

19. Longitudinal Community Pharmacy Placements

Ensuring the Quality of Placements

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Introduction

Longitudinal placements are “a regular, recurrent placement in the same setting with the same supervisor over a period of time”. “Continuity” is the organising principle for promoting learning. Longitudinal placements establish more opportunities for connection with patients (“continuity of care”), integrate knowledge, skills and attitudes and link experiential learning to the curriculum (“continuity of curriculum”) and enhance supervision, role modelling and mentoring (“continuity of supervision”).

Initiative

The Longitudinal Clinical Pharmacy Placement (LCPP) was introduced in RCSI with the commencement of a new integrated programme in 2015. The LCPP was designed as one half-day per week, in the same community pharmacy, for the duration of the second semester in Year 2 of the programme. Students are required to complete a workbook and particularly engage with one patient to promote patient interaction. The design was based on the published literature, which mainly pertains to medicine. The placements are managed by the Affiliation for Pharmacy Practice Experiential Learning (APPEL). The other Schools of Pharmacy opted for a two-week block. The Head of School of Pharmacy supported the LCPP initiative, and the Director of APPEL agreed to implement the LCPP on behalf of RCSI.

The LCPP was suspended during the Covid-19 pandemic, given the risks to the junior students outweighed the benefits to the public. Senior pharmacy students remained on placement and contributed to the provision of healthcare. The LCPP was reintroduced in February 2022 with diminished risks to students through vaccination, and the benefit to their learning.

Outcome

An explanatory mixed methods study sought to explore if the LCPP promoted learning through student patient-centeredness, curricular integration, and growing professional engagement.⁴ Quantitative data for the study was collected prior to and after the LCPP using a questionnaire incorporating a validated measure of professional engagement (S-PIPE instrument) and items relating to patient-centeredness and curriculum integration. Semi-structured interviews were then conducted with students, supervisors and practice-educators. There was a 78% response rate (47/60 paired responses) to the questionnaire and 25 interviews were conducted. There was quantitative and qualitative evidence of patient connection during LCPPs. Curriculum integration was enhanced by the longitudinal nature of the placement. There was a significant increase in the sum scores of the S-PIPE instrument, indicating enhanced professional engagement. Qualitatively there was evidence that engagement was promoted through role modelling and supervision. Some students had fewer opportunities to connect with people, and for some changes in supervisor compromised continuity of supervision. The placement, therefore, needs to be of a sufficient length to enable repeated patient interaction. Students, supervisors and practice-educators agreed that there would be an advantage in increasing the time spent on placement.

Table 1. Mean and Sub-scale scores: mean, standard deviation, median and interquartile range (n=47) and Pre- and post-placement comparison using the S-PIPE tool

Score	Mean	Std. Deviation	Median	Interquartile range	Z (p)
Pre Mean Score	3.81	0.99	4.50	3.22-3.67	-4.328 (<0.01)
Post Mean Score	4.47	0.79	5.05	3.76-4.67	
Pre Belonging	3.95	0.98	4.00	3.22-4.66	-4.153 (<0.01)
Post Belonging	4.57	0.79	4.67	3.88-5.11	
Pre Connectedness	3.47	1.46	3.33	2.66-4.37	-4.199 (<0.01)
Post Connectedness	4.45	1.12	4.66	4.00-5.33	
Pre Meaningful Experience	3.64	1.08	3.50	2.75-4.25	-2.435 (0.02)
Post Meaningful Experience	4.11	0.91	4.25	3.5-4.75	

An enhancement to these placements was introduced for the 2021-22 academic year. The experience of teaching through the Covid-19 pandemic was used positively, as the timetable was rescheduled to feature online learning on the morning of the LCPP. This gave additional flexibility for travelling for students attending placements near their homes or accommodation, and may provide for an increase in the time spent on placement in the future. Overall, the research showed that an early LCPP promotes learning by providing opportunities for curriculum integration and professional engagement, an important element of the pharmacy curriculum.

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