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Challenges To Pharmacy Students Training in Community Pharmacies

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Pharmacy students are the future health care practitioners who will provide not only quality pharmaceutical services but also health promotion guidance to communities (1). If they are not well trained in the community health needs, this will directly affect on the future quality of care in the community. Worldwide pharmacy graduates are found more inclined to practice in community pharmacy setting. This initiative will not only help them in practicing their knowledge but also act as a profitable earning source.

As a future health care practitioner, pharmacy students need to undergo through a specific number of training hours (internships), either in community /hospital settings. To be registered as a pharmacy practitioner, in most countries, pharmacy students need to undergo a specific number of training hours (internships), either in community or hospital settings. However, in some developing countries such as in India, Pakistan, Sub Saharan African countries, internship requirements are not necessary to become a registered practitioners [2,3,4,5]. Students are free to choose according to their area of interest i.e hospital or community pharmacy. At the end of the training period, all students are given certificates of acknowledgement that they have taken the required period of training. A question do arise here, that is did all the students get the same benefit from training? Were they have been exposed to the same environment? Definitely, majority will say No. The main reason behind this are certain challenges that pharmacy students face during their internships in the community pharmacy.

This short communication will briefly highlight these challenges that most pharmacy students face during their internships in the community pharmacy. From my personal perspective there are mainly three challenges to affective pharmacist training in community pharmacy setting; one students them selves, community pharmacists and the deficiencies in the curriculum.

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emphasize on the role of community pharmacists by health authorities and general public, many pharmacy students feel that it is not rewarding to just work in retail setting as this function can be easily taken by those person who do not possess a university degree in the field of pharmacy. Beside that things are made more worst due to the traditional curriculum which emphasized to be more product oriented rather than patient oriented education. In contrast to the situation in developing countries, majority of the universities in developed countries had transformed their pharmacy curriculum to be more service and patient focused rather than product orientation as pharmacist can not only play an active role in medication safety aspects through rational selling and dispensing of medications, but also they can play a bigger role in the provision of health promotion services to the society. Still there are many pharmacy institutions in developing nations that are not providing this base to their students, which in turn result lack of understanding among students towards the scope of community pharmacy and result in a graduate with a poor knowledge about the community pharmacy. Furthermore a part from the deficiencies in curriculum, availability of qualified professional is another challenge that is faced by the institution that has taken the initiative to incorporate subject related to the community pharmacy practice. Mostly such subjects are taught by a person with limited qualification and exposure to community pharmacy. This deficiency in knowledge sharing may result lack of interest among the students toward community pharmacy practice.

A possible solution to compensate these deficiencies may be achieved through proper site perception at community pharmacy under the supervision of a qualified community pharmacist. In some countries, where there are a low number of community pharmacies and large number of pharmacy graduates every year, this in return will be a big challenge to find a qualified community pharmacists (preceptors) to supervise the students. In developing countries in which there is no comprehensive national health insurance coverage and without dispensing separation between general practitioners and community pharmacies, community pharmacies are often thriving as a profit oriented business entity and due to business pressure and high volume of sales especially, some pharmacists might do not have time to provide good supervision to the students. Students have never been told by their academic lecturers how to start their

training, what to do in the community pharmacy as a first step, how to spend their time in the community pharmacy and what is expected from them to learn during their internships. Many pharmacy students during their internships are asking what shall we do in the community pharmacy? Do we need to write all the prescription products in a notebook with their active ingredients, side effects, alternatives, manufacturers or do we need to focus on dispensing? These frequent questions show the inadequate level or absence of the supervision either by their lecturers or the community pharmacists and the absence of a structured pharmacy practice guide for pharmacy students.

As a consequence to the absence of a good and close supervision to the students during their training period, this might seriously affect on their future practice. This is true especially if students got their training in community pharmacies which are business oriented where community pharmacists might violate the regulations by administering injections in the community pharmacy, selling prescription products without prescriptions, and misuse advertisements to affect on patients' purchasing. Students who have been trained in such environment without supervision might be adapting some of these malpractices after graduation. These challenges to pharmacy students in community pharmacies training highlight the need for amendments in the curriculum. Furthermore, pharmacy institution should take initiative of faculty development that will be helpful in building a good foundation for community practice for the future pharmacy graduates. In addition a quality culture should be adopted while selecting the community pharmacy as a potential site for the internship. Memorandum of Understandings should be signed with the approved sites and frequent auditing will also help in monitoring the quality aspects of community pharmacy and knowledge sharing with pharmacy students. Moreover, an initial orientation session before starting the internship will be helpful for the students to clarify their doubt about the training.

The challenges highlighted in this short communication will be helpful for the pharmacy institution in developing nations to design an ideal work plan to improve the skills of the pharmacy graduates particularly in community pharmacy practice. Intervention to cope these challenges will be beneficial in developing a good community pharmacy practice in future.

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