Quality Assurance and Standards in Pharmacy Education

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1st SEE Quality in Pharmacy Summit
Belgrade, Serbia
October 23-24, 2015
The *Continuum* of Education for Professionals

What competencies are required for pharmacy practice?

± 4 - 6 Years

± 40 Years

Institute of Medicine (USA):
“Health Care Professionals not adequately prepared or supported in practice”
The 7 Habits of Highly Effective People

Habit 2: Begin with the End in Mind

Stephen R. Covey
“There is a need to assure the development of an adequate and appropriately trained health care workforce, along with the academic and institutional infrastructure to deliver the required competency-based education and training. Therefore, many countries are introducing, expanding, or undertaking major transformations of pharmacy education. Such developments must be accompanied by robust systems to assure the quality of the educational context, structure, process, outcomes and impact.”

Traditional Oversight of Higher Education

GOVERNMENT → UNIVERSITY

QUALITY ASSURANCE/ACCREDITATION

LOCAL AUTHORITY → UNIVERSITY

AUTHORIZE TO AWARD DEGREE

UNIVERSITY → DEGREE PROGRAM IN FACULTY OR SCHOOL
The Emerging Trend

- **GOVERNMENT**
  - Establish/Recognize
  - INSTITUTIONAL ACCREDITOR
  - PROGRAMMATIC ACCREDITOR

- **LOCAL AUTHORITY**
  - Authorize to award degree
  - QUALITY ASSURANCE/ACCREDITATION

- **UNIVERSITY**
  - DEGREE PROGRAM
    - in Faculty or School
    - ACCREDIT

- ACPE Logo
Where and How Does Quality Assurance Fit Within the Profession?
Driving Forces and Dynamic Relationships that Advance the Profession

Regulation

QA

Education ↔ Practice
State and federal pharmacy organizations

State and federal regulatory boards

Accreditation agencies

General public (consumers of pharmacist services)

Other healthcare professions

Students and prospective students

Employers/Trade

CE Providers

Faculties of pharmacy

Individual educators and practitioners

State and federal pharmacy organizations

Regulation

QA

Education

Practice
Pharmacy Practice and Science: Today and in the Future?
From Product to Patient … a Continuum of Competencies

National Needs & Priorities

Patient & Population Needs

Market Forces

Are there “Core Competencies”?

Who Decides?
What are the patient, community and national needs?

What services can pharmacists provide?

What education and training must they complete?

What competencies do pharmacists need?

Needs: local, regional, national, & international

Services: provided by the pharmacy workforce to meet these needs

Competencies: demonstrated by the pharmacy workforce to provide these services

Education: completed by the pharmacy workforce to achieve these competencies

Source of graphic: FIP Education Development Team
Needs-Based Education Model

- Needs: local, regional, national, & international
- Locally determined
- Services: provided by the pharmacy workforce to meet these needs
- Socially accountable
- Competencies: demonstrated by the pharmacy workforce to provide these services
- Globally connected
- Education: completed by the pharmacy workforce to achieve these competencies
- Quality assured

WHO-UNESCO-FIP Pharmacy Education Taskforce
Socially Accountable Education

CONTEXT
National Needs & Societal Environment

QA
Educational Institution

Outcomes: Education Research Service

IMPACT
Graduate

Government, Policy Makers, Employers, Consumers, Funders, etc.

Society
Quality Advancement

Quality Assurance

Accreditation Standards;
Standardization;
Consistency

Institution/Provider-driven
Encouraged by accreditor
Innovation
Individuality
CPD: Bridging the Classroom and the Workplace

MUST BE ALIGNED

Patient and Organizational Outcomes

Learner’s Educational Outcomes
How Do We Build Quality?
The Pillars and Foundations of Educational Quality

What OUTCOMES do we need to achieve (Competencies of Graduates) in order to have the desired IMPACT?
Not Linear … Dynamic

IMPACT creates new CONTEXT (CQI)
Pillar 1: Context

✓ What are the national and community needs?
✓ What is the profession-wide vision for pharmacy practice and education?
✓ How are the school’s **vision**, **mission**, **goals**, and **values** developed and aligned with these?
✓ Does the school have unique aspects to its mission?
✓ What “culture” is the school trying to develop?
✓ What are the evolving technologies and trends?
✓ Are the goals set clearly?
Pillar 2: Structure

✓ Governance
✓ Administration
✓ Organizational structure
✓ Collaborative relationships
  ✓ Research
  ✓ Teaching
  ✓ Practice
  ✓ Inter-Professional

✓ Resources
  • Human
  • Educational
  • Technological
  • Financial
  • Physical facilities
  • Practice sites
Pillar 3: Process

- Policies, procedures, bylaws
- Strategic planning
- Management
- Assessment & evaluation
- Quality assurance
- Committee work
- CQI and innovation
- Curricular development, delivery, and improvement
- Teaching and learning methodologies
- Student services and advising
- Student input and representation
- Faculty mentoring
- Faculty and staff professional development
Pillar 4: Outcomes

Immediate/short-term; relatively easy to observe/measure; directly related to the program and/or activities of the school:

- Student learning & curricular effectiveness
- “Practice-ready” graduates (as defined by Educational Outcomes & Competencies)
- Research – studies, publications, and presentations
- Service (university, community, national, international)
- Other mission-related outcomes
Pillar 5: Impact

Higher level local, national, international and social changes and advancement; more challenging to measure; generally factors other than the program and/or activities of the school also have a role:

- Scientific and technological advances
- Advancement of practice in the community and nation
- Leadership in the development of the national vision for practice and education and contribution to its achievement
- Graduates who become leaders in the profession and agents of change
- Leadership of and advocacy for the profession
- Innovations and changes that address or solve national health care needs and health-related priorities
- Attitude, motivation and self image of pharmacist
- Collectively reflect “social accountability”
Quality of Education

Educational activities must address all competency areas (knowledge, skills, attitudes, values)

- Science – base for knowledge
- Practice – base for experience
- Ethics – base for attitudes and values

competency
Foundation 1: Science

- Appropriate qualifications of the academic staff
- Science foundation of the curriculum
- Evidence-based and source-referenced curricular content and delivery (teaching)
- Materials and resources provided to enhance understanding and application of the educational material in practice
- Research projects and publications; other scholarly activity
Foundation 2: Practice

- Involvement of preceptors (teacher practitioners)
- Reinforce application of learning in practice (case studies, workshops, projects)
- Interactive educational activities - using active learning strategies and exercises, and promote “real life” problem solving and critical thinking
- Experiential learning in practice settings
- Appropriate for current and future practice
Foundation 3: Ethics

• Including into curriculum the principles of professional ethics and autonomy that must guide future pharmacists in decisions about patient care and the responsible use of medicines.

• **Oath of a Pharmacist** - administer the oath publicly to pharmacy students upon commencing their professional studies and new pharmacy graduates.
FIP’s Global QA Framework

• The FIP Global QA Framework is offered as a tool to facilitate the establishment of QA systems and standards in countries where no such formal systems exist and to improve existing systems.

• Where regional similarities and collaborations exist or are possible, the FIP Framework may also be adapted and applied at a regional rather than national level.

• Where resources or other constraints limit the immediate application of some of the principles of the framework, the document can serve as a “road map” for incremental application.
## Quality Indicators for Context

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Non Compliant</th>
<th>Major Improvement Required</th>
<th>Minor Improvement Required</th>
<th>Compliant</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>The mission and goals of the school reflect and consider the national environment, needs, and priorities.</td>
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<td>2</td>
<td>The mission and goals of the school are aligned with the profession-wide vision for pharmacy practice and education.</td>
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<td>3</td>
<td>The mission and goals of the school are aligned with the mission and goals of the university (if applicable).</td>
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<td>4</td>
<td>The mission, goals, and values of the school are developed with input from key stakeholders (internal and external).</td>
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<td>5</td>
<td>The educational programme is designed and delivered based on national and professional needs and priorities.</td>
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<td>6</td>
<td>Changes in science, practice and regulation influence the content, design and delivery of the programme.</td>
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<td>7</td>
<td>Curricular changes are visible, consensus-based, and aligned with changes impacting the pharmacy profession.</td>
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<td>8</td>
<td>The educational programme provides national and international perspectives on the topics being taught.</td>
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<td>9</td>
<td>The school implements strategies and programmes to broaden the scientific and professional horizons of students.</td>
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<td>10</td>
<td>The school provides and/or supports the delivery of educational programmes to its graduates and other pharmacy professionals in the form of CE and CPD activities to inform and influence pharmacy practice.</td>
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<td>11</td>
<td>The school’s commitment to the generation, dissemination, and application of new knowledge is evident and demonstrated by productive research, publications, and other scholarly activities.</td>
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<td>12</td>
<td>The school embraces the obligation to be socially accountable and strives to address national and community needs through its educational, research and service activities.</td>
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<td>13</td>
<td>The school provides and supports projects and activities that bring about positive changes in society.</td>
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FIP’s Statement of Policy: Quality of Pharmacy Education

Practical recommendations for:
• National Governments,
• Regulatory and Quality Assurance Organizations
• FIP Member Organizations
• Universities, Colleges and Schools of Pharmacy
Other Resources

ACCREDITATION COUNCIL FOR PHARMACY EDUCATION
International Services Program

INTERNATIONAL QUALITY CRITERIA FOR CERTIFICATION OF PROFESSIONAL DEGREE PROGRAMS IN PHARMACY

Adopted: June 20, 2012
Released: July 1, 2012

Establishing Quality and Accredited Programs for Continuing Pharmaceutical Education and Training in Low- and Middle-income Countries

IN PRESS
Thank you for your attention!