

Cheap Labour or Formative Experience during COVID-19: Observational Perspectives on Pharmacy Student Co-op Placements

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Abstract: In this snapshot of current research, modifications and reformulations of initial questions regarding the role of the pharmacy student and the nature of their co-op placement are emerging from observations and experiences on the frontlines of the COVID-19 pandemic. Shifting healthcare contexts necessitate an examination of pharmacists' reflections on their work experiences prior to, during and post COVID-19. This pivot in research direction is discussed in light of the pandemic and evolving healthcare situation. As such, the discussion encompasses: scope of practice changes, feminization, core competencies, preceptor-student relationships, the role of lifelong learning as developed through experiential co-op student placements, the impact of work intensification on students' learning and the accessibility of pharmacists as frontline healthcare workers engaged in public health education. Against the stark relief of the pandemic, examining co-op placements as formative experience or cheap labour may serve to further elucidate the nature of the pharmacy profession's transformation.

Keywords: Pharmacy, Co-op Students, Experiential Learning, Preceptor-Student Relationship, COVID-19

In reflecting on almost a decade of experience working in pharmacies and observing pharmacists' professional practice as a community healthcare partner, an "insider-outsider" (Smith, 1987), significant changes in the profession's praxis have occurred. These changes have manifested both in the approach by pharmacists to their profession and in the facilitation of pharmacists-in-training. With the shift from straightforward dispensing to patient-centred care in an inter-professionally collaborative environment, safety, and communication take precedence over business. This repositioning of professional priorities has demanded that training methodologies also morph to ensure effective pharmacy practice within an evolving healthcare context. This transformation of the pharmacy profession through constructed experiential learning frameworks has been accompanied by increasing feminization of the industry. The impact of these changes, particularly during the COVID-19 pandemic, is still being assessed and has yet to be fully appreciated. What began as an exploratory study of the pharmacy preceptor-student relationship as an iterative educational process is transforming as new research priorities evolve.

Historically, like other professions within healthcare, pharmacy has been male-oriented. The Annual Report of the Ontario College of Pharmacists (OCP) (2018), however, indicates that the number of women now surpasses that of men in the profession, filling the lower ranks of the industry. Believing that pharmacy can offer 'work-life balance,' women gravitate to the profession; they can meet their various care burdens through flexible or part-time work (CPhA, 2020). Despite their numbers, there is a dearth of women in decision-making roles of authority and power (CPhA, 2020). Broadly mirroring the healthcare field and society, women in pharmacy suffer from fewer training and mentorship opportunities throughout their careers (CPhA, 2020). Additionally, their personal and professional experiences are marked by a pay gap (CPhA, 2020). Although a majority of pharmacy students are women, the gendered nature of the profession and its consequences eludes many (CPhA, 2020).

Along with these demographic changes, substantive changes in the practice of the profession are ongoing. Multiple revisions of the Pharmacy Act of 1991 have facilitated a rapid expansion of pharmacists' scope of practice. Among other things, pharmacists can now adapt and modify prescriptions without prior consultation with physicians, give injections, and administer drugs by inhalation. Soon, they will be authorized to assess patients and prescribe for minor ailments such as certain skin conditions and urinary tract infections. Currently, pharmacists have been called on to perform COVID-19 testing of potentially exposed but asymptomatic people in pharmacies. Facilitating these extensions in their scope of practice, methods of teaching and student engagement have accompanied transformations in practice and assessments of professional competency.

Obligated to meet legal requirements, pharmacists maintain competence in the standards of practice and codes of ethics set by the Ontario College of Pharmacists (OCP). At entry to practice, pharmacists must demonstrate core competencies in patient care; product distribution; practice setting; health promotion, knowledge and research application; communication and education; intra- and interprofessional collaboration; quality and safety; ethical, legal, and professional responsibilities (NAPRA, 2014). Within these competencies, pharmacists have multiple educative roles. Lifelong learning is a core competency for professional practice, but pharmacists also play a significant role in educating those following them in the profession, as well as patients, the public, and other healthcare professionals in

their role as medication experts. For pharmacy students, the co-op experience is a unique opportunity to apply formally learned skills in the context of actual practice and through the tutelage of a more senior practitioner. Competency is achieved through experiencing the theory and praxis nexus first-hand.

Pharmacists use a multitude of ways to maintain competence. Continuing education credits are variously available to them and provide a straightforward means to demonstrate competence. The rate of change in industry, government, medical, pharmaceutical, and patient-care innovations results in a continuously diversifying field, facilitating choices regarding this lifelong learning process. These changes, however, can outstrip the pace of course availability. Additionally, in a context of austerity-required staffing levels, the relatively uninterrupted time required to digest these materials is itself in short supply. Competency requirements further intensify the work milieu and can significantly impinge on the pharmacists' lives outside of work. Pharmacists are expected to be adaptable and flexible by their licensing bodies and employers—to just “make it work.” Consequently, to ensure safe and efficacious care for their patients, pharmacists must engage in constant formal and informal learning in order to remain licensed and up to date. Doing so can come at a cost, professionally and personally. In taking on the performance of COVID-19 testing during this pandemic, pharmacists may experience these costs to be far higher than the exhaustion inherent in work intensification.

On the front lines of health and wellness treatment and maintenance, pharmacists are compelled by these required competencies to take on more responsibility for public health education. Pharmacists are one of the most accessible free health resources available to the public. They act as intermediaries, coordinating between patients and their various healthcare practitioners. As public health educators, pharmacists interpret complicated medical information for the public, facilitating understanding between them and the various actors in the healthcare system. This is an essential service, particularly in the ever-shifting context of the COVID-19 pandemic. The nature of their frontline role, particularly in promoting public health, remains relatively underappreciated and underutilized.

Work intensification behind the dispensary bench, however, precludes vital healthcare work in front of it. In the initial days of the pandemic, pharmacists (and their staff) fielded questions from the public by phone and in person, dramatically expanding their risk of exposure to the coronavirus. The demand for clear and concise information in a rapidly changing health care crisis put pharmacists' abilities to distill and communicate complex and evolving health information to the test. Pharmacists' precarity and disposability were made evident in their lack of initial inclusion within governmental PPE distribution chains (King, 2020). In the few short months since this initial exclusion, pharmacists have now become ‘indispensable’ in governmental pandemic response plans as they take up the task of COVID-19 testing in their pharmacies. Surging healthcare burdens, especially during the COVID-19 pandemic, manifest in further work intensification for pharmacists, but the resources they require to keep patients and the public safe are shrinking. As such, their ability to remain accessible to the public is increasingly compromised.

In this context, mentoring students in environments where work intensification is the norm provides cost-effective help pharmacists often need. Personal and professional satisfaction is fostered when pharmacists act as preceptors for pharmacy co-op students, particularly as those students have a vested interest in succeeding, despite challenging circumstances. In this constructed experiential learning environment, scaffolding promulgates learning for both the preceptor and the student. Each time a student counsels a patient, writes a letter to a doctor, or calls an ER for clarification on a prescription, the pharmacist gives feedback on their work in real-time that the student can then operationalize at the next occurrence of that event. Taught within this milieu to recognize and utilize transferable skills, each skill in and of itself forms the basis of an iterative process. As the student struggles to manage their time and shifting priorities, the pharmacist offers advice from their own experience on how they would handle any given scenario or possible avenues that could be taken. As the co-op placement progresses, the student constructs their own work methods in a way that eventually converges on the desired professional results, ideally as demonstrated by the pharmacist/preceptor. By articulating their own methodologies during these activities and by responding to the students' questions, the pharmacist refines and streamlines their own processes. Together, both increase their knowledge of the relationships between medical issues and how to integrate this understanding into a collaborative approach that treats the patient holistically and as an active partner in the process. In this environment, complex problem solving is a skill that is honed by experience and with guidance.

Students negotiate and construct their own effective practice processes through the tutelage of one who strives to model effective work practices. Timely and relevant feedback is a necessary part of this process. Periods for reflection and examination of experiences are indispensable; they allow students to self-evaluate and consolidate what worked

for them and what did not. Without this feedback/reflection loop, students may lurch from task to task, unable to see the larger professional practice picture. Without this enriching experience of the nexus between theory and praxis, they work not as practitioners in formation, developing their own ethical professional identity, but merely as cheap labour.

Using the ethnographic technique of participant observation (Creswell, 2009) within a grounded theory framework (Wood et al., 2016), this reflective exploratory study included pharmacy students during their placements, preceptors, and training pharmacists. Levels of functionality were continuously and reflexively assessed at intervals throughout students' placement periods as the workflow within the context of COVID-19 has allowed. The unfolding nature of the pandemic, the day-by-day changes, and continuous enfolded of new work processes has demanded that the rubric for assessment become fluid and conversational with frequent check-ins. Observations, including, but not limited to, student motivation, sense of precarity, risk, agency, and metacognitive practices informed the assessment and aided in appraising perceptions of efficacy regarding the co-op experience. At all stages, reflective considerations have been informed by students' individual context: their program year, previous co-op and pharmacy experience, and self-identified intersectionalities, learning, and communication preferences. The preceptor and training pharmacists' experiences with the students and their perceptions with respect to the changing nature of experiential learning has been elucidated through workplace discussions. In these discussions, the role of the student and the nature of their co-op placement experience has been informed by the context of the COVID-19 pandemic. These discussions and the pandemic have led to modifications and reformulations of the initial research questions as newer queries emerge. Where possible, follow-up discussions will be conducted with students and pharmacists to clarify or interrogate initial observations in light of these emerging research questions to take the COVID-19 context into account.

Reflecting on historical observations of pharmacy practice and comparing them with current pharmacy practice in the COVID-19 context has highlighted the changing nature of the industry. These changes represent both demographic and professional practice shifts. Initial observations of the experiences of pharmacy co-op students' developing professional practice, as well as the pharmacist/preceptor and co-op pharmacy student relationship, have consequently led to a reconceptualization of research goals. Co-construction of the experiential learning framework is being accomplished from within a profession that continues to undergo feminization. As gendered occupational segregation continues to progress, this co-construction of the co-op experience is simultaneously restructuring the profession and its practice. Concomitantly, observation is revealing that the profession itself, and those who practice it, are being received differently by other healthcare practitioners, the public, and patients alike.

As one of the most accessible frontline healthcare workers, pharmacists work at the fault-lines of our healthcare system. As such, they can be the focus of frustration, fear, and anger from patients and the public. This has never been so evident as during this pandemic. Further study is required to identify resultant manifestations of the changes in the profession, as highlighted by COVID-19. As we move into a potential second wave and a 'new normal' of a permanent health crisis, it is important to assess the impact on pharmacists, pharmacist/preceptors, pharmacist trainers, and co-op pharmacy students in light of the shifts in the pharmacy field. Careful collection and examination of pharmacists' reflections on their work experiences prior to, during and post COVID-19 may serve to further elucidate the nature of the pharmacy profession's transformation. This may inform their daily practice and the co-op exchange programs that intimately contribute to pharmacists' professional identity formation and fulfillment of their roles. In turn, this will elucidate whether the pharmacy students' co-op placement ultimately serves as a formative experience or cheap labour.

REFERENCES

- Annual Reports of the Ontario College of Pharmacists (2018). Retrieved from <http://www.ocpinfo.com/library/annual-reports/>
- Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage.
- Canadian Pharmacists Association. (2020). *Women in pharmacy*. Pharmacists. <https://www.pharmacists.ca/advocacy/women-in-pharmacy/>
- King, A. (2020, March 29). 'People forget about us': Pharmacists concerned over lack of government-issued PPE. CBC Toronto. <https://www.cbc.ca/news/canada/toronto/pharmacists-concerned-over-lack-of-government-issued-ppe-1.5513751>
- National Association of Pharmacy Regulatory Authorities (NAPRA). (2014). *Professional competencies for Canadian pharmacists at entry to practice*. NAPRA. https://napra.ca/sites/default/files/2017-08/Comp_for_Cdn_PHARMACISTS_at_EntrytoPractice_March2014_b.pdf
- Pharmacy Act, 1991. S.O. 1991, Chapter 36. (1991) <https://www.ontario.ca/laws/statute/91p36>
- Smith, D. E. (1987). *The everyday world as problematic: A feminist sociology*. University of Toronto Press.
- Woods, P., Gapp, R. & King, M.A. (2016). Generating or developing grounded theory: Methods to understand health and illness. *International Journal of Clinical Pharmacy*, 38(3), 663–670. <https://doi.org/10.1007/s11096-016-0260-2>

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