ABSTRACT:
The Joint Commission of Pharmacy Practitioners Future Vision of Pharmacy Practice 2015 suggests that pharmacists will provide both "patient-centered and population-based care...and...promote health improvement, wellness, and disease prevention." Furthermore, the Accreditation Council for Pharmacy Education (ACPE) Standards and Guidelines 2007 include various aspects of public/population health competencies throughout their guidelines. Albany College of Pharmacy and Health Sciences (ACPHS) places an emphasis on real-time interaction with local public health organizations to provide students with real field experience in public health. In addition, our core group of community pharmacy-based faculty offers a "Well-Tip" program which includes various health screenings and promotion activities for the public at local pharmacies. Additional didactic coursework in wellness/preventive medicine includes elective courses in tobacco cessation; cancer screening, prevention, and early detection; and a required course in immunizations.

EDUCATIONAL METHODS OR APPROACHES USED:
A 40-hour Introductory Pharmacy Practice Experience (IPPE) in Public Health is a required component of our professional curriculum and must be completed the summer following the students first professional year (P1). Students are required to take a 6-week Advanced Pharmacy Practice Experience (APPE) in Community Pharmacy that provides them the opportunity to participate in various "Well-Tips" initiatives. These initiatives include blood pressure screenings, education about cancer screenings, and other disease prevention services. Didactic coursework in tobacco cessation, cancer screening, prevention and early detection and immunizations complement this community pharmacy experiential offering.

PROJECT DESCRIPTION:
The Public Health IPPE was implemented initially as an APPE during the 2008-2009 academic year in response to the increased number of experiential hours required by ACPE Standards 2007, and to specifically meet ACPE 2007 Standard 12 on Professional Competencies and Outcomes Expectations. This standard states: “Promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of health care providers.” ACPHS also had an interest in offering non-traditional practice opportunities to students to better prepare them for the evolving role of pharmacists in healthcare. Therefore developing a public health APPE was a natural fit for our institution and community. A number of faculty and students were already very engaged in service activities through professional and community organizations. These activities include the American Pharmacists' Association (APhA) "Operation Diabetes" and "Operation Immunization" and the American Cancer Society affiliated Colleges Against Cancer. The program requires collaboration between our Division of Experiential Education and local public health organizations.

Data collected after the first year of the public health experience was offered and helped determine that the activities for this experience were more appropriate for an IPPE rather than APPE experience. The evaluation of the program indicated that the students were completing activities that they would be competent to do after the P1 year. In many cases, students created educational brochures on self-management of diseases and public health initiatives such as bike helmet safety, healthy nutrition, and
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safe disposal of medications for which the P1 curriculum prepares the student. In the P1 year, for example, students take a self-care course. Based on this data, the Public Health experience was changed to an introductory, rather than advanced, pharmacy practice experience. The Tobacco Cessation, Cancer Screening, Prevention and Early detection, and Immunizations courses are all elective courses established prior to academic year 2005-2006. These courses were developed based on faculty interests and expertise. The Immunizations course became a required course beginning academic year 2009-2010 in response to both Standards 2007 and new legislation in New York State, passed in 2009 allowing pharmacists to administer flu and pneumonia immunizations to people over age 18.

The collaboration between our Division of Experiential Education with a specific professional staff member dedicated to public health IPPE (IPPE Public Health Coordinator) ensures the sustainability of the program. Several factors ensure the sustainability of the Immunizations course: state legislation allowing licensed-pharmacists to immunize; literature documenting the improvement in immunization rates now that pharmacists can immunize; community pharmacy employers expecting an immunization certificate as a condition of employment; and making immunizations a required course. The tobacco cessation and cancer screening, prevention and early detection elective courses provide faculty the opportunity to engage in teaching that satisfies their interests and expertise, and have been offered at least once each academic year since the courses were approved. While these courses are elective, the pharmacy curriculum committee recently required students to take 12 credit hours of professional electives; these courses are among those currently offered. Previously, students were able to take general education/liberal arts courses to meet the elective course requirement.

HEALTHY PEOPLE OBJECTIVE ADDRESSED:
ECBP-12-16 Increase the inclusion of core clinical prevention and population health content in health professions education.

PROGRAM OR COURSE GOALS:

Number of students enrolled/participating in 2010-2011 school year: 293

Public Health IPPE (1 credit hour)- 293 pharmacy students; This required 1 credit (40 hours/1 week) Introductory Professional Practice Experience provides students with practical experience in public health. Rotation experiences may include policy development, participation in community events such as health screenings, target population disease and medication education, health event planning and marketing, event outcomes assessment and health interventions in the target population. This experience is offered after completion of the P1 year.

Pharmacist-Assisted Tobacco Cessation (1 credit hour) - 25 pharmacy students (plus a waiting list each year);This clinical elective provides students with a foundation of core knowledge and skills to provide comprehensive tobacco cessation counseling to patients who are current or former tobacco users. The course approaches nicotine addiction from a pharmacologic, physiologic and psychological perspective. Communication and problem-solving skills are developed in the classroom through mock counseling activities and enhanced via participation in a tobacco cessation inpatient consult service at Albany Medical Center (AMC). The invitation to participate on the tobacco cessation service is provided at the completion of the course. This voluntary clinical component of the course provides students with a unique opportunity to observe direct patient care, application of course material and the importance of promoting a significant public health initiative. Upon completion of the course, students are competent in tobacco cessation encounters, including assessing a person’s readiness to quit, applying tailored cognitive and behavioral strategies to assist patients with quitting and selecting appropriate tobacco cessation aids.
Cancer Screening, Prevention, and Early Detection (3 credit hours) - 18 pharmacy students; The clinical practice guidelines from the National Comprehensive Cancer Network for the screening, prevention and early detection of breast, cervical, prostate and colorectal cancers are discussed with emphasis on the role of the health care professional in community/population-based settings. Cancer epidemiology, cost-effectiveness of cancer screening, complementary/alternative medicine and lifestyle modifications, including smoking cessation and skin cancer prevention are addressed. Students participate in clinical controversy discussions based on cases and articles drawn from the primary literature in a structured debate format. Each student debate team chooses a cancer screening/prevention/early detection topic of their interest to lead one of the assigned debates. One volunteer activity is required to be undertaken during the course to increase public health awareness of cancer screening, prevention and early detection and encourage service learning.

Pharmacists as Immunizers (1 credit hour) - 293 students; Pharmacy-Based Immunization Delivery is a hybrid course that integrates self-learning, live lecture, and vaccine administration skills assessment that was developed by the American Pharmacists Association in conjunction with the National Immunization Program, Centers for Disease Control and Prevention. The course provides students with the skills necessary to become a vaccine advocate, provide patient education, and administer vaccines. The core curriculum of the course includes a review of the basics of immunology as it pertains to vaccines, provides immunization education and training, as well as provide the necessary skills to develop a successful immunization service for a wide variety of patients in many different settings. The completion of this course results in a certificate that satisfies the legal requirement for training needed for pharmacists to immunize.

Community Pharmacy APPE with faculty (6 credit hours) - 25 pharmacy students; The primary goal of the Community Pharmacy Advanced Pharmacy Practice Experience II (CPAPPE II) elective is to provide student pharmacists with the opportunity to learn how to develop, implement and provide patient centered care programs in the community pharmacy setting. A patient-centered, outcomes-oriented approach allows the pharmacist to work with the patient and the patient’s other health care providers to promote health, prevent disease and assess, monitor, initiate and modify medication use to assure that medication therapy regimens are safe and effective. WellTIPs are wellness targeted intervention programs aimed at improving the health and wellness of the community we serve. These programs are also designed to increase patient awareness of the role their community pharmacists can play in their health thus promoting pharmacists as members of the patient’s healthcare team. Students are prepared to participate in the WellTIP program during the first day of orientation at the experiential site.

Did you conduct a needs assessment as part of your planning process? □ Yes  □ No

PROFESSIONS INVOLVED:
Public Health IPPE - overseen by a Coordinator of IPPE in the Division of Experiential Education who is a PharmD. The professions who serve as preceptors include nurses, physicians, pharmacists, social workers, and other public health professionals

LESSONS LEARNED/EVALUATION RESULTS:
Our greatest success has been the insight that our students gain as to the personal and social challenges patients face when attempting to change their behaviors to improve their health. These personal and social challenges can significantly impact a patient’s ability to effectively engage in the self-management of their medications.

Our greatest challenge in the public health IPPE program has been the lack of awareness and appreciation shown by some students who do not understand the purpose of the program. Some
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students feel that they should not be placed in non-pharmacy (e.g., brick-and-mortar pharmacy) environments and do not initially recognize or value the role of the pharmacist clinical prevention and population health. This is a minority view that we address with students individually. We are also working to communicate the message more clearly in our IPPE orientation sessions. Occasionally we are challenged with insuring site quality and opportunity for real field experience given the short 40-hour program. In some cases, students are given administrative work (such as filing and stuffing envelopes). Our Coordinator of IPPE has a quality assurance process and the Division of Experiential Education is also developing a preceptor development program specific for the public health preceptors. As part of the QA process, 10% of all public health IPPE sites are visited randomly. The student and preceptor are interviewed to collect feedback on the positive aspects of the program, suggestions for improvement, and to address any questions or concerns. Student evaluations of the experience are reviewed for response to the question, “Would you recommend this site for another student? Why or why not?” Negative responses are investigated for more information and a site visit may occur as a result.

CONCLUSION:
It is important to be creative in developing student awareness of and appreciation for the role that we all have in public health. We can all make a difference regardless of our health profession. Establishing formal affiliation agreements and ensuring that enough sites exist is a very important first step before determining if a required program for students is feasible. In some cases site availability may determine whether the course is initially offered as an elective. It is also important to be clear with the public health organizations about what the students are and are not yet able to do given the placement of the program into the curriculum.

COMPANION MATERIALS: (Course syllabi, resource lists, tests, website, etc.)

- Public Health IPPE activities checklist
- Public Health IPPE Syllabus
- Public Health IPPE Sites
- Community Pharmacy APPE Well-Tip program (example)
- Tobacco Cessation Course Overview
- Cancer SPE Syllabus
- Cancer SPE Schedule
- ACPHS Curricular Grid pre-2007
- ACPHS Curricular Grid post-2007

PUBLICATIONS:

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