The Blueprint: Strategic Action in Education and Continuing Professional Development

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Disclaimer

Robert Sindelar serves on the Merck Frosst BC Health Policy Advisory Committee for which he receives an honorarium that is donated to student organizations in the UBC Faculty of Pharmaceutical Sciences. He declares no other conflicts of interest.

Arthur Whetstone declares no conflicts of interest or financial interests in any product, service or issue mentioned in this program, including grants, gifts, stock holdings, and honoraria.

Overview

- Overview – Blueprint for Pharmacy
- Implications and Challenges
  - Pharmacy Education
  - Pharmacy CE/CPD
- Questions

What is the Blueprint for Pharmacy?

- For the first time in Canadian history, pharmacists, pharmacy technicians, pharmacy owners and pharmacy organizations are **working together** to articulate a common vision and implement a coordinated plan of action.

- Led by CPhA, in partnership with national / provincial pharmacy organizations and corporate pharmacy.

→ **CPhA: LEADERSHIP without OWNERSHIP**

CANADIAN PHARMACISTS ASSOCIATION   ASSOCIATION DES PHARMACIENS DU CANADA

Drivers for Change:
A Health Care System in Transition

Increasing demands on the health care system

Changes in health care delivery models (e.g., primary care reform, collaborative care)

Shift to more patient-centered, outcome-focused care

Need to achieve financial sustainability

Efforts to optimize scopes of practice of health professionals

Drivers for Change:
Pharmacy Practice is Changing

Community pharmacists
- Prescribing, chronic disease management (CDM), health promotion and wellness, new reimbursement models.

Hospital pharmacists
- Medication reconciliation; specialists in ambulatory care, emergency medicine, etc.

Pharmacists employed FHTs
- Collaborative prescribing, CDM, drug information within a family health team (FHT).

Consultant pharmacists
- To FHTs, community pharmacies, home-care, long-term care.

The Challenge for Pharmacy

- The changes in the delivery of health care require pharmacy to focus more attention on

  patient-centred, outcomes-focused care to optimize the safe and effective use of medications.

THE VISION FOR PHARMACY

Optimal drug therapy outcomes for Canadians through patient-centred care

In our Vision for Pharmacy

Pharmacists and pharmacy technicians

- practice to the full extent of their knowledge and skills, and are integral to emerging health care models.

- protect the safety, security and integrity of the drug distribution system through the enhanced role of regulated pharmacy technicians and greater automation of dispensing.

- lead the development of and participate in medication safety and quality improvement initiatives.

Pharmacists

- manage drug therapy in collaboration with patients, caregivers and other health care providers.

- identify medication use issues, take responsibility for drug therapy decisions and monitor outcomes.

- initiate, modify and continue drug therapy (e.g., through collaborative agreements, delegated or prescriptive authority), and order tests.

- access and document relevant patient care information in health records, including test results and treatment indications (e.g., in electronic health records).

- empower patients in decision-making about their health, and play a prominent role in health promotion, disease prevention and chronic disease management.

- conduct practice research and contribute to evidence-based health care policy and best practices in patient care.
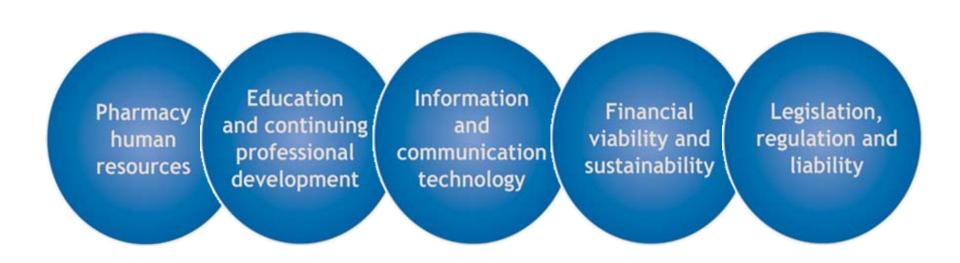
Pharmacists' services

- are compensated in a manner that relates to expertise and complexity of care.

5 Blueprint Working Groups

- To realize the Vision, strategic action is required in five key areas
- Proposed actions developed by Task Force and working groups

Pharmacy human resources

Education and continuing professional development

Information and communication technology

Financial viability and sustainability

Legislation, regulation and liability

Education and CPD Working Group

- Robert Sindelar (Co-chair)
- Art Whetstone (Co-chair)
- Karen Agro
- Tim Fleming
- Dennis Gorecki
- Stacy Johnson
- Susan Lessard-Friesen

- Louise Mallet
- Nathalie Plante
- John Clayton Rankin
- Suzanne Taylor
- Nancy Waite
- Donna Woloschuk
- Margaret Woodruff
- Barry Power, CPhA Staff Liaison

Commitment to Act

- 100% of national/provincial pharmacy organizations have SIGNED ON!!!!
- 75 organizations* committed to act:
- – National Pharmacy Organizations: 17/17
- – Provincial Advocacy Associations: 12/12
- – Provincial/Terr'l Regulatory Authorities: 11/13
- – Chain Pharmacy: 15/19
- – Faculties of Pharmacy: 10/10
- – Pharmacy Student Associations: 10/10

As of March 3, 2009

IMPLEMENTATION PLAN

ACHIEVING THE VISION
Optimal drug therapy outcomes for Canadians through patient-centred care.

Overall Objectives

The ECPD section of the implementation plan (Section 5.1) outlines actions that will lead to:

- Educational programs (e.g., undergraduate, graduate, CPD) that influence the future of the pharmacy profession and ensure that learners have the knowledge and skills to practise in innovative or expanded models of pharmacy practice;

- Canadian standards for bridging programs to meet the needs of international pharmacy graduates (IPGs) and pharmacy technicians; and

- Labour mobility by ensuring consistent standards in education in pharmacy personnel across the country.

Actions General

- Implementation Plan lists for each of the five key areas:
    - Actions
    - Potential lead organizations (up to two)
    - One or more deliverables per action item
    - Time frame
    - Additional details (Present status, Funding)
- Example (view entire Implementation Plan document at: http://www.pharmacists.ca/content/about_cpha/whats_happening/cpha_in_action/blueprint.cfm#implementation_plan

1. Education and Continuing Professional Development			
Actions	**Potential Lead Orgs**	**Deliverables**	**Time Frame**
1.1 Ensure that core pharmacy curricula address the knowledge, skills and values required for future pharmacy practice to ensure new graduates are prepared to develop and practise in emerging roles.	AFPC/ADPC & CPTEA	1.1.1 Process to review educational outcomes for pharmacy and pharmacy technician programs and to identify knowledge and skills to be incorporated in pharmacy learning (Based on 1.13.1).	Short
	AFPC/ADPC	1.1.2 Upon identification of 1.1.1, curricula that reflects the core competencies.	Med.
1.2 Promote and increase interprofessional	AFPC/ADPC	1.2.1 National inventory of programs that promote and increase	Short

Actions 1

- **1.1** Ensure that **core pharmacy curricula** address the knowledge, skills and values required for future pharmacy practise to ensure new graduates are prepared to develop and **practice in emerging roles**. (AFPC/ADPC, CPTEA*)

- **1.2** Promote and increase **interprofessional and intraprofessional approaches to education and training** to ensure optimal patient-centred care in an integrated health care environment . (AFPC/ADPC, CPTEA)

- **1.3** Address challenges that affect the education, **recruitment and retention of pharmacy educators and learning facilitators**, to ensure the quality and quantity of educators, facilitators and preceptors . (AFPC/ADPC, CPTEA)

(*CPTEA = Canadian Pharmacy Technician Educators Association)

Actions 2

- **1.4** Ensure all pharmacy professionals, including students, **value and develop life- long learning and personal performance assessment skills** to assist them to be competent to practise in these emerging roles. (CCCEP*, NAPRA)

- **1.5** Increase the accessibility, quality, quantity and variety of **experiential learning** opportunities to prepare pharmacy professionals, including students, to practise in **expanded and innovative roles**. (AFPC/ADPC, PPAs**)

- **1.6** Identify needs and deliver programs to meet the **needs of international pharmacy graduates** (IPGs). (CCAPP, NAPRA, AFPC, Univ. Toronto)

(*CCCEP = Canadian Council on Continuing Education in Pharmacy; **PPAs = Provincial Pharmacy Organizations)

Actions 3

- **1.7** Implement accessible **programs to upgrade knowledge, skills and values** to support current practice and services, the implementation of new professional pharmacy services, specialty practices, or new practice models. (CCCEP, NAPRA)

- **1.8** Create partnerships to **develop and deliver learning programs** to facilitate innovation in pharmacy services. (AFPC)

- **1.9** Ensure that **all pharmacy technician programs meet the nationally defined competencies and are accredited** to prepare pharmacy technicians to practise in expanded and innovative roles and to ensure positive patient health outcomes. (NAPRA, CCAPP)

Actions 4

- **1.10** Develop **bridging programs to assist non-regulated pharmacy personnel** to achieve the competencies required for pharmacy technician regulation. (CCAPP)

- **1.11** Conduct and **utilize research to develop, evaluate and improve education and CPD programs**. (AFPC/ADPC)

- **1.12** Define **core competencies required by other pharmacy support personnel** to protect the safety, security and integrity of the drug distribution system. (NAPRA, CPTEA)

- **1.13 Change pharmacy practice culture to support new pharmacy services and practice models.** (NCO*)

(*NCO = National Coordinating Office)

Challenges - Education

- Role: Lead, collaborate, liaise, be informed?

- Prioritize projects to best engage limited resources

- Build consensus while keeping keeping identity and ability to innovate

- Explore how best to integrate all learning: interprofessional and intraprofessional

Challenges - Education

- Define a process to deliver projects:
  - Identify champions
  - Create
  - Communicate and engage stakeholders
  - Garner needed resources (HR, fiscal, etc.)
  - Implement and assure translation of learning to practice
  - Measure success, determine intercalation with other components and modify as needed to improve
- Maintain the commitment to the "Blueprint"

Challenges - CE/CPD

- **Future of CE/CPD**
  - Is there one?
  - What is it and what is its purpose?

- **Nature and Scope of CE**
  - Lunch Box Minute to Certificate
  - Content -based to Practice-Based
  - Single Delivery to Mixed Delivery
  - Provider driven to learner driven
  - Nature of Quality

Challenges - CE/CPD

- CPD (Continuing Professional Development)
  - Can practice meet theory?
  - Barriers to effective CPD
- Challenges of the New Pharmacy
  - New roles
  - Inter-professional
  - Niches & certification
  - Pharmacy team

Next Steps

- **Operational Framework** created that groups deliverables outlined into ten projects that align with the priorities of pharmacy organizations and innovators to change pharmacy practice.

- Will create a **steering committee** and a **national coordinating office.**

- Identified **Leaderships groups** will need to engage, develop projects, communicate and collaborate results, and implement.

What will success look like?

Measure of Success to Date:

- Agreement of Pharmacy Community on Vision

- Coming together for action

- Innovations in practice

- Growing support for change in pharmacy education

- Blueprint initiative has:

  – Changed the debate

  – Changed the agenda

  – Changed how we work together

Questions?