

*CPRB*

*Advanced (Year 2) Pharmacy  
Practice Residency  
Accreditation Standards*

*Stakeholder Consultation Workshop*

May 11, 2015

1400-1500

# Welcome and Introductions

- ▶ Today's session will be facilitated by:
  - ▶ **Dr. Curtis Harder** – Residency Coordinator, Vancouver Island Health Authority
  - ▶ **Allan Mills** – Director Pharmacy, Trillium Health Partners
  - ▶ **Nancy Sheehan**, Pharmacist, Montreal Chest Institute – McGill University Health Centre, and Associate Clinical Professor, Faculté de pharmacie, Université de Montréal
- 

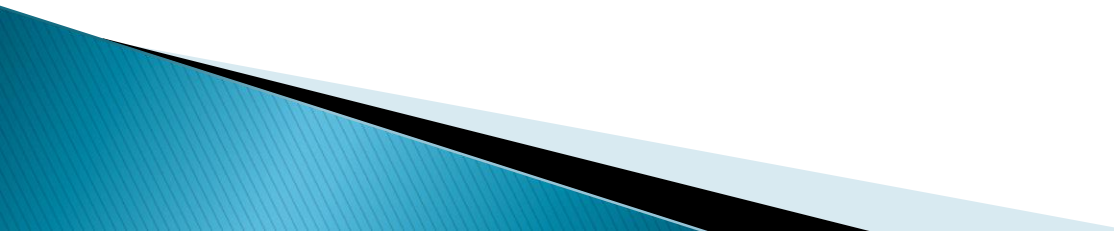
# Acknowledgement

- ▶ These draft Year 2 standards was created through the hard work of the CPRB Standards working group:
  - Allan Mills, Peter Loewen, Curtis Harder, Sandra Bjelajac Mejia, Jennifer Bolt, Heather Kertland, Debbie Kwan, Lalitha Raman–Wilms, Nancy Sheehan, Donna Woloschuk, Samatha Yau
- ▶ We acknowledge Dr. Donna Woloschuk and Ms. Nancy Sheehan who led the work on the creation of this first draft.

# Outline

- ▶ Presentation will be 45 minute long with 45 minutes for discussion
  - Need being addressed by creating Year 2 standards.
  - Function of the standards document.
  - Overview of the Standards
  - Comparison to the year 1 Standards
- ▶ Questions and suggestions from the participants
  - We invite questions and comments throughout the session in the "question box" and will address them in the question
- ▶ Summary and close

# Feedback on the standards

- ▶ Is there anything that requires clarification?
  - ▶ Are there any suggestions you would make regarding the proposed standards?
  - ▶ Is there any areas that you support?
- 

# Why Create “Advanced (Year 2) Residency Standards”?

## ▶ Societal Need

- Transition with advance practice outcomes
  - Further enhancement of clinical competencies leading to greater “clinical maturity”
  - Seen as a source of practice leadership: clinical faculty, practitioners for ‘advanced’ clinical roles, clinical leadership roles

## ▶ Demand

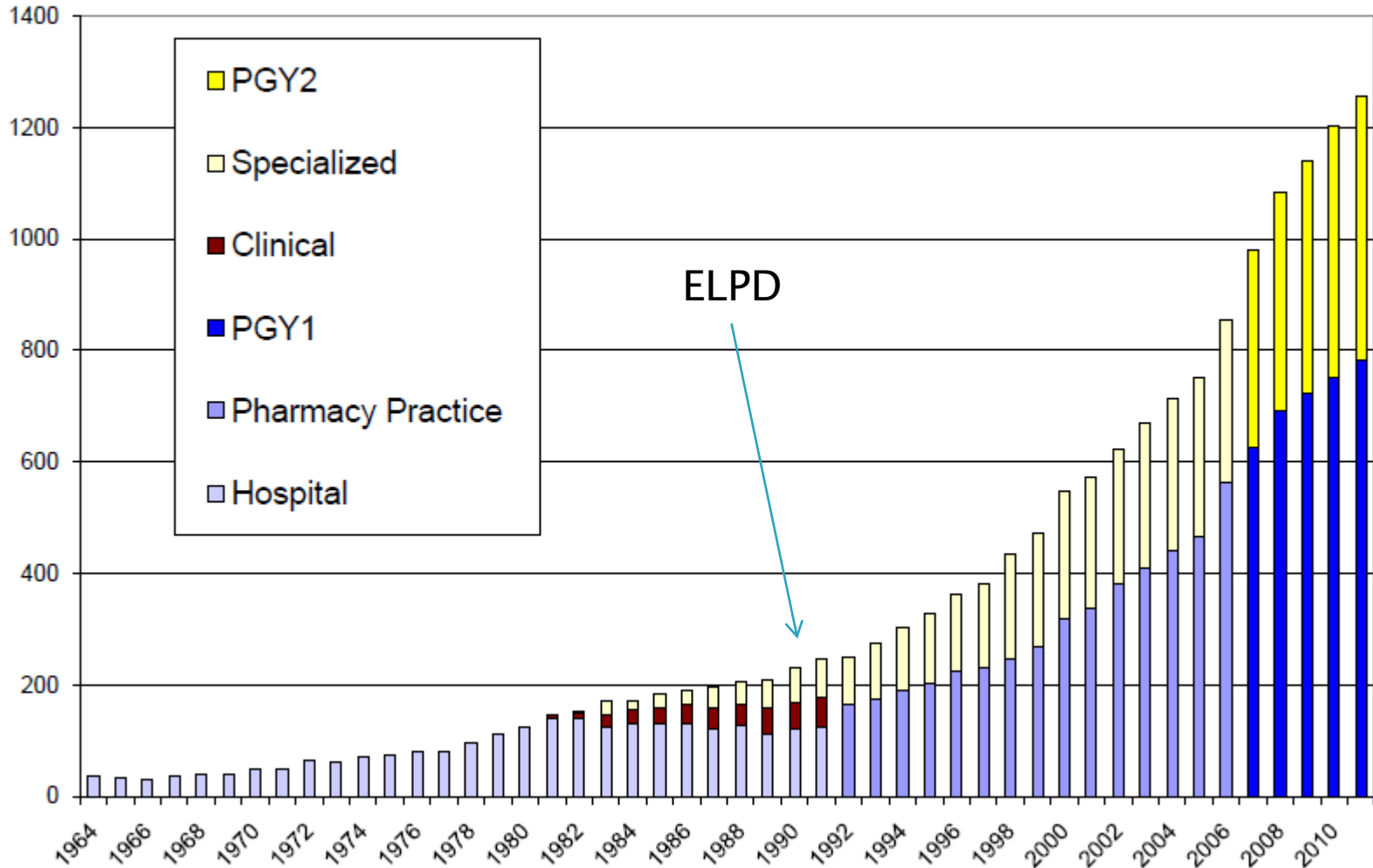
- Existing programs have requested these standards for over 10 years.
- Increasing number of pharmacy graduates within Canada

<http://www.aacp.org/about/pages/vitalstats.aspx>

White SJ: *Am J Health Syst Oharm* 2005; 62(1) 14-21

# Residency Programs in ASHP Accreditation Process (1964-2011)

as of 1/11/11



# Role of Standards

- ▶ Canadian Pharmacy Residency Board (CPRB) creates residency standards to:
  - Outline the basic criteria that need to be met in order to achieve program accreditation
  - Support each program in meeting societal expectations regarding
    - The quality of the program
    - The quality of the graduate



# Support for Program Quality

- ▶ Application of Standards ensure that...
  - Qualified individuals are administering the program
  - Qualified individuals are delivering the program
  - Educational approach is consistent with the desired educational outcomes and evaluation methodology
  - Accountabilities within programs are aligned and assigned
  - Environment supports the residency programs
  - Quality improvement is embedded in the program

# Support for Graduate Quality

- ▶ Application of Standards ensures achievement in predefined educational competencies
  - Ability to provide direct patient care as a member of an interprofessional team
  - Ability to manage and improve medication use systems
  - Ability to exercise leadership
  - Ability to provide medication and practice related education
  - Demonstration of Research Skills
  - (Project management skills)\*
  - (Manage one's own practice)\*

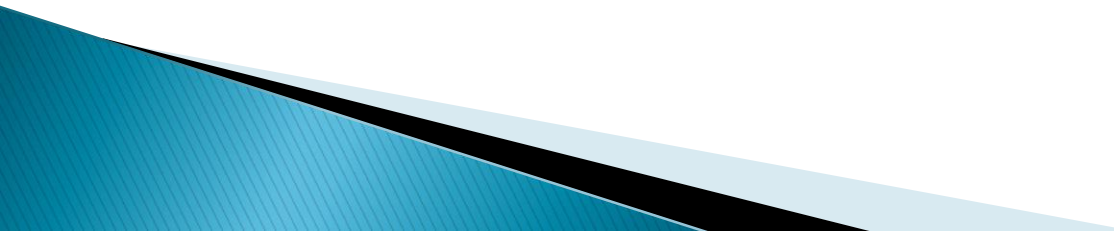
\* Year 1 competencies

# Year 2 Standards Reinforce the Continuum of Learning

- ▶ Year 2 Standards incorporate contemporary educational outcomes
  - AFPC outcomes (CanMEDS 2015)
    - Care Provider (Medical Expert)
    - Communicator
    - Collaborator
    - Manager (Leader)
    - Advocate (Health Advocate)
    - Scholar
    - Professional
  - Allows for a standard nomenclature and framework which can support Inter-Professional Education (IPE) and alignment of training.

Frank JR, Snell LS, Sherbino J, editors. *Draft CanMEDS 2015 Physician Competency Framework – Series IV*. Ottawa: The Royal College of Physicians and Surgeons of Canada; 2015 March.  
*Educational Outcomes for First Professional Degree Programs in Pharmacy (Entry-to-Practice Pharmacy Programs) in Canada*. Vancouver: Association of Faculties of Pharmacy of Canada; 2010 June

# Mapping to AFPC Outcomes

- ▶ CPRB to incorporate mapping to AFPC educational outcomes with next iteration of the “2010” standards
  - ▶ Use of AFPC framework will reinforce a common approach between health professionals (e.g. professional groups, faculties)
- 

# Orientation to the NEW Standards, Part 1

**No  
Change  
Same  
framework  
as Year 1  
Standards**

## **1.0 Introduction**

- 1.1 Definition
- 1.2 Purpose of the Standard
- 1.3 Purpose of Advanced (Year 2) Pharmacy Practice Residencies

## **2.0 Standards for Program Administration**

- 2.1 Qualifications
  - 2.1.1 Organization
  - 2.1.2 Department
  - 2.1.3 Residency Program Administration
  - 2.1.4 Preceptors
  - 2.1.5 Residents
- 2.2 Program Planning and Operation
  - 2.2.1 Admission Criteria, Policies and Procedures
  - 2.2.2 Educational Approach
  - 2.2.3 Evaluation
  - 2.2.4 Program Completion

# Orientation to the NEW Standards, Part 2

## 3.0 Standards for Advanced (Year 2) Pharmacy Practice Residency Program Competencies (Educational Outcomes)

- 3.1 Provide Direct Patient Care as a Member of Interprofessional Teams
- 3.2 Manage & Improve Medication Use Systems
- 3.3 Exercise Leadership
- 3.4 Provide Medication- and Practice-Related Education
- 3.5 Demonstrate Research Skills

## NEW

- Removal of “Exhibit Ability to Manage One’s Own Practice” (formerly 3.4)
- Emphasis on Research Skills (vs Project Management, formerly 3.6)

**Accreditation Standards**  
**Advanced (Year 2) Pharmacy**  
**Practice Residencies**

# Advanced pharmacy practice

## ▶ Definition

- Pharmacy practice beyond the level of competent practitioner that involves either **complex** patients or complex therapy problems in a **defined area of practice**.



# Defined area of practice

- ▶ **Specific patient population**
  - Pediatrics, geriatrics, obstetrics, etc
- ▶ **Specific system–diseases**
  - Cardiology, oncology, infectious diseases, etc
- ▶ **Specific type of practice environment**
  - Primary / ambulatory care
  - Drug information
  - Pharmacogenomics

# Advanced (Year 2) Pharmacy Practice Residency (APPR)

## ▶ Definition

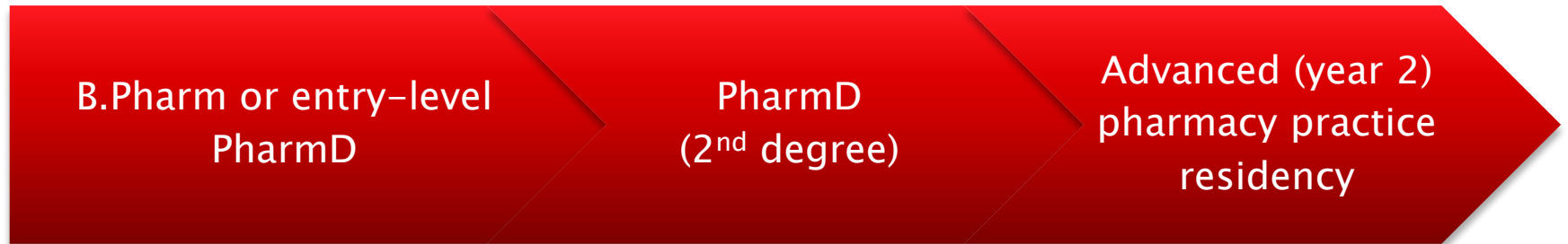
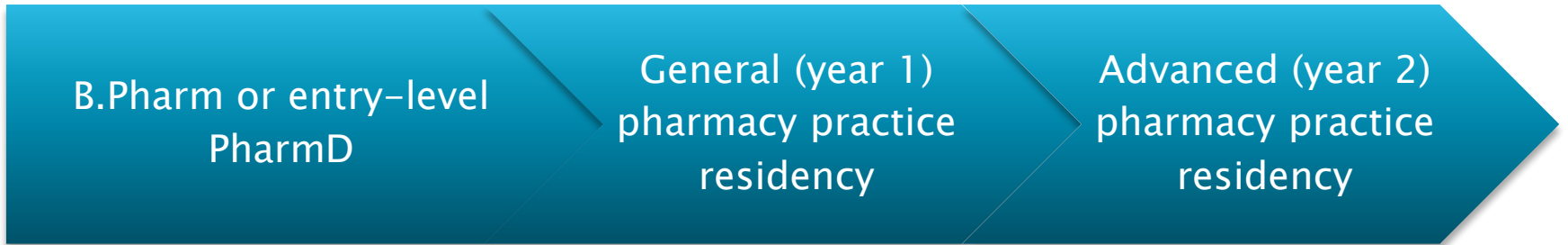
- Organized, directed, accredited program that **builds upon competencies of an accredited graduate clinical pharmacy degree or a pharmacy practice residency**;
- The APPR focuses on **direct patient care, teaching and research**. The APPR increases the pharmacist's knowledge, skills, attitudes and competencies to allow for the interprofessional **management of complex patient cases** at a **level beyond what is expected of a year 1 resident**;
- The APPR focuses on a **defined area of practice**;
- APPR develop **interprofessional** and **leadership** skills that can be applied to any position in any practice setting.

# Purpose of Advanced (year 2) pharmacy practice residencies

- ▶ Refine, through experiences in a defined area of practice under the **guidance of expert practitioners**, selected competencies that were gained during study in an accredited 2<sup>nd</sup> professional pharmacy degree program or a pharmacy practice residency program;
- ▶ Enhance **inter- and intra-professional care** to a level that will serve as a **model for others**;
- ▶ Develop and demonstrate **leadership, change management**, and demonstrate **research skills** that will enable graduates to **improve medication use** for individual patients and groups of patients;
- ▶ Educate others.

# Clinical Pharmacy Education and Training Continuum

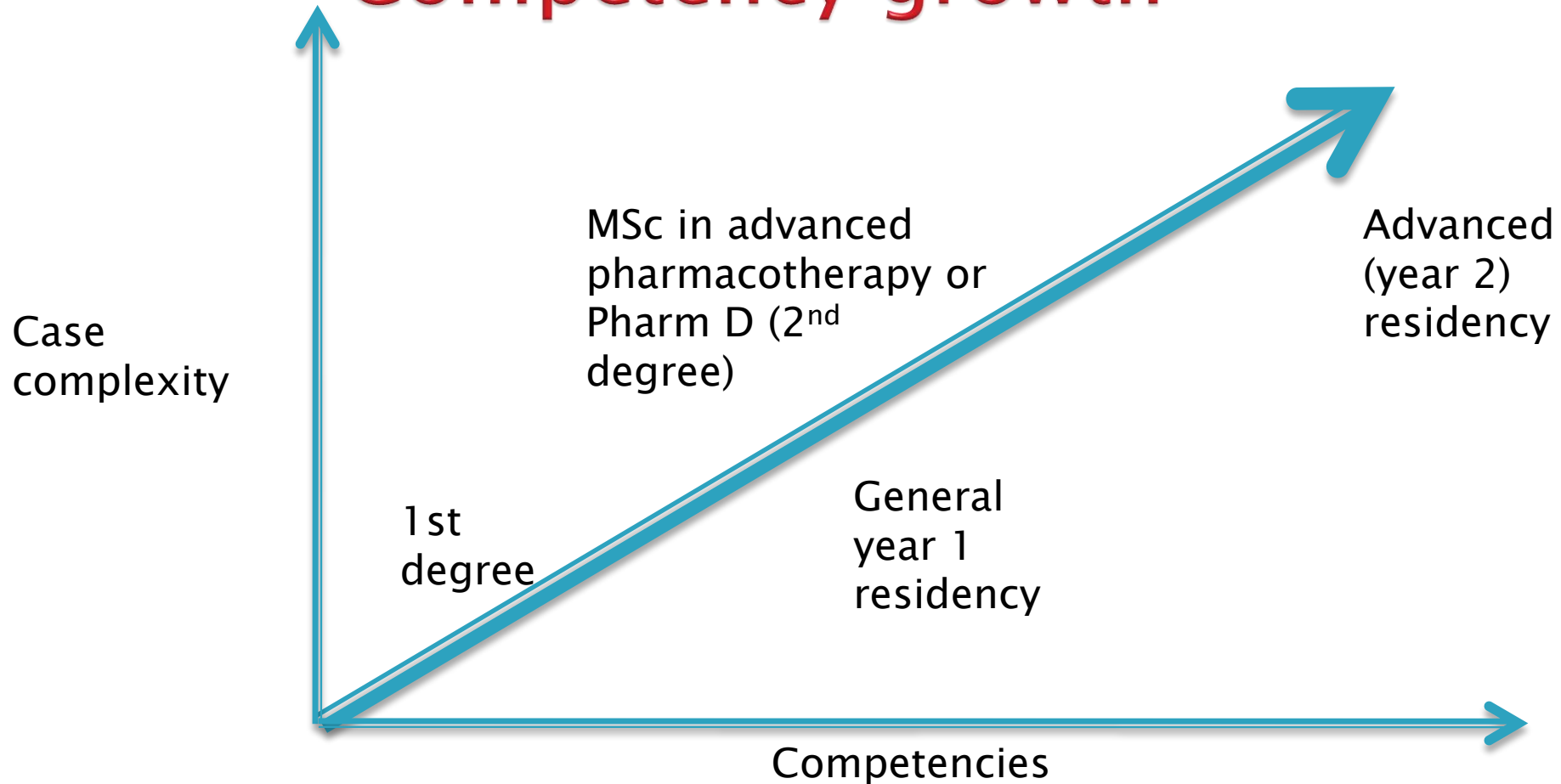
## Different scenarios in Canada



The Québec model



# Competency growth



Pharmaceutical care – Interprofessional skills – Critical thinking  
Communication – Project management – Teaching – Research

# Comparison (key differences)



Advanced (year 2) versus (year 1)  
pharmacy practice residency standards

... for program administration

... residency program competencies

# 2.1.1 Organization

- ▶ **Advanced (year 2) residencies :**
  - The organizations shall have healthcare professionals that are qualified and who are **leaders** in the residency's **defined area of practice**;
- ▶ **Required evidence:**
  - **Variety of professional practice experience opportunities [in the defined area of practice];**
  - **Expert professional pharmacy or other qualified health professions preceptors in the defined area of practice.**

## 2.1.2 Department

- ▶ **Advanced (year 2) residencies:**
  - Shall be conducted in **departments** that have demonstrated a commitment to education and that provide an exemplary environment conducive to residency training.
- ▶ **Requirements and evidence:**
  - The department shall provide experience in **different facets of the defined area of practice as well as areas that are complimentary to that defined area of practice;**
  - Pharmacy services that are organized to effectively meet patient needs in the core areas of the residency's defined area of practice;
  - Pharmacists are essential members of the interprofessional teams;
  - The **pharmacy service in areas** where residency training is provided is **active 12 months a year.**



## 2.1.3 Residency Program Administration Requirements...

### Program director

- ▶ Leader in the profession;
- ▶ Administrative experience  $\geq$  2 years;
- ▶ Ability to supervise, teach and mentor residents;
- ▶ Active membership in a professional society;
- ▶ Sustained contribution to advancing practice.

### Coordinator

- ▶ Leader in the pharmacy profession; and
- ▶ Completed accredited pharmacy practice residency OR advanced pharmacy practice training OR received certification in the defined area of practice OR equivalent experience; and
- ▶ **Active pharmacy practice in the defined area of practice;** and
- ▶ Active member CSHP; and
- ▶ **Contributed to advancing pharmacy practice in the defined area of practice.**

# 2.1.4 Preceptors

## ▶ Standard

- The resident shall be precepted by **qualified pharmacists** or **other qualified practitioners** who have the experience, desire and aptitude to teach.

## ▶ Requirements:

- Primary preceptor shall:
  - Maintain an **active practice in the defined area of practice**;
  - Have completed an accredited advanced (year 2) pharmacy practice residency **OR** a post-graduate clinical pharmacy degree **OR** have received certification in the defined area of practice **OR** have equivalent practice experience in the defined area of practice;
  - Have **contributed to the defined area of practice**.
- **Not less than 50% of residency days** in the overall program shall be precepted by a **primary preceptor with training in the field of pharmacy**.

## 2.1.5 Residents

### ▶ Standard

- ...residents shall be individuals who hold to high professional ideals, who have a commitment to continued learning and who **wish to become an expert and leader in the residency's defined area of practice.**

### ▶ Requirements (admission)

- Successfully completed an advanced clinical pharmacy degree (**2<sup>nd</sup> degree PharmD, MSc advanced pharmacotherapy**) or an accredited pharmacy practice residency.

# 2.2.1 Admissions criteria, policies and procedures

- Minimal changes to standards
- **Duration**
  - Full-time 52 week program (including approved leave/vacation), or
  - Part-time: 52 weeks (including approved leave/vacation) offered over 24 months
  - Leave / vacation (training break) : max 15 days during the program

## 2.2.2 Educational Approach

- ▶ Content relatively unchanged
- ▶ Order of steps in designing, planning and implementing program changed
- ▶ **Some minor changes:**
  - Learning goals and objectives address content from a **list of topics** (e.g., diseases, conditions, client groups, service issues, etc.) in the **defined area of practice**;
  - Learning experiences (rotations) shall be selected to ... **cover the scope of the defined area of practice**;
  - Residents shall **provide service with a team for an extended duration or on a recurring basis** with a frequency that supports development of **interprofessional collaborative practice skills to the highest level**.

## 2.2.3 Evaluation

- ▶ Evaluation tools: competency- and criteria-based
- ▶ Method to evaluate longitudinal development of competencies

Competency	Evaluation
Clinical skills	Direct observation
Attitudes and professionalism	Interviews with peers, supervisors, health care professionals, patients, families, etc.
Communication	Direct observation, written communication (ex: consultation notes)
Inte- and intra-professional collaboration	Validated tools (PIPES or similar)
Teaching	Written student assessments, direct observation (seminars, lectures, case presentations, etc.)

## 2.2.4 Program completion

- ▶ Relatively unchanged
- ▶ **Designation: ACPR2**
  - Accredited Canadian Pharmacy Resident–Advanced Year 2

# 3.1 Provide Patient Care as a Member of Interprofessional Teams

## ▶ **Standard:**

- The resident shall demonstrate **expertise** in providing evidence-based pharmacy care as a member of interprofessional teams in the residency's **defined area of practice**.



# 3.1 Provide Patient Care as a Member of Interprofessional Teams

Professional

Inter / Intra  
professional  
collaboration

Evidence  
-based

Accountable

Patient  
advocate

Critical  
appraisal

Decision  
-making

Adapt

Proactive

Care  
plans

Patient  
follow-  
up

Health  
prevention /  
promotion

Documentation  
/  
Communication

## 3.2 Manage and improve medication use systems

### ▶ Standard:

- The resident shall contribute to the **improvement of medication use systems and pharmacy services** in healthcare teams, organizations and systems
  - **Prepare tools** to improve consistency / quality
  - Use health informatics effectively
  - Recognize, disclose, respond to adverse events, errors, near misses
  - **Analyze factors that influence quality and recommend / implement modifications**

# 3.3 Exercise leadership

## ▶ Standard:

- The resident shall **demonstrate leadership** in professional practice
  - **Demonstrate personal responsibility** for and contribute to quality improvement;
  - Contribute to **strategies that improve the value of pharmacy care / health care delivery**;
  - **Facilitate changes** to enhance pharmacy services outcomes;
  - Achieve additional prescriptive authority or other **expanded scope** privileges (if applicable and pertinent);
  - **Contribute to scholarly activities.**

## 3.4 Provide medication and practice-related education

### ▶ Standard:

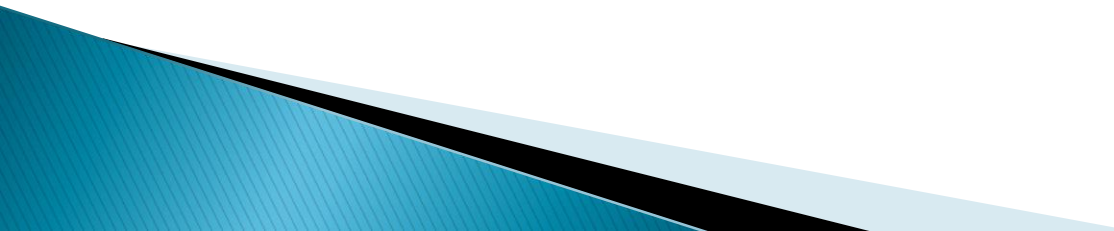
- The resident shall effectively respond to medication- and practice-related questions, and educate others.
  - The resident shall respond effectively and in a timely manner to medication- and practice-related questions received from others;
  - The resident shall facilitate the learning of students, other pharmacy residents, other health professionals including students from other professions, the public and other stakeholders;
    - Demonstrate effective selection of an appropriate teaching role and demonstrate effective teaching within that role;
    - Demonstrate effective feedback and evaluation.

# 3.5 Demonstrate research skills

## ▶ Standard

- The resident shall use effective project management skills to **undertake, conduct and successfully complete a research project in the defined area of practice.**
  - Pose clinically and scientifically relevant questions;
  - Explain and justify the rationale;
  - Critique the possible methods;
  - Prepare a project proposal (including ethical considerations);
  - Establish role and responsibilities of team members;
  - Collect data and/or oversee data collection;
  - Prepare a written report in a format suitable for publication in a peer-reviewed journal;
  - Present and defend outcomes of the project.

# Feedback on the standards

- ▶ Is there anything that requires clarification?
  - ▶ Are there any suggestions you would make regarding the proposed standards?
  - ▶ Is there any areas that you support?
- 

# Thank you

We appreciate your feedback  
and suggestions

