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Research

# Interprofessional global service learning: A pharmacy and nursing practice experience in Botswana

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## Abstract

**Objectives:** To develop, implement, and assess an interprofessional global service-learning experience in rural government-run clinics and a community hospital for pharmacy and nursing students.

**Design:** An interprofessional educational experience was developed for volunteer pharmacy students to collaborate with nursing students in an established study-abroad elective course. Students participated in interprofessional activities for 27 days in Kanye, Botswana, where they engaged in clinical practice in community clinics and hospital units for 15 days between June 18 and July 15.

**Assessment:** Five pharmacy students and 11 nursing students participated in the program. A qualitative survey assessed student perceptions of the interprofessional clinical experience while reflection papers assessed service learning.

**Conclusions:** Global service learning is a valuable opportunity to prepare collaborative teamwork among pharmacy and nursing students. In addition, partnerships with other health care programs' established educational experiences can facilitate pharmacy program expansion into global interprofessional practice experiences. Though validated assessments of global service learning impact on cultural competency and compassion were not performed here, preliminary evidence from reflective papers and student debriefing sessions suggest an interprofessional global service-learning experience develops both. More research is needed to measure the degree to which interprofessional global service learning can impact cultural competency and the expression of compassion.

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## Introduction

As health care institutions strive to develop and advance patient care, health professionals must work together to synchronize therapeutic regimens. Historically, physicians have been perceived as the health care professional bearing full responsibility for patient care and outcomes. In order to provide more effective and efficient patient care, the Institute

of Medicine (IOM) Health Professions Education Summit recommended that all health professionals be educated to operate as an interdisciplinary team.<sup>1</sup> The Accreditation Council for Pharmacy Education (ACPE) has embraced this recommendation, agreeing that pharmacists must be educated to deliver patient-centered care as members of an interprofessional team. Achieving this goal would require curricula that addresses evidence-based practice, health promotion, disease prevention, patient safety, cultural competence, health literacy, health care disparities, and interprofessional practice.<sup>2</sup>

The definition of interprofessional education (IPE) according to the World Health Organization (WHO) is

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“When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.”<sup>3</sup> Moreover, ten of the ACPE guidelines include an interprofessional education requirement. Of these requirements, seven were new guidelines in the 2011 revision. The ACPE appendices B, C, and D also mention interprofessionalism five times, three of which are new additions.<sup>2</sup>

As recommended by the ACPE guidelines, many pharmacy programs are taking steps to integrate (IPE) into their curricula.<sup>4–6</sup> IPE has been introduced in didactic education as well as in experiential education to improve patient outcomes. The ACPE guidelines suggest APPE rotations should be conducted in settings where “...continuity of care throughout the health care delivery system, including the availability and sharing of information regarding a patient’s condition, medications, and other therapies...” is emphasized.<sup>2</sup> Following these guidelines and yet stepping outside the customary boundaries, a number of universities have begun to take interprofessional education abroad. For example, the College of Pharmacy at North Dakota State University developed an Advanced Pharmacy Practice Experience (APPE) rotation in which students participate in a ten-day global mission trip working with other medical professionals including medical and nursing students. One of the goals of this program is to improve student cultural competency assessment scores, while facilitating student opportunities to provide hypertension and diabetes screening, medication, nutrition and health promotion counseling, in addition to participation in pharmacy operations in Guatemala.<sup>7</sup>

Introducing service learning into IPE adds another layer of complexity. The ACPE describes service learning as “a structured learning experience with clearly defined objectives that combines performing service in the community with preparation, reflection, and discussion.”<sup>2</sup> The Interprofessional Education Collaborative Expert Panel (IECEP) describes service learning as having several characteristics, stating “Service learning projects are frequently used as values-based educational opportunities to help students develop person and patient-centered knowledge and skills with a community/population-orientation around the health and health care needs of the at risk, vulnerable, and underserved.”<sup>3</sup> Whether or not a particular community is considered underserved may be relative. The educational experience reported here took place in the southern African country of Botswana, in Kanye, which is a small rural village approximately one hour from the capital. While Botswana provides universal access to health care, the health care services in Kanye remain under-resourced with respect to equipment, supplies, and staffing. Therefore, it is argued that Kanye represents an underserved community and thus this is a service-learning experience by both IECEP and ACPE definitions.

The Loma Linda University (LLU) School of Pharmacy and School of Nursing worked together to design and implement a global service-learning IPE program for pharmacy students in conjunction with an already established course for

nursing students. The entire experience included 27 days of IPE activities. Students trained and served in government-run clinics and a community hospital affiliated with a college of nursing in Kanye, Botswana, for 15 days. The five objectives specific to this global service-learning IPE experience were as follows: (1) to learn about and from different health care professionals within a collaborative team, (2) to develop personal and professional skills needed to meet health care needs of people in settings where there are limited resources, (3) to provide a cross-cultural experience in health care delivery, (4) to develop an appreciation for people with differing values, traditions, and health needs, and (5) to foster or reinforce a personal commitment to serve at home or abroad.

Pharmacy student participation was integrated into a program that the School of Nursing had been offering for the past eight years. This program involved a collaborative relationship between the LLU School of Nursing, the Kanye Seventh-day Adventist College of Nursing (KSDACON), the Kanye Seventh-day Adventist Hospital, and the neighboring government-run clinics. The School of Nursing at the LLU developed this program to provide senior baccalaureate nursing students with the opportunity to participate in an elective study-abroad, service-learning clinical rotation offered in the required Public Health Nursing course. This was designed prior to the American Association of Colleges of Nursing recommendation for cultural competence education.<sup>8</sup> During the program, nursing faculty observed nursing student instruction in clinic dispensaries could be enhanced with drug-information expertise. As a result, a pharmacy faculty member was approached for pharmacy student participation in an IPE experience.

One nursing professor and one pharmacy professor traveled with the students and served as preceptors for this experience. The nursing faculty member arranged clinical sites prior to arrival in Botswana. While in Botswana she coordinated and confirmed lodging, travel, and food accommodations. She also coordinated with the hospital, the KSDACON, and the Kanye SDA Church for opportunities for the Loma Linda team to observe surgeries, speak to the KSDACON students, offer children’s Bible school classes, and provide worship music. The School of Pharmacy professor established partnerships with the inpatient pharmacy, outpatient pharmacy, HIV medication adherence counseling center, and hospital units to facilitate pharmacy student participation. She also defined roles with physicians and nurses who provided additional student supervision and precepting. The pharmacy professor rotated between sites to precept students and also met with students daily to debrief clinical, IPE, and cross-cultural experiences.

## Design

### *Administrative, application, travel, cultural, and clinical preparation*

The memorandum of understanding (MOU) developed between the LLU and the KSDACON is reviewed yearly and

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