# **Analysis of Interprofessional Educational Experiences Within** A Required APPE Program

#### BACKGROUND

Since the 1972 Institute of Medicine article entitled "Educating for the Health Team", interprofessional education has recognized the importance of interdisciplinary education for the health care delivery teams. In 2009, six national education associations of schools of the health professions formed a collaborative to promote and encourage efforts that would advance substantial interprofessional learning experiences to help prepare future health professionals for enhanced team-based care of patients and improved population health outcomes. This was known as the IPEC. These organizations that represent higher education in allopathic and osteopathic medicine, dentistry, nursing, pharmacy, and public health created core competencies for interprofessional collaborative practice to guide curricula development across health professions schools.

The purpose of our analysis is to determine student and preceptor perceptions of interprofessional learning experiences in the inpatient and outpatient pharmacy setting. The results of our survey will then lead us to develop and test pilot programs for each type of APPE rotation setting in order to aid students in the development of members of the collaborative practice team. The goal is to teach students to work interprofessionally, regardless of work setting, and enter the workplace as a contributing member of the practice team.

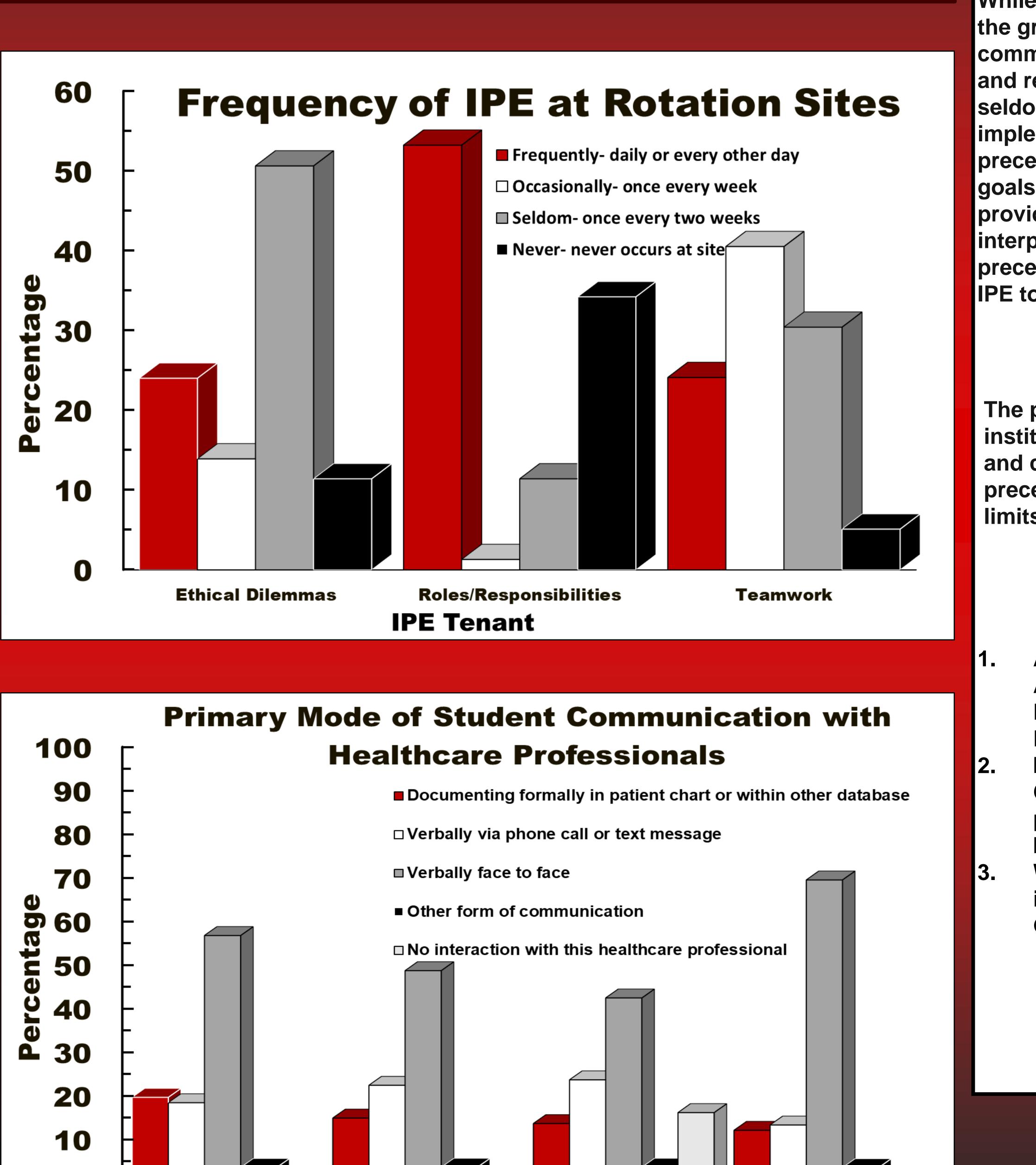
### OBJECTIVE

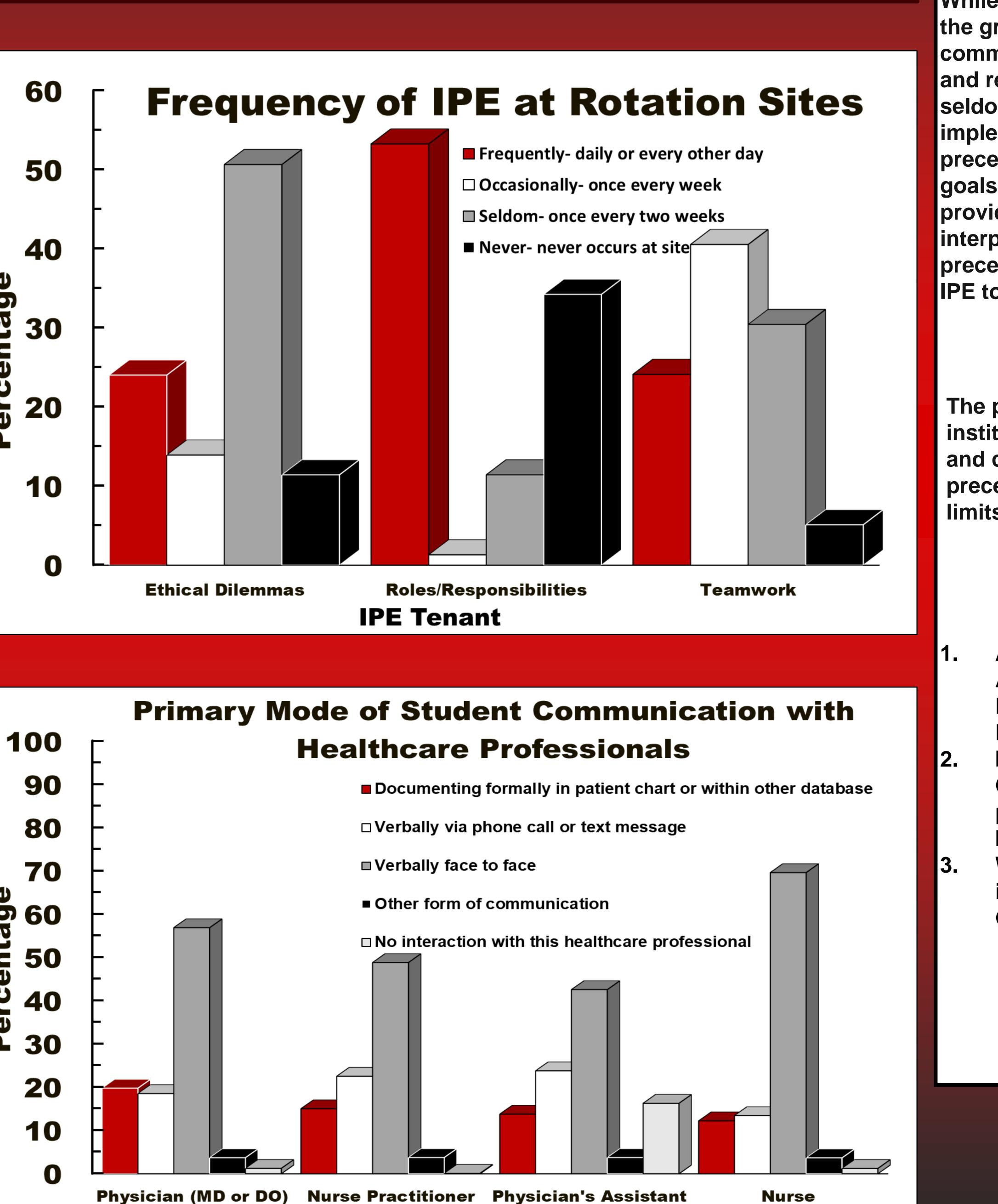
To determine if interprofessional educational experiences offered on required APPE rotation sites are providing interprofessional opportunities that are consistent with student and preceptor perceptions.

#### METHODS

A survey was sent to preceptors representing practice sites that deliver rotations in the 4<sup>th</sup> year of the pharmacy program. At the conclusion of each advanced pharmacy practice experience rotation in the 4<sup>th</sup> and final year of the program (2018-2019), students have completed a short reflection of their Interprofessional education experiences. At the conclusion of each advanced pharmacy practice experience rotation in the 4<sup>th</sup> and final year of the program, preceptors complete a final competency assessment of their students. Data from the preceptor survey, student reflections, and preceptor evaluations were analyzed independently and collectively to determine any relationships related to the ability of a practice site to effectively deliver quality interprofessional education experiences.

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### RESULTS



### CONCLUSIONS

While students consistently score well on all aspects of IPE, the greatest challenge reported was in the area of communication. Preceptors are frequently discussing roles and responsibilities with their students, but many report seldom involving ethical dilemmas. With the development and implementation of pilot programs, the goal is to provide preceptors with the training and activities to achieve the goals of IPE set by the ACPE standards. Also, to be able to provide students with exposure to working

interprofessionally. Pilot programs will be implemented for all preceptors on all rotation sites in order to provide intentional **IPE to all students.** 

### LIMITATIONS

The purpose of this project was focused on a singleinstitution. The results of this project can not be projected and cannot represent other pharmacy programs. Also, the preceptor response rate was 82/218 (37.6%), which also limits the applicability of the preceptor perceptions.

## **SELECTED REFERENCES**

**Accreditation Council for Pharmacy Education. Accreditation Standards and Key Element for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree. 2016.** 

**Interprofessional Education Collaborative Expert Panel. Core competencies for interprofessional collaborative** practice: Report of an expert panel. Washington, DC: **Interprofessional Education Collaborative, 2011.** World Health Organization. Framework for action on interprofessional education and collaborative practice. Geneva: WHO; 2010.



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