

# So what exactly is IPPE?

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# Objectives

- At the completion of this talk the audience should be able to:
  - Discuss ACPE standards for pharmacy education
  - Discuss what an IPPE is and the reason for having IPPEs as part of the pharmacy curriculum
  - Identify purposeful educational activities for the students
  - Recognize Precepting challenges and identify possible solutions

# ACPE

- The Accreditation Council for Pharmacy Education (ACPE)
- Established in 1932 for the accreditation of professional degree programs in pharmacy, and in 1975 its scope was broadened to include accreditation of providers of continuing pharmacy education ([www.acpe-accredit.org](http://www.acpe-accredit.org))
- The mission of ACPE is to assure and advance quality in pharmacy education.
- State boards of pharmacy require that licensure applicants from the United States have graduated from an accredited pharmacy degree program to be eligible to sit for the North American Pharmacist Licensure Examination (NAPLEX®).

# Accreditation Timeline

- Application
- Pre-candidate Status
- Candidate Status
  - The Husson University School of Pharmacy earned candidate status from the [Accreditation Council on Pharmacy Education](#) (ACPE) at the June 2010 ACPE Board of Directors meeting
- Full Accreditation

# Revision of Standards: Background

- All accrediting bodies, including ACPE, periodically review and revise their standards
- A number of environmental factors required ACPE to conduct a careful reassessment of the standards. These factors included:
  - The experience gained by ACPE in its accreditation reviews since the adoption of the Doctor of Pharmacy standards in 1997
  - Feedback from ACPE stakeholders regarding quality improvement of the standards



<http://siliconvalleysleuth.co.uk/photos.jpg>

# Revision of Standards (Cont'd)



<http://siliconvalleysleuth.co.uk/photos.jpg>

- The reports of the Institute of Medicine ([www.iom.edu](http://www.iom.edu)) noting needed changes in our health care system to improve medication safety and patient outcomes
- The proliferation, now in more than 40 states, of collaborative health care practice
- Legislation that includes an expanded patient care role for pharmacists.

# Revisions of Standards (Cont'd)

- Revision of the AACP's Center for the Advancement of Pharmaceutical Education (CAPE) Educational Outcome
- 2005 revision of the NAPLEX examination blueprint
- Medicare Modernization Act of 2003
- AACP's development of a profile system to display exemplary experiential sites
- ASHP Practitioners' Vision of Pharmacy Practice 2015



<http://www.adcet.edu.au/Admin/UploadedFiles/Images/Photos/standards.jpg>

# Areas of emphasis

- *Communication skills*
  - Curricular content
  - Evaluation/assessment/outcomes
- *Experiential education*
  - Faculty and staff matters
- *Interprofessional teamwork*
- *Patient safety*
- *Professional competencies*
- *Professionalism*
  - Regional accreditation
  - Scholarship and research
  - Student admission and progression

# Mapping of ACPE Standards

Standards 2000		Standards 2007	
Number	Title	Number	Title
1	College or School of Pharmacy Mission and Goals	1	College or School Mission and Goals
2	Systematic Planning	2	Strategic Plan
3	Systematic Assessment of Achievement	3	Evaluation of Achievement of Mission and Goals
		4*	Institutional Accreditation
4	College or School of Pharmacy and University Relationships	5	College or School and University Relationship
5	Organizational and Administrative Relationships in University and Affiliated Healthcare Facilities	6	College or School and other Administrative Relationships
6	College or School of Pharmacy Organization and Administration	7	College or School Organization and Governance
7	Responsibilities of the Dean of the College or School of Pharmacy	8	Qualifications and Responsibilities of the Dean
8	The Curriculum in Pharmacy	9	The Goal of the Curriculum
9	Curricular Organization and Length	10	Curricular Development, Delivery, and Improvement
10	Professional Competencies and Outcome Expectations	12	Professional Competencies and Outcome Expectations
11	Areas and Content of Curricular Core	13	Curricular Core-Knowledge, Skills, Attitudes, and Values
		14	Curricular Core-Pharmacy Practice Experiences

[http://www.acpe-accredit.org/pdf/CS\\_Mapping\\_of\\_Standards\\_2000\\_vs\\_Standards\\_2007.pdf](http://www.acpe-accredit.org/pdf/CS_Mapping_of_Standards_2000_vs_Standards_2007.pdf)

# Standard No. 9

- **Standard No. 9: The Goal of the Curriculum**

- The college or school's professional degree program curriculum must prepare graduates with the professional competencies to enter pharmacy practice in any setting **to ensure optimal medication therapy outcomes and patient safety**, satisfy the educational requirements for licensure as a pharmacist, and meet the requirements of the university for the degree
- The curriculum must develop in graduates knowledge that meets the criteria of good science; **professional skills, attitudes, and values; and the ability to integrate and apply learning to both the present practice of pharmacy and the advancement of the profession.**

# Standard 9 (Cont'd)

- Ensure optimal medication therapy outcomes and patient safety
- Develop professional skills , attitudes, and values
- Develop the ability to apply learning to both present practice and the advancement of pharmacy
- Identify and implement needed changes in pharmacy practice and health care delivery

# Standard No.12

- Standard No. 12: Professional Competencies and Outcome Expectations
  - Provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health care team based upon sound therapeutic principles and evidence-based data, taking into account relevant legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.
  - Manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.

# Standard No.14

- **Standard No. 14: Curricular Core—Pharmacy Practice Experiences**

- The college or school must provide a continuum of required and elective pharmacy practice experiences throughout the curriculum, from introductory to advanced, of **adequate scope, intensity, and duration to support the achievement of the professional competencies presented in Standard 12.**

- **The pharmacy practice experiences must integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum.** The objectives for each pharmacy practice experience and the responsibilities of the student, preceptor, and site must be defined. Student performance, nature and extent of patient and health care professional interactions, where applicable, and the attainment of desired outcomes must be documented and assessed.

# Guideline 14.4

- The introductory pharmacy practice experiences must involve actual practice experiences in community and institutional settings and permit students, under appropriate supervision and as permitted by practice regulations, to assume direct patient care responsibilities
- The introductory pharmacy practice experiences should begin early in the curriculum, be interfaced with didactic course work that provides an introduction to the profession, and continue in a progressive manner leading to entry into the advanced pharmacy practice experiences
- The didactic course work itself should not be counted toward the curricular requirement of introductory pharmacy practice experiences.

# IPPE1 Community- Goal

The goal of IPPE Community rotation is to expose the student to the everyday practice of pharmacy in the different types of community settings (Chain store, Grocery store, Independent...etc.). The student should be introduced to all aspects of professional interactions with patients and coworkers, medication dispensing, and pharmacy management

# IPPE<sub>2</sub> Institutional- Goal

The goal of IPPE institutional rotation is to expose the student to the everyday practice of pharmacy in the institutional setting. The student should be introduced to all aspects of professional interactions with patients and coworkers, medication distribution and/or dispensing, and pharmacy management.

# IPPE Objectives

## IPPE<sub>1</sub>

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- Professional Conduct
- Prescription Compounding and Dispensing
- Pharmacy Management
- Communication

## IPPE<sub>2</sub>

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- Professional Conduct
- Prescription Compounding and Dispensing
- Pharmacy Management
- Communication

# Barriers to Effective Precepting

- Anything that prevents transmission of the message
  1. **Language Barrier**  
Different languages, vocabulary, accent, dialect represents a national/ regional barriers
  2. **Cultural Barriers**  
Age, education, gender, social status, economic position, cultural background, temperament, health, beauty, popularity, religion, political belief, ethics, values, motives, assumptions, aspirations, rules/regulations, standards, priorities can separate one person from another and create a barrier
  3. **Individual Barrier**  
It may be a result of an individual's perceptual and personal discomfort
  4. **Organizational Barrier**  
The nature of the internal and external environment like large working areas physically separated from others, poor lightening, outdated equipments and background noise are Physical Organizational Barriers.

# Barriers (Cont'd)

5. **Interpersonal Barrier:**

Lack of Knowledge of non-verbal clues; different experiences; shortage of time

6. **Attitudinal Barrier:**

Pre-conceived notions, and distrusted source divides the attention and create a mechanical barrier which affects the attitude and opinion

7. **Channel Barrier:**

Lack of interest to communicate; information sharing or access problems which can hamper the channel and affect the clarity, accuracy and effectiveness.

**Biggest barriers**

- Time
- Lack of feedback

# Biggest Barrier.....TIME!

- Good time management will allow you to maximize the use of your time
- You know your schedule and how the day usually goes so you decide on meeting and discussion times
- First day is important, set the tone
- Reinforcing the importance of time management in pharmacy practice is an important lesson for students



# Overcoming Barriers

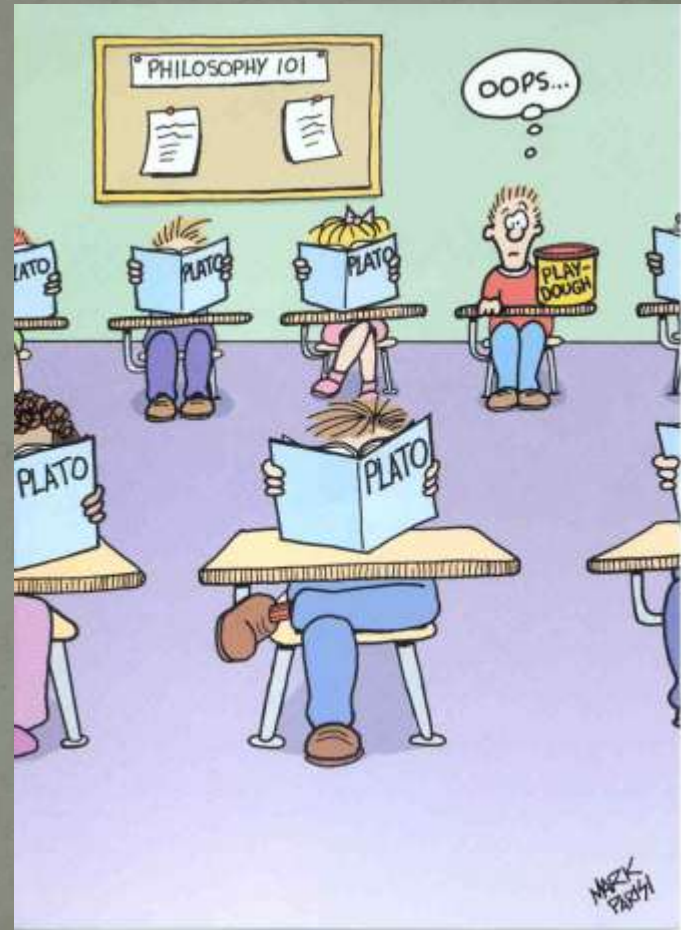
- First day student is at your site
  - Discuss background, pharmacy experience, career goals and plans
  - Discuss expectations
    - e.g. Conduct, ethics, confidentiality
  - Fill out necessary paperwork
    - HIPPA, Name badge, Parking...etc
  - Pharmacy tour
  - Introduction to staff
  - *Rotation Calendar*
    - This will keep your rotation on track and running smooth

# Rotation Calendar

Monday	Tuesday	Wednesday	Thursday	Friday
28	29	30	31	1
0800-1000 Student Orientation and introduction to staff	0800-1200 Dispensing activities with technician_____	0800-1200 Dispensing activities with technician_____	0800-0900 IPPE workbook	0800-1200 Inventory
1000-1200 Shadow pharmacy staff	1200-1230 Lunch Break	1200-1230 Lunch Break	0900-1200 Compounding with_____	1200-1230 Lunch Break
1200-1230 Lunch Break	1230-1245 How's the day going?	1230-1245 How's the day going?	1200-1230 Lunch Break	1230-1245 How's the day going?
1230-1630 Shadow pharmacy staff	1245-1630 Continue dispensing activities	1245-1630 Continue dispensing activities	1230-1245 How's the day going?	1245-1500 Inventory (Cont'd)
			1245-1400 IPPE workbook	1500-1600 How was your week? What's next?
			1400-1630 Continue compounding	
1630-1700 Wrap up	1630-1700 Wrap up	1630-1700 Wrap up	1630-1700 Wrap up	

# Overcoming Barriers (cont'd)

- Feedback
  - The place where miscommunication can be corrected
  - Receiver and sender change roles
  - Can be both *verbal* and *nonverbal*
  - Makes communication a two-way process
  - Can be used to determine the level of understanding of the receiver
  - Must be provided to students throughout the rotation.



<http://hercules.gcsu.edu/~hedmonds/images/plato%20cartoon.jpg>

# Constructive Feedback

- Focus on behavior rather than personality
  - Behavior can be changed
- Be descriptive rather than evaluative
  - Less threatening and judgmental
- Focus on your own reactions rather than the other person's intentions
  - Assigning blame is not constructive
- Be specific
  - Focus on the issue at hand
- Focus on problem solving
  - Improves relationship
- Provide feedback in a private setting

# Effective Opportunities to Teach in a Productive Manner

- Patient education and counseling
- Literature searches and drug information questions
- Drug utilization reviews
- Technician activities
- Employee feedback and evaluation process
- Policies and procedure development or revision

# Conclusions

- Standards are reflective of current practice needs
- IPPEs are invaluable opportunities to teach hands-on
- Barriers do exist but can be overcome with proper planning
- Every experience is a learning opportunity