

## ACPE Report Mike Rouse

Asst. Exec. Director, Professional Affairs and Director, International Services, ACPE

District 5 Meeting

August 3, 2012

Duluth, MN

#### **Overview of Presentation**

- Continuing Professional Development: Advancing ACPE's Strategic Plan in this area.
- International Initiatives: Implications for State Boards and Schools of Pharmacy?
- Other Updates

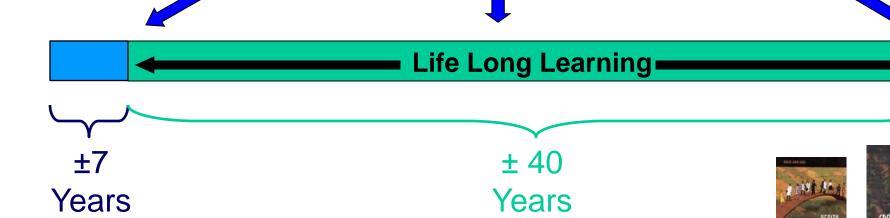


# Continuing Professional Development (CPD)



## The Continuum of Education and Training

What competencies are required for practice?



Institute of Medicine: HCPs not adequately prepared or supported in practice

#### What's Changed in 35 Years?

- Complexity of care provision
  - patient demographics, patterns of disease/morbidity, health care system, range and sophistication of pharmaco-therapeutic agents, new technologies, payment systems, managed care, new prescribers
- Expanded scope of practice for pharmacists and pharmacy technicians; pharmaceutical care/MTM; new career opportunities
- All PharmD, advanced training and credentials, certification and specialization
- Regulatory environment, especially regulation of pharmacy technicians
- Business models; chains; IT and clinical support systems
- Patient access to information
- Team-based care, CDTM



#### If it's not broken, why fix it?

"The current system of continuing education for health professionals is not working. Continuing education for the professional health workforce needs to be reconsidered if the workforce is to provide high quality health care. A more comprehensive system of CE is needed, and CPD provides a promising approach to improve the quality of learning."

http://iom.edu/Reports/2009/Redesigning-Continuing-Education-in-the-Health-Professions/Report-Brief-Redesigning-Continuing-Education-in-the-Health-Professions.aspx?page=3



#### IOM Report 2009: Redesigning Continuing Education in the Health Professions

- Absence of comprehensive and well-integrated system of CE is an important contributing factor to knowledge and performance deficiencies
- There are major flaws in the way CE is conducted, financed, regulated, and evaluated
- The science underpinning CE for health professionals is fragmented and underdeveloped
- CE efforts should bring health professionals from various disciplines together in carefully tailored learning environments
- A new comprehensive vision of professional development is needed; CPD provides a promising approach to improve the quality of learning

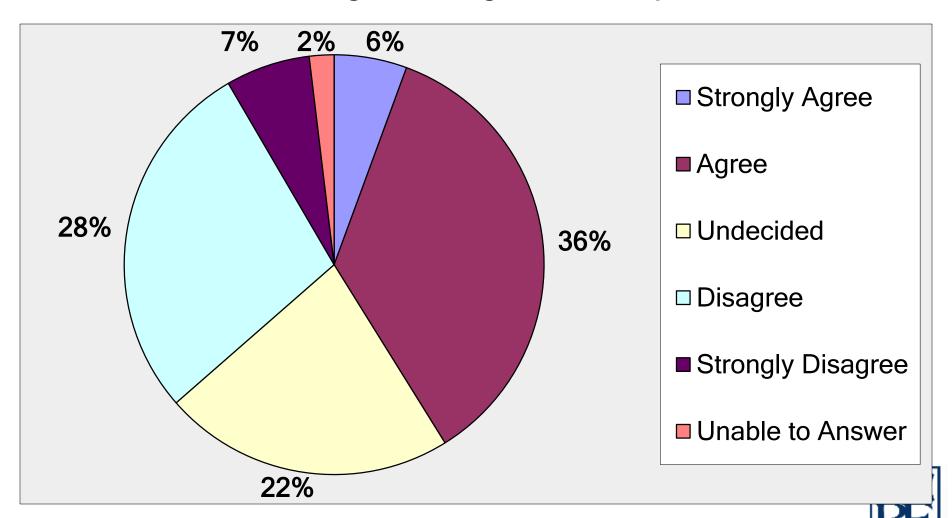


### 2011/2 Survey of Members and Staff of State Boards of Pharmacy by ACPE

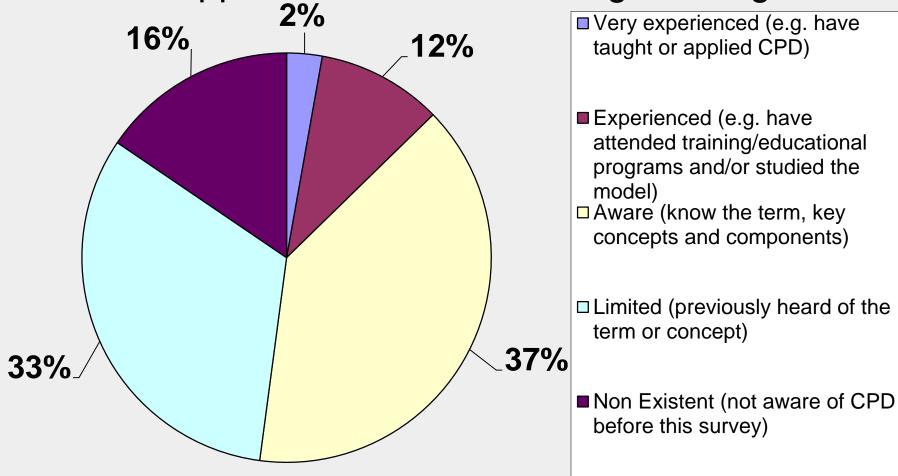
- Administered August 2011 to March 2012
- Gather input to help inform future ACPE initiatives and direction for models that support lifelong learning of pharmacists and pharmacy technicians
- Responses from <u>individuals</u> from 32/53 states and territories (60%)



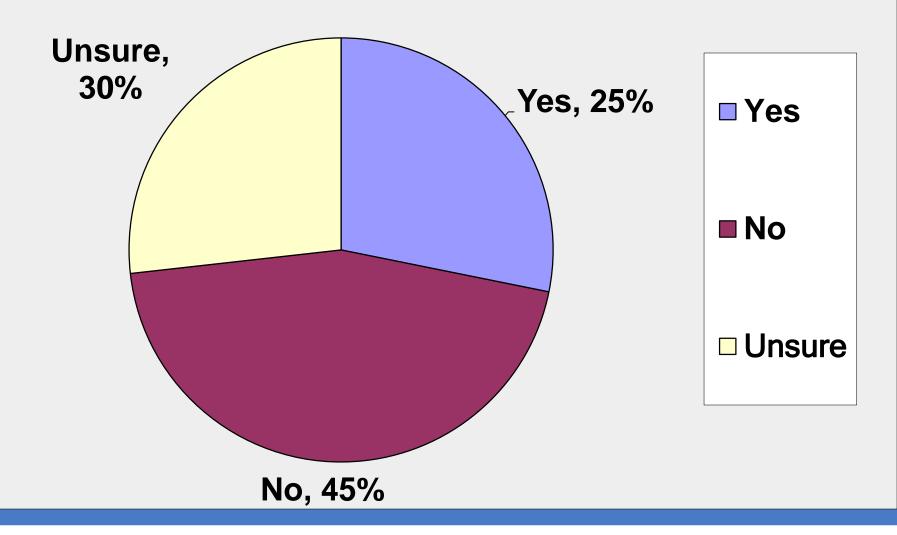
#### The current mandatory, hours-based CE system effectively meets the lifelong learning needs of pharmacists?



Select the statement below that the best describes your level of knowledge about the CPD approach/model for lifelong learning.



#### Has the CPD approach/model for lifelong learning been discussed by your Board?



## The Concepts and Components of CPD



#### **Defining Some Terms**

- Continuing Education: a structured educational activity designed or intended to support the continuing development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Continuing education promotes problem-solving and critical thinking and is applicable to the practice of pharmacy. (ACPE)
- Continuing Professional Development: the lifelong process of active participation in learning activities that assists individuals in developing and maintaining continuing competence, enhancing their professional practice, and supporting achievement of their career goals. (ACPE)

#### From the State-Based CPD Pilots:

Continuing Professional Development: a self-directed, ongoing, systematic and outcomes-focused approach to learning and professional development.

#### **CPD Value Statement:**

"Pharmacists who adopt a CPD approach accept the responsibility to fully engage in and document their learning through reflecting on their practice, assessing and identifying professional learning needs and opportunities, developing and implementing a personal learning plan, and evaluating their learning outcomes with the goal of enhancing the knowledge, skills, attitudes and values required for their pharmacy practice."

#### The Elements of CPD

I consider my current and future practice, and self-assess my professional development needs and goals.

I consider the outcomes and effectiveness of each learning activity and my overall plan, and what (if anything) I want or need to do next.



I develop a "Personal Learning Plan" to achieve intended outcomes, based on what and how I want or need to learn.

I implement my learning plan utilizing an appropriate range of learning activities and methods.

In my "CPD Portfolio" I document important aspects of my continuing professional development; it is a valuable reference that supports my reflection and learning.

#### Some Key Messages

- CPD must be seen more as an approach than a <u>process</u>
- Learners must be <u>fully engaged</u> in their learning to maximize the outcomes
- Self-directed learning is a competency, requiring knowledge, skills, attitudes and values



### Pharmacists and pharmacy technicians want to learn, but ...



"...you go, you sit, you listen,...you forget"\*

\* Pharmacist's quote from article by Austin et al; AJPE 2005; 69 (1) Article 4



#### **Conclusions from the Literature**

- CE can be effective in both learning and practice change, but ...
- More successful (learning, practice change) if:
  - Area of interest or preference
  - Related to daily practice
  - Programs selected in response to identified need
  - Interactive, hands-on
  - Use more than one intervention; continuing not opportunistic
  - Use reflection
  - Self-directed (content and context)
  - Focus on specific outcomes/objectives
  - Commitment to change

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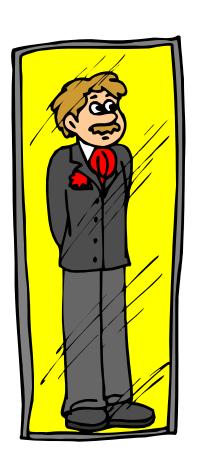
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#### REFLECT



- Reflect on
  - Yourself as a person
  - Yourself as a professional
  - Your professional practice
  - Your knowledge and skills
  - Your learning preferences
- Identify learning needs and opportunities
  - Must address several competency areas
- Frame learning objectives
  - Broad / high-level







## Reflection: the Starting Point for Self-Directed Learning



Psychoanalytic approaches to learning stress making the UNCONSCIOUS



CONSCIOUS

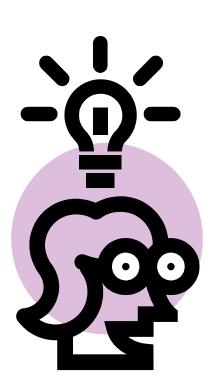


#### REFLECT



#### **IMPORTANT!**

- It's "self-assessment" ...
   not "self-assassination"
- The purpose is primarily to identify learning needs and opportunities, not to assess level of competence





#### **PLAN**



- Develop an action plan to accomplish your learning needs identified during the REFLECT stage
- Develop individual learning objectives
- Identify and set priorities
- Address all competency areas
- Develop a timeline with your action plan; be realistic



#### **PLAN**



- Long-term: three to five year plan
- Short-term: one year plan
- Identify activities to help you meet your learning objectives (structured/unstructured)
- Take into account your "learning style"
- Identify resources needed to accomplish your learning objectives
- Review at least annually



#### **Developing SMART Objectives**

Specific

Be precise about desired achievement

Measurable

Quantify objectives

Achievable

Ensure realistic expectations

Relevant

Align with practice and/or organizational goals

Timed

State when objective will be achieved



#### **LEARN**



- Implementation of personal learning plan
- Activities chosen should be outcomesdriven to meet stated learning objectives
- Use a variety of learning methodologies and activities
  - √ Formal/structured/accredited activities
  - ✓ Informal/unstructured activities
  - ✓ Work-based learning



#### **EVALUATE**



- Reflection on your learning; outcomes and impact versus "satisfaction" with educational programs
- Review your personal learning plan at least annually
  - Evaluate progress toward achieving your objectives
  - Evaluate the educational activities to ensure adequate content and learning
  - Ensure you are following action plan and timeline
  - Consider changes that have occurred professionally that may require adjustments in your objectives and plan

#### **EVALUATE**



- Leads to reflection, completing the continuum
  - New plans are designed based on updated learning and development needs and goals



#### RECORD & REVIEW (Portfolio) =



- Documentation is integral to each component of the learning cycle
- Dynamic, comprehensive tool to record and retrieve information, reflection, action plans, etc.
- Facilitates achievement of learning objectives and personal learning plan
- Needs to be readily accessible, simple to use
- Ideally standardized format (electronic/paper)

#### RECORD & REVIEW (Portfolio) <



#### Use of a CPD Portfolio

must not beome:

- "busy work"
- a burden
- a barrier to learning

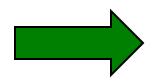
Broad Goal	What do you want to learn?		What resource will you use?	When do you plan to start	When be	Laurensi Activity
	SMART Learning Objective	Learning Activities (variable #)	(See learning activity worksheet for examples)	this Learning Activity?	Name 17	Congletes? Yearho
	18 18 18		Home study program     Discussion(s) with     colleague(s)     Use workshop, course,     or conference     Reading articles,     Internet search,     Ulterature search,     Coher			
			Home study program     Cleoussion(s) with     collesgue(s)     Live workshop, course,     or conference     Reading articles,     interest search,     Cleroture search,     Coher			
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North Carolina Board of Pharmacy Portfolio. Used with Permission.



#### What's the Connection?

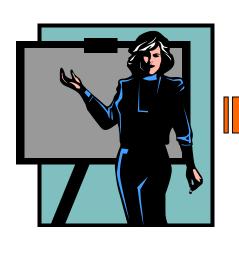




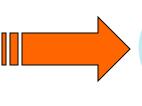


CE

Licensure Renewal









**Practice** 



#### What's the Connection?



CE

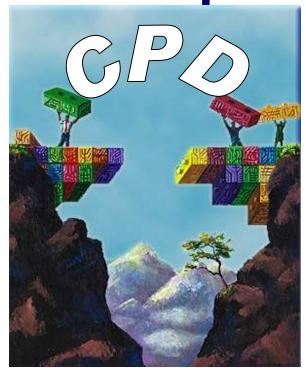
Licensure Renewal



#### **Traditional CE versus CE + CPD**

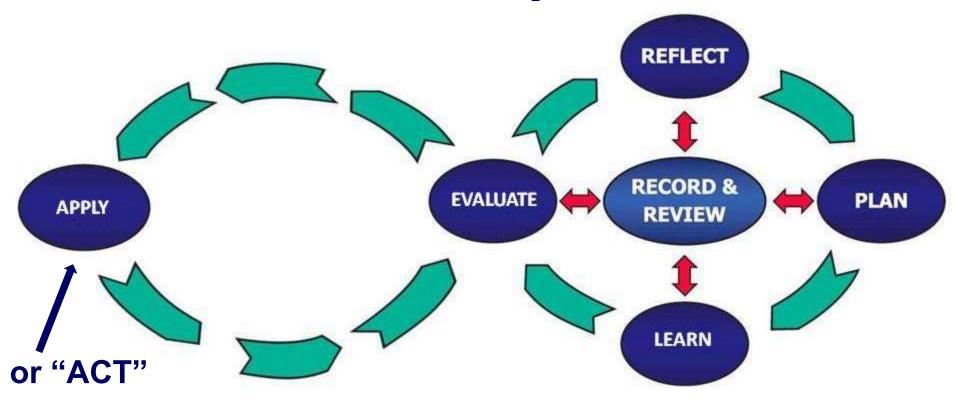
	CE	CE+CPD
Area of interest or preference	**	***
Related to daily practice	*	***
Programs selected in response to identified need	*	***
Interactive, hands-on	**	**
Use more than one intervention; continuing not opportunistic	*	***
Use reflection		***
Self-directed (content and context)	*	***
Focus on specific outcomes/ objectives	**	***
Commitment to change	*	***

## CPD: Bridging the Classroom and the Workplace



"The new vision for continuing education will be based on an approach called continuing professional development (CPD), in which learning takes place over a lifetime and stretches beyond the classroom to the point of care." *IOM December 2009* 

## CPD: Bridging the Classroom and the Workplace





#### The Challenges of Self-Directed Learning/CPD

- Self-directed learning is a skill
- "Overcoming" the predominant learning style/preference for pharmacists
- Resistance to change
- How best to support diverse learners (providers, professional associations, etc.)
- Evaluation and validation (expertise and resources for regulator)
- Initially more time, effort and self-motivation required by the learner (approach vs. process)
- Expense?
- Keeping it simple (KISS); avoid "busy work"





## ACPE International Services Program

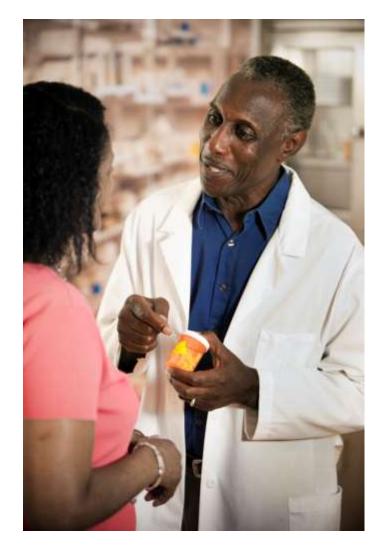


### **ACPE International Services**

- Long history of collaboration with other countries
- International Services Program (ISP) formally established in January 2011
- Assist international pharmacy stakeholders
  - Quality assurance/advancement of education
  - Provide consultancy and training upon request
  - Involve consultants from the pharmacy academic and practice communities; USA and other countries
  - Develop quality criteria that may be voluntarily used by programs and CE providers outside of the United States
- General oversight by International Commission; all decisions by ACPE Board of Directors

### **ISP Mission**

Promote, assure and advance the quality of pharmacy education internationally to improve patient care through safe and effective medication use







### **ISP Services**

- Certification of professional degree programs based on International Quality Criteria (adopted June 2012; release and publication August 2012)
- Consultation
- Workshops and training programs
- Long-term projects



# ACPE Certification – Distinct from ACPE Accreditation

ACPE Accreditation

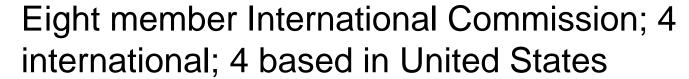
**PharmD Programs** 

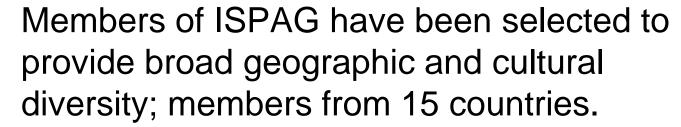
ACPE Certification

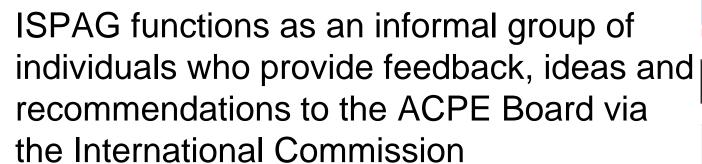
Pharmacy
Programs based
Outside the USA



# International Commission & Advisory Group























# Systems for Improved Access to Pharmaceuticals and Services (SIAPS)

- Five-year initiative in partnership with Management Sciences for Health (MSH)
  - Other core partners: Harvard School of Public Health,
     Harvard Pilgrim Health Care Institute, Logistics
     Management Institute, and the University of Washington
     Department of Global Health
- Funded by a grant from the U.S. Agency for International Development (USAID)
- ACPE will engage in assessing pharmacy education and training in a number of developing countries

### **ACPE's Role in the SIAPS Program**

- Assessing various factors and their effect on the quality of pharmacy education that could ultimately be addressed through the SIAPS program
- Developing and evaluating quality (or accreditation) standards and processes for pharmacy degree programs and continuing education programs
- Training program evaluators and relevant parties on standardization and consistency in the accreditation review process
- Providing guidance to interested parties (ministry of health, deans of degree programs, pharmacy associations, medicines regulatory authorities) on standards-based approach to improve the quality of pharmacy education.

## Quality Pharmacy Education — A Global Necessity

Educación Farmacéutica de Calidad — Una Necesidad Global

Formation Pharmaceutique de Qualité — Une Exigence Mondiale

جودة التعليم الصيدلي — ضرورة عالمية



### Other Updates



### **Accredited PharmD Programs\***

Programs with Accreditation Status (n = 129)

- Full Accreditation Status: 109
  - Programs that have graduated students
- Candidate Accreditation Status: 15
  - Programs with students enrolled but have not yet produced graduates or have graduates and have not addressed all the accreditation standards
- Pre-Candidate Accreditation Status: 5
  - Programs that have not yet enrolled students or are in their first year of classes
- On-site Evaluations Authorized for Fall 2012: 0

\* Inclusive of June 2012 Board Actions



### **Degree Program Accreditation**

 A new version of the Policies and Procedures for Professional Degree Program Accreditation (June 2012) is on the ACPE web site



### ACPE Invitational Conference September 12–14, 2012, Atlanta, GA

Advancing Quality in Pharmacy Education: Charting Accreditation's Future

- Consensus-seeking conference
- Participants represent key leaders from a wide range of backgrounds and experiences



### Why an Invitational Conference?

- Unique times are facing the profession of pharmacy due to:
  - Current/proposed changes in the U.S. health care delivery
  - Increasing role of pharmacists in patient care
  - Growing acceptance of interprofessional education and practice models in health care



### Why an Invitational Conference?

- The ACPE Board strongly desires to study these issues to identify needed quality improvement in the:
  - Accreditation standards
  - Accreditation review procedures
- Recommendations from the conference will "kick start" the next accreditation standards revision process



#### **CPE Provider Accreditation**

- Update on CPE Monitor implementation:
  - Summary in the most recent provider eUpdate
  - Over 250,000 pharmacists and technicians registered
  - Over 100 providers submitting activities
  - Over 550,000 activity records submitted to date
- Inter-professional collaboration with other accrediting bodies on joint accreditation (7 providers jointly accredited)
- Ongoing efforts to ensure independence in CE.

# Thank you for your attention!

