An educator in a pharmacist's coat: Donna Woloschuk

Pharmacist Donna Woloschuk is a moderator trainer and coach with CPhA's ADAPT program.

DONNA WOLOSCHUK'S FAMILY TEASES HER about her collection of degrees, diplomas and certificates. They say she has thousands of dollars framed and hanging on her wall. To be fair, she points out the scholarship she received from the University of Cincinnati, saying the state of Ohio was very good to her. What started with an interest in chemistry and toxicology led Woloschuk along a varied career path from pharmacist to being a moderator trainer and coach with the ADAPT online patient skills development program, in addition to her regular duties as the Regional Pharmacy Manager for Educational Services in the Winnipeg Regional Health Authority.

"At heart I'm an educator. I just happen to wear a pharmacist's coat," says Woloschuk.

Originally from Prince Albert, Saskatchewan, she attended the University of Saskatchewan in nearby Saskatoon and then did a hospital residency in Regina. She applied to all the hospitals across the country that might need a pharmacist and received 3 job offers in the mail. She chose Kingston, Ontario, and after 3 years realized she wanted more formal education. A chance encounter with another Canadian

pharmacist at an American Society of Hospital Pharmacists meeting led her to a scholarship and the PharmD program at the University of Cincinnati.

As she was finishing, the university hospital offered her the opportunity to be the first resident for a specialized oncology and bone marrow transplantation program. Woloschuk says being the clinical pharmacist and helping design the program to meet accreditation standards was an excellent experience. After a year she found a job that allowed her to return to Canada, as the Residency Program Director for Clinical Services at the Royal Alexandra Hospital in Edmonton, Alberta.

Manitoba, however, was just starting a blood and marrow transplant program of its own, and in 1990 Woloschuk moved to Winnipeg to help get it off the ground as its clinical pharmacist with a team of 3 pharmacists, 2 of whom had just graduated.

"We had to grow the services of the program and at the same time grow the skills of the pharmacists, to look after a very interesting, very high-risk group of patients, where you deliberately give drug therapy to them that is lethal and then you give them cells back."

She worked with more than 600 adult and pediatric bone marrow transplant patients and is happy to report that most are still alive. Looking back at the effects of the care she provided and the care plans she contributed helped her realize how much she enjoyed the coaching she gave pharmacists, nurses and physicians in training.

That realization took her back to school.

While working full time, Woloschuk earned a certificate in adult and continuing education from the University of Manitoba. Night classes in addition to her regular schedule taught her a valuable lesson about educating pharmacists.

"While hospital pharmacists work crazy hours, community pharmacists work crazier hours, and trying to find a work schedule that's going to be compatible with going to night classes just isn't going to work. I knew distance education was really where it was at."

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She found Athabasca University, a distance education school, and completed an advanced graduate diploma in distance education technology and then a master's degree in distance education. Along the way, she moved into a regional pharmacy manager position where she was responsible for the education of about 350 pharmacy staff in 8 hospitals across Winnipeg.

Using her pharmacy experiences as case studies, she developed plans and programs in school "that would enable us to better prepare students who came to our facility, that would change the culture of learning among our pharmacy staff and raise the profile of pharmacy technicians, which is much needed in this time as scope of practice is changing."

Along the way, Woloschuk connected with the ADAPT program, representing the Canadian Society of Hospital Pharmacists (CSHP). Initiatives such as Integrating family Medicine and Pharmacy to Advance primary Care Therapeutics (IMPACT) and the Blueprint for Pharmacy had identified the need for training that would help pharmacists develop skills to advance their role in delivering health care. The Canadian Pharmacists Association (CPhA) partnered with CSHP and the CPhA-CSHP Primary Care Pharmacy Specialty Network on a proposal to Health Canada, which then funded a pilot project in 2010 that became ADAPT.

The regular program started in 2011, and the next session runs from August 2013 to January 2014. ADAPT consists of 7 online modules, each running 2 to 4 weeks and covering topics such as medication assessments, documentation, collaboration with other health care providers, patient interviews and lab data interpretation.

Working with the ADAPT participants, whom she calls Adapters, fills Woloschuk with optimism. "There are great pharmacists doing great things for their patients and their communities right now."

"ADAPT is a course about patient care skills, there's no doubt about that, but it's also a great framework for change and it comes with a personal trainer and a cheering section."

The program's unique features include expert moderators and peer-to-peer feedback. Throughout the course, participants apply what they're learning to their daily practice and share their experiences, both the opportunities and the challenges.

"We can make big changes if we change one person at a time, but ADAPT's going a bit bigger, it's changing groups of 15 people at a time. It's not just ADAPT, it's the pharmacists who participate who are helping to bring about that change in one another. That is so refreshing. There is enough time and there is enough support to make those changes if you decide you want to make them."

Facing barriers and exploring ways to overcome them is important if pharmacists want to adapt to a shifting professional environment.

"The unexamined practice is a practice that is probably not going to grow. In these changing times pharmacists do need to grow their practice or they're going to be left behind."

Time is the most common barrier, Woloschuk says, but she thinks the term is a catch-all for smaller components that can be worked on individually. An example is having enough time to do comprehensive interviews with patients. "I don't know if there's any Olympic athlete who trains and doesn't have a sense of what the goal is that they have to achieve. But often in pharmacy we don't know what the norm is." ADAPT provides some frameworks to help participants approach situations in different ways to improve efficiency and care.

Woloschuk acts as an ADAPT moderator, moderator trainer and coach and is now training other moderator coaches for the program. In her regular job, she's working on understanding what goes on when pharmacists and pharmacy technicians go through the checking process, in order to build competency aspects.

She will also be CSHP's representative on the Canadian Council for the Accreditation of Pharmacy Programs, helping other pharmacists build their own wall of framed credentials. ■