

# **Acute Care Interprofessional Student Collaboration: Benefits of Medical and Pharmacy Students Working Together**

Son Nguyen<sup>1</sup>DO, PharmD; Lisa Eberhardt<sup>1</sup>, BSN, RN, CWOCN; Gurpreet Singh<sup>1</sup>, MD; Amanda L. Engle<sup>2</sup>, PharmD, BCPS; James Desemone<sup>1</sup>, MD, FACP Albany Medical College<sup>1</sup>; Albany College of Pharmacy and Health Sciences<sup>2</sup>

### **INTRODUCTION**

- Interprofessional collaboration has become fundamental in the development of a well-functioning healthcare system showing significant impact on the quality, efficacy, and safety of patient care<sup>1-2</sup>.
- The Interprofessional Education Collaborative identified core competencies moving beyond profession-specific educational efforts, engaging students of different professions in interactive learning with each other <sup>1</sup>.
- Despite the known benefits of interprofessional collaboration and the aim for a standardization in interprofessional curricula, current literature fails to identify a standard mechanism in both the design and implementation of interprofessional education (IPE) programs <sup>1-2</sup>.
- Highlighting the importance of interprofessional student collaboration, the purpose of this study was to evaluate the impact of an interprofessional team rounding model on the ability of pharmacy and medical students to achieve Interprofessional Education Collaborative standards of competency.

### METHODS

sets of MS total.

Two fourth year medical students (MS) and two fourth year pharmacy students (PS) paired up into teams of 1 student from each profession during an internal medicine acute care rotation at Albany Medical Center. PS rotated for 6 weeks while MS rotated for 2 weeks then new MS began for the next 2 weeks; PS met 3

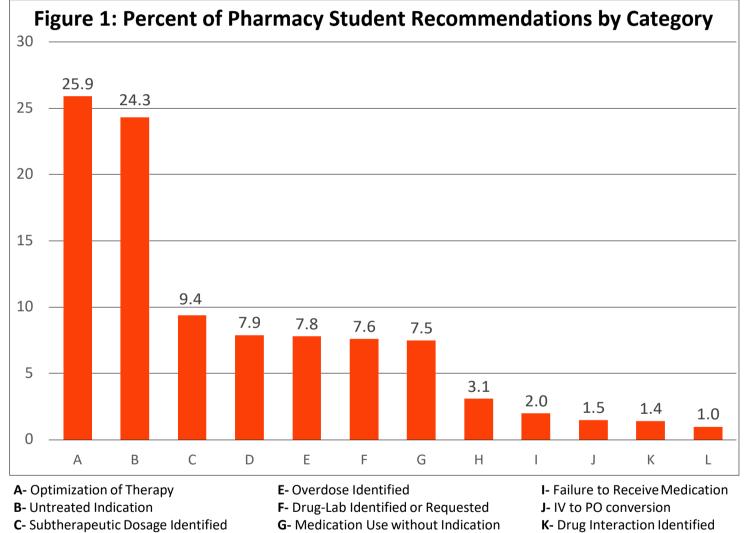
- Student teams pre-rounded on patients without faculty present, including conducting patient interviews together and working together to devise the management plan for the day, for which the medical and pharmacy students copresented to the Physician and Pharmacist who attend rounds.
- PS tracked pharmacotherapy recommendations made each day as a result of this service.
- The Interprofessional Collaborative Competency Attainment Scale (ICCAS)<sup>3</sup> was administered to both PS and MS at the end of their IPE rotation experience.



Interprofessional Education Team Rounds

### RESULTS

- Two hundred sixty six patient encounters were recorded. Of these encounters, 690 pharmacotherapy recommendations were made by pharmacy students to the medical team over a 36 week period. The acceptance rate was 85%.
- Figure 1 shows the types of recommendations made by pharmacy students and the corresponding category percentages. Of all recommendations, 13% involved medication history errors and 18% involved medication reconciliation errors.



ICCAS survey results post interprofessional collaboration revealed a 70% [95% confidence interval 11.55-14.81, p < 0.05] increase in the self-reported attitudes about IPE and the perceived ability to engage in collaborative practice.

**D-** Adverse Drug Reaction Identified

• <u>Table 1</u> represents the average student responses greater than a Likert value of 3 (Very Good and Excellent) before and after IPE collaboration.

### Table 1: ICCAS Survey Skills Participation Assessment Change

H- Improper Drug Selection

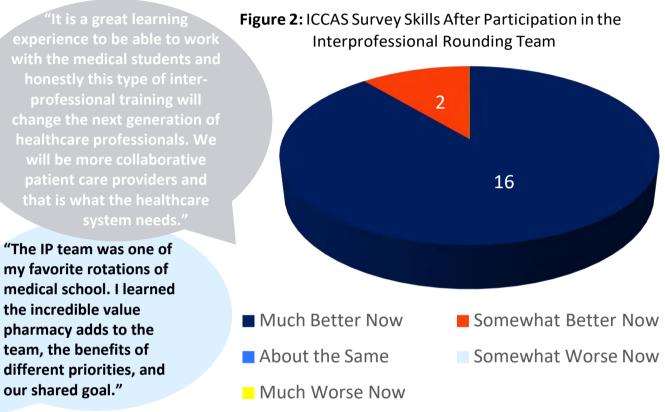
		Number of Questions Greater Than 3 After	Cł Be
Average	5.54	18.72	
STDV	4.62	3.15	

interprofessionally compared to prior to the IPE.

L- Duplication of Therapy

hange After from efore

13.18 4.59 • Figure 2 depicts the students' overall reported perceived ability to collaborate



## **CONCLUSIONS & FUTURE DIRECTIONS**

- The Albany Medical College and Albany College of Pharmacy and Health Sciences IPE program demonstrated clear clinical and educational benefits, as demonstrated through types and volume of pharmacy student recommendations and statistically significant improvements in ICCAS scores.
- This experience improved patient care and provided a framework for learners to develop interprofessional clinical competencies.
- To propagate this model, with the goal of expanding access to IPE learning at the bedside which our group determined to be optimally effective, students, clinicians, educators, and administrators alike must align priorities to eliminate logistical barriers, such as redesigning existing experiential curriculum to increase preceptor availability and aligning student schedules across the medical and pharmacy schools. This work is currently being reviewed by our AMC-ACPHS Interprofessional Education Steering Committee, with an aim to pilot an IPE service in inpatient pediatrics and a second internal medicine team.

## **IPEC INSTITUTE OBJECTIVE**

• Create competency-based, practice-oriented curricula for improving interprofessional education

1. Grbic Dea. Analysis in Brief: Interprofessional Educational Opportunities and Medical Students' Understanding of the Collaborative Care of Patients , AAMC. 2014:14(10)

2. Javadi MR. Khezrian M. Sadeghi A. Haiimiri SH. Eslami K. An Interprofessional Collaboration between Medicine and Pharmacy Schools: Designing and Evaluating a Teaching Program on Practical Prescribing. Journal of research in pharmacy practice. 2017;6(3):178-181 3. Archibald D. Trumpower D. MacDonald CJ. Validation of the interprofessional collaborative competency attainment survey (ICCAS). J Interprof Care. 2014 Nov: 28(6):553-558

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