Synopsis of AFPC's CPERC 2010 Program

1) CPERC Title and Theme:

"Bringing the Blueprint to Life"

2) CPERC Overview (taken from the conference program welcome):

The theme of AFPC's CPERC 2010, "Bringing the Blueprint to Life" is a particularly important and timely one. The "Blueprint for Pharmacy," the national initiative of the Canadian Pharmacists Association and endorsed by all sectors of pharmacy in Canada, sets out a long-term vision and implementation plan intended to strengthen and realign the profession's social responsibility and scope of practice with the health care needs of Canadians. The Blueprint's goals emphasize "optimal drug therapy outcomes for Canadians through patient-centred care" and that "the *status quo* is not an option." What should practice models look like in the Blueprint era? What does this mean for pharmacy programs? What knowledge, skills and values are appropriate for Blueprint graduates? Will Blueprint faculty members require new knowledge and skill sets? Academic pharmacy, through AFPC and ADPC, has been identified as a lead organization for implementing educational change in the Blueprint era. The inaugural CPERC program, through carefully selected plenary talks, workshops, break-out sessions, poster presentations and a research symposium, is intended to explore many of these questions as well as open up others for discussion and critical analysis. The intent is to initiate new and share existing Blueprint conversations relevant to home institutions as well as support the AFPC/ADPC mandate for leadership in educational change.

3) CPERC Program Day 1 Focus:

Day 1 of the CPERC is intended to explore broad educational issues related to the Blueprint and the implications for pharmacy education and academic programs. Below are the abstracts for the opening session talks and afternoon workshop (see CPERC program for timing details)

<u>Opening CPERC Session Title</u>: "Framework for the Future – Critical Perspectives on Pharmacy Education & Practice"

Presentation #1 Title: Patient Centered Care: Educating the Next Generation of Pharmacists

Presenter: Robert A. Blouin, PharmD, Professor and Dean

UNC Eshelman School of Pharmacy

Abstract:

This presentation will review contemporary trends in higher education with particular emphasis on the current learning environments in the pharmacy academy and the need for a significant change in the pedagogy associated with our curriculum. The case for change will focus on the unique occurrence of a rapid change in the expectations of a new generation of learners, a rapid change in the society's expectation of an educated workforce possessing sophisticated critical-thinking and problem-solving skills, and a rapid change in education technology. A strategy will be presented that incorporates blended-learning techniques (asynchronous and synchronous) with optimum utilization of technology to consistently deliver teaching-learning opportunities from the top of the Bloom's taxonomy pyramid.

Research-intensive universities must compete in an arena that is focused on attracting the best student and faculty talent in the world. The challenge of creating a progressive teaching-learning environment in a research-intensive university will be discussed with particular emphasis on student- and faculty- recruiting strategies, faculty appointment and promotion issues and the recognition of alternative forms of scholarship. In addition, the opportunity of creating an environment that optimizes the availability of a world-class faculty in the classroom as the pinnacle of the value-added learning

proposition for the student will be introduced. Creating the infrastructure to support excellence in both teaching and learning and in research will be discussed.

Presentation #2 Title: Carrying the Blueprint Forward: Promoting Caring and Social Responsibility

Presenter: Patricia (Paddy) Rodney, RN, MSN, PhD

UBC School of Nursing

Abstract:

In this session Dr. Paddy Rodney will start by providing a synopsis of issues of caring and social responsibility for all health care professions. This will include a discussion of the place of values and ethics in professional practice, and a brief overview of critical theoretical perspectives on caring and social responsibility. She will then reflect on the implications for teaching caring and social responsibility in terms of curriculum content and processes, including both preparatory and continuing education within and between professions. As she does this she will point to areas of particular relevance for the Blueprint for Pharmacy.

Following her discussion of professional education Dr. Rodney will note some professional practice implications. Drawing on her interprofessional program of action research she will note how all professions can collaborate to create a moral climate that fosters caring and social responsibility in today's complex practice environments. She will close by suggesting future directions for the pharmacy profession to consider in terms of leadership, research and policy work.

Afternoon Workshop Title: Bringing the Blueprint to Life in Pharmacy Education

Workshop Facilitator: Barbara Gobis Ogle, BSc(Pharm), ACPR, MScPhm

Abstract:

The Blueprint for Pharmacy provides a vision for the future of pharmacy practice in Canada. The Blueprint Implementation Plan identifies education as one of five key areas where action is needed to achieve this vision. AFPC has been named as a lead organization to assist Canadian schools of pharmacy in ensuring "that core pharmacy curricula address the knowledge, skills and values to ensure new graduates are prepared to develop and practice in emerging roles." This participatory workshop, one of several AFPC initiatives related to the Blueprint Implementation Plan, will engage pharmacy faculty in large and small-group discussions to share existing and consider new strategies to address the following questions: 1) What are the pre-requisite attributes of students who will practice in the manner envisioned and how can these be identified in the admission process? 2) What curricular content is required to produce graduates with the necessary knowledge, skills and values? 3) What instructional and assessment strategies could be used to facilitate the development of the graduate of the future? 4) How can technology be used to facilitate the educational process? The intention for this workshop is that participants will leave with some resources, ideas, and energy for continuing the Blueprint conversation at their home schools. A summary of the discussions from this workshop will be posted on the AFPC website.

4) CPERC Program Day 2 Focus:

Day 2 of the CPERC is intended to explore more focused pedagogical and research issues and strategies that will be important in the Blueprint era. Below are the abstracts for the opening session talks, morning breakout session and afternoon research symposium (see CPERC program for timing details).

<u>Opening CPERC Session Title</u>: "Supporting Intra-Professional Education & Experiential Learning – Perspectives from CPTEA and PEPC"

Presentation #1 Title: Pharmacy and Pharmacy Technician Students Working Together

Presenter: Beverley Stotz, BSc(Pharm), RPh, Nova Scotia Community College

Abstract:

We are in a period of exciting change ushered in by the Blueprint for Pharmacy which promises a new clinical and practical approach to the pharmacy profession. As educators we want to prepare our graduates to work together as pharmacists and pharmacy technicians. To best serve the profession and our students we must have a clear picture of this new collaborative model while stepping back and critically assessing the issues that we face in practice.

For the past 10 years the Dalhousie College of Pharmacy and the Nova Scotia Community College Pharmacy Technology Program have been providing opportunities for students to practice collaboratively in a community pharmacy lab setting. The goals set forth by these labs are to promote communication, awareness and appreciation for the scope of practice and interfaces between pharmacy and pharmacy technician students. With this in mind, the Blueprint for Pharmacy offers an exciting challenge. In this monumental moment in pharmacy what can we do as educators to institute intra-professional working relationships that enhance collaboration and thus equip our students with the necessary knowledge and skills before graduation and licensure?

Presentation #2 Title: Five Students: One Preceptor – Collaboration to Support Experiential Education

Presenters:

-Cheryl Cox, BSP, MBA, Experiential Education Coordinator, Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta

-Adrienne J. Lindblad, BSP, BSc, ACPR, PharmD, Clinical Practice Leader, Alberta Health Services

Abstract:

A primary focus for each of the provincial members of PEP Canada is the quantity and quality of student placements to meet the expectations of the pharmacy profession and the Blueprint for Pharmacy. Picture this situation for experiential education in pharmacy: a demand for students for quality placements that is greater than the supply, students accountable for direct patient care, students supporting the learning of other students, students bringing five times the value to patient care, preceptors with new time available in their day. This is an account of a partnership between the hospital pharmacy department of the Red Deer Regional Hospital and the experiential education program at the Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta. Collaboration is a key thread of this project from the pharmacy department's initiation of the idea, to implementation and evaluation. It is also a key thread that links multiple participants including hospital staff, preceptors, experiential education faculty and importantly, students. A Clinical Teaching Unit (CTU) was established on a 38-bed stroke ward at the Red Deer Regional Hospital. Five students were placed for 9-week placements, with 2 of the five students joining on week five of the project. Pharmacist and student workload statistics were tracked and compared to the same time period in the previous year, and demonstrated a significant increase in patient interventions without an increase in preceptor overtime. Given the value added results for patient care, the positive implications for the preceptor and student outcomes, this CTU model is advocated for rethinking the way experiential education is delivered in the future.

<u>CPERC Breakout Sessions Title</u>: Blueprint Pedagogies : Educating Medication Experts for a Changing Profession

Breakout Session #1 Title: Faculty Recruitment: Preparing for the Blueprint and Ensuring the Right Knowledge, Skills, and Values Mix

Presenters:

- Mary H.H. Ensom, Pharm.D., FASHP, FCCP, FCSHP, FCAHS, Professor and Director, Doctor of Pharmacy Program, UBC Faculty of Pharmaceutical Sciences
- Simon P. Albon, BSc, MSc, Senior Instructor, UBC Faculty of Pharmaceutical Science
- James P. Kehrer, Ph.D., Professor and Dean, University of Alberta, Faculty of Pharmacy and Pharmaceutical Sciences

Abstract:

Faculty recruitment for Faculties across Canada is an important issue and focus of the Blueprint for Pharmacy Implementation Plan. Across Faculties in Canada, as we move our curricula ahead in the Blueprint era, some imperative questions include: (1) Given the anticipated curriculum changes to support each element of the Blueprint and the new educational outcomes from AFPC, what are the logical implications for new faculty members (e.g., knowledge, skills, values, etc.)?; (2) Considering the implications identified in #1, what set of qualifications would be priorities for recruiting new faculty members?; (3) If the qualifications are not generally available, how should faculties prepare new hires and graduate students to be effective faculty members?; and (4) What are some innovative ways to recruit new faculty members?

This session will consist of a facilitated, but largely unscripted, dialogue between attendees. We ask the attendees to give some thought to the 4 discussion points *before* the session so as to generate the richest discussion. The session is expected to lead to some concrete take-home tips when all the "great minds" gather in the same room. Specifically, having faculty members engage in a session that not only raises the issues, but where they come away with specific suggestions for how to move forward on this issue, would be ideal.

This break-out session will begin with open discussion of the 4 questions, followed by small-group discussion of recommendations and insights that we can take home to our individual faculties. This session will begin to address Action 1.3 of the Blueprint Implementation Plan and be an important first step forward regarding faculty recruitment with early recommendations.

Breakout Session #2 Title: Identifying and Mapping Pharmacy-related Interprofessional Learning Activities onto a Curriculum Framework using a World Café Discourse

Presenters:

- Lynda Eccott, BSc, MSc, Senior Instructor, UBC Faculty of Pharmaceutical Science, Director of Interprofessional Curriculum, UBC College of Health Disciplines
- Donna Drynan, M.Ed., OT(C), Clinical Associate Professor & Academic Fieldwork Coordinator, UBC Department of Occupational Sciences and Occupational Therapy, Director of Practice Education, UBC College of Health Disciplines
- Lesley Bainbridge, BRS (PT), MEd, PhD, Associate Principal of the College of Health Discipline, Director of Interprofessional Education in the Faculty of Medicine
- Victoria Wood, MA, Project Coordinator, UBC College of Health Disciplines.

Abstract:

Using the CAIPE (2002) definition of Interprofessional Education (IPE), a taxonomy was proposed for organizing each dimension of learning "with, from and about" each other into stages of exposure, immersion and mastery, providing examples of learning activities along a continuum of simple to complex. (Bainbridge, L., 2009) IPE researchers at the University of British Columbia have used this proposed taxonomy in conjunction with the Canadian National Competency Framework for Interprofessional Collaboration (2010) to build a curriculum scaffolding for IPE.

The goal of this workshop will be to share ideas about possible, or existing IPE learning activities (in the classroom and the practice setting) that are taking place in our pharmacy schools, and to map them onto a curriculum framework to determine the 'extent' of their Interprofessional nature. This workshop will begin with a discussion about the proposed taxonomy for IPE as well as the competency framework. The draft curriculum scaffolding will then be used to guide a World Café discourse on elements of the taxonomy such as learning activities and objectives.

World Café is a style of discourse offering a safe and comfortable atmosphere for exploration and innovation. World Café questions will stimulate new ideas and innovations that are unconventional as they relate to pharmacy curriculum development of IPE. All participants will have the opportunity to discuss 3 out of 6 questions all of which will relate to a different aspect of the taxonomy. For example, learning activities that could be used to facilitate learning "about each other" at the immersion level of learning will be captured in one question. Table hosts will facilitate discussion at each table and will report back a summary of the discussions related to "their" question. The results of the discussion will be shared so that the curriculum framework can be applied by participants on their return to their own educational institution.

Breakout Session #3 Title: Enhancing Learning and Assessment in Pharmacy Programs through Peer Teaching

Presenters:

- Marion Pearson, BSc(Pharm), MA, RPh, Senior Instructor, UBC Faculty of Pharmaceutical Science
- Colleen Brady, BSc(Pharm), RPh, Lecturer, UBC Faculty of Pharmaceutical Science
- Tessa Nicholl, BSc(Pharm), MSc, RPh, Lecturer, UBC Faculty of Pharmaceutical Science

Abstract:

The communication, problem-solving, and other complex skills required of pharmacy graduates require substantial time, practice, and feedback to acquire, which strains the human resources of Faculties. At the University of British Columbia (UBC), voluntary and elective-credit opportunities for undergraduate peer teaching have been created in several courses to facilitate learning and assessment activities that could not otherwise be provided. The examples that will be described in this session include the use of near-peers as teaching assistants in first and second year pharmacy skills laboratory courses and senior peers as facilitators in a first year case-based tutorial course. This session will include a presentation of findings from the literature on the value of peer teaching, descriptions of the ways peer teachers are currently being trained, utilized, and assessed in the Faculty of Pharmaceutical Sciences at UBC, and observations about the advantages and disadvantages of using peer teachers. As part of this session, there will be an opportunity for participants to share their own experiences with peer teachers and to consider

ways peer teaching might be incorporated into their programs to enhance learning and assessment activities for their entry-to-practice students.

Breakout Session #4 Title: Developing a Program Evaluation for Canadian Faculties of Pharmacy

Presenters:

- Ingrid Price, PhD, Senior Instructor, UBC Faculty of Pharmaceutical Science Enhancing Learning and Assessment in Pharmacy Programs through Peer Teaching

Abstract:

In order to ensure appropriate training of our students, quality and excellence in professional pharmacy education is essential. Pharmacy programs are accountable to their students/student's families, accreditation bodies, universities, governments and society. Indeed, the "Blueprint for Pharmacy" states that schools must "ensure core pharmacy curricula address the knowledge, skills and values required for future pharmacy practice". Therefore, program evaluation is a vital part of the delivery of professional pharmacy programs. Effective evaluation provides program faculty with the ability to monitor and enhance the learning opportunities of their students. Program evaluation is an emerging area in Canadian Faculties of Pharmacy. While most Faculties have course/faculty specific evaluations in place, more comprehensive program evaluation plans are not as well developed. A committee has been struck through AFPC with representation from all pharmacy schools in Canada to develop a Program Evaluation Guide. The guide provides those charged with program evaluation the tools and processes needed to develop and implement an effective and sustainable evaluation of an entry-to-practice pharmacy program.

Through reviewing the AFPC Program Evaluation Guide, this session will familiarize participants with the elements of planning and implementing an effective and sustainable program evaluation. As with many things, one size does not fit all, and the same is true with program evaluation, therefore, participants will be engaged in activities to link the elements of program evaluation with the culture and needs of their individual pharmacy program.

<u>CPERC Research Symposium Title</u>: Foundations for the Future – Shaping Practice through Research

Symposium Abstract:

Pharmacy practice is once again at a cross-roads. However, this time, it appears that governments are taking a vital interest in increasing the pharmacist's role in the provision of primary care to improve health outcomes. This session will provide a critical review of the pharmacy practice culture in Canada and will highlight recent research initiatives conducted within B.C. In addition, the government perspective will be presented in terms of recent developments and future plans for the expanded scope of pharmacy practice.

Research Symposium Presentation #1 Title: The Blueprint is Nice, But Are Pharmacists Ready For It?

Presenter: Ross T. Tsuyuki, BSc(Pharm), PharmD, MSc, FCSHP, FACC, University of Alberta

Abstract:

A clear vision for Canadian pharmacists has been articulated in the Blueprint for Pharmacy: "Optimal drug therapy outcomes for Canadians through patient-centered care." Yet, the consistent and widespread provision of patient-centered care has not been adopted in pharmacy practice. This may be due to current pharmacy culture not aligning with the desired practice changes: "Culture eats strategy for lunch", as the saying goes.

In this presentation, I will present some work on pharmacists' self perception of their professional role. The overall objective of these studies was to gain some insight into pharmacy culture by examining how pharmacists in different settings (community, hospital, and faculty members) describe what they do.

Our work to date suggests that pharmacists of all kinds view themselves primarily as dispensers of medications. This makes it difficult for them to conceptualize patient-centered care and could be an important barrier to practice change and current implementation strategies for the Blueprint.

Research Symposium Presentation #2 Title: Pharmacists' preferences for providing new services

Presenter: Kelly Grindrod, BScPharm, ACPR, PharmD, MSc, University of BC

Abstract:

In the fall of 2008 we examined pharmacists' preferences for providing patient-centred services. We recruited senior pharmacy students and pharmacists in British Columbia and Alberta to complete a discrete choice experiment. Using 18 different choice-sets, we asked respondents if they preferred to provide one of two hypothetical patient-centred services or to continue with the status quo. Of 539 respondents, 49% were dispensary pharmacists or managers, 12% were dispensary owners or regional managers, 21% were clinical pharmacists and 16% were students. Overall, we found that respondents were very averse any decrease in income or job satisfaction. They also preferred to have access to a weeklong course or a paid preceptorship before embarking on patient-centred services. Compared to traditional pharmacy services, we also found that respondents preferred medication or disease management services and were not interested in screening services. Preferences differed according to several factors including respondents' place of work and experience.

Overall, it is apparent that pharmacists prefer to offer patient-centred services over the status quo. Before providing these new services, however, most will need to be assured of their income and job satisfaction and be given access to suitable advanced education. Considering that most Canadian pharmacists are not paid to provide patient-centred services, decision-makers and pharmacy leaders should carefully consider these preferences to improve the success of future programs.

Research Symposium Presentation #3 Title: Adaptation in B.C. – How did pharmacists do and did physicians like it?

Presenter: Carlo Marra, BSc(Pharm), PharmD, Ph.D., FCSHP, University of BC

Abstract:

In 2008, the BC provincial government passed legislation to expand the role of healthcare professionals in the province that enabled pharmacists to adapt prescriptions. The legislation led to the development of the Professional Practice Policy 58 (PPP-58) by the College of Pharmacists of BC to provide a framework for safe and effective adaptations. As of January 1, 2009, BC pharmacists could renew existing prescriptions, change the dose, formulation or regimen of existing prescriptions and perform therapeutic drug substitutions with the goal of enhancing public health, ensuring continuity of care, and providing the public a choice in healthcare (College of Pharmacists of BC, 2008a). We completed an evaluation of pharmacy adaptation services is underway focusing on determining the associated costs, barriers and facilitators of adaptation services among pharmacies and the impacts of adaptation services on patient populations. In addition, we conducted focus groups with pharmacists and physicians to determine their perceptions on the initiative.

Research Symposium Presentation #4 Title: Government perspective on pharmacy practice: the scoop on scope

Presenter: Suzanne C. Malfair Taylor, BSc(Pharm), ACPR, PharmD, BCPS, FCSHP, Executive Director, Drug Use Optimization Branch, BC Ministry of Health Services

Abstract:

The practice of pharmacy, especially community pharmacy, is in the midst of a transformation. Driving forces of change include legislation and professional practice policies around pharmacist scope; the Conversation on Health; the Interim Agreement between the Ministry of Health Services and the BC Pharmacy Association; the Blueprint for Pharmacy; technician regulation; evolving funding models; population demographics; and national and international trends in curriculum and practice. How can government facilitate, enable, and empower a patient-centred pharmacy practice that optimizes health outcomes for our citizens? Value and sustainability are the required endpoints. This presentation will define implications of the driving forces, describe the medication management demonstration project, and explore educational, professional development, and research aspects that must be considered for success.

Respectfully Submitted,

Simon Albon Chair, AFPC's CPERC 2010 Planning Committee