

**PDF2.10****Exploring the perspectives of significant others on patients' experiences of cancer services**Alison Brincat<sup>\*1</sup>, Antonella Tonna<sup>1</sup>, Patricia Vella Bonanno<sup>2</sup>, Derek Stewart<sup>3</sup>, Anita E. Weidmann<sup>4</sup>

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**Background and objective:** Globally, there has been a growing concern that patients are not receiving appropriate cancer care based on their needs. Whilst efforts were made towards better quality of care to meet patients' expectations, healthcare systems are required to operate with decreasing resources given the overall economic context. This study aimed to explore the perspectives of significant others regarding cancer care experiences of patients receiving antineoplastic medicines for colorectal cancer.

**Method:** A longitudinal design was adopted over a six-month period. Individuals initiating treatment for colorectal cancer with either FOLFOX for 12 cycles or XELOX for 8 cycles at the national oncology centre in Malta were asked to nominate at least one significant other; that is a person who in their opinion was highly involved in their care. Two in-depth interviews with significant others were conducted at patient's initiation and completion of treatment (24 weeks interval), transcribed verbatim and thematically analysed.

**Main outcome measures:** Themes illustrating perspectives of significant others regarding patients' experiences.

**Results:** A total of 16 participants, were interviewed [females (n = 12) and spouses (n = 6)]. Three themes were identified: (1) patients' experiences of cancer services (2) healthcare professionals' communication with patients and others (3) recommendations for services. Whilst significant others noted that patients were overall satisfied with cancer services throughout the treatment journey, negative experiences were mainly related to misdiagnosis. The issue of being truthful about cancer diagnosis raised different opinions, with some considering that complete disclosure was insensitive. Some argued that healthcare professionals were directly answering patients' questions without further expansion. This was irrespective of the patients' lack of knowledge and ability to ask further questions. At initiation of treatment, significant others recommended the need for improved awareness of available support services such as psychological services and more regular contact time with healthcare professionals. At completion of treatment, recommendations shifted to availability of cancer care services in the community setting including provision of ambulatory care.

**Conclusion:** This study showed that timeliness of diagnosis and accessibility to healthcare services were crucial in cancer care. Introduction of interventions along the treatment journey to address the patients' current needs were recommended and "one size fits all" approach is not suitable.

**PDF2.11****Entrustable professional activities—assessing medication reconciliation performance of German foundation pharmacists**Yvonne Pudritz<sup>\*1</sup>, Ula Bozic<sup>2</sup>, Martin R. Fischer<sup>3</sup>, Jan Zottmann<sup>3</sup>

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**Background and objective:** Entrustable professional activities (EPAs) are observable process descriptions of clinical work units consisting of knowledge, skills and attitudes<sup>1</sup>. EPAs support assessment of learners within healthcare settings. We developed the EPA "medication reconciliation (MedRec)" at the LMU University Hospital in Munich. This is the first EPA for use in Germany in a clinical pharmacy setting to our knowledge. The objective was to assess and evaluate the foundation pharmacists at the pharmacy department of the LMU University Hospital in MedRec using this EPA.

**Method:** We tested the EPA "MedRec" in a pre-post-setting. Foundation pharmacists were evaluated twice, once after an introduction into the local MedRec process, then after 4–5 weeks working in that area. The observing pharmacist used an assessment checklist to observe the students with two patients each and to assess the categories "patient conversation", "preparation of medication plan", and "attitudes". The Levels of supervision (LoS) Scale<sup>1</sup> was used to denote the abilities of the participants, with "1" being "only observer" and "5" "can supervise other learners".

**Main outcome measures:** Performance of medication reconciliation by foundation pharmacists as measured by LoS. Paired t-test was performed with  $p < 0.05$  set as significant.

**Results:** We observed 21 foundation pharmacists in 2022. Participants showed a statistically significant improvement across all categories. The biggest improvement (mean  $\pm$  SD) was observed in the category "attitudes" (3.99  $\pm$  0.51 vs 4.42  $\pm$  0.45). Students already scored high in the pre-test for "attitudes" as well as "patient conversation" with significant improvements in the post-test. In the category "preparation of medication plans" foundation pharmacists moved from observer status (LoS1) to supervised performance (LoS2).

**Conclusion:** We could successfully evaluate our foundation pharmacists using the EPA "MedRec" in combination with an assessment checklist. Foundation pharmacists can also use the EPA description and checklist for individual assessment of their learning needs and progress. Further clinical EPAs relevant to pharmacy practice are currently under development.

**References**

1. Ten Cate O, Taylor DR. The recommended description of an entrustable professional activity. AMEE Guide No. 140. Med teach (2021), 43(10):1106–1114

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**PDF3.01****Digital literacy in undergraduate pharmacy education: a scoping review**Mashaal Alowais<sup>\*1,2</sup>, Georgina Rudd<sup>1</sup>, Victoria Besa<sup>1</sup>, Hamde Nazar<sup>1</sup>, Tejal Shah<sup>3</sup>, Clare Tolley<sup>1</sup>

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**Background and objective:** Pharmacists play a vital role in harnessing digital tools to optimise patient care. However, a gap exists in pharmacy education regarding digital literacy and effective training. This scoping review aims to identify the approaches for integrating digital literacy into undergraduate pharmacy programmes across different countries, specifically focussing on methods for education, training, and assessment.