

The development and evaluation of an activity-based Pharmacy Informatics and Medication Safety Course

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BACKGROUND

- Although the Institute of Medicine considers informatics a core competency for all health professionals, a consistent and coordinated approach to teaching pharmacy informatics is still lacking.
- Accreditation Council for Pharmacy Education (ACPE) 2016 Standards aim for students to develop a comprehensive knowledge-base of foundational informatics to be considered practice ready.
- With only one-third of pharmacy schools including informatics courses in their curricula, limited literature is available on the design and implementation of health information and informatics training in pharmacy curriculum.
- To our knowledge, little information is available on developing an activity-based informatics and medication safety (IMS) required course.

OBJECTIVE

- To evaluate the impact of developing an activity-based pharmacy IMS course for third-year pharmacy students.
- Assess students' knowledge and perceptions of health informatics and the pharmacists' role within informatics

METHODS

- This institutional review board approved study was conducted from January 2024 to March 2024 at the University of Louisiana Monroe College of Pharmacy.
- A required informatics and medication safety (IMS) course was developed for third-year pharmacy students, incorporating team-based and active learning strategies.
- Fourteen weekly classes covered topics such as fundamentals of informatics, healthcare data management, the medication use process, and medication safety.
- Activities included TikTok®, games, individual and teamreadiness assurance tests, case studies, and real-world examples.

Data Collection

- Demographics
- Students baseline knowledge and attitudes regarding IMS assessed through a pre- and post-course questionnaire. (See QR Code for survey details)

Data Analysis

• Data was analyzed using SPSS, employing descriptive statistics, Wilcoxon signed-rank tests, or McNemar tests as appropriate.

Active learning incorporated into the informatics and medication safety course increased student knowledge including the ability to define health informatics and its role in health system pharmacy

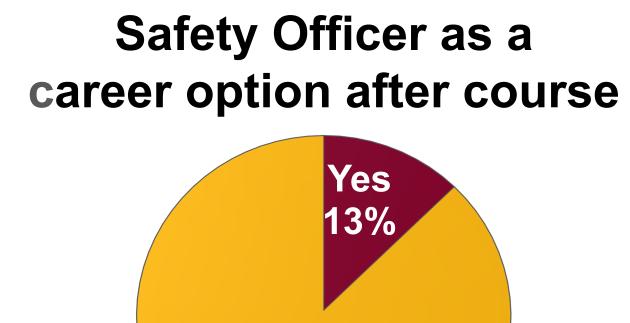


RESULTS

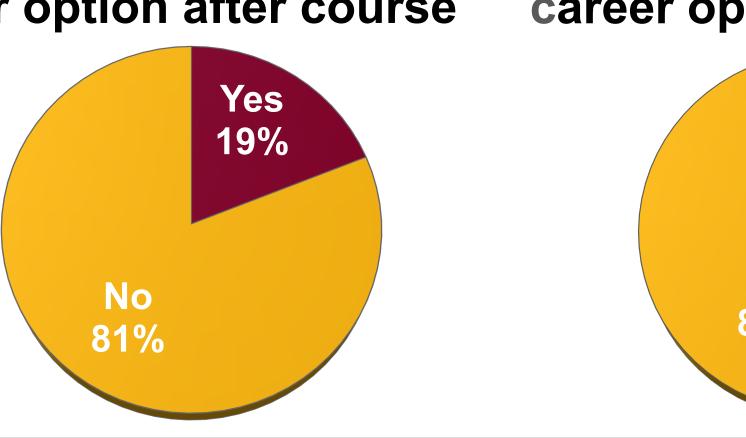
Demographics of pharmacy student respondents			
Age (mean \pm SD)		24 ± 2.37	
Year of Study (%)	Third year	70 (89.7)	
	Third year modified	8 (10.3)	
Taken an informatics	Yes	4 (5.1)	
class before (%)	No	74 (94.9)	
Made a TikTok Video	Yes	30 (38.5)	
before (%)	No	48 (61.5)	

Assessment Results				
Student is able to	Pre-	Post-	P-value	
Accurately describe health informatics	8%	85%	<0.001	
Explain how health informatics improves patient care	14%	74%	<0.001	
Define role of informatics pharmacists	17%	65%	<0.001	
Define role of medication safety officer	29%	63%	<0.001	
Identify that informatics is important to their success as a pharmacist	69%	79%	0.070	
Identify an example of a medication related outcome used in informatics	52%	92%	<0.001	

Consider Pharmacy Informatics as a career option after course



Consider Medication



- After taking this activity-based informatics course, 63% of students felt more knowledgeable about the topic of informatics.
- Students' perceptions increased from 67% to 82% in favor of thinking that informatics is extremely or somewhat important to your success as a pharmacist.

DISCUSSION

- Our research introduced an activity-based learning model that contrasts with traditional lecture-based methods. This approach involves interactive, hands-on activities that enhance student engagement and practical understanding of informatics concepts.
- Overall, third year pharmacy students demonstrated a significant increase in the ability to correctly describe health informatics and how health informatics improves patient care.
- Students showed improvement in correctly defining the role of informatic pharmacists and medication safety officers in the hospital setting.
- Students provided positive feedback on course activities and the instruction style.
- Limitations to course implementation include lack of up-todate instructional material, access to active EMR, technology knowledge deficits, limited resources available.