

Exploring interprofessional experiences in multiple pharmacy practice locations

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Learning Objectives

- Summarize the definition of interprofessional education
- Identify opportunities for interprofessional education in a variety of practice settings.
- List benefits of interprofessional collaboration for both students and the practice site.

Disclosures

- Speakers, Dornblaser and Mickool have no financial disclosures or conflicts relative to this presentation

Interprofessional Education

Interprofessional Education occurs when
two or more professions learn
about, from & with each other
to improve collaboration and the quality of
individual and community care

IPE Competencies

1. **Values and Ethics**- Work with individuals of other professions to maintain a **climate of mutual respect and shared values**.
2. **Roles and Responsibilities**- Use the **knowledge of one's own role and those of other professions** to appropriately **assess and address the health care needs of patients** and to promote and advance the health of **populations**
3. **Communication**- Communicate with **patients, families, communities, and professionals in health** and other fields in a responsive and responsible manner that **supports a team approach** to the promotion and maintenance of health and the prevention and treatment of disease.
4. **Teamwork**- Apply **relationship-building values and the principles of team dynamics** to perform effectively in **different team roles to plan, deliver and evaluate patient/population** centered care an population health programs and policies

About us & our sites

Dan Mickool

11 years AmCare at Maine General Hospital's Family Medicine Institute

Dual faculty appointment
Dartmouth Geisel School of
Medicine

Pharmacy students are integrated into rounding, didactics with physician residents and medical students.

Emily Dornblaser

Critical Care Pharmacist (in a past life)

9 years at CMMC in Mixed ICU

2021-2022- Mercy ICU

Interprofessional rounding teams are the norm in the ICU.

Challenge to create more IP Teams throughout the hospital

IPE in the Ambulatory Setting

Integration of Residency program at Dartmouth, UNE and Tufts.

Fully IPE and supported from their medical programs

Home visits occur in family medicine and geriatrics programs.

Weekly defined activities

6 week rotations, final project med/pharm students present summary of learning, case they worked on together in “grand rounds style”. Reflections are written around what they learned about each others’ roles.

Use of the Team Skills Scale

Breakout Session

Find at least two pharmacists in the room who have a different practice site from you.

Those in the Ambulatory care setting- share your experiences with IPE

What has worked? What hasn't?

What successes would you like to share with the group?

What challenges have you faced?

IPE in the Hospital Setting

Rounds.....are they really IPE?

- Actively look for teaching and learning opportunities from others

Consider switching roles for the day

- Students shadowing other professions once a week for a part of the day

Committee work (order sets, P&T, Safety, Outcomes)

Breakout Session

Find at least two pharmacists in the room who have a different practice site from you.

Those in the In-patient care setting- share your experiences with IPE

What has worked? What hasn't?

What successes would you like to share with the group?

What challenges have you faced?

IPE in the Community Setting

Ensure baseline skills are solid first

Communication skills with practices MD/DO, NPs, Nurses, MAs (secretary-physician agent?)

Anticipate how to talk with people at different levels

MD/DO/NP Clinics close by:

- Disease state management discussions

Vaccine clinics?

Collaborative practices:

Have student research criteria in Maine and write one!

Have DME? PT/OT?

Collaborative practice agreements in Maine

A pharmacist may engage in collaborative drug therapy management pursuant to a collaborative practice agreement in accordance with this section. [PL 2013, c. 308, §4 (NEW) .]

1. Submit to board. The pharmacist shall submit a copy of the collaborative practice agreement to the board and the licensing board that licenses the practitioner prior to the commencement of the collaborative practice.

2. Review and revision. The signatories to a collaborative practice agreement shall establish a procedure for reviewing and, if necessary, revising the procedures and protocols of the collaborative practice agreement.

3. Health information privacy. Services provided pursuant to a collaborative practice agreement must be performed in compliance with the federal Health Insurance Portability and Accountability Act of 1996, 42 United States Code, Section 1320d et seq. and its regulations, 45 Code of Federal Regulations, Parts 160-164.

4. Amendments to agreement. Amendments to a collaborative practice agreement must be documented, signed and dated.

5. Assessment; risk management. A collaborative practice agreement must include a plan for measuring and assessing patient outcomes and must include proof that liability insurance is maintained by all parties to the agreement.

Collaborative agreements in Maine

Contents of agreement. A practitioner and a pharmacist desiring to engage in collaborative practice in accordance with this subchapter shall execute a collaborative practice agreement that must contain, but is not limited to:

- A. A provision that states that activity in the initial 3 months of a collaborative practice agreement is limited to monitoring drug therapy. After the initial 3 months, the practitioner and pharmacist shall meet to review the collaborative practice agreement and determine the scope of the agreement, which may after the initial 3 months include a pharmacist's initiating, administering, monitoring, modifying and discontinuing a patient's drug therapy and reporting these actions to the practitioner in a timely manner in accordance with rules adopted pursuant to [section 13846](#);**
- B. Identification and signatures of the parties to the collaborative practice agreement, the dates the agreement is signed and the beginning and ending dates of the period of time during which the agreement is in effect;**
- C. A provision that allows either party to cancel the collaborative practice agreement by written notification;**
- D. Specification of the site and setting at which the collaborative practice will occur;**
- E. Specification of the qualifications of the participants in the collaborative practice agreement;**
- F. A detailed description of the types of diseases, drugs or drug categories involved and collaborative drug therapy management allowed in each patient's case; and**
- G. A procedure for the referral of each patient to the practitioner.**

General Tips

Begin with the End in Mind!

Show student the final evaluation rubric, what you expect.

Build rapport and relationship (future colleagues and employees)

Ice Breakers! Why did you become a pharmacist? What do you contribute to patient care? How did you choose your practice?

Activities that are easy to “IPE-ize”

Topic presentations on new medications and guidelines

Create educational pamphlets on particular patient education topic in collaboration with doctors offices

Revise or develop a website

Journal clubs for multiple professions

Collaborate on a P&T presentation

Create a new Plan-O-Gram for an OTC section or for the prescription department

Discharge counseling

Precepting students

- Activities
 - Solid orientation and onboarding. Team introductions. First names!
 - Roles and responsibilities. What do pharmacists do? What do physicians do? What education/training does each have?
 - Pharmacy/medical students aren'tyet! And need guidance.
 - Be Socratic! What do you do when they get stuck?
- Feedback
 - Formative and frequent
 - MidPoint
 - Final

IPE Evaluation for Husson APPE students From RxPreceptorWe ask you evaluate

The student collaborates as a member of an interprofessional team.

Learning Target(s):

Communicate a patient's medication-related problem(s) to another health professional

IPE Evaluation at UNE: Assess and Document

ASSESSMENT

Interpersonal skills:

4.4 Works collaboratively with the pharmacy team and other health care professionals.

Verbal, Non-verbal, and Listening skills:

5.1 Communicates effectively with patients, caregivers, health care professionals, and the public

Patient Care:

7.7 Appropriately refers patients to other health care providers or services.

DOCUMENTATION

- Required to log 10 interprofessional encounters while on each core rotation

Preceptor Development

When multiple pharmacists at a site, give each other feedback on teaching skills. Evaluate activities.

Engage themselves in CPD activities to stay clinically sharp

Precepting helps keep you clinically connected because students share knowledge as they are learning.

You don't need to be the expert, you need to be the guide.

Break out session

- Examples of student projects that have expanded practice or knowledge
- Brainstorming on how to embed IPE activities into current actives
- Share with the group

Assessment Question 1

- Interprofessional education may be summarized by the following statement:
 - A. two or more health professions working side by side
 - B. two or more health professions improving patient outcomes
 - C. two or more health professions learning about, with and from each other.
 - D. two or more health professions collaborating by tele-medicine

Assessment Question 2

- Interprofessional education may be accomplished:
 - A. only in a hospital setting
 - B. only where physicians are present
 - C. in a community pharmacy
 - D. only in pharmacy school

Assessment Question 3

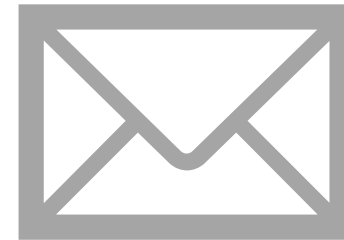
Which of the following is not a benefit of increasing IPE experiences?

- A. Increasing understanding of multiple roles and responsibilities
- B. Increased barriers to communication among professionals
- C. Reducing the risk of burnout among learners
- D. Ability to share values and ethics

Contact



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Reference

[Preceptor Tips](#) University of North Carolina, 2021

Preceptor's handbook for Pharmacists, third edition - ASHP. (n.d.). Retrieved October 10, 2022, from <https://www.ashp.org/-/media/store-files/p4955-sample-chapter-1.ashx>

Collaborative Practice Agreements.

https://www.cdc.gov/dhdsp/pubs/docs/translational_tools_pharmacists.pdf

www.rxpreceptor.com

Preceptor Pearls from ASHP <https://www.ashp.org/-/media/preceptors-conference/docs/handouts/870L04-NPPC18-Pearls-Slides-combinedFINAL.pdf>