



Research

Three-year assessment of advanced pharmacy practice experience student and faculty change requests at a college of pharmacy

Rex O. Brown, PharmD, FCCP, BCNSP^{*}, Christina A. Spivey, PhD,
Marie A. Chisholm-Burns, PharmD, MPH, MBA, FCCP, FASHP,
Debbie C. Byrd, PharmD, BCPS

University of Tennessee College of Pharmacy, Memphis, TN

Abstract

Objective: Experiential education is a critical component of the curriculum of all colleges of pharmacy. Thus, having access to quality and adequate numbers of Advanced Pharmacy Practice Experiences (APPEs) is essential. This study examines APPE change requests from preceptor faculty and students over a three-year period. Such requests are the primary reason to obtain an excess of APPEs. The objective was to determine whether class size influences the excess percentage needed.

Methods: Data were collected from student records regarding APPE change requests and granted requests for the graduating classes of 2011–2013 at the University of Tennessee College of Pharmacy. Percentages of change requests and granted requests were calculated. ANOVA was conducted to assess differences in change requests and granted requests over the study period.

Results: There were 660 APPE change requests in 2011, 331 in 2012, and 232 in 2013. The percentage of granted requests calculated from total APPEs was 29% in 2011, 15.8% in 2012, and 12.1% in 2013. The number of change requests and granted requests were significantly higher for the Class of 2011, which had 203 students, compared to 2012 and 2013 ($p < 0.05$), that had 183 and 147 students, respectively.

Conclusion: To conduct a viable experiential program, a public college of pharmacy should maintain a 12–20% excess in APPEs for class sizes of 140 or more. As class size increases to 200 or more, excess percentage of APPEs needed also increases considerably.

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Introduction and background

Advanced Pharmacy Practice Experiences (APPEs) comprise at least 25% of college of pharmacy curricula.¹ APPEs are completed in the last academic year of the pharmacy program and are a key part of the student pharmacists' education as it assesses their professional responsibility and

accountability in a real-life setting.² At a minimum, the goal of every experiential education program is to meet educational goals of the college and to realize some value added to the site through the presence of student pharmacists.^{2,3} The vast majority of APPEs occur in direct patient care settings and are often subject to change as preceptor faculty move to different areas within a pharmacy or move externally to other locations or organizations.⁴ Growth and maintenance of a successful experiential education program requires current affiliation agreements, a relevant preceptor manual, development of new APPE sites, and regular visits to the respective sites.⁵

^{*} Corresponding author: Rex O. Brown, PharmD, FCCP, BCNSP, University of Tennessee College of Pharmacy, 881 Madison Avenue, Room 227, Memphis, TN 38163.

E-mail: rbrown@uthsc.edu

Over the last few years, many colleges of pharmacy have increased their class size, and new colleges of pharmacy have opened.⁶ Brown⁶ reports that 7000 PharmD degrees were conferred in 2001, compared to 11,931 in 2011. In many locations, this increase invariably creates a strain on the provision of quality APPEs as more competition for sites occurs.^{7,8} At the same time, many of the preceptors at existing sites feel stretched with increasing job responsibilities and demands placed on them by the complex and ever-changing health care system. Preceptors surveyed reported that the preceptor-perceived quality of the APPE experience is related directly to the time they spend with the student pharmacist.⁹ In the same survey, 20% of preceptors felt they could not devote adequate time to provide a quality learning experience.⁹

A competitive market for quality APPE sites and complex pharmacy practice models mixed with career direction changes from student pharmacists creates a dynamic where APPE changes can be frequent. Kawahara et al.¹⁰ addressed APPE placement changes several years ago and found that a 15–20% excess in APPE availability was needed to meet the changes within their particular program. However, these data were collected before there was a marked increase in pharmacy class expansion and the opening of a number of new pharmacy schools. More recently, the Southeastern Pharmacy Experiential Education Consortium reported APPE site placement changes for 2008–2009 that widely ranged from 14% to 53% of all APPE assignments.¹¹ It was notable that these placement changes were approximately 20% for public schools and approximately 40% for private schools in their consortium.¹¹ Yet, this study was limited to one year and did not consider the possible impact of varying class size within an institution on the quantity of excess APPEs.

Rationale

Given the changes in the academic pharmacy environment over the past decade and the limitations of previous studies, additional research is needed regarding APPE changes and the excess in placements required to keep pace with such requests and sustain a college of pharmacy's experiential program. The purpose of this study was to assess faculty and student APPE placement changes at the University of Tennessee College of Pharmacy during a period of class size variation so as to project the percentage of excess APPEs needed to successfully manage an experiential education program.

Materials and methods

The study was conducted at the University of Tennessee College of Pharmacy. Faculty-generated and student-generated APPE change requests received by the college of pharmacy's office of experiential learning were reviewed for students in the graduating Classes of 2011, 2012, and

2013. As of 2013, the APPE program consists of 11 calendar-month experiences across the last 14 months of the curriculum. The 11 APPEs consisted of four required APPEs (advanced institutional, advanced community, ambulatory care, and an inpatient acute care). Two off months and one month of didactic electives complete the 14-month program. Previous classes, including the classes of 2011 and 2012, took ten calendar-month APPEs.

The quality of APPEs for our college is maintained by careful selection of sites and close monitoring of those who are actively involved in the experiential program. When there is a need for a specific APPE, a site is approached to determine if there is interest in participating in our educational program. This usually requires an initial site visit by a faculty member or staff person to discuss our requirements and expectations. If the potential APPE meets a need identified by the college and it is in a geographic location that can be accessed by a reasonable number of student pharmacists, the process continues. The potential preceptor faculty member completes the paperwork for an academic appointment with the Department of Clinical Pharmacy in the University of Tennessee College of Pharmacy, and an affiliation is developed between the college and respective site. When these steps are completed, a site visit is conducted that includes preceptor orientation and a review of the preceptors' handbook developed by the college. We invite the new faculty preceptor to all college events that interface with experiential learning such as preceptor development conferences and rotation day for third-year student pharmacists. Our college added 138 preceptor faculty during the three years preceding the years studied. Overall, 42 preceptor faculty were added in 2010, 58 in 2011, and 38 in 2012. This was done to meet the anticipated competition for APPE sites and provide us with an excess that would keep our experiential program viable.

Data were collected regarding change requests and granted requests through a review of student records for the graduating classes of 2011–2013. Change requests and granted requests that were made prior to the commencement of APPE assignments (i.e., during “swap week” in which students are allowed to request up to two APPE changes) were excluded from the study. Change requests and granted requests were separated into two major categories: student-initiated and faculty-initiated. The following were considered faculty-initiated requests: maternity leave, reassignment or promotion within the same pharmacy organization, change of employment; personal illness or injury, relocating to another city, computer upgrade processes that required additional faculty time, and contracts or affiliations not being completed or extended on time. All APPE assignments were done after faculty appointments were attained, so there were no faculty-initiated APPE changes due to failure to have a faculty appointment. APPE changes were considered student-initiated based on the following criteria: required academic or professional remediation; changes in career direction after the start of APPEs;

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