

of older adults, (2) improve student conversation skills with older adults, and (3) increase student awareness of geriatric challenges.

Method: Pharmacy, dental, advanced nursing and medical students are paired with older adults in ten different US states, all of whom have experienced social isolation. Students contact their partners via phone twice monthly and participate in monthly educational geriatric expert sessions via Zoom. Outcomes were measured via call tracking and pre/post-programme surveys.

Results: To date, COAST-IT has resulted in >350 student/partner pairs and >5000 calls over 16 months. Over three-quarters of students (77.8%) reported being fairly/very confident in their ability to talk with older adults after the programme, up from 52.2% at the start. Some older adults and students reported reduced feelings of loneliness and isolation. Students became more comfortable using telehealth to provide care to older adults.

Conclusions: Pharmacy students can contribute to community health outcomes by reducing social isolation and loneliness while practising communication and empathy. The COAST-IT programme has been a beneficial and safe telecare replacement for in-person community activities.

Collaborative online international learning (COIL) programme: Your career opportunities worldwide – learning from the experience and personal view of professionals in the sector

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Introduction Degrees in Pharmacy, Biotechnology and Nutrition & Dietetics courses offer a wide range of career opportunities, but many students are unaware of these and feel disorientated when deciding on their professional future. In a global context, employers demand qualities such as intercultural communication skills, team-working skills, networking abilities and international collaborative experience. The COVID-19 pandemic has limited access to global mobility. Collaborative Online International Learning (COIL) programmes enable students to gain an international experience without travelling abroad. In this COIL project, students from Torino, Coventry and CEU-San Pablo Universities worked collaboratively to research the worldwide professional opportunities related to their degrees.

Method: This COIL included: *Introductory session* with icebreaker and intercultural activities; *Teams' online meetings*, where professors from three Universities guided and supervised the students' work; *Interviews of the students' teams* with two to three professionals of Pharmacy, Biotechnology or Nutrition & Dietetics; *Conferences* by relevant professionals; and *International Congress* where information gathered by the students through oral communication was prepared and presented. It also included plenary conferences and a workshop on LinkedIn.

Results: This COIL programme involved three Universities, 38 professors, 111 students and 76 professionals (from 11 countries working in 60 institutions). More than 400 people from 40 different countries and 60 Universities were registered at the Congress. 41 interviews with professionals, 12 conferences by 32 speakers and one International Congress were organised. More than 80% of the students agreed that the COIL allowed them to improve their soft and intercultural skills, made them more employable and increased their motivation to work abroad. 90% of the students considered this COIL to be useful for their professional future.

Conclusions: These excellent results highlight the benefit of COIL programmes for students and their careers. This led the authors in 2022 to organise a second edition of the COIL programme with a possible international visit included.

Interprofessional education and competencies: Development of an assessment tool for pharmacy practice

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Introduction: Interprofessional education (IPE) activities have an impact on the development of healthcare students' competencies. Best practices for assessing the impact of IPE have not yet been identified. The aim was to design outcome assessment methodologies capable of evaluating IPE on pharmacy competencies development.

Method: An innovative IPE tool was designed and validated through a three-step Delphi technique by two multidisciplinary panels of experts composed of Maltese and international healthcare professionals. The tool was distributed to Doctorate in Pharmacy students (N = 35) and alumni (N = 16) of the same course, who all had experienced IPE-based placements. Internal consistency of the tool was assessed by Cronbach's Alpha test. Kruskal Wallis was used to compare mean core competency scores between groups of participants clustered by gender, age, year of study, years of practice and area of practice.

Results: The developed 'Interprofessional Education on Pharmacy Competencies (IPEPC)' tool consists of ten statements divided into four core competencies, namely: 'Values-Ethics for Interprofessional Practice', 'Roles-Responsibilities', 'Interprofessional Communication' and 'Teams and Teamwork'. The tool was completed by 32 students and 14 alumni of the Doctorate in Pharmacy course. The tool shows adequate internal consistency between the statements in each of the core competencies (Cronbach's Alpha values > 0.07). All statements received a mean score higher than 4 out of 5 (5 being the highest agreement). 'Roles/Responsibilities' core competency received the highest score.

Conclusions: High scores received by all statements of the IPEPC tool showed the critical role of IPE on pharmacy competencies. IPE helped to provide confidence in the 'Roles/Responsibilities' core competency. The tool is useful to evaluate IPE pharmacy competencies and improvement of person-centred care.

Student conferences: Integrating and contextualising learning in practice

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Introduction: The Master of Pharmacy degree must produce graduates with integrated scientific knowledge and clinical practice skills (GPHC, 2021) along with the professional attributes and resilience to thrive in all sectors of practice. Graduates need to communicate effectively with a diverse patient population, and to provide compassionate, person-centred care, whilst also being equipped to contribute to the knowledge and evidence base through research.

Method: A half-day conference was organised for each year group, focused on programme year themes: Year 1: People and Medicines, Year 2: Pharmacotherapy, Year 3: Advanced Therapeutics, Year 4: Professional clinician. Patients were involved as speakers and panellists to provide an insight into their lived experience of conditions taught in each academic year e.g. dementia and to provide context to the reality of concepts such as shared decision making and personalised care. Sessions led by alumni and expert practitioners aimed to inspire student future career paths, introduce postgraduate study and development opportunities. Recent graduates provided insight to Year 4 students about maximising their foundation training year, and Year 3 students shared their reflections with Year 1 students. Voluntary organisations promoted the benefits of volunteering in providing health advice to the homeless community or emergency response first-aid. Students could view posters from previous student projects, PhDs and staff and visit stands with representatives from training providers and patient groups.

Results: Over 400 students attended. Overall feedback was positive, with students commenting 'it was very interesting to get real life experience from staff and patients' and '...helpful to prepare for the future'.

Conclusions: The integration of conferences within the curriculum can be an effective strategy to introduce students to a professional conference environment, networking and research poster presentations. Tailored sessions provide context, integration and real-life application of curriculum content.

Reference

GPHC (General Pharmaceutical Council). (2021). Standards for the initial education and training of pharmacists (online). UK: GPHC. Available from: <https://www.pharmacyregulation.org/sites/default/files/document/standards-for-the-initial-education-and-training-of-pharmacists-january-2021.pdf>

Team-based learning in social pharmacy

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Introduction: The method Team-Based Learning (TBL) is not just 'group work' but a well-defined method including strategically formed, permanent teams, pre-reading (literature, podcasts etc.), individual Multiple-Choice Questions (MCQ) to assess understanding of pre-reading (Readiness Assessment Test – iRAT) followed by team MCQ (tRAT) with the same questions for discussion requiring consensus (Team-Based Learning Collaborative, n.d.). Students have the possibility to write an appeal with reference to the pre-reading if they believe their answers were wrongly marked incorrect. This feedback enables the teacher to identify what was difficult to understand, and can address these topics in a brief, clarifying lecture. Lastly, the students apply the knowledge – for instance in case discussions in groups followed by voting for suggested solutions and arguing their case in plenary discussions.

Method: Thematical analysis of student feedback in the forms of focus groups, written and oral course evaluations.

Results: TBL was assessed by the students as the number one teaching method to help them learn. When asked to grade a list of learning activities from 1 to 5, only TBL preparations and reading the textbook got average grades over 4 (4.7 and 4.6 respectively). The students highly appreciated that teachers explained how activities are connected, how to use various learning resources and the contents included. The focus group showed that students retained knowledge best from TBL sessions because they were challenged to think for themselves and to discuss, while traditional lectures were quickly forgotten. TBL also improved the students' teamwork skills.

Conclusions: TBL is a method which motivates most students and promotes learning better than traditional lectures.