Questions on the Teaching of the Patient Care Process

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In their article, Kolar et al.¹ propose that incorporating pharmacists' patient care process (PPCP) without intentionally teaching foundational components of professional practice is problematic. The authors state that teaching the PPCP may be premature, before introducing more broad concepts of pharmaceutical care consisting of practice philosophy, PPCP, and practice management system. But is there an assumption that PPCP replaced teaching the model of pharmaceutical care? The pharmaceutical care model was developed in 1990² and incorporated in many pharmacy school curricula for close to 30 years. According to the American Pharmacists Association, pharmaceutical care is "is a patient-centered, outcomesoriented pharmacy practice that requires the pharmacist to work in concert with the patient and the patient's other healthcare providers to promote health, to prevent disease, and to assess, monitor, initiate, and modify medication use to assure that drug therapy regimens are safe and effective."³ Another guiding principle of pharmacy practice is the "Oath of the pharmacist." The Oath commits pharmacists to a patientcentered approach, life-long learning, ethical and professional standards, and serving societal needs.

I would argue that both the concept of pharmaceutical care, as well as oath of the pharmacist, are introduced and discussed in early curricular stages in most pharmacy programs to prepare students for their didactic and experiential courses focused on delivery of direct patient-centered care. PPCP, a new requirement in ACPE 2016 standards, actually operationalizes and standardizes how a novice or experienced practitioner can deliver patient-centered care in a systematic way. It is not overly complex, and explains how to deliver abstract pharmaceutical care to a specific patient using concrete implementation steps. It empowers students to take concepts related to pharmaceutical care and apply them in a meaningful way to: collect information; assess and evaluate patients using a systematic approach that is unique to pharmacists, focusing on drug-related problems; generate and implement a plan; and design a patient-specific follow-up, monitoring schedule and parameters focusing on optimizing patient outcomes.

The authors suggest that philosophy of practice and practice management systems should be taught alongside PPCP and reemphasized throughout the curriculum. A very nice definition and discussion on philosophy of practice is provided by Cipolle et al. in their textbook, pharmaceutical care practice.⁴ Authors describe philosophy of practice as "specific to a practice, not to the practitioner," and as "different from an individual's philosophy of life." A philosophy of practice would aid in making clinical judgement calls, resolving controversial ethical dilemmas, and guiding the correct approach or priorities related to patient care. While this is crucially important, the profession is still not unified on what the philosophy of practice for a pharmacist is. Recently, Pestka et al. proposed 5 tenets to define philosophy of practice for pharmacists providing comprehensive medication management.⁵ These included meeting a societal need, assuming responsibility for optimizing medication use, embracing a patient-centered approach, caring through an ongoing patient-pharmacist relationship, and working as a collaborative member of a healthcare team. While not a new concept, even seasoned practitioners had variable responses when it came to aligning their practice with the proposed tenets.

So, this poses the following questions: is teaching the pharmaceutical care model and discussing the professional commitments of a pharmacist, as in the Oath of a Pharmacist, sufficient prior to introducing PPCP as a standardized approach to delivering pharmaceutical care? And, would philosophy of practice be something that is taught alongside with PPCP, while students are forming their professional identity and can reflect and relate to the philosophy in a meaningful way? Fundamentally though, the profession needs to agree on what our practice philosophy is, before we can discuss where and how to consistently instill it into the next generation of pharmacists to prepare them for ever-changing healthcare climate.

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