

Improving Clinical Pharmacology learning: Pharmacist-led teaching of first year clinical students

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Background: It is well recognised junior doctors find prescribing difficult during their formative years¹. They report feeling unprepared and express concerns about content on prescribing in the tertiary medical curriculum². They make more errors than experienced clinicians³. In New Zealand, the final three years of medical degrees are placement focussed providing the opportunity for clinical workplace learning. In 2018 a new pharmacist led Clinical Pharmacology module was developed as a voluntary option for fourth year students; this included tutorials and clinical attachments with pharmacists for students.

Aim: The aim was to improve clinical pharmacology knowledge, skills and confidence in medical students whilst creating inter-professional understanding. New practical collegial activities were introduced to consolidate foundation knowledge, enhance prescribing practice and create cultural change through inter-professional relationship building.

Methods: Structured seminars and pharmacist-led attachments with formal sign off were introduced for 2018. Changes include joint doctor/pharmacist-led prescribing tutorial, introduction to e-prescribing and clinical pharmacy attachment with specific learning outcomes. Informal PDSA cycles were used to improve the learning throughout the 6month introductory period. Pre and post intervention evaluation was completed.

Results: 85% students completed attachment (n=39). 100% of those students agreed / strongly agreed the tutorial and attachment were valuable. 96% reported improved confidence in skills. 100% had better knowledge of sources of help.

Discussion: This is a low cost and practical way for medical students to gain both explicit and implicit knowledge about prescribing and clinical pharmacology whilst building inter-professional understanding, providing a solid foundation for their remaining undergraduate years. Pharmacists report improved relationships with their students, facilitating improved prescribing rather than time spent on corrective actions.

Conclusion: Clinical Pharmacists are ideally placed to lead this learning as subject matter experts for medical students. Evaluation findings from 2018 will be applied to the 2019 intake, as a continuous improvement cycle.

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