



Opinion

Development of an international advanced pharmacy practice experience (APPE) and lessons learned after implementation

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Abstract

The development of international advanced pharmacy practice experience (APPE) rotations can add a unique feature to the experiential programs of U.S. schools and colleges of pharmacy. In 2008, the West Virginia University School of Pharmacy (WVUSOP) developed an international APPE rotation through a collaborative agreement with Nelson Mandela Metropolitan University (NMMU) in Port Elizabeth, South Africa. The goals of the rotation were to broaden the students' educational and life experiences, promote the development of communication and patient-care skills, and enhance cultural competence.

This article reviews the first three years of the experience with the program and describes five guiding principles for developing a successful international rotation. Reflections from NMMU faculty, WVU students, pharmacy practice residents, and WVUSOP faculty are included. With appropriate planning and ongoing oversight, an elective international APPE can provide a unique and valuable dimension to the professional Doctor of Pharmacy curriculum. Additionally, students who completed the APPE believed that the experience improved both direct patient-care skills and cultural competence.

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Introduction

Pharmacy education is ever changing with new philosophies, theories, and teaching methods on how to best educate pharmacy students. The requirement for pharmacy students to complete advanced pharmacy practice experience (APPE) rotations provides the opportunity to develop unique patient-care experiences.^{1–3} Experiential rotations are necessary to provide real-world situations where students can develop their direct patient skills in various

settings.^{4,5} However, many domestic rotations immerse students in settings that are culturally similar to their own, which is unlikely to enhance cultural understanding and sensitivity.

The development of cultural competence is included in the Accreditation Council for Pharmacy Education (ACPE) standards for the professional program in pharmacy, leading to the Doctor of Pharmacy degree.⁶ In addition, a statement from the Joint Commission of Pharmacy Practitioners (JCPP) calls for cultural awareness and the ability to factor culture into decision-making processes.⁷ The JCPP also states that pharmacy education should prepare students to provide patient-centered and population-based care, which would aid in the development of culturally competent graduates.⁷ Cultural competence can be defined in many

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ways and has been discussed widely in the pharmacy literature.^{1,2,8–10} There are numerous publications on developing courses on cultural competence and achieving such competence as a health professional.^{11–13} However, a 2007 survey found that only 18% of colleges of pharmacy incorporated cultural competence into their experiential education programs.⁸

While the opportunity to learn to practice in a culturally sensitive manner is one valuable aspect of international APPEs, other reasons for their development exist. Communication skills are enhanced through gathering information from patients who may not speak the same language as the student. Additionally, patient-care skills can be enhanced by encountering disease states not commonly seen in the U.S. through a focus on drug-information retrieval and use of appropriate communication skills to gather needed patient data. In fact, these diseases can become an educational focus of the international experience and allow students to gain confidence in managing illnesses that may not be seen very often when they become practicing pharmacists.

The ACPE guidelines state that students should have the opportunity to, “provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health care team...taking into account relevant legal, ethical, social, cultural, economic, and professional issues.”⁶ Furthermore, the standards state that elective APPEs should complement the required experiences and provide innovative opportunities for students to mature professionally and in accordance with their individual interests.⁶ With this in mind, the West Virginia University School of Pharmacy (WVUSOP) developed an international APPE rotation in collaboration with Nelson Mandela Metropolitan University (NMMU) in Port Elizabeth, South Africa. The goal was to create a unique, exciting, and educational elective APPE opportunity that promotes the development of communication and patient-care skills and enhances cultural competence.

The intent of this article is to describe the processes used to develop a successful program, provide stakeholder reflections on the first three years’ experience with the program, and draw comparisons to other international rotations previously described in the literature.

Developing the international APPE

Due to the willingness of NMMU to host international collaborations and one author’s prior experience as a member of the 2007 International Scholar Laureate Program in South Africa, WVUSOP began developing an international APPE in 2008.^{3,14} Because WVUSOP required its international programs to be coordinated through a pharmacy school in the host country, an initial review of each school in the country was undertaken, evaluating aspects such as the relative safety of each potential city, the local health care institutions available for clinical experiences, the desirability of the travel opportunity for students, and

whether the school had previous experience hosting international students. Upon completion of this review, a WVUSOP faculty member sent an initial email message to NMMU to determine their interest in the proposed program. After both parties agreed that an APPE was feasible, the initial planning of the program commenced. WVUSOP’s requirements included (1) the ability for three to four U.S. students and/or pharmacy residents to complete the experience annually, (2) a four-week program centered in an acute care environment providing 40 hours per week of rotation activities, (3) the experience to be completed in August/September due to the need to fit within WVUSOP’s existing APPE rotation schedule and NMMU’s existing “hospital program,” (4) the inclusion of a main contact at NMMU so that the program could be planned efficiently by both institutions, and (5) permission for a WVUSOP faculty member to spend the first week each year in South Africa to provide support for the American students and facilitate activities with the South African faculty, students, and patients. These five requirements formed the foundation of the initial program and have continued for three academic years.

Guiding principles for an effective international rotation

During development of the international rotation, five guiding principles emerged that were essential to its success.

- (1) Identify a companion school of pharmacy (SOP) in the desired location that can meet the program objectives. This tenet contains three major requirements. First, the program must be based in a safe location within the foreign locale. We conducted a research to find a location that would provide an appropriate pharmacy experience without sacrificing safety. Second, the health care institutions partnered with the foreign SOP must have pharmacists involved in providing patient-centered care. Port Elizabeth offered experiences in Livingstone and Dora Nginza hospitals, which provided practice opportunities in both adult and pediatric populations. Third, the companion SOP must be able to assist with providing lodging for the students/residents in a safe area near the learning experience. In addition to these three requirements, NMMU had an international office that assisted with the many logistical aspects required for successful development of the experience.
- (2) Develop a relationship with a primary contact in the desired locale. Early in the development process, WVUSOP began working closely with one individual in South Africa who agreed to serve as the primary contact. This facilitated creation of the schedule of activities well in advance of the experience. This collaborative effort and mutual understanding of the overarching goals resulted in

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