

Incorporating Interprofessional Simulated Exercises into Pharmacy Education

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With the evolution of the pharmacy profession from one that involves primarily manufacturing and dispensing to one that is more focused on clinical practice and a practitioner who is an integral part of the healthcare team, pharmacy academicians must continue to adjust its methods for educating and training future pharmacists. Gone are the days of depending on lectures and isolated laboratory experiences for training a pharmacy graduate who will be highly recruited in the marketplace. Laboratory experiences must expand into being more practical and involving more than just pharmacy students. At a time where it is more competitive to secure employment, particularly in highly sought after clinical positions, it is essential for students to be trained in an environment that challenges rote thinking. This is found to be evident by a survey conducted by the *Chronicles for Higher Education* which found that 75% of employers surveyed said they want educators to place “more emphasis on five key areas, including critical thinking, complex problem-solving, written and oral communication, and applied knowledge in real-world settings” to produce better job candidates [1].

The aforementioned key areas can be addressed in an educational environment through simulated exercises. Creating real-world scenarios in pharmacy education will help pharmacy students understand their role in the healthcare system and understand how to interact with other healthcare professionals. Simulation provides an avenue which allows pharmacy students to apply their knowledge from the classroom in a real-world setting by mimicking actual or realistic pharmacist-delivered patient care situations [2].

According to the World Health Organization, “interprofessional education occurs when students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes. Once students understand how to work interprofessionally, they are ready to enter the workplace as a member of the collaborative practice team. This is a key step in moving health systems from fragmentation to a position of strength.” [3]

Trends in pharmacy education lend themselves to emphasizing the skillsets addressed by the World Health Organization and sought by employers. The 2013 Center for the Advancement of Pharmacy Education (CAPE) Educational Outcomes state that graduates must be able to actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs [4]. Additionally, the 2016 Accreditation Council for Pharmacy Education (ACPE) standards dictate that pharmacy schools have a curriculum that prepares all students to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team, which includes prescribers and other healthcare professionals. ACPE also allows for 60 of the 300 clock hours required for Introductory Pharmacy Practice Experiences to come from simulated practice experiences [2].

This provides a great opportunity for pharmacy educators to create opportunities for simulated experiences among professional healthcare students. The Society for Simulation in Healthcare defines healthcare simulation as, “a range of activities that share a broad, similar purpose

to improve the safety, effectiveness, and efficiency of healthcare services.” Through simulation, educators have the opportunity to educate and assess student learning in an environment that is not harmful to real patients [5]. Simulation allows training for non-invasive tasks, such as communication skills, process-oriented tasks, such as workflow operations, as well as tasks that impact patient well-being, such as proper drug selection and administration. These training exercises can be facilitated by the utilization of: a.) standardized patient educators who are trained to portray a condition, as well as teach and assess learners, b.) low-fidelity to high-fidelity mannequins which can be programmed to simulate a patient response to a certain degree depending on its capabilities, or c.) virtual or game-based environments which can be digitally engineered to accurately replicate an actual real-world existing space [6].

Working interprofessionally in a simulated exercise allows students to be immersed into a realistic experience that forces them to truly understand their role on the healthcare team, as well as the others, and see how their decisions and recommendations impact others on the team and ultimately the patient. When facilitating simulated exercises, there are several key components involved which include: preparation of the case scenario including a mock exercise, student intake orientation on the day of the activity, the actual simulated activity, and a debriefing of the activity where feedback is given and learning is enhanced.

As outlined, a simulated exercise can be a resource intense process, which tends to be a barrier when involving one program. As expected, this barrier expands when educators from multiple professional programs work together to create an interprofessional simulated exercise. An additional reason why programs hesitate to become involved in these types of activities is consistency in student accountability, specifically how grades are awarded across varying programs and how the exercise is linked to a course in the curriculum. Other obstacles include logistics for scheduling and planning exercises and willingness of programs to work together, as well as access to a simulation to center that can host this type of activity and/or the cost to purchase simulators or time in a simulation center. In an effort to produce marketable practitioners who are effective in improving patient outcomes, it is important for academicians to find a way to overcome these challenges.

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In healthcare, educational programs have traditionally operated alone with minimal interaction between other programs. However, the healthcare system and consequentially educational accrediting bodies are requiring that pharmacy, as well as other healthcare professions move away from silo education and work together to help students have a better understanding of their role and a greater appreciation for the role of other healthcare team members. Implementing simulated interprofessional experiences early in the curriculum and throughout will facilitate the preparation of better equipped graduates for the everyday world who are sought by employers and who provide the ultimate goal of positive patient outcomes.

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