Twelve guiding principles, related to concepts of leadership and educational philosophy, were defined and could be linked to contemporary leadership development thought. These guiding principles describe the motivation for teaching leadership, the fundamental precepts of student leadership development, and the core tenets for leadership instruction.

Conclusions. Expert opinion gathered using a Delphi process resulted in guiding principles that help to address many of the fundamental questions that arise when implementing or refining leadership curricula. The principles identified are supported by common contemporary leadership development thought.

Keywords: delphi, leadership, instruction, principles, curriculum

INTRODUCTION

The need for leadership instruction in pharmacy education has been articulated by multiple pharmacy groups over many years.¹⁻⁶ The Oath of a Pharmacist indirectly supports the need for leadership instruction by calling on pharmacists to serve others and “embrace and advocate changes that improve patient care.”² The positions of many stakeholders have evolved, beginning in the early 1980s, to call for expanded curricula and leadership skill development in students.¹

Starting in 2000, professional organizations have individually and collectively released white papers that address leadership. The American College of Clinical Pharmacy vision of pharmacy’s future included the stance that all pharmacists must become agents of change.³ The American Pharmaceutical Association Academy of Students of Pharmacy-American Association of Colleges of Pharmacy (AACP) Council of Deans Task Force on Professionalism White Paper included leadership as 1 of the 10 traits of a professional and called on students, faculty members, and educational programs to focus on developing professionalism.⁴

Support for the need for leadership instruction for all students strengthened starting in 2009 with the Argus Commission and American Society of Health-System Pharmacists Foundation Reports calling for leadership development in all students out of professional obligation.^{5,6}

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AACP's 2011 strategic plan aimed to put this ideology to action through the development of curricula and programs that enable and empower students to be leaders.⁷ In addition, ACPE's update to the Standards and Guidelines 2.0 included Guideline 9.3 calling for the curriculum to foster the development of students as leaders and agents of change.⁸

While these positions were developing, examples of leadership development initiatives, courses, and related programming covering various topics such as self-development,⁹ advocacy,^{10,11} team building¹² and leading change¹³ began to appear in the pharmacy literature. While each is valuable, there are noted differences in topic coverage, scope, and time in the curriculum that raise a need for an educational framework.

The tasks involved in developing leadership curricula require significant investment by schools and faculty members. Time must be allocated for instruction; instructional resources must be acquired; frameworks of instruction must be developed; faculty members may have to develop expertise in topics or teaching methods; and assessment must occur to show achievement of leadership-related competencies. These significant investments can be better conceptualized with a set of guiding principles that address issues such as the reasons to engage in leadership development, the extent of efforts required, and the content educators and students should understand.

The aim of this study was to gather expert opinion to assist administrators and faculty members in colleges and schools of pharmacy in framing, directing, and supporting the large investments needed for leadership development programs for student pharmacists. In addition, the connections of this work to additional literature validated the statements and provided resources for understanding and communicating these results to other faculty members, stakeholders, and students.

METHODS

The Delphi process is a qualitative technique that requests and refines the collective thoughts and opinions of a panel of experts. Using multiple "rounds," data are collected from the participants, summarized, and presented back to the participants to obtain feedback and measure agreement or disagreement.¹⁴⁻¹⁹ Developed by the Rand corporation in the 1950s, the Delphi was used as a qualitative, long-range forecasting technique²⁰ and method for improved decision making.²¹ The Delphi process has been used in health professions education for identification of training needs²² and competencies.²³⁻²⁵

Powell argues that the success of a Delphi study rests on the expertise of the panel selected as participants.¹⁹ Recommended criteria for expert panel selection include

competency within the specialized area¹⁷ and credibility.¹⁹ To be included in this study, participants were required to be a leadership instructor for PharmD students in the United States. Previous experience in teaching leadership was deemed important in ensuring expertise in leadership, as well as experience in defining competencies for the required knowledge and skills needed for entry to practice.

The optimal number of experts needed for a Delphi study is not agreed upon in the literature.^{17-19,26} While 10 to 15 subjects is suggested to be sufficient if the subjects are homogenous,¹⁴ a panel is generally composed of under 50 people.²⁷ In practice, there is extensive variation in the number of experts used.¹⁹ Considering the pool of available experts and its breadth in terms of years of leadership teaching experience and extent of leadership teaching, a panel size of 20-30 was deemed appropriate for this research.

In May 2011, instructors of leadership in PharmD programs in the United States were contacted via telephone to announce the study and explain that further details would be delivered via e-mail. These pharmacy leadership instructors were identified by participation in informal meetings on leadership instruction at AACP and via the principal investigators' professional networks. Additional names of leadership instructors were requested from the initial contacts, and the interest areas of leadership and advocacy were queried in AACP's membership roster. Approximately 1 week later, a formal request to participate was sent via e-mail with a link to a Web-based version of the consent form.

This study used a 3-round modified Delphi process, collecting participant responses via the Web-based survey software program Qualtrics (Qualtrics Labs Inc., Provo, UT). In responding, participants were asked to use the Rauch and Behling definition of leadership: "The process of influencing an organized group toward accomplishing their goals."²⁸

Round 1 asked 4 open-ended questions regarding what students need to know and do related to leadership at entry to practice. Panelists were also asked the attitudes, values, beliefs, and behaviors that students should possess and the principles that should guide student leadership development. These data were reviewed by the authors for themes and summary statements were drafted. Statements were categorized into guiding principles and competencies. Statements were identified as guiding principles when they were related to concepts of leadership and educational philosophy perceived as foundational to the instructional approach.

In round 2, a Guiding Principles report was returned to participants. Each report contained the draft summary

statement and quotes from the participants that were used to create the summary statements. Using a 5-point Likert rating system (ie, strongly disagree, disagree, neither agree nor disagree, agree, strongly agree), participants were asked to rate their level of agreement with each statement and to comment particularly on those areas of disagreement and suggested refinements.

A consensus level was set prospectively. There are no definitive guidelines for the desired level of consensus in a Delphi process.^{18,19} Loughlin and Moore defined consensus as 51% agreement.²⁹ Typically, agreement is no lower than 55%, and potentially can be as high as 100%.¹⁹ For this study, consensus was defined as a minimum of 80% of participants agreeing or strongly agreeing with a specific principle. After round 2, statements not reaching 80% were refined based on the comments received and returned for further rating and commenting in round 3. At the conclusion of round 3, items not achieving consensus were not included in the approved principles.

At the conclusion of the study, the authors grouped the guiding principles into 3 categories to facilitate discussion and use by administrators and faculty members. A review of the literature was completed to verify and validate the results of the panel's work. Applicable literature was summarized with each principle for administrators and faculty members to justify and use in their efforts. This study was approved by the University of Minnesota Institutional Review Board.

RESULTS

Twenty-six leadership instructors participated in the Delphi process. The authors then summarized their feedback into the 12 Guiding Principles for Student Leadership Development in Pharmacy. The guiding principles were grouped into 1 of 3 categories: motivation for teaching and learning, fundamental precepts, and core tenets. Each category was linked to 1 of 3 questions that faculty members and administrators need to be prepared to ask and answer when initiating or modifying student leadership development curriculum: Why are we investing in student leadership development? What commitment are we making when we agree to invest in student leadership development? What do students need to understand? The answers to these categorical questions can help administrators and faculty members to rationalize and create a productive learning environment for all involved.

Each guiding principle, final level of agreement, and the related category is included in Table 1. Each guiding principle was supported by descriptors and additional detail provided by the experts during round 2 of the study. A summary of this information is included in Appendix 1 to provide further context for understanding and use.

The 12 guiding principles identified from the Delphi group are well aligned with contemporary leadership development thinking. Connections to this thinking are elaborated below to assist administrators and faculty members in their discussions and potential development or refinement of leadership instruction.

Motivation for Teaching and Learning

The Delphi panel identified 2 guiding principles that help administrators and faculty members answer the question, "why are we investing in leadership development?" New or enhanced leadership development in a curriculum may require faculty development, increased faculty effort, and curricular changes. These guiding principles and the references in the literature that support them can be helpful to administrators and faculty members in creating the urgency for this potentially large investment and change effort. In addition, these guiding principles provide the impetus for faculty members to teach and for students to embrace the content as a part of their curriculum.

Guiding Principle 1: Leadership is important for all student pharmacists to develop. Delphi panelists' comments affirmed messages from professional association reports regarding the need for leadership in pharmacy and the need for leadership development in all students.^{4-6,30-32} When taking the Oath of a Pharmacist, student pharmacists agree to "advocate for changes that improve patient care."² All students can operationalize this by taking actions to improve the medication use system every day with patients, professionals and administrators. This work has been referred to as "little L" leadership³⁰ or non-positional leadership,⁵ and as a professional obligation.⁶

Guiding Principle 2: Leadership can be learned. Kouzes and Posner have argued that the perception of leadership as the purview of a charismatic few in the spotlight is likely a result of the lack of formal leadership education and wide range of effectiveness that is observed as a result.³³ Leadership is comprised of skills, abilities, and activities that are observable and can be improved through coaching and practice.³³ Researchers have articulated the difficulty in assessment of learning in leadership development programming and the need for advancements in this area.³⁴ However, the literature includes studies demonstrating higher levels of leadership skills following structured leadership programming.³⁵ In particular, one study indicates that participation in an undergraduate elective training program had a positive impact on Socially Responsible Leadership Scale scores and that the effects persisted 3 months after program completion.³⁵

Table 1. Panel Agreement With Identified Guiding Principles

Guiding Principles	Level of Agree-ment, % ^a
Motivation for Teaching and Learning (Why are we investing in leadership development?)	
Guiding Principle 1: Leadership is important for all student pharmacists to develop.	87
Guiding Principle 2: Leadership can be learned.	100
Fundamental Precepts (What commitment are we making when we agree to invest in student leadership development?)	
Guiding Principle 3: Student leadership development must focus on student self-development.	96
Guiding Principle 4: Leadership development should take place in a wide variety of settings including didactic curriculum, experiential curriculum and extra-curricular involvement.	96
Guiding Principle 5: Leadership development requires many “teachers” from whom students can learn.	86
Guiding Principle 6: A person’s leadership development is continuous.	100
Core Tenets (What do students need to understand?)	
Guiding Principle 7: Anyone has the potential to lead regardless of background, position or title.	95
Guiding Principle 8: Leadership is a choice.	87
Guiding Principle 9: Leadership is principle-based and rooted in the common good.	96
Guiding Principle 10: Leadership involves relationships with people.	100
Guiding Principle 11: There is no single right way to lead.	87
Guiding Principle 12: Leadership and management are distinct activities.	87

^a Consensus for agreement was set at 80% prospectively.

Fundamental Precepts

Consensus was achieved around 4 guiding principles that help administrators and faculty advance beyond the need for leadership instruction to identify an approach and potential resources involved. These guiding principles help administrators and faculty members answer the question, “What commitment are we making when we agree to invest in student leadership development?” These precepts give context to the who, when, where and how of teaching leadership. Building off these precepts, administrators and faculty members addressing this issue can begin to conceptualize what the future of student leadership development looks like at their school.

Guiding Principle 3: Student leadership development must focus on student self-development. Posner described leadership as being driven more by internal forces of caring and values.³⁶ Thus, leadership development must focus on the development of one’s inner self. “Without an underlying belief in what students can accomplish as an individual and the need to make a personal commitment to embody the change that they hope to see in the profession, it is unlikely that leadership development activities will result in notable change in the individual’s activities or behaviors.”¹² The pharmacy education literature has highlighted work that focuses on the self-development of students related to discovery of personality, emotional intelligence, talents, and strengths.^{9,37-39} Disciplines outside the profession have described personal growth projects and other mechanisms to encourage a student’s focus on their own self-development.⁴⁰

Guiding Principle 4: Leadership development should take place in a wide variety of settings including didactic curriculum, experiential curriculum, and extracurricular involvement. Daloz Parks commented on the need to create learning environments that are more akin to places where leadership is practiced.⁴¹ In a pharmacy context, students must practice and perform activities in pharmacy settings and organizations, moving beyond workshops and the classroom to experience leadership^{32,42} Just as pharmacy educators expect students to actively engage in providing patient care, so should students engage in leadership activities to develop these skills. Development across a wide spectrum of settings is required to build these abilities.

Guiding Principle 5: Leadership development requires many “teachers” from whom students can learn. Colleges and schools of pharmacy need multiple teachers to handle the workload of teaching, modeling, coaching, and facilitating across multiple settings. Pharmacy education initiatives have been reported that use mentors and preceptors to expose students to leaders in their environments.^{13,43,44} Parks confirms that multiple teachers are possible when teachers share a curiosity about leadership education aimed at the common good, respect for growth and development, and a willingness to question their teaching.⁴¹

Guiding Principle 6: A person’s leadership development is continuous. By participating in opportunities throughout the curriculum and focusing on self-development, student pharmacists are strengthening

abilities that will be pivotal for a career of continuous development. Pharmacy embraces life-long learning as a practice to maintain competency, and leadership must be included as a focus. Continuing professional development is a mechanism that could be used to support the self-development needed in leadership.^{45,46} Posner argues that each day is an opportunity for students to become better leaders.³⁶

Core Tenets for Leadership Instruction

To complement the 6 guiding principles propelling faculty members and administrators to action and realizing the implications in curricula, the Delphi panel yielded 6 core tenets that broadly identify what students should know. The term *tenet* was selected to best represent the views and opinions which coalesced around, “What do students need to understand?” Unless faculty members and students appreciate the basis for the core tenets which guide leadership development, the purpose and framework for the education may be inconsequential. Students may not be motivated to fully explore and engage in leadership courses and experiences unless they know these tenets. Faculty members may be disengaged by students who are apathetic to their content. The negative implications to programmatic outcomes in the absence of the tenets may foster the appearance of administration not using resources effectively.

Guiding Principle 7: Anyone has the potential to lead, regardless of background, position, or title. AHSP’s statement on leadership as a professional obligation clearly expects that all pharmacists are leaders, stating, “Frontline pharmacists must exhibit themselves as leaders each time they step into the workplace.”⁶ Further, this report describes pharmacists’ efforts to optimize medication outcomes through effectively influencing the behavior of health care professionals as leadership. In addition, the 2007-2008 and 2008-2009 Argus Commissions highlighted the need to engage in non-positional leadership to positively impact health care.^{5,47} Popular texts have also outlined the activities of leadership that do not require a formal position or title for their completion.⁴⁸

Guiding Principle 8: Leadership is a choice. The oath pharmacists use as a professional ethos infers the need to participate in leadership activities to improve the care of patients.² However, on a daily basis and in any given situation, it is the individual who decides to make the difference.⁴⁹ In addition, individual pharmacists must decide how to make this difference. There are many styles, processes, and actions that can be used in leadership. Assuming that individuals will adopt and use many different styles of leadership, an individual’s style is a choice built on character, values, and principles. This choice links

closely to an individual’s moral reasoning and citizenship behaviors. Graham proposed theoretical links between styles of leadership behavior, moral reasoning, and organizational citizenship behavior.⁵⁰ In the pharmacy literature, Brown supports the concept of effective leadership based on achieving competence, connections to others and excellence in character.⁵¹

Guiding Principle 9: Leadership is principle-based and rooted in the common good. The common good is described in the Social Change Model (SCM) of Leadership Development.⁵² Rooted in a nonhierarchical leadership concept, the Social Change Model aligns individual values with community values (citizenship) and group values, suggesting that collaboration, common purpose, and civility yield change. The model assumes that leadership seeks to influence positive social change, and therefore change (a better world or a better society) is at the center of individual, group, and community values. Student pharmacists are interested in a variety of causes and issues, from health disparities to legislative advocacy for improved laws and health care. When united around a cause, students will not only be more motivated toward a shared purpose, but also will experience leadership and “do leadership.”³⁶

Guiding Principle 10: Leadership involves relationships with people. Success in organizations and initiatives in this networked world depends on relationships.⁴⁹ To complement the literature on leadership, Kelley articulates the roles and qualities of followers and the reciprocal nature of leaders and followers.⁵³ His notion of “good leaders know how to follow – and they set an example for others” is aligned with Kouzes and Posner’s Model the Way leadership practice.⁵⁴ Delphi participants affirmed the reciprocal and balanced relationship between leadership and followership. By cultivating relationships, leaders may in fact become more effective as the team is more important than the individual. Komives described leadership as a “relational process of people working together to accomplish change or to make a difference that will benefit the common good.”⁵⁵

Guiding Principle 11: There is no single right way to lead. Multiple styles of leadership, with varying philosophies and processes, have been articulated in the literature. Autocratic, transactional, participative, transformational, and servant leadership are some of the contrasting styles that have been described.⁵⁰ Hersey and Blanchard describe a situational leadership model based on the idea that there is no one best style of leadership or way to influence people. To be effective, leaders must balance task and relationship behavior with the readiness level of followers.⁵⁶

Guiding Principle 12: Leadership and management are distinct activities. Pharmacy literature has affirmed that leadership and management are different and that

“hierarchy does not confer leadership, nor does leadership confer hierarchy.”⁵⁶ Blumenthal has described the distinction between leadership and management as “rarely clear cut,” with practitioners often moving quickly between leadership and management tasks.⁵⁷ A good leader needs to manage or work with others who manage. At times too much emphasis is placed on management tasks and activities without effective leadership.⁵⁸ Colleges and schools of pharmacy are expected to develop managers and leaders who can navigate managerial processes and activate others.⁸

DISCUSSION

With so many varying leadership definitions, topics, and curricular models, a wide variety of leadership programming is possible for pharmacy curricula. Combining this with a lack of a previous framework for leadership education in pharmacy and the likelihood of faculty cohorts with different leadership experiences moving initiatives forward at individual colleges and schools, progress in producing significant and consistent student leadership development outcomes could be difficult. With this complex milieu of unique factors, simplicity is needed. These basic guiding principles of leadership instruction are foundational to unify and guide efforts that result in the most effective leadership development possible in colleges and schools and across the profession of pharmacy.

Implementing leadership programming for *all* pharmacy students seems daunting. However, pharmacy educators are called to do no less. The call to implement leadership education for all may be the academy’s most significant leadership challenge. Fulfilling this call may involve connecting with, recognizing, and supporting extracurricular leadership development opportunities in new ways. It may also entail expanding elective programming to more students, or threading and enhancing previously concentrated programming into more parts of the curriculum. These potential changes raise many concerns, including persuading faculty members and curriculum committees that this expansion is necessary, preparing more instructors to lend their talents toward this programming, and convincing all students that this is important and part of being a pharmacist. Consistent and constant communication of guiding principles can help address these concerns.

As Covey stated, we should begin our endeavors with the end in mind.⁵⁹ The guiding principles help us do this. With already intense curricula and the resources it takes to implement new student programming, administrators and students may question why this is being done. Administrators may be skeptical about additional class time and the faculty workload needs for this programming. Students

with different existing perceptions of leadership may question the need to spend time on leadership activities when other rigorous classwork requires their attention. Guiding principles 1 (leadership is important for all students to develop) and 2 (leadership can be learned) can provide the talking points for addressing these issues.

With so many different curricular designs used in pharmacy education programs, it may be a struggle to “find time and space.” Even when time and space can be found, the questions of what to do, when, how, and with what instructors will challenge the collective thinking and resolve of pharmacy educators. Respecting the desire and need for customization and innovation in individual pharmacy programs, the Fundamental Precepts (ie, Guiding principles 3 through 6) give direction on approaching these issues with faculty members and curriculum committees.

Students, faculty members, administration, and the practice community should be aligned when it comes to the basic core tenets that leadership instruction aims to instill. Without buy-in to these tenets, pharmacy graduates, as a whole, may not consistently step up to the expectations of the pharmacist’s oath or the obligations communicated by the practice community. Tenet buy-in is not intended to stifle curricular innovation, but instead gives pharmacy educators a firm basis on which innovation can build. The profession as a whole and the cultures within colleges and schools of pharmacy can use guiding principles 7 through 12 to say with 1 voice, “this is what we believe about leadership in pharmacy.”

While we believe the use of the guiding principles is inherent, this study is not without limitation and presents further questions for the academy’s examination. Although this study represents consensus from 26 leadership instructors and resulted in guiding principles that are well aligned with contemporary leadership development thinking, it focused on responses from pharmacy leadership instructors. Additional research soliciting the input of the pharmacy practice and student communities may be helpful to confirm and validate these findings.

In the future, research involving administrators, faculty members, pharmacists, and student pharmacists would be valuable in understanding the difficulties associated with using these guiding principles in pharmacy practice. Exploring faculty concerns, curricular support for the principles, and the degree to which students affirm these principles would be valuable as a baseline prior to further student leadership development programming implementation. In addition, examination of methods for taking the next steps and developing an educational and organizational culture that values and consistently exhibits these guiding principles will be needed.

CONCLUSIONS

Guiding principles for student leadership development were generated from consensus among a panel of pharmacy leadership faculty members. These guiding principles help to address fundamental questions such as: Why are pharmacy educators investing in student leadership development? What commitment are pharmacy educators making when they agree to invest in student leadership development? What do students need to understand? The guiding principles align well with contemporary leadership development thinking. As colleges and schools seek to implement and/or refine leadership instruction that enables graduates to influence an organized group toward accomplishing its goals, the guiding principles derived from this work can help frame, direct, and support student leadership development initiatives. The principles are supported by common contemporary leadership development literature that can be used to further understanding and discussion related to curricular implementation.

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Appendix 1. Descriptions of Guiding Principles for Student Leadership Development in Pharmacy

Initial responses from Delphi panelists were used to create the guiding principles, which were rated for consensus in subsequent rounds of the process. In addition, direct responses from the panelists were developed by the authors into the following descriptive narratives to further elaborate upon the guiding principles.

Motivation for Teaching and Learning (Why are we investing in leadership development?)

Guiding Principle 1: Leadership is important for all student pharmacists to develop. (87% Agreement)

Panelists articulated their beliefs that leadership is a characteristic of a professional and 1 person can make a difference. However, this group recognized there are different types of professional leadership. These types range from an appointed title or elected office position with defined leadership responsibilities, to leadership on a daily basis at a practice site from all pharmacists aimed at the common good of patients. Students must be inspired to believe that leadership is needed across the spectrum of career and personal responsibilities. Supporting this initiative, educators at colleges and schools of pharmacy should have an overarching goal related to teaching leadership that provides all student pharmacists the opportunity to develop leadership skills.

Guiding Principle 2: Leadership can be learned. (100% Agreement)

Panelists in the study commented that there are innate characteristics that make some leadership opportunities more natural for some students. However, panelists stated that leadership is something that can be developed when the right environment, encouragement, training, motivation and mentoring are provided. The group suggested that training should include an opportunity to observe the

elements of leadership, basic principles of interacting with people and building relationships, and an individual approach that recognizes the student's abilities, traits, and desire to lead. This approach will further spark the inner drive to engage in leadership. The panelists advocated for faculty members and students to foster the idea that a way to increase leadership effectiveness is to enhance abilities through education and experience. Utilizing this principle, educators at colleges and schools of pharmacy should focus on the elements needed for students to learn leadership and clearly articulate to students and faculty members that leadership can be learned.

Fundamental Precepts (What commitment are we making when we agree to invest in student leadership development?)

Guiding Principle 3: Student leadership development must focus on student self-development. (96% Agreement)

Leadership development must focus beyond the tasks at hand to foster self-development. Panelists stated that individuals must know where they are going before they can lead others. Leadership development requires honest, open self-examination, which may be a difficult or painful process for students. Panelists suggested that it should be acknowledged that people seek leadership positions for a variety of personal reasons and benefits, including personal development, networking, improving the profession, preparing for postgraduate training or personal gratification. Learning activities related to student self-development may include striving for self-awareness by reflecting on one's strengths, weaknesses, and/or personality traits. Self-development activities should be a foundational component of leadership development programs in colleges and schools of pharmacy.

Guiding Principle 4: Leadership development should take place in a wide variety of settings including didactic curriculum, experiential curriculum, and extracurricular involvement. (96% Agreement)

Panelists described that leadership development is an accumulation of experiences over time which prepares an individual for the next experience. Therefore, leaders must constantly develop themselves. Consistent with principles of effective learning, regardless of topic, a wide variety of teaching moments, settings and activities should be utilized to foster accumulation of experiences. Student leadership development often occurs through involvement of students in student government and professional organizations. Panelists reported that it is important for students to have access to leadership development programs and opportunities for immersion in positional leadership. Schools should consider leadership development programs beginning early in the curriculum and should seek out experiential opportunities where students are exposed to leading and managing others.

Guiding Principle 5: Leadership development requires many "teachers" from whom students can learn. (86% Agreement)

In addition to a variety of settings, many "teachers" were suggested as a requirement for leadership development. Panelists suggested that students should be introduced to leaders in pharmacy early and often. In addition, students may also benefit from discussing examples of both good and bad leadership. Since leadership development includes many personal experiences and focusing on self-development, it was suggested that mentorship from leaders within the profession, including faculty members, be explored. While offering several sources enhances student learning, one solid mentor may make a big difference for students. Colleges and schools of pharmacy should seek a wide variety of support and participants in teaching leadership.

Guiding Principle 6: A person's leadership development is continuous. (100% Agreement)

Consistent with pharmacy education's goal of developing self-directed learners and fostering continuous professional development, students and faculty members should realize that a person's leadership development doesn't end upon the conclusion of a class or at graduation. Students should enter leadership development with a desire to be teachable and expect to develop further after graduation. Colleges and schools of pharmacy should include programming across the student's career in the curriculum to support this idea. Educational strategies should include frequent reflection and development planning to foster these habits of the mind.

Core Tenets (What do students need to understand?)

Guiding Principle 7: Anyone has the potential to lead regardless of background, position or title. (95% Agreement)

Tying closely to the guiding principle of "leadership can be learned," panelists recognized a need to motivate students regardless of their current leadership aspirations or previous leadership background. Panelists reported that one of the most important aspects of leadership is understanding potential, that of others and of oneself. Student thinking should be shaped to expand beyond commonly perceived views of leaders needing a position or title to recognize their own potential. Based on personal experiences or perceptions, learners may not realize that they can be leaders. Educators, preceptors, and mentors need to foster environments that challenge thinking and push students into areas outside their comfort zone. Colleges and schools of pharmacy should help students realize their potential through leadership development programs that help every student pharmacist develop the core skills needed for leadership in the profession.

Guiding Principle 8: Leadership is a choice. (87% Agreement)

With potential realized, leaders will commonly have a desire and make a conscious choice to lead. Yet, there are times when pharmacists are in situations where they are bound by professional values and ethics to lead. Panelists also described that leaders, regardless of the situation, have the power to decide how they will lead and to act on values and principles that serve the best interests

of others. To best prepare for these instances, students should know they not only have the opportunity to lead, but also the capacity for leadership. Students should recognize and faculty members should support leadership as a professional commitment bound by the ethics of the profession. Furthermore, self-reflection should be fostered to help students evaluate and recognize the impact of their choices and actions based on professional values and principles.

Guiding Principle 9: Leadership is principle-based and rooted in the common good. (96% Agreement)

Panelists commented on the personal and professional benefits students may experience by engaging in leadership. Regardless of the benefits an individual may experience, the group was adamant that students must understand that leadership is based on principles and rooted in the common good of society. Principles such as integrity, honesty and trust must be pillars of the leadership development culture and messages. Holding consistent with the standards of health care, leadership should be practiced in accordance with high ethical standards. Along with consistent messages and reminders about these standards, colleges and schools of pharmacy should incorporate learning activities that allow students to identify and address issues pertaining to the common good.

Guiding Principle 10: Leadership involves relationships with people. (100% Agreement)

While self-development is an important aspect of leadership development, programs should also foster student abilities to relate with other people. Panelists stated that, in order to be an effective leader, initiating, cultivating, and navigating relationships is important. Students should realize the reciprocal nature of these relationships and pay attention to their potential roles as both a leader and follower within the same or different teams of people. In roles as a leader, when difficult decisions have to be made, respect for relationships with people should be considered. Colleges and schools of pharmacy should develop leadership programming that identifies the importance of relationships, provides strategies to foster relationships and gives students practice in working with groups of people.

Guiding Principle 11: There is no single right way to lead. (87% Agreement)

Multiple leadership theories, styles, and practices have been proposed. Exposure to multiple styles and the people and situations that may utilize them is important to leadership programming. Panelists stated that how pharmacists lead should be individualized based on who they are leading, the specifics of the situation, and their capabilities. A student's personal style of leadership should be discovered and applied. Programming that integrates a multi-faceted approach to leadership should be considered to enhance growth and the leadership outcomes of graduates.

Guiding Principle 12: Leadership and management are distinct activities. (87% Agreement)

Panelists identified the close connection between leadership and management in society. With systems and practice management being a major focus of curricular outcomes and commonly held perceptions of having to hold a management position to be a leader, programming must stress the distinction between these activities. While the practices coexist in many situations, there are times when a situation requires a different emphasis on each. At times, too much emphasis can be placed on budgeting, workflow, and performance and not enough emphasis on visioning, motivation, and direction. In practice a good leader needs to manage, or work with others who manage, to be successful. However, management is not a prerequisite to begin engaging in leadership. Colleges and schools of pharmacy should work to clarify distinctions between leadership and management and identify both as important and coexisting to varying degrees across multiple practice situations.