

Introductory Pharmacy Practice Experiences in Ambulatory Care Practice: Perceptions of First- and Second-Year Pharmacy Students



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Background

Accreditation Council for Pharmacy Education (ACPE)¹

- During the 4-year pharmacy-school curriculum, students must acquire 1,740 experience hours in various pharmacy practice settings

Introductory Pharmacy Practice Experiences (IPPE)¹

- 300 hours must be gained during the first 3 years of pharmacy school and balanced from two traditional practice settings:
 - 120 (min) hours from: **Community practice**
 - 120 (min) hours from: **Institutional health-system (hospital) practice**
 - 60 (max) hours from: Simulated practice experiences

Advanced Pharmacy Practice Experiences (APPE)¹

- 1,440 hours must be gained during the 4th year (P4) of pharmacy school from four required practice settings and other selective settings, which include:
 - Community practice
 - Institutional health-system (hospital) practice
 - Ambulatory Care practice (*outpatient clinical*)
 - Inpatient general medicine (*inpatient clinical*)

SWOSU College of Pharmacy

IPPE Program

- The summer after the 1st year (P1) of pharmacy school
 - Community IPPE – 120 hours
- The summer after the 2nd year (P2) of pharmacy school
 - Institutional IPPE – 120 hours

Faculty Observations

- Many students do not gain an appreciation of the Ambulatory Care practice setting until experiencing it during the P4 year
- Many students desiring a career in Ambulatory Care practice have not optimally prepared for residency training in advance of the P4 year

Objective

- To determine if spending one morning exposed to an Ambulatory Care clinical pharmacy practice setting gives P1 and P2 pharmacy students a better understanding and/or appreciation of that practice setting as compared to students who are not exposed to that setting

Methods

Sample

- Regional P1 and P2 students assigned to Community and Institutional summer IPPEs attend a single morning clinic visit at a faculty Ambulatory Care practice (study cohort)

Study Design

- Retrospective, voluntary responses to an online survey

Study Implementation

- The study cohort and a control cohort (those who did not attend an Ambulatory Care practice) were emailed a QualtricsSM survey during the following school year after their summer IPPE experiences
- Participants provided definitions to open-ended questions of each practice setting (Community, Institutional, Inpatient Clinical, and Ambulatory Care practices)
- They also rated on a 5-point Likert scale how much the IPPE experiences improved their understanding and career consideration of each practice setting

Analysis

- Five clinical pharmacists with backgrounds in the four practice settings scored participant definitions as correct or incorrect
- Likert data were analyzed using JASP (version 0.18.2) with the Mann-Whitney test and one-tailed hypothesis that after IPPE ratings would be higher than before IPPE ratings

This study was approved by the SWOSU IRB

References

- <https://www.acpe-accredit.org/pdf/Standards2016FINAL.pdf>

Disclosure Statement

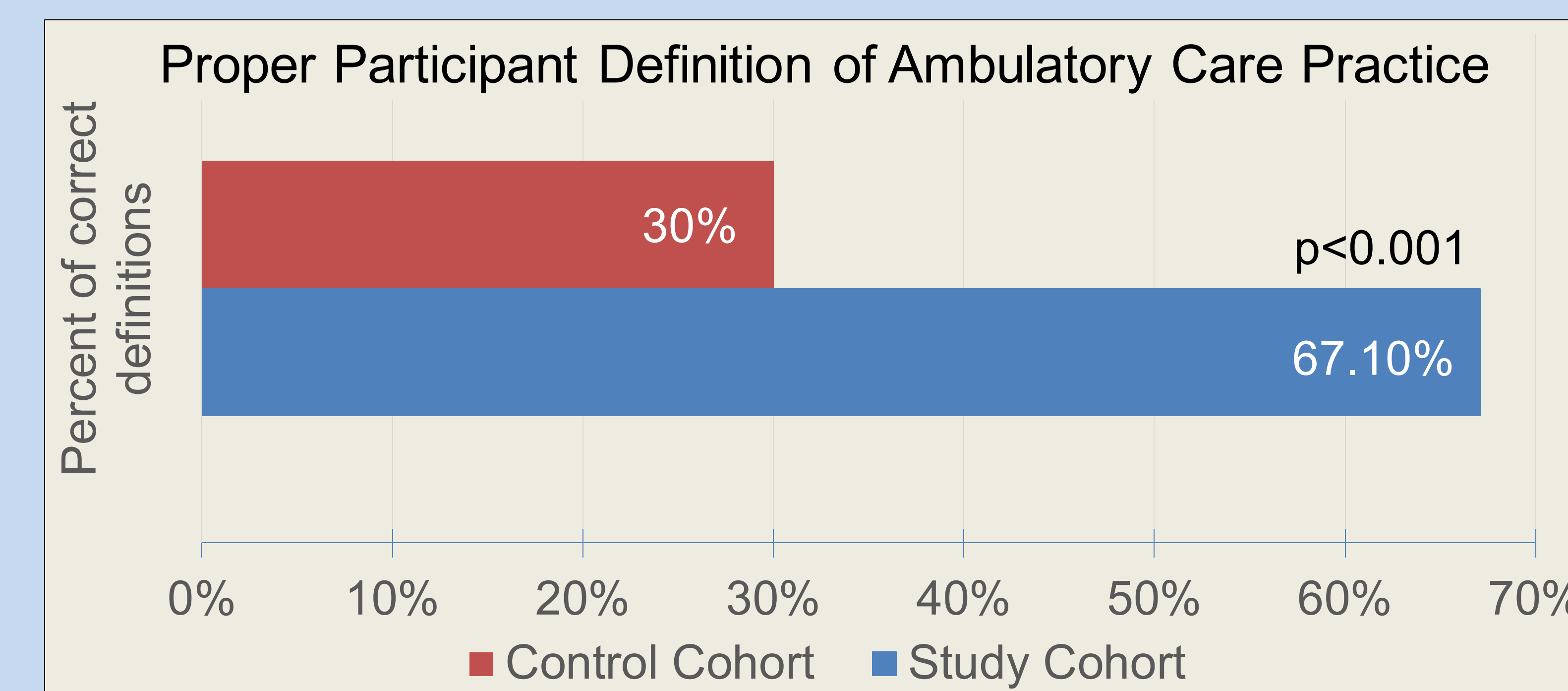
Authors of this presentation disclose possible financial or personal relationships with entities that may have direct or indirect interest in the subject material of this presentation: All authors: nothing to disclose

Results

Enrollment

- Over 2 years, 37 participants attended an Ambulatory Care site visit
- 17 of those participants completed the survey (46% response rate)
- 18 control cohort participant surveys were collected

Ambulatory Care definition outcome



Likert data outcomes

- Increased understanding (p < 0.001) and career consideration (p = 0.015) of Ambulatory Care in the study versus control cohort after the IPPE
- Increased understanding (p < 0.001) and career consideration (p = 0.010) of Inpatient Clinical pharmacy practice in the study versus control cohort after the IPPE
- No differences (p > 0.05) in these measures were found for either Community or Institutional pharmacy settings in comparing before versus after ratings
- More participants in the study cohort agreed to have a good understanding of ambulatory care practice (p < 0.001) and in **considering a career in ambulatory care practice (p = 0.046)** as compared to the control cohort as a result of their IPPE

Conclusions

- A single Ambulatory Care exposure may improve student explanation and self-perceived understanding of Ambulatory Care practices
- A single Ambulatory Care exposure may increase consideration of a career in Ambulatory Care
- Further study may determine if such Ambulatory Care exposures may improve preparation for pursuit of residency training and/or a successful residency match