‘When two Schools meet’: Pharmacy and Medical undergraduates learning Clinical Skills together.

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Background: The GPhC guidance document “Future Pharmacists”¹ highlights the importance of team working and an appreciation of the roles, responsibilities and skills of other health care workers. Interprofessional education (IPE) can counter inflexibility and tribalism², preparing people to work together to provide quality patient care. Learning together builds a strong foundation for more effective teamwork through greater understanding of and respect for each other’s skills and expertise³. Cardiff University School of Medicine Clinical Skills and Simulation Team and the School of Pharmacy have successfully forged a unique partnership in order to implement regular IPE in Clinical Skills within their curricula.

Method: The IPE initiative adopts social constructivism, in the belief that students from both Schools have unique views and knowledge bases of the skills that they learn together. Discussion between faculty from each School led to the agreement of learning objectives for the IPE, a timetable was set out for the combined training of Year 1 medical students (300) and Year 4 Pharmacy students (120) in the skills of Basic Life Support (BLS) and Vital Signs. Tutors from both Schools worked together to deliver the teaching. At the end of each session a simplified version of the “Readiness for Inter-Professional Learning Scale” (RIPLS) was distributed to students using total population sampling.

Results and Evaluation: Whilst logistically challenging to organise, the timetabled sessions of the first stage of this initiative have been highly successful, producing positive feedback from Pharmacy and Medical students. More than 71% of students strongly agreed (35%) or agreed (36%) they had “learned something by watching the approach of students from the other profession”. The evaluation response rate was over 90% from both medical and pharmacy undergraduates.

Discussion and Conclusions: Within any healthcare setting effective multi-disciplinary team working is essential for quality patient care. In order to deliver practice ready healthcare professionals undergraduate curricula must embed IPE. Research studies measuring longitudinal benefits of IPE³ suggest the initial benefits from learning together may fade after a number of months. It is therefore imperative that we develop this initiative to help us ensure long term value of our IPE programme.

References

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3. Bradley,P., Cooper, S & Duncan, F. (2009). A mixed-methods study of interprofessional learning of resuscitation skills. Medical Education. 43: 912–922