

# **An Interprofessional Clinical Integrations Pilot Program: Integrating Third-Year PharmD Students into Family Medicine Clinics**

**Eric H Gilliam PharmD; Kari L Franson PharmD, PhD  
Arian Hilsendager, FNP; Erin Hagermam, PA  
Benjamin Krikley, MD; Benjamin Chavez, PharmD**

**CU School of Pharmacy and Pharmaceutical Sciences – Aurora, CO  
and  
Salud Family Health Center – Commerce City, CO**



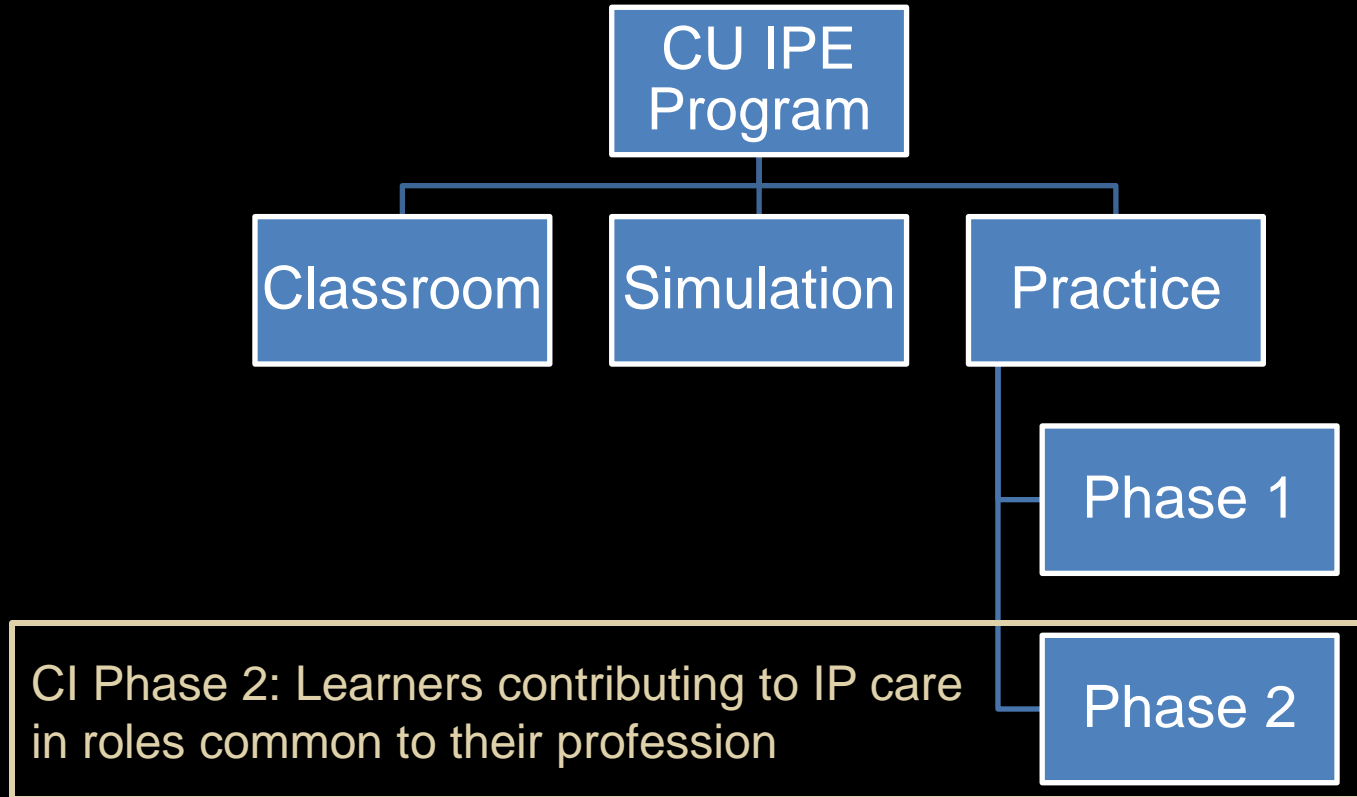
**University of Colorado Anschutz Medical Campus**  
**Interprofessional Education**

# Objectives

1. Describe the University of Colorado Clinical Integrations Program Vision
2. Describe the CU School of Pharmacy Clinical Integrations Pilot
  - » Create value-added student placements in interprofessional settings
  - » Optimize student placements for a win-win for both school and clinic
  - » Evaluate success of the first pilot

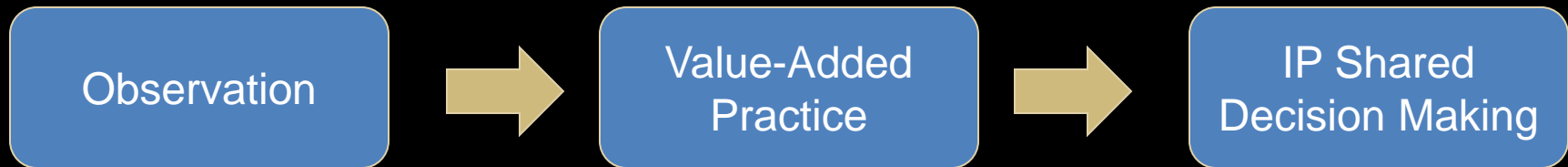


# CU IPE Program: New Focus on Clinical IPE

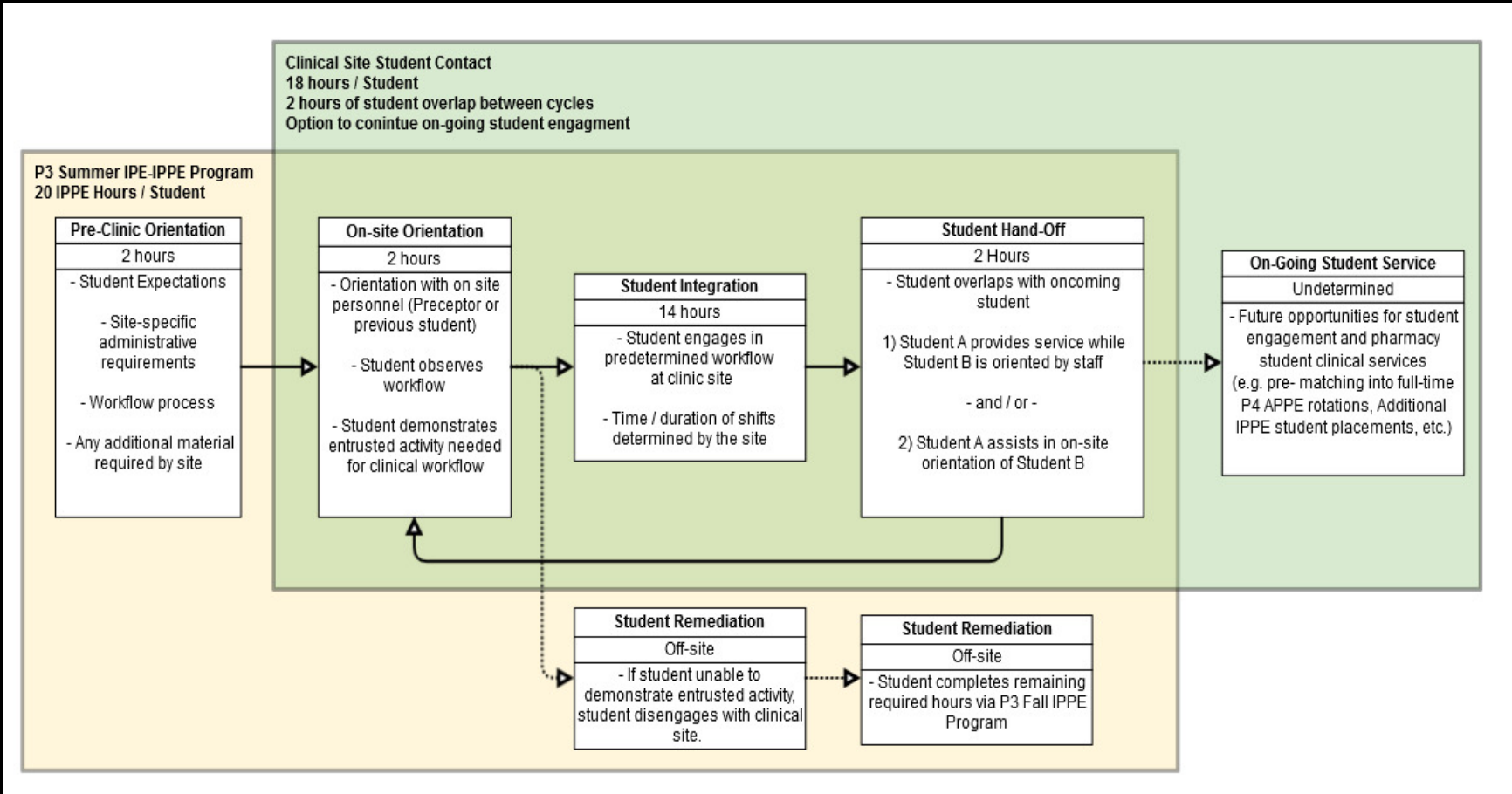


# Clinical Integrations: School of Pharmacy CI Phase 2 Pilot

- History:
  - » CU SOP has placed students into primary care settings intentionally to learn from primary care providers since 2002<sup>1</sup>
  - » Colorado statues changed to allow non-pharmacist providers to supervise pharmacy interns in clinical work



# The Pitch



# The IP Team

- Salud Family Health Center – Commerce City, Colorado
  - » IP Primary Care Team Preceptors
    - Physicians
    - Nurse Practitioners
    - Physician Assistants
    - Clinical Pharmacist (Non-precepting role)
  - » 21 Students:
    - Summer between 2<sup>nd</sup> and 3<sup>rd</sup> year students



# SOP Student Roles and Interactions

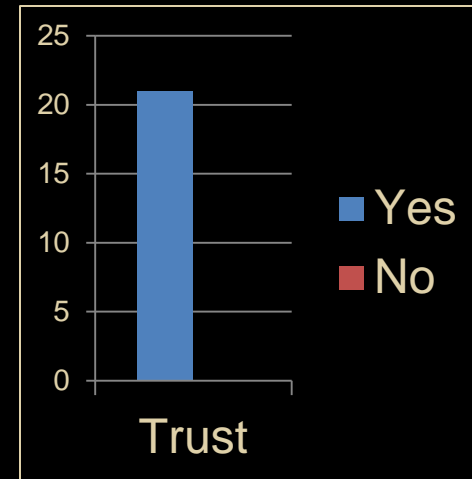
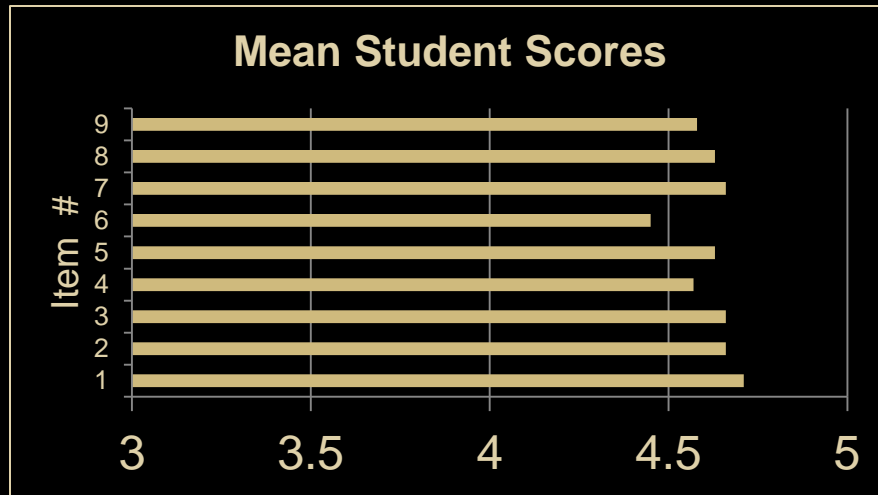
- Methods: IP Preceptor Debrief
  - » What roles did students have that were valuable to you?
    - Gathering HPI at start of visit
    - Conducting medication reconciliation
    - Identifying routine vaccinations needs
    - Counseling parents during wellness checks regarding OTC products (pediatric dosing)
    - Researching drug/dose information when creating plans
    - Following-up on prior authorization requests



# Student Performance

- 9-item assessment with 5-point scale
- 1 global assessment item with Yes / No Response

*“I would trust this individual to be on an interprofessional team”*





# Student Evaluation of Experience

- Overall incredibly positive:
  - » 100% of participating students agreed, he/she. . .
    - would recommend the experience to peers
    - felt they contributed directly to improved patient care
    - felt encouraged by their provider preceptor
    - participated in direct-patient care discussions with providers
    - described the provider preceptor as invested in the education of pharmacy students



# Student Reported Data Upon Completion

## Patient engagement

	Student Mean	Range	Program Cumulative Total
No. of patients seen	20.6	10 – 26	est. 450

## Student confidence in working with an IP Team

	Start	End
Mean level of confidence	2.38	3.27

Retrospective pre-post assessment using a 4-point scale



# Conclusion

- We learned:
  - » Creating shared expectations across students and providers resulted in:
    - Increasing patient care opportunities for students
    - Increasing value of the student
    - Maintaining sustainability and consistency of the experience throughout the pilot
  - » **Providers trust students as IP team members**

