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Research

A summer diabetes camp as an interprofessional service-learning experience for early experiential pharmacy students

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Abstract

Objective: To determine the impact of a week-long, volunteer, interprofessional service-learning experience at a pediatric diabetes summer camp on early experiential pharmacy students' self-reported diabetes knowledge and skills, confidence in patient counseling and communication, and comfort with interdisciplinary teamwork.

Methods: Students applied for the experiential rotation in the spring of their first or second professional year. The application process included letters of intent and recommendation and a personal interview. The authors assessed the impact of service-learning activities on students' perceptions of their diabetes knowledge and skills, confidence in patient counseling and communication, and comfort with interdisciplinary teamwork through the use of pre- and post-camp surveys and content analysis of students' reflection journals.

Assessment: Eight pharmacy students participated in camp and completed the pre- and post-camp surveys and reflection journals. Students' post-camp survey scores and investigator analysis of students' reflection journals demonstrated that most students met the majority of investigators' learning objectives.

Conclusions: Pre- and post-camp survey data and reflection journal content analysis provide subjective and objective data that support that the students met investigators' learning objectives through participation in interprofessional service-learning. Early experiential students engaged in interprofessional service-learning improved their diabetes knowledge, confidence in patient counseling, and comfort with interdisciplinary teamwork. Condensed, off-site, summer service-learning experiences may help colleges of pharmacy with limited access to other on-campus health professions schools meet Interprofessional Education outcomes.

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Introduction

Service-learning

Service-learning (SL) is a unique form of experiential education that combines hands-on learning with service to the community and is reciprocal in nature, benefitting both the community and the service providers.¹ Beyond reinforcing didactic learning, SL experiences build confidence and develop both communication and interpersonal skills by

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engaging students in cooperative complex problem-solving with others.^{1,2} SL also strengthens the bonds between health professionals and their communities by instilling a sense of ethics and social responsibility in student participants.²

SL experiences are being increasingly utilized by Colleges of Pharmacy to prepare graduates to be critical thinkers and engaged citizens. The Accreditation Council for Pharmacy Education (ACPE) promotes SL for pharmacy students as it allows students to apply and practice recently acquired didactic knowledge through active learning in the community, which fosters the development of desirable attitudes and values such as empathy and professionalism.³ SL is considered an appropriate educational and professional development opportunity for both Introductory and Advanced Pharmacy Practice Experience (IPPE and APPE) students, when certain criteria are met.^{3,4}

ACPE and other organizations promoting SL emphasize specific requirements that differentiate community service from effective SL.^{1–3} Didactic preparation according to specific learning objectives serves to balance the community service with learning to ensure student-centered learning remains a priority of the exercise. SL experiences must also provide structured reflection on the learning experience, which helps students understand the connection between the service experience and the learning. These reflections establish emotional connections to the community, change attitudes, and build empathy, a sense of caring, and professional responsibility.^{1–3} Thus, health fairs and other similar extra-curricular activities are usually considered community service activities rather than SL because they do not typically incorporate specific measurable learning objectives or include time for structured reflection on the experience.

Interprofessional education

The Center for Advancement of Pharmacy Education (CAPE) calls for Colleges of Pharmacy to provide opportunities for student interaction with other health professional students and practitioners.⁵ The Institute of Medicine notes that, once in practice, health professionals are asked to work on interdisciplinary teams, but they are not educated together.⁶ By progressing through distinct, specialized curricula, students fail to achieve an appreciation of the actual or potential contributions of various other professions. Interprofessional education (IPE), defined as “students from two or more professions learning about, from and with each other to enable effective collaboration and improve health outcomes” fosters functional interprofessional communication and patient care in the workplace.⁷ The 2013 CAPE outcomes promote IPE by requiring students to “actively participate and engage as a health care team member by demonstrating mutual respect, understanding, and values to meet patient care needs.”⁵

Barriers to implementation of IPE may include, for some Colleges of Pharmacy, a lack of access to other on-campus health professions schools.⁸ In those cases, Colleges of

Pharmacy may need to consider off-site experiences in the surrounding community. Additionally, colleges may face challenges of scheduling when partnering with health professions schools on dyssynchronous academic calendars.⁸ IPE through condensed summer SL at off-site locations may bridge the gap between professions, allowing students of different occupations to learn and interact together without requiring extensive restructuring of existing didactic curricula.

Previous literature describes curricular APPE rotations combining IPE and SL in summer camps for children with chronic disease states.^{9–11} In an elective rotation in a curricular diabetes concentration, the author evaluated students’ perceptions of their confidence in their knowledge and ability to manage diabetes using a pre- and post-camp self-assessment survey and reflection essays. She determined that APPE rotation students had more confidence in their diabetes management skills, communication skills, ability to interact with other health care professionals, and ability to display empathy after participating in camp.⁹

We hypothesized that the interprofessional SL summer camp successes demonstrated in APPE rotation students could also be achieved in earlier career students. We elected to bring volunteer early experiential students to test the feasibility of their participation prior to implementing the site as an IPPE rotation for curricular credit. We assessed the impact of interprofessional SL activities on students’ perceptions of their diabetes knowledge and skills, confidence in patient counseling and communication, and comfort with interdisciplinary teamwork through the use of pre- and post-surveys and reflection journals.

Methods

Description of Camp Victory

Camp Victory is a non-profit, week-long, overnight summer camp for children aged 6–14 years with type 1 and type 2 diabetes, which is sponsored each summer by the American Diabetes Association in collaboration with the Lions of Louisiana. At Camp Victory, volunteer physicians, nurses, pharmacists, and dieticians provide multidisciplinary medical care that allows diabetic children to experience summer camp in a safe and monitored environment. The camp also provides a unique, interdisciplinary service-learning environment for nursing, pharmacy, and dietetic students from various universities across the state to learn the day-to-day management of diabetes, develop rapport with pediatric patients, and explore professional collaboration and teamwork.

Objectives of the SL experience

Our primary objective for inviting pharmacy student involvement in Camp Victory was to determine the feasibility of a summer camp as an IPE opportunity for early professional students to develop skills and knowledge that

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