Learner Integration: A Win-Win-Win Scenario

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Disclosures

- Marialice Bennett serves on a TEVA Advisory Board and is a paid contract surveyor for ASHP Accreditation Services.

- Randy McDonough is co-owner of Towncrest, Solon Towncrest, & Towncrest Compounding Pharmacies. He is also co-owner of Innovative Pharmacy Solutions. Randy is a speaker for McKesson Health Mart Town Hall Meetings.

The American Pharmacists Association is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

Learning Objectives

1. Identify learner needs for clinical skills development and develop learning activities to meet these needs.
2. Create learning activities in a pharmacy practice that are designed to develop complex thinking skills among learners.
3. Identify activities and strategies for assessment that are appropriate for various learning objectives.
4. Describe strategies for enhancing learner integration within pharmacy practice, including interprofessional approaches.

1. Which of the following is TRUE about course objectives?

a. Bloom’s Taxonomy is used to designate the cognitive and affective domain levels of learning objectives.
b. Objectives are broad statements of abilities.
c. Assessment methods drive the development of objectives.
d. Objectives direct the activities the learner will experience on the rotation.
2. Your practice site provides learning opportunities that occur only once or twice a year. How can you manage the learning objectives assigned to these opportunities when the opportunity is not occurring?
   a. Mark n/a on evaluation.
   b. Lead a discussion about the experience.
   c. Create a case from the actual experience.
   d. Send the learner to a different site to have the experience.

3. Which of the following preceptor roles is least effective in experiential teaching?
   a. Modeling
   b. Facilitating
   c. Direct instruction
   d. Coaching

4. Which statement is false?
   a. Students function independently at a site requiring little supervision from their preceptors.
   b. Students can become an extension of the pharmacist with appropriate preceptor oversight.
   c. Students can help to develop new services at their practice site.
   d. Regular feedback is important to helping the student develop their clinical skills.

5. Each of the skills listed below are important for Continuous Medication Monitoring except:
   a. Problem-solving skills
   b. Marketing skills
   c. Health coaching skills
   d. Decision-making skills

Where do you start?

Understanding the Curriculum
• Vision and mission of the college or school of pharmacy
• Competencies, goals, and objectives
• Courses
  – Chemistry and biological sciences
  – Pharmacology, pharmaceutics, pharmacokinetics
  – Pharmacy practice
  – Practice and personal management
  – Experiential
Vision and Mission of College of Pharmacy

The Ohio State University College of Pharmacy advances the pharmacy profession and patient-centered care across Ohio and around the globe through innovative teaching and practice, groundbreaking research, and transformative outreach and engagement.

The mission of the Northeastern Ohio College of Pharmacy is to prepare highly skilled pharmacists who play an indispensable role in a team-oriented approach to patient care and medication management services. The College’s unique curriculum intermeshes with that of the College of Medicine to set new standards for interprofessional education, collaboration, community involvement, diversity and lifelong learning.

Curriculum Structure

- Competencies
  - Categories of program graduates’ capabilities
  - Patient Care

- Goals
  - Broad statement of abilities
  - Provide care using the JCPP Pharmacists’ Patient Care Process

- Objectives
  - Observable, measurable statements
  - (Analyzing) Collect relevant subjective and objective information for the provision of patient care.

Example: Side Effects of Antihypertensive Medications

Knowledge (Remembering): State the common side effects of antihypertensive medications.

Comprehension (Understanding): Compare the common side effects of antihypertensive medications.

Application (Applying): Predict the most likely side effects of antihypertensive medications in a particular elderly patient.
Analysis (Analyzing): Identify the side effects of antihypertensive medications in a particular elderly patient.

Evaluation (Evaluating): Justify the design of an antihypertensive medication regimen

Synthesis (Creating): Design an antihypertensive medication regimen for a particular elderly patient to avoid the most intolerable side effects.

Experiential Course: The What

• Syllabus
• Competencies, goals and objectives
  – Heart of course design
  – Determine the level of learning
  – Drive the assessment method
  – Direct the activities
• Evaluation tool
• Expectations
• Opportunities of the site/rotation

How to Align Activities with Objectives

• Plan 1
  – List all the things you do
  – Match your list to objectives
    • Keep in mind the cognitive level
  – Complete a gap analysis
    • Which objectives cannot be met?
    • Which objectives cannot be met every rotation?
    • Where can opportunities be created?

How to Align Activities with Objectives

• Plan 2
  – Determine how you will assess each goal
  – Assign activities to practice for the assessments

<table>
<thead>
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Defining Activities

- List of activities
- Preparation to do activity
  - What do they need to know?
- Steps to preform activity

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What Resources are Needed to Achieve Activities

- Policies and procedures
- Credentials
- Readings
- Equipment
- Technology
- Facilities
- Personal
- Adequate repetitions

Objective Assessment Activities to Prepare for

(Analyzing) Collect relevant subjective and objective information for the provision of patient care.

(Creating) Develop a business plan for a new service or an enhanced service.

(Applying) Demonstrate responsibility to patients.

Experiential Courses: The When

- Create a Master Schedule or Checklist
  - Location
  - Activities
  - Preceptor
  - Feedback
  - Assessments

Experiential Courses: The Who

- IPPE, APPE, or Resident
  - Depth and breath
- Individual needs
  - Portfolio
  - Learning style inventories
  - Strength Finders
  - Special needs
- Degree of independence

Experiential Courses: The How

- Instructor Roles
  - Director
  - Instruction
  - Modeling
  - Coaching
  - Facilitating
Experiential Courses: The How

Technology for precepting

- Dropbox
  - Cases
  - Drug information questions
  - Things don’t see every rotation
- Portfolios
- Guidelines and drug Information resources
- Calendar reminders
- Webinars
- Video taping
- What student can teach you

What will it look like?

Towncrest Pharmacy

- Background information
  - Pharmacists
    - Bernie Cremers, Mike Deninger, Randy McDonough, Kelly Kent, Kelly Richeal, Denise Prybil, Angela Lyons, Jill Weetman, Melanie Furman
  - Resident
    - Rani Raju
  - Technicians
    - Mary Powers, Bonnie Forbes, Emily Mostaert, Amanda Rhines, Amy Runge, Joseph Weirather
    - Student technicians
      - Jessica, Monica, Robert, Annika, Autumn, Abby, Aaron, Hannah
  - Inventory Management and Book keeping
    - Bill Haigh

Five Functional Areas

- Dispensing area for our ambulatory, independent patients
- Nursing home area (ICF, SNF, assisted living, group homes and supported community living agencies)
- Clinical services
- Compounding
- Durable Medical Equipment
Towncrest Pharmacy

Clinic Services
- Med Check Program
- Medication Adherence Program
- Med Sync
- Influenza and Pneumococcal Vaccinations
- Zostavax Vaccination
- Tdap Vaccination
- Medication Therapy Management (MTM)
- Nursing Home Consulting
- CPAP service/education
- Ostomy Consultations
- Drug Information Service
- Comounding
- Employer based health screenings
- Diabetic shoes
- Compression stockings
- Wellness Center
  - Cholesterol screening
  - Blood glucose screening
  - BP screening
  - Height and Weight
  - BMI
- Specialized Focused
  - Mental Health
  - Wellness
  - Geriatrics
  - End of life/palliative care
- Pharmaceutical Case Management (PCM)
- Employer based health screenings

Towncrest Pharmacy

Teaching Experience
- Providing rotations to Advanced Pharmacy Practice Experience (APPE) to the University of Iowa College of Pharmacy students (7 to 8 students per year)
- Providing community pharmacy residency experience for the past seven years

Towncrest Pharmacy

Teaching Philosophy
- Learners (residents and students) are integrated into the practice so they become an extension of Towncrest Pharmacy providing patient care and clinical services to patients so that they gain the clinical experience and confidence needed to become independent critical thinkers and problem solvers.
- Learners will provide continuous medication monitoring (CMM) services ensuring that patients are achieving their therapeutic outcomes with safe and effective drug therapies.
- Learners will collaborate with other healthcare providers providing clinical recommendations to resolve drug therapy problems identified through the CMM process.
- Learners will document all patient care activities.

Matching learning Activities with Learning Goals

Please list 5 measurable goals that you would like to meet by the end of this rotation.
1.
2.
3.
4.
5.

Student Orientation Checklist

1. Review expectations of student and preceptor (SMO) and POMS.
2. Complete student preceptorship evaluation.
5. Observation of patient care.
Educating the Learner about the need for Paradigm Change in Pharmacy Practice

- Health care reform
- Evolution of pharmacy from a product-focus to patient-care focus
- Survival of the profession
- Evolution of Practice

Recognizing Practice Gaps

- Current practice issues
  - Pharmacists' time pressures
  - Lack of recognition for clinical knowledge and expertise
  - Patients
  - Other health care providers
  - Payers
  - Insufficient reimbursement for all aspects of practice
    - Dispensing
    - Clinical services
    - Patient counseling and education
    - Drug information services

Recognizing Practice Gaps

- Current practice issues
  - Inadequate space for clinical services
  - Pharmacists not prepared to provide clinical services
  - Insufficient documentation of patient care activities
  - Uncertainty of the future of pharmacy and the role of pharmacists

Teaching Continuous Medication Monitoring (CMM)

- What is CMM?
  - Happens at the time of a patient encounter
  - Pharmacists are focused on patient medication management
  - Identifying actual or potential drug therapy problems
  - Collecting further clinical information as needed
  - Implementing clinical intervention to resolve the drug therapy problem
    - Patient directed
    - Prescriber directed
    - Potentially both
  - Documenting the patient care process
  - Doing all of this in “real time”

Teaching Continuous Medication Monitoring (CMM)

- Why CMM?
  - Need to impact patient therapeutic outcomes
  - Improved patient outcomes mean improved pharmacy quality measures
  - High performing pharmacies are more likely to be part of preferred provider network
  - Its all about access to lives
  - Pharmacies part of a preferred provider network are more likely to receive bonus incentives for additional revenue
  - This is the future of community pharmacy

Teaching Continuous Medication Monitoring (CMM)

- How is CMM delivered in a busy community pharmacy?
  - Technician driven dispensing system
  - Utilization of technology
  - Moving away from the “strip-down” model of community pharmacy practice
    - Sufficient staff (technicians and pharmacists)
    - Use of a clinical documentation system
    - Training pharmacists how to perform “quick clinical” assessments on the run
    - Developing systems and processes to ensure efficiency of effectiveness
    - Creating “patient care” areas
    - Emphasizing to “make every encounter count™”
Teaching Continuous Medication Monitoring (CMM)

- What skills are required?
  - Therapeutic knowledge—foundation
  - Critical-thinking skills
  - Problem-solving skills
  - Decision-making skills
  - Interpersonal communication skills
    - Verbal and written
  - Collaboration and teamwork skills
  - Health coaching skills
  - Motivational interviewing skills
  - Documentation

Practice Changes Needed for CMM

- Technician driven, pharmacist managed dispensing process
  - Sufficient support staff (e.g. certified pharmacy technicians) to prepare medications
  - Pharmacists are freed up to focus efforts on CMM
  - If possible and if boards of pharmacy support, implement tech-check-tech
  - Develop workflow

Practice Changes Needed for CMM

- Moving away from the “strip-down” model of community pharmacy practice
  - The need for “slack” resources

The need for “slack” resources

Increasing Learner Accessibility “Business Management”

- Marketing, advertising, promotions
  - Meeting with our marketing representative
  - Implementing special health promotions
  - Creating marketing tools, promotional fliers, patient information

- Financial Management discussions
  - Pricing, revenue, and costs associated with products and services
  - Discussions about PSAOs, PBMs, contracting, MAC pricing, DIR fees, flexing, preferred/narrow/cost-savings networks, high performance networks, PFP, shared-savings, etc

- HR management discussions
  - Hiring, firing, evaluations, job descriptions, job responsibilities, scheduling, etc

Utilizing Technology

- Utilizing technology
  - Automated dispensing systems
Increasing Learner Accessibility
“Clinical”

- Continuous Medication Monitoring services
  - “MTM on the Run”
- Clinical services
  - Vaccinations
  - Point-of-Care testing
  - Adherence programs
- MTM services
  - Group homes
  - Part D plans
- Patient Management
  - Med Sync

Increasing Learner Accessibility
“Clinical”

- Patient work-ups
- Clinical interventions
- Patient education
- Patient counseling
- Home visits
- OTC counseling
- Health promotions
- Health coaching
- Motivational interviewing

Increasing Learner Accessibility
“Clinical”

- Documenting all patient care activities
  - CMM, Patient Encounters, MTM
  - Using our PharmClin (patent pending) system

Clinical Documentation System

Clinical Documentation System

Clinical Documentation System

Clinical Documentation System
Repetitions

- Initially, the learners are shadowing and observing the pharmacists/role models.
- Next (in a relatively short period of time) the learner provides the patient care/service with input from the pharmacists/role models.
- Eventually, learners provide the service with oversight from the pharmacists/role models.
- Feedback is provided with each patient encounter and clinical intervention.
- Provide the learners with as many patient care repetitions as possible.

Incorporate the Learners as “part” of the practice

- Learners do what the pharmacists do
  - But with oversight from the preceptor(s)
- Learners become an extension of the pharmacist
  - But with formative feedback from the preceptor(s)
- Learners are introduced to the patients at each encounter
  - Many patients like the fact that we are a rotation/residency site
  - Gives them the perception that we are always up-to-date
- Learners are incorporated into the practice and services
  - Challenge the learners with their clinical knowledge and have them challenge you. The learner-preceptor role is a give and take proposition.

Incorporate the Learners as “part” of the practice

- It is critical to teach them the importance of life-long learning
- Feedback, feedback, feedback
  - There should be no surprises at their final evaluation
- Make the learner feel like they are important to the practice
  - Adding new energy
  - Challenging how we do things
  - Improving our systems and patient care processes
  - Providing drug information services and clinical updates to patients, other providers, and pharmacy staff
- Learners should never feel as if they are “in-the-way”, but rather they provide benefits to the practice

Intraprofessional Opportunities

- Continuing education
  - Pharmacists
  - Technicians
- Discussions
  - Staff
  - Pharmacists
  - Technicians
- Intranet opportunities
- Newsletters
- Clinical meetings
- Professional meetings

Interprofessional Opportunities

- Development of collaborative working relationships (CWRs) with prescribers and other providers
- Shadowing healthcare practitioners within the health system or community
- Sharing of patient information
  - Electronic medical records
  - Traditional methods such as faxes
  - Databases (e.g. Matrix, CareAnyWare)

Interprofessional Opportunities

- Communications
  - Therapeutic Updates presentations to other providers
  - Marketing services
  - Updates on patients/data sharing
  - Drug information questions
  - Newsletters/e-communications
- Collaborative practice agreements (CPAs)
- Transitions of Care opportunities
Interprofessional Opportunities

- Interprofessional committee meetings
- Healthcare students in neighboring practices
  - Shadow each other
  - Journal Clubs
  - Case discussions
- Networking
  - Local community organizations
  - Local government task forces
  - Local town halls
  - Local advocacy efforts
- Research projects
- Others?

Learners Impact on Practice

- Bring a new energy and excitement to the practice.
- Bring new ideas and a fresh look at the practice.
- Improve in how a service is being delivered
- Updated therapeutics/clinical guidelines
- New skills and knowledge depending on learner background, experience, and education

Learners Impact on Practice

- Develop and implement a new service
- Improve an existing service
- Expansion of an existing service
- Provide feedback on workflow, documentation
- Help to create business plan, marketing plan, and promotional materials.
- Provide medication updates
- Answer drug information questions
- Research and grant opportunities

Learners Impact on Practice

- Case Examples
  - Compounding company started after a student on an elective rotation did a business plan along with a three year financial projection. Towncrest Compounding Pharmacy was founded.
  - Med Sync program developed, implemented, and improved by residents and is now a staple at our practice.
  - Cost benefit analyses done on Wellness Clinic to determine the profitability of certain clinical services
  - Successful implementation of an Employer based Health Screening program.
  - Students and residents help us expand our service offerings including MTM services

Key Points

- Understand the expectation of the institution and the rotation or “course” for the learner
- Align the learner’s activities with the expectations
- Plan rotation experiences from the beginning of the rotation
- Know the level of expectations for the learner
- Plan for how you will precept the experience
- Strategically plan for IPE experiences

Key Points

- Practice perspective
  - Let them see your practice “realities”
    - The good, the bad, and the ugly
    - Explain that opportunities exist within the disruption of health care and pharmacy practice.
  - Emphasize the importance of the learners to be ready at all times because they will never know when the opportunities will arise.
  - Give the student plenty of practice repetitions to develop their skills along formative feedback throughout the experience
  - Expose the learner a variety of educational/clinical activities to help develop their patient care skill sets
1. Which of the following is TRUE about course objectives?
   a. Bloom’s Taxonomy is used to designate the cognitive and affective domain levels of learning objectives.
   b. Objectives are broad statements of abilities.
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