RESEARCH ARTICLES

The Structured Interview and Interviewer Training in the Admissions Process

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Submitted October 16, 2006; accepted March 11, 2007; published October 15, 2007.

Objectives. To determine the extent to which the structured interview is used in the PharmD admissions process in US colleges and schools of pharmacy, and the prevalence and content of interviewer training.

Methods. A survey instrument consisting of 7 questions regarding interviews and interviewer training was sent to 92 colleges and schools of pharmacy in the United States that were accredited or seeking accreditation.

Results. Sixty survey instruments (65% response rate) were returned. The majority of the schools that responded (80%) used interviews as part of the PharmD admissions process. Of the schools that used an interview as part of the admissions process, 86% provided some type of interviewer training and 13% used a set of predefined questions in admissions interviews.

Conclusions. Most colleges and schools of pharmacy use some components of the structured interview in the PharmD admissions process; however, training for interviewers varies widely among colleges and schools of pharmacy.

Keywords: structured interview, interview, interviewer training, admissions

INTRODUCTION

Although Pharmacy College Admissions Test (PCAT) scores and undergraduate grade point averages predict academic success in pharmacy school,\(^1\,^2\) nontraditional or noncognitive variables, such as oral communication skills, maturity, integrity, compassion, and leadership are essential traits for good professional practice. These can only be assessed by interviewing potential students.\(^3\,^4\) In the interview setting, however, assessment of nontraditional factors is highly subjective. Therefore, interviewer training is required to improve consistency across interviewers. This need is recognized by the new accreditation standards for the doctor of pharmacy degree (PharmD), which require that admission interviewers receive training in order to promote inter-rater reliability and standardization of the interview process.\(^5\)

This requirement is supported by research in nonacademic settings, which suggests that interviewer training improves the reliability of interviews, decreases bias in the rating of applicants, and enhances overall interviewer performance.\(^6\,^8\) For example, Chapman and Zweig surveyed 812 applicants and 592 interviewers from more than 502 organizations and concluded that interviewers who had received training were more standardized and formalized in their evaluation of applicants.\(^7\) Further, the limited research focusing on the selection of students for health professional programs also suggests that reliability and validity can be improved through interviewer training.\(^9\,^12\)

The structure and intensity of interviewer training is not prescribed in the new accreditation standards. However, the literature provides some guidance. For example, Schuh suggests that a good interviewer training program should include instruction, coaching, and supervised practice.\(^13\) Meanwhile, research in medical schools suggests that it is beneficial for faculty interviewers to receive training on an annual basis to assure standardization,\(^12\) and Edwards and colleagues stress the importance of providing training as new members are added to an admissions committee.\(^9\)

Although not required by the new accreditation standards, greater standardization can also be achieved through the use of structured (rather than unstructured) interviews.\(^9\) Structured interviews usually include: (1) a set of standardized questions asked of all applicants; (2) a standardized scoring system, with guidelines for rating applicant responses to each question; (3) a panel of 2 or
more interviewers; and (4) interviewer training. Optimally, interviewers are given sample answers corresponding to each level in the scoring system. Using a panel of interviewers enables more than 1 person to rate applicant responses to the same questions. Typically, interviewers are not allowed to discuss applicants before recording their ratings.9,14

Research supporting the superiority of structured versus unstructured interviews comes primarily from business settings, where structured interviews are used more frequently than any other type of interview.15 For example, in a comprehensive analysis of employment interviews by McDaniel and colleagues, structured interviews proved to be more valid than unstructured interviews in predicting job performance criteria.16 These findings were supported by results of a meta-analysis conducted by Conway and colleagues. They observed a two-fold difference in inter-rater reliability favoring structured versus unstructured interviews.6

Despite concern about reliability and validity, health professional schools tend to use unstructured or semi-structured interviews as part of admissions procedures. In the unstructured interview, neither the questions asked of applicants nor the scoring system used to rate respondent answers is standardized, increasing the possibility that interviewer ratings will be influenced by bias.14,17 Examples of bias include rating tendencies such as leniency and severity, whereby some interviewers tend to use the upper, more positive portion of the rating scale, while other interviewers tend to use the lower, more negative portion of the scale. Consequently, ratings made by different interviewers may not be comparable. Interviewers may also tend to unconsciously rate applicants who are similar to themselves in terms of demographics or professional interests more favorably, introducing another source of systematic bias.9

There is little information in the pharmacy literature regarding the extent to which schools of pharmacy in the United States currently use applicant interviews as part of the PharmD admissions process and, among those schools that use applicant interviews, the nature and extent of training varies. Latif has discussed the development of the structured interview at the Bernard J Dunn School of Pharmacy at Shenandoah University3 and others have recognized that the structured interview format facilitates the identification of students who have the qualities needed for professional practice.10,17,18 However, little is known about the extent to which US schools of pharmacy currently use structured versus unstructured interviews as part of the PharmD admissions process. Thus, the current study was undertaken to obtain this information.

METHODS

Data were collected via a mailed survey sent to the 92 schools of pharmacy in the United States that were accredited or seeking accreditation as of August 2006. The survey instrument consisted of 7 questions asking about the school’s procedures concerning PharmD admissions interviews. The survey instrument was mailed to 1 faculty member at each school of pharmacy who was identified from an AACP mailing list as being affiliated with the admissions process. If an admissions contact was not listed for a particular school of pharmacy or if it was unclear who to contact, a call was made to the school to ask the name of the most appropriate person to receive the survey instrument.

RESULTS

Sixty surveys were returned (65% response rate). The majority of the schools that responded (80%) used interviews as a part of the PharmD admissions process. Two of the schools that did not use interviews were 0-6 programs in which students who successfully completed their pre-pharmacy coursework were guaranteed admission into pharmacy school. Two schools reported plans to implement interviews as a part of the admissions process in January 2007.

The majority of the schools using interviews reported that they used some, but not all, components of a structured interview (Table 1). Most schools reported using a well-defined scoring system for evaluating applicant interviews (92%), using a panel of interviewers (86%) and providing interviewer training (86%). Fewer schools reported having explicitly defined goals for admissions (5%) or using a set of predefined questions during interviews (13%).

Although most of the schools reported that they provided interviewer training, comments that respondents included on the survey instrument suggested that this training varied immensely across schools. Most of the training was done face-to-face with the interviewers, but ranged from a review of the evaluation form to having a professional trainer not affiliated with the school involved. The majority of the training reported was conducted by a person affiliated with the admissions committee at the school of pharmacy and involved discussing appropriate questions to ask applicants, tips on rating applicant responses, and use of the evaluation form.

All but 1 school reported that faculty members were used to interview PharmD applicants. In most schools, deans and assistant or associate deans as well as PharmD students were used to interview applicants; whereas, pharmacist practitioners not affiliated with the school were used by less than one third of the schools. Alumni,
DISCUSSION

Most colleges and schools of pharmacy conduct interviews as part of the admissions process and use some components of the structured interview. However, most colleges and schools are not using strictly structured interviews in the process.

Interviewer training was reported by 86% of the schools, but the nature and extent of this training varied greatly. Some schools reviewed the scoring form used in the interview, while others had a trainer not affiliated with the school perform training. Interviewer training is important because individuals do not inherently know how to effectively interview applicants in order to elicit the most information in a consistent and fair manner. Instruction, coaching, and supervised practice are recommended as part of an interviewer training program.13

Using predefined questions is a component of the structured interview and only 13% of colleges and schools reported using a set of predefined questions. Asking similar questions of all applicants is important to ensure fairness and minimize bias (ie, some applicants may be asked easier questions than others, depending on the interviewer). If predefined questions are not used, how can schools of pharmacy ensure that the interview is achieving the desired outcomes?

One limitation of the study was the lack of definition of terms used in the survey instrument. Terms such as “well-defined scoring system” and “interviewer training” should have been defined so that faculty members completing the survey instrument would have had more information and may have answered the questions more accurately. Because of the confidential manner of the interview, we did not ask faculty members to submit their interview forms. However, doing so may have helped determine whether the scoring system was well-defined, goals of admission were explicit, and standardized questions were used.

The interview is the only opportunity to evaluate nontraditional or noncognitive variables. It can be argued that these variables are more important than grade point average or Pharmacy College Admissions Test (PCAT) score. However, the interview takes a tremendous amount of faculty and staff time. Therefore, efforts to optimize the interview and to elicit the information that colleges and schools need from applicants are vital. If colleges and schools of pharmacy are not using the structured interview, they may not be getting as much information as possible.

CONCLUSIONS

Admissions interviews are now an accreditation requirement for colleges and schools of pharmacy. The majority of schools are conducting interviews but not using strictly structured interviews. Interviewer training is provided, but the definition of training varies immensely and often does not consist of instruction, coaching, and supervised practice as recommended. Colleges and schools of pharmacy need more guidance on the use of structured interviews and interviewer training. In addition, data on
the use of interviews and interviewer training in improving admissions outcomes are needed.

ACKNOWLEDGEMENTS
The authors would like to acknowledge Tina Ayers, PharmD, and K.T. Vaughan, MSLS, for their assistance with the preparation of this manuscript.

REFERENCES