

Assessment of student pharmacists' perceptions on participating in clinical services in the community pharmacy setting

Rachel A. Maynard, PharmD^{a,*},
Megan E. Wagner, PharmD^b, Susan R. Winkler, PharmD, BCPS^c,
Jaime L. Montuoro, PharmD^b

^a SuperValu Pharmacies, Stratham, NH

^b SuperValu Pharmacies, Franklin Park, IL

^c Department of Pharmacy Practice, Midwestern University, Chicago College of Pharmacy, Downers Grove, IL

Abstract

Objectives: To assess perceptions of student pharmacists in their final year of pharmacy education on providing clinical services in the community pharmacy setting. Primary objectives evaluated students' perceived opportunities, importance, readiness, and barriers to providing clinical services.

Methods: An online survey was administered to students attending fully accredited pharmacy school in the United States.

Results: Nine-hundred sixty-seven students completed the survey (20.7% response). Students believe that opportunities exist to provide clinical services (87.2%), clinical services are important (95%), and they plan to provide clinical services after graduation. Lack of time, lack of support staff, and lack of privacy were identified barriers. Student readiness and interest were the greatest positive predictors for planning to provide clinical services.

Conclusion: Students' perceived readiness is critical for them to plan to provide clinical services in the future. Exposing students to clinical opportunities in pharmacy education and practice is essential to ensure expansion of clinical services in community pharmacy.

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Introduction

The role of the pharmacist has expanded in recent decades to incorporate and emphasize the importance of patient-centered care. The development of patient-centered care models, such as the Asheville Project, Project Im-

PACT, and the Diabetes Ten City Challenge have evaluated the ability of pharmacists to improve patient outcomes and reduce overall health care costs.^{1–4} In these novel practice models, pharmacist management of disease states, such as hypertension, hyperlipidemia, and diabetes yielded multiple benefits, including improved patient therapeutic outcomes, reduced overall health care costs, and enhanced patient satisfaction in pharmacy services and in their health care.^{1,2} The positive results from these studies and others have established the value of pharmacists within the medical community as well as to many third-party payers.^{3–5}

Despite the benefits of pharmacist-provided clinical services and the greater emphasis within the profession for patient-centered care, the widespread availability of clinical services for practicing community pharmacists remains lim-

The first author conducted this study as a community pharmacy practice resident with SuperValu Pharmacies and Midwestern University.

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* Reprint requests: Rachel A. Maynard, PharmD, SuperValu Pharmacies, 100 Shaw's Lane, Stratham, NH 03885.

E-mail address: rachel.maynard@supervalu.com.

ited. Results from the 2004 National Pharmacist Workforce Survey that evaluated community pharmacists and their work environments found that only 10–20% of community pharmacists reported at least one “pharmacist care service” at their practice site. A “pharmacist care service” was defined by the investigators as eight different cognitive services, including smoking cessation programs, health screenings, disease state management, and immunizations. In addition, 54.4% of the 273 community pharmacies surveyed did not offer any of these services.⁶ Therefore, there appears to be a discrepancy between the expanding role of pharmacists and the extent to which community pharmacy is providing pharmaceutical care.

Pharmacist-driven clinical services are still growing and pharmacists have shown continued interest in these opportunities. Pharmacists have reported a desire to continue employment with an organization that supports these services, and they feel an enhanced sense of belonging in their workplace if they are able to participate in clinical services.^{7,8} A separate study that evaluates the results from the 2004 National Pharmacist Workforce Survey showed that pharmacists from all practice settings spent more time in a dispensing role than they desired and less time performing “clinical” activities (i.e., optimizing drug therapy, educating patients and assessing medication needs, and communicating with other health care professionals) than desired. Community pharmacists in particular had the largest gap between the desired and actual amount of time spent participating in patient care services. Pharmacists from chain community pharmacies desired to spend 36% of their time dispensing and 47.8% of their time performing clinical activities, whereas they actually spent 55.2% of their time dispensing and only 26.9% of their time providing those clinical services.⁹ Reasons for the discrepancy between actual and desired participation rates remain unclear and warrant further investigation.

Information gained by studying the perceptions of student pharmacists in their fourth professional year of pharmacy school may be useful to explain the inconsistencies observed in the Workforce Study. The education of student pharmacists has recently transitioned to highlight the concept of patient-centered care. The Accreditation Council for Pharmacy Education (ACPE) revised the *Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy degree* in 2007 with a stronger emphasis on ensuring that student pharmacists are adequately educated to care for patients, optimize medication outcomes, and collaborate effectively with other health care professionals.¹⁰

Although the focus of pharmacy school curricula has changed, research shows that students may still face conflict between the concept of patient-centered care described in pharmacy education and the realities of pharmacy practice.^{11,12} Students may have difficulty envisioning the pharmacist in a patient care-centered role in all pharmacy practice settings.¹¹ Many pharmacy advocacy groups have set

forth recommendations to improve students’ outlooks on providing patient care services in the community pharmacy setting, but it is unclear whether educational experiences available for students have changed as a result. For example, the American College of Clinical Pharmacy (ACCP) proposed that more community pharmacy leaders should serve as adjunct faculty to demonstrate their ability to provide patient care services and collaborate with other health care professionals in this setting.¹³ Educational experiences have been shown to play a crucial role in students’ perceptions of providing clinical services, and pharmacy school curricula must focus on enhancing these experiences so students are prepared to provide clinical services upon graduation.¹¹ A recent study that evaluated third professional year student pharmacists’ work experiences found that in all work settings, student pharmacists spend 69% of their time preparing or dispensing medications and only 10% of their time providing direct patient care.¹⁴ Educational and work experiences must coincide in their focus on direct patient care so students are not faced with a disconnect between pharmacy education and practice.

There is currently minimal information available that assesses student pharmacists’ perceptions on the provision of patient-centered clinical services in community pharmacy. Previous evaluations of student pharmacists have found that the importance students place on providing patient care services may be low. One survey from 1992 assessed fourth professional year student pharmacists’ reasons for planning to enter various practice settings upon graduation. Most students were interested in chain community pharmacy or hospital pharmacy, but students interested in community pharmacy placed a higher importance on salary considerations compared with students interested in hospital pharmacy. These students ranked personal fulfillment most important.¹⁵ In contrast, a 2004 survey assessing third professional year student pharmacists’ career goals found that 66% of these students had an immediate career goal of direct patient care, whereas 19.1% had an immediate goal of indirect patient care and 14.9% wished to have a career in drug distribution management. However, these roles were defined by a video the students watched before completing the survey, and may not have been detailed enough to adequately assess the specific kinds of patient care activities students would prefer to provide.¹⁶ It is essential to better understand student perceptions on the importance of providing clinical services in community pharmacy practice after recent curriculum changes and the expansion of pharmacists’ roles.

This research intended to assess whether student goals match the intent of pharmaceutical education as well as changes in the profession. It was anticipated that the results would identify factors that increase the likelihood of student pharmacists participating in community pharmacy-based clinical services after graduation. This research also explored potential unrecognized barriers, in education or in

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