# Pharmacy Preceptors' Knowledge, Perception, and Experience with Interprofessional Practice and Education



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Themes

# BACKGROUND/ RESEARCH QUESTIONS

Over 1/3 of the Doctor of Pharmacy curriculum in Doctor is experiential education in the clinical learning environment and is supervised by practicing pharmacists.

- Introductory pharmacy practice experiences (IPPE) summers PY1 and PY2 years, community and institutional settings
- Advanced pharmacy practice experiences (APPE) PY4 year, community, institutional, acute care, ambulatory care and elective settings

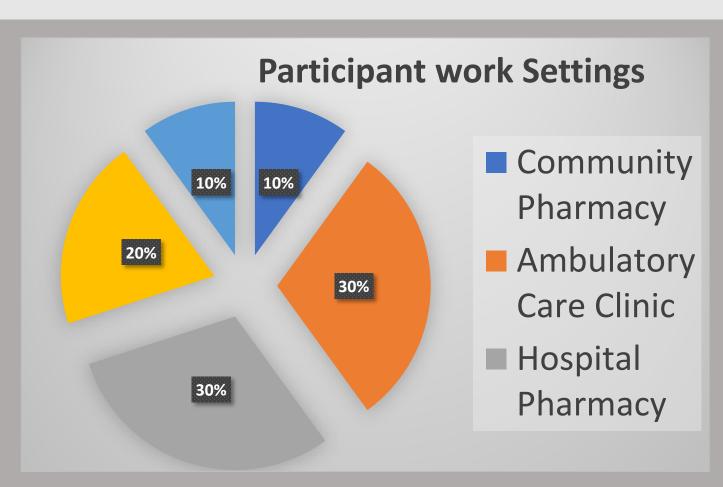
There are pre-defined and measurable IPPE/APPE learning outcomes associated with interprofessional practice and education (IPE), yet we know little about our preceptors' knowledge of, perceptions of, and experiences with interprofessional practice and education in these clinical settings.

## GOAL AND PURPOSE

To evaluate pharmacy preceptors' baseline knowledge, perception, and experience with IPE, the student experience with IPE and any barriers to IPE at their sites.

### METHODOLOGY & METHODS

Pharmacy preceptors with diverse experience and practice sites in central Washington participated in key informant interviews via video conference. Interview questions were developed based on results of a previous validated survey of a larger but similar population.



Interviews conducted by the same researcher, recorded, transcribed, and deidentified.

Transcripts analyzed deductively to identify meaningful, recurrent

A code book created using the IPEC core competencies framework

IPE Improves patient outcomes

- Holistic approach to care
- Addressing the spectrum of patient needs

Enhances provider satisfaction

- Prevents burnout
- Improves work environment

**Creates Synergy** 

- The whole is more than sum of its parts
- Shared viewpoints and expertise

#### Roles & Responsibilities

"It gives me more job satisfaction, knowing that I get to work with a lot of different individuals from different backgrounds and skill sets"

"Nobody has all the information; nobody has all the knowledge."

#### Communication

"Pharmacists, nurses, physicians, social workers...will have a piece of crucial information that is relevant to the patient's care... so being able to get together and then share our important pieces of information... goes a lot better when you work outside of your silos and have everybody on the same page"

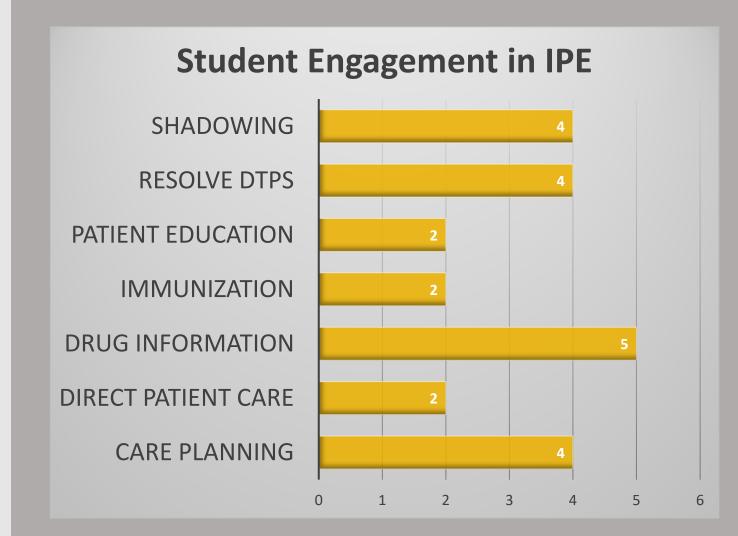
#### Teams & Teamwork

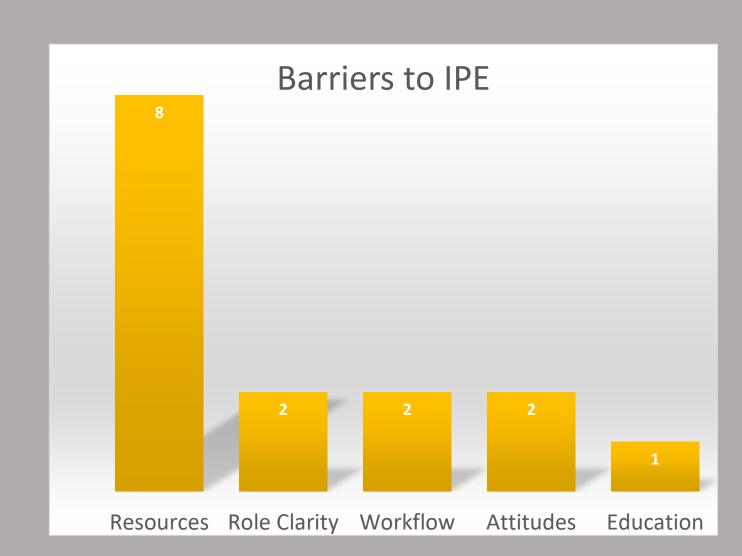
"Different viewpoints [are] always going to be a strength because you miss things if everyone's got the same training...you can begin seeing the whole patient. I think it's important that we see all of our patient, and not just that siloed part that we're most trained in."

#### Values & Ethics

"[collaboration] encourages learning... anytime you're partnering with somebody who has a different perspective than you, you get the privilege of learning what life looks like through their eyes, and how you can be a better partner to them"

# RESULTS





# DISCUSSION/CONCLUSION

The interviews afforded valuable insights into the current state of IPE in pharmacy experiential learning.

- Pharmacist preceptors are strong supporters of IPE and regularly participate in collaborative patient care
- > They believe IPE improves patient care outcomes and enhances provider satisfaction and well-being
- > Preceptors perceive their contributes are valued and they respect the interprofessional contributions of other members of the care team.
- Barriers to IPE exist in the experiential learning environment with a perceived lack of time being most common.
- Pharmacy students gain experience in collaborative practice but are not learning together with students from other health professions.

# NEXT STEPS...

- > Expand interviews to include preceptors from other health professions
- > Develop support for preceptors and sites to grow interprofessional learning experiences beyond shadowing
- Provide tools for clinical sites to develop opportunities for interprofessional groups of students to learn together

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