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Research Note

Pharmacy student involvement in student-run free clinics in the United States

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ABSTRACT

Introduction: The role of pharmacy students in student-run free clinics (SRFCs) across the United States has not been well-defined. This study sought to assess the level of involvement and roles of pharmacy students in SRFCs as well as their interprofessional collaboration.

Methods: An online survey was sent to each pharmacy school registered with the American Association of Colleges of Pharmacy (AACP). The survey addressed the following concepts within SRFCs: pharmacy student roles, precepting and school of pharmacy involvement, interprofessional experience, leadership positions held by pharmacy students, and dissemination of feedback in this service-learning experience.

Results: The survey was sent to 139 schools; 45 pharmacy schools responded (32%); of those that responded, 29 schools were not connected to a SRFC (64%) and 16 schools were affiliated with at least one SRFC and completed the survey (36%). The most common disciplines pharmacy students work with in SRFCs included: dental, medical, mental health, nutrition, nursing, physical therapy, public health, and social work. Pharmacy students find their volunteer experience with SRFCs to be valuable, noting that they are able to apply their knowledge in a practice setting to benefit patients, improve their patient interviewing and health screening skills, become involved in the community, work as a team with other health professional students, formulate treatment plans, and obtain leadership positions.

Discussion and conclusions: SRFCs offer interprofessional and leadership activities that pharmacy students find valuable, but many pharmacy schools are not associated with SRFCs.

Introduction

The Society of Student Run Free Clinics describes a student-run free clinic (SRFC) as a service-learning outreach project driven primarily by students in any discipline that aims at bettering community health and wellbeing.¹ Student-run clinics are known for their ability to teach students “clinical skills, medical humanism, and professional generosity.”² Pharmacy students are often involved with these clinics, but the extent of their involvement is unclear. SRFCs vary in the services they offer and the students that help to run them.

The presence of interprofessional education and collaboration has been increasing in professional schools across the United States.³ Past studies of students from multiple health disciplines have demonstrated that involvement in SRFC increased teamwork, interprofessional skills, and attitudes and understanding regarding interprofessional roles.^{4–6} For example, Sick et al.⁴ reported that students who participated in a SRFC had higher scores in teamwork skills and interprofessional skills compared to their counterparts

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who applied for but were not accepted into a SRFC. Since these opportunities demonstrate development of interprofessional and teamwork skills necessary for high quality patient care, it is valuable to have an understanding of the current and potential involvement that schools of pharmacy might play in SRFCs.

SRFCs exist at more than 75% of medical schools, according to recent data.⁷ Smith et al.⁷ surveyed United States medical schools with SRFC involvement and found that 41.5% of the SRFCs at 85 medical schools partnered with pharmacy students.⁷ It is important for pharmacy students, preceptors, and other health professionals to gain an understanding of the presence of SRFCs in pharmacy schools and the roles played by pharmacy students in these clinics, as this will help all parties determine best practices for pharmacy involvement.

This study seeks to evaluate pharmacy student involvement within SRFCs affiliated with pharmacy schools across the United States. We requested information from all SRFCs affiliated with schools of pharmacy and did not exclude any SRFCs based on their programming type (e.g., strictly volunteer, service-learning class, or experiential rotation). Our objectives were to describe pharmacy student roles and the training required for these specific roles within SRFCs in the United States, assess the students' perception of benefit from their involvement in the SRFC, evaluate how pharmacy students are given feedback and precepted, gauge interprofessional involvement among students, and specify the ability of students to obtain educational credit for their work with the SRFC.

Methods

An online survey containing 29 questions consisting of free-response and multiple-choice questions was developed (Appendix) and disseminated through Qualtrics Survey Software (Qualtrics Labs Inc., Provo, UT). A SRFC was defined to the participant at the start of the survey as a service-learning outreach project driven primarily by students in any discipline that aims at bettering community health and wellbeing.¹ Many questions were adapted from two previous surveys used to assess medical student involvement in SRFCs.^{2,7}

One hundred thirty-nine accredited US pharmacy schools were identified to receive the survey based on their membership with the American Association of Colleges of Pharmacy (AACP) as of October 1, 2015.⁸ Email addresses and phone numbers of offices of student affairs for each school were obtained from published information on the school's website. An email was sent out to this group to first identify whether the individual schools were affiliated with a SRFC and if so the message requested that the office forward the survey to a pharmacy student leader at their school involved with a SRFC. If the school was not affiliated with a SRFC, it was requested that the school simply reply that this was the case to the original inquiry. Two subsequent reminder messages were sent to unresponsive schools. If schools were unresponsive after three total email messages, we called their student affairs' office to obtain information to directly contact the student/faculty leader if available.

Pharmacy student leaders who filled out the survey were encouraged to seek help from other leaders, students, and faculty to answer questions and to report exact numbers if possible or best estimates. The survey link was open and responses were collected from October to November 2015. In the case of duplicate survey responses regarding the same clinic, the first survey was analyzed and the second was disregarded. Descriptive mean and standard deviation were calculated with Microsoft Excel[®]. The University of Minnesota Institutional Review Board determined that this study was exempt from review.

Results

Forty-five schools replied via email or survey, a response rate of 32%. Of the 45 responding schools, 29 either lacked a SRFC or were not involved with an existing one at their school or university (64%). Sixteen schools were involved with at least one SRFC (36%). Of these, four schools were involved with two or more SRFCs.

Student leaders were asked about operations of their SRFC including majority of patient populations they serve. The majority of clinics were open for less than four hours a week, although there was variability among respondents.

Student volunteer roles and involvement

The most common pharmacy student role included medication education, but many student roles were documented. Only 50% of responding SRFCs noted that their pharmacy students were involved in dispensing. Several participants responded that within their SRFC, pharmacy students participated in vaccine administration as well as health screenings including blood glucose, cholesterol, bone density, blood pressure, and body mass index measurements.

Students at different stages in their training are involved with SRFCs; five respondents reported that pre-pharmacy students volunteered at their SRFC (31.25%). The mean number of students involved with the SRFC each school year was evenly distributed for first through third-year pharmacy students (see Table 1); however, participation by pharmacy students in the fourth year declined by nearly 50% compared to other first through third-year students. Of note, researchers confirmed that each school that reported no involvement of their fourth-year pharmacy students in SRFCs was a four-year program.

Student volunteer training

Participants discussed the training of students in their respective clinic roles in a free response format that varied among SRFCs. Five schools of pharmacy mention that their students are trained through general orientation/informational sessions (31.25%). One

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