

CLARION CALL

A section for passionate calls for action to further develop the contribution that pharmacy can make to healthcare

Working Together To Improve The Patient Experience: Community Pharmacies As Placement Learning Opportunities For Pre-Registration Nurses

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Background

The primary purpose of pre-registration nurse education is to prepare the future nursing workforce. Nurse education is therefore driven by decisions and predictions about what future health services could and should be like, and the knowledge and skills that nurses will need to meet individual and population needs.

The major factors affecting the health of the population and of individual people include:

- demographic change (ageing population and higher birth rate)
- changing patterns of health and disease
- rising expectations of the public and health service users
- increased access and choice
- the shift to delivery of more care in community settings
- continuing social inequality
- advances in care and treatment
- advances in technology for communications and care.¹

These changing needs are reflected in the modification of nursing curricula and programme design. The Nursing and Midwifery Council guidance recommends a community placement in all three years of pre-registration nurse education.² This has put increased pressure on existing

community services (e.g. health visiting and district nursing) and has highlighted the need to continually source and sustain new placements to meet demand. To maximise practice learning opportunities, Higher Education Institutions (HEI) are reviewing their practice placement models so that student nurses can experience a wider variety of community placements.

With the nationally recognised concept for Healthy Living Pharmacies, enabling pharmacies to help reduce health inequalities within the local community by delivering high quality health and well-being services, promoting health and providing proactive health advice, combined with their role of helping to provide better quality and more resilient urgent care, community pharmacies were identified by the HEIs in Leeds as having the potential to be an excellent learning environment for student nurses.

The Pilot

Two pilot studies took place. The first was in March 2014, utilising twenty three community pharmacies (Healthy Living Pharmacies) as two week (six days) practice learning opportunities for twenty-two 3rd year pre - registration nursing students from the University of Leeds. Feedback from the first pilot suggested that the length of the

placement should be reduced and the timing of the placement should occur earlier in the education programme. A second pilot took place in November 2014 with twenty-one 2nd year pre-registration nurses and thirteen community pharmacies; placements were reduced to one week (3 days).

Both pharmacists and student nurses were provided with a briefing sheet with suggested learning outcomes and information was provided via face-to-face contact. Pharmacies were happy to participate in the pilot even though there was no funding available to support them.

Findings

Combining the data for both pilots provided a response rate of 77% (34 responses) for the students and 49% (17 responses) for the pharmacies. The responses from the pharmacy evaluation may have been low as many of the pharmacies took part in both pilots and may have already provided an evaluation. As the surveys were anonymous there was no way of verifying this assumption.

Two of the key findings of the pilots related to the students' knowledge of the role of community pharmacies and the application of this learning to practice.



Community pharmacies are a good learning environment for nurses

“... greater understanding of each other’s roles and responsibilities provides the potential for closer collaboration and integration between the different professions...”

Knowledge of the role of the community pharmacy

Prior to starting the placement 59% (20) of the students who responded said that they had a thorough understanding of the role of the community pharmacy; this figure increased significantly to 91% (31) by the end of the placement. As two students commented:

“I have experienced the complexities of the community pharmacy, how they manage medicines for people and how they use concordance aids. Also their partnerships/communication with linking surgeries. Delivery systems. Ordering prescriptions. Health promotion projects: new medicines service, medication reviews, diabetes reviews, skin reviews, BP monitoring, smoking cessation

programs, minor ailments schemes, home visits and more. I did not realise the breadth of their services.”

“I did not know about some of the additional services they provided such as prescribing particular medications without a prescription from the doctor.”

A small minority of students (3) commented that they did not feel that the placement added any value.

Application of learning to practice

When the students were asked how this knowledge would be applied to practice they identified that it would help them in terms of making appropriate referral of patients to the community pharmacist,

discharge planning, gaining support from the community pharmacist for themselves, greater knowledge of pharmacology, medicines reviews, health promotion advice and multidisciplinary team working.

This greater understanding of each other’s roles and responsibilities provides the potential for closer collaboration and integration between the different professions, leading to being better able to support self-care and the ability to deliver care closer to home. Effective collaboration has been shown to create teams that work together better and improve patient experience.

Wider learning

The majority of respondents felt that the ideal length of placement should be for a day, dependent upon the student’s individual needs. This flexibility could be built in if the placement was part of a wider community placement where their learning needs could be assessed and the placement learning opportunity utilised appropriately.

Between pilots there was a noteworthy changeover of personnel in the pharmacies, which meant that a significant amount of time was invested in briefing new staff. This would not be an easily sustainable model for the future.

Next steps

Be proactive and consider approaching your local HEI, district nurse or practice nurse to explore your options and consider offering a practice learning experience as part of a wider community placement.

REFERENCES

1. Prime Minister’s Commission. Front Line Care: the future of nursing and midwifery in England. Report of the Prime Minister’s Commission on the Future of Nursing and Midwifery in England. 2010.
2. Nursing and Midwifery Council. Education Standards for Pre-registration Nursing Programmes. 2010.