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Currents in Pharmacy Teaching and Learning 8 (2016) 353–358

Currents
in Pharmacy
Teaching
& Learning

<http://www.pharmacyteaching.com>

Research Article

Preceptor perceptions of fourth year student pharmacists' abilities regarding patient counseling on therapeutic lifestyle changes

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Abstract

Objective: Advanced pharmacy practice experiences (APPEs) provide an opportunity for students to showcase health and wellness knowledge and skills attained during didactic education. The primary objective of this study was to assess preceptor perceptions of how well pharmacy year four (PY4) students are prepared to provide guideline-based and patient-specific therapeutic lifestyle change (TLC) counseling at onset of an APPE rotation. A secondary objective included assessment of differences in counseling abilities if the preceptor considered the student normal weight versus overweight or obese, or if they were a known smoker.

Methods: A questionnaire containing Likert questions about perceptions regarding TLC counseling was distributed electronically in October 2014 to 708 PY4 preceptors from two pharmacy schools. Only preceptors who routinely provided TLC counseling were included in data analysis that were done using descriptive statistics. The project was approved by both universities' institutional review boards.

Results: The survey was completed by 165 PY4 preceptors (response rate = 23.3%), and 67 met inclusion criteria. Regarding nutrition counseling, a greater percentage of preceptors agreed that students more adequately provided counseling per guidelines (79.1%) versus individual patient needs (62.6%). Preceptors perceived students of normal weight were more likely to provide adequate lifestyle-modification counseling to overweight/obese patients (81%) compared to students that were overweight/obese themselves (69%). Students of normal weight were perceived to be more likely to adequately counsel normal weight patients on lifestyle modifications (81%) compared to students that were overweight/obese (64%). Students who smoked were perceived to adequately counsel about not smoking, though, to a lesser degree than students who were non-smokers.

Implications: While students are perceived as adequately equipped to provide guideline-based recommendations, there is room for improvement in providing patient-specific counseling. Additionally, it is perceived that student health status related to weight impacts TLC counseling.

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Keywords: Therapeutic lifestyle change (TLC) counseling; Overweight/obesity; Tobacco use; Patient counseling; Advanced pharmacy practice experience (APPE); Precepting

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Introduction

A growing problem, the prevalence of obesity now exceeds 30% in most age and gender groups in the United

States and in 2000 poor diet and physical inactivity was the second leading cause of death.^{1,2} Healthy People 2020, a health initiative established by the Department of Health and Human Services, has outlined goals and objectives pertinent to public health in the United States to address obesity and related diseases.³ The four central goals can be summarized as follows: to attain high quality of life, improve health of all groups, create environments that endorse good health, and promote healthy behaviors throughout life. Achievement of these goals is tracked using approximately 1200 objectives divided into relevant topics.³ Implementation of policies and procedures by health care providers to address pertinent objectives is described within the Nutrition and Weight Status (NWS) topic. Of the objectives, NWS-5, NWS-6, and NWS-7 outline goals to increase the proportions of primary care physicians that assess body mass index (BMI), physician offices that include counseling or education on nutrition, physician office visits for patients with diagnosed cardiovascular disease (CVD), diabetes mellitus (DM) or dyslipidemia, and worksites with weight management services. The National Profile of Local Health Departments (NHPLD) and the National Association of County and City Health Officials found that 82.6% of community-based organizations including local health departments, tribal health services, non-governmental organizations, and state agencies provided population-based primary prevention in chronic disease programs.⁴ However, other studies indicate patients having a different perception of the availability and utility of such services. Current research shows only 39% of office visits adequately addressed topics such as weight, diet, and other therapeutic lifestyle change (TLC) care, indicating a need for improved services.^{4–7}

The U.S. Preventative Services Task Force (USPSTF) also advocates that implementation of services and programs for subsequent achievement of the Healthy People 2020 objectives be carried out via a collaborative health care team including primary care clinicians, nutritionists, dietitians, and other specialists.⁸ Often referred to as the most accessible members of a health care team, pharmacists are well positioned to assume new responsibilities that address the outcomes defined in Healthy People 2020. The USPSTF recommends that proper training of these skills to be included in the curricula of academic institutions and student clinical training.^{8,9}

A new or expanded professional responsibility for pharmacists warrants additional education and assessment in pharmacy curricula to ensure student pharmacists are prepared to provide appropriate and specific counseling upon graduation. In any pharmacy curriculum, it is likely that TLC counseling is discussed at least briefly in relation to conditions such as CVD and DM; however, it is not as easy to hypothesize to what degree preventative measures of such conditions are addressed. Limited research has been completed in this area to date. A survey of 50 schools of pharmacy in 2007 regarding lifestyle courses found only

five programs had a required course and seven programs had at least one elective course demonstrating that lifestyle management skills may be insufficiently addressed in overall current pharmacy curricula.¹⁰ A small survey completed by pharmacy students at Creighton University revealed that all (100%) believed lifestyle-modification counseling should be part of the overall care plan for patients, however, only 54% felt pharmacists are qualified to counsel patients on lifestyle modifications.¹¹ In addition, all pharmacy students surveyed wanted a greater curricular focus on lifestyle-modification training.¹¹

The 2013 Education Outcomes from the Center for the Advancement of Pharmacy Education (CAPE) note that, at completion of a Doctor of Pharmacy program, a student should be able to design prevention, intervention, and educational strategies for individuals and communities to manage chronic diseases and improve health and wellness (Domain 2.3).¹² Achievement of this domain can be accomplished by various methodologies within pharmacy curricula such as lectures, laboratory activities, and clinical assessments during the first, second, and third year of pharmacy. Demonstration and assessment of a student's ability to provide effective TLC counseling is most likely to occur in Advanced Pharmacy Practice Experience (APPE) courses completed during the fourth year of pharmacy school (PY4). During an APPE, the preceptor assumes responsibility for evaluation of appropriate lifestyle counseling ability by the PY4 student. This enables the preceptor to assess students' abilities to incorporate guideline-based education, as well as, specific and tailored counseling based on a patient's individual needs.

The purpose of this survey research was to investigate if the curriculums of two schools of pharmacy prepare students to provide adequate TLC counseling. There is no current report in the literature evaluating APPE preceptors' perceptions of the ability of PY4 students to provide appropriate TLC counseling. There is published research in other health care professions indicating that health status of a health care provider can have implications on lifestyle counseling.^{13–15} Due to this indication, secondary objectives were added to determine if this was perceived to occur in student pharmacists as well.

Methods

A questionnaire was developed to assess preceptor perceptions of PY4 students' ability to provide TLC counseling in APPE courses. The questionnaire was not validated. The primary objective was to assess how well PY4 students are prepared to provide guideline-based and patient-specific TLC counseling, with focus on diet, physical activity, and smoking cessation, at the beginning of an APPE rotation, prior to exposure to the rotation and any critique or input by the preceptor. The secondary objectives were to assess differences in counseling abilities if the student was considered by the preceptor to be normal

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