

Mapping Public Health in the MPharm programme

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UKPHA Pharmacy Special Interest Group
(SIG) www.ukpha.org.uk

- UKPHA Pharmacy SIG – several queries from members – what should we be teaching?
- APG 2006 – sought co-operation from SOP delegates
- Limited guidance in Indicative syllabus or Accreditation documents (Dewdney 2002)
- Public health policy strategies

- *Choosing Health Through Pharmacy* strategy recognises an area for future development over the next decade
 - *“strengthening the undergraduate pharmacy curriculum and training of support staff to better encompass public health”* (DH 2005:9)

Aim & Objectives

- The aim of the survey was to map the current provision of public health teaching in UK SOP
- To measure resources
- To describe course topics currently
- To differentiate between what should be undergrad and what post grad topics

- Collaborative design based on earlier survey including USA criteria, (Pfleger 2004) 13 /17 UK SOP covering all possible public health issues - 10 themes 34 topics
- Cross sectional descriptive, 14 questions, seven page self completion questionnaire
- Emailed out by UKPHA to 24 contacts in UK SOP November 2006
- Email follow up, by February replies from 23/24
- Usable data from 20. 3 not able to complete (83%% response rate)

- 13/20 SOP teach public health as an identifiable element (programme/ course/ module) in the MPharm programme.
 - Most likely to be spread across 4 years (11)
 - One year only (3)

Student contact hours associated vary across a range of 6 -100 hrs

Problem of definition and separating issues out
Pharmaceutical public health or public health and pharmacy ?

- 11 SOP have a designated individual who **leads** PH teaching
 - Variety of methods, lectures small groups, project work, self directed, e-learning, One school has an option.
- 8 SOP utilise directly employed staff who specialise in this subject to cover teaching
- 12 SOP rely on external teachers, such as:
 - public health pharmacists, consultant in public health pharmacy, health promotion specialists, epidemiologist, sociologist

What is currently taught?

- **Surveillance and assessment pop health well covered :**
- Basic epidemiology and risk (18)
- Determinants of health (20)
- Analysis / interpretation of pop health data (15)
- Pharmacoepidemiology (13)
- Health needs assessment (11)

- **Collaborative working, working with and for communities mixed:**
- Principles and methods partnership working (10)
- Roles for non NHS organisations (8)
- Public involvement (8)
- Community development (4)

- **Health Promotion / prevention / protection well covered**
- **Tackling health inequality policy (14)**

What Should be taught at undergraduate level ?

List of topics agreed by majority (15 or more) SOP

- Basic principles of epidemiology including causation and risk
- Theoretical models and principles of health promotion
- Health screening
- Disease prevention
- Immunisation and vaccination

- Public health policy
- Health inequality
- Social, biological and environmental determinants of health

- Health service organisation
- Ethical decision making in the context of clinical and cost effectiveness
- Confidentiality and data protection
- Governance

What should be taught at undergraduate level?

From the list next most commonly agreed by 10 SOP

- Analysis and interpretation of health data including mortality, morbidity, burden of disease and health status of populations
- Health needs assessment
- Pharmacoepidemiology
- Communicable disease control

- Principles of change management
- Principles of assessing, investigating and communicating risks to health
- Critical appraisal skills – primary and secondary research
- Methods and tools used to evaluate programmes, technologies and interventions

- Tackling health inequality policy
- Social cultural and psychological factors in perceptions of health and illness and responses to health interventions

What is more suitable for postgraduates?

- Emergency planning
- Law relating to health protection
- Use of media for effective delivery of public health messages
- Performance management including use of performance indicators
- Roles of organisations outside the NHS e.g. Local authorities, voluntary sector
- Principles and methods of partnership working
- Community development public involvement
- Models of leadership and application in public health
- Research methods and their application to public health issues
- Identification of research questions in public health
- Development of a service

The influence of the FPH and Skills for Health 10 key public health roles.

- Surveillance and assessment pop health (10)
- Promoting and protect pop health (17)
- Developing quality and risk management (9)
- Collaborative working for health (12)
- Developing health progs and services to reduce health inequalities (14)
- Policy and strategy dev & implementation (10)
- Working with & for communities (8)
- Strategic leadership for health (3)
- Research & dev.(10)
- Ethically managing self , people, resources (9)
- Two SOP use the whole framework, one does not, five fewer than half.

- The guidance provided by the RPSGB in relation to teaching public health is inadequate (17)
- The scope of public health to be taught at undergraduate level is unclear (17)

- Limitations.
 - Interpretation of survey
- Implications of findings for curriculum development
 - The top 12 topics (agreed by 15+ respondents) are traditional health promotion/education/prevention topics
 - Minor influence of FPH Skills for Health criteria
 - The 11 topics deemed more suitable for postgraduates are actually those which pharmacists will need if they are to be involved in real public health promotion and collaborative contracting with health and social care agencies.

- We think HOS should reach some agreement on what should be taught as a minimum curriculum. We do not advocate an indicative syllabus.
- We recommend forming a network, to share syllabus, resources and research findings . This should help broaden out thinking on the range of understandings and skills that pharmacists need to contribute to delivery of the public health agenda