PERSPECTIVES ON CURRENT AND FUTURE COMPETENCY REQUIREMENTS FOR PHARMACISTS

Daniel C. Robinson, PharmD, FASHP
Dean, College of Pharmacy
Western University of Health Sciences

Graduate Health Sciences University
Pomona, California (east of Los Angeles)
30 minutes from Disneyland
3,000 Students, 300 Faculty in 9 Colleges
Western University Programs

- Medicine (DO)
- Physical Therapy (DPT)
- Physician Assistant (MSPAS)
- Pharmacy (PharmD)
- Graduate Nursing (MSN, DNP)
- Veterinary Medicine (DVM)
- Dentistry (DMD)
- Optometry (OD)
- Podiatry (DPM)
Interprofessional Education
Enhanced Patient-Centered Care

9 PERSPECTIVES
1 FOCUS

Western University
OF HEALTH SCIENCES
The discipline of learning.
The art of caring.
Burning Questions

Are current pharmacy graduates prepared to provide direct patient care?

If not, should this be an explicit outcome of pharmacy education?
Lessons Learned from Other Health Professions

Practice Ready

- Physical Therapy
- Physician Assistant
- MS Nursing
- Nurse Practitioner
- Dental Medicine
- Optometry
- Veterinary Medicine
- Pharmacy?

Residency Ready

- Medicine
- Podiatric Medicine
Lessons Learned from Other Health Professions

Practice Ready
- Physical Therapy
- Physician Assistant
- MS Nursing
- Nurse Practitioner
- Dental Medicine
- Optometry
- Veterinary Medicine
- Pharmacy?

Residency Ready
- Medicine
- Podiatric Medicine
Dental Medicine

Scope of Practice

Evaluation, diagnosis, prevention, treatment (surgical and nonsurgical) of diseases or conditions of the oral cavity, maxillofacial area and adjacent structures.

Educational Outcomes

Graduates possess the basic knowledge, skills, and values to practice dentistry, independently, at the time of graduation.
Veterinary Medicine

Scope of Practice

Prevention, diagnosis, treatment of disease, disorder and injury in animals; covering all animal species, both domesticated and wild

Educational Outcomes

New graduates must have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation
The “Practice of Pharmacy” means the interpretation, evaluation, and implementation of Medical Orders; the Dispensing of Prescription Drug Orders; participation in Drug and Device selection; Drug Administration; Drug Use Review; the Practice of Telepharmacy within and across state lines; Drug or Drug-related research; the provision of Patient Counseling; the provision of those acts or services necessary to provide Pharmacist Care in all areas of patient care, including Primary Care and Collaborative Pharmacy Practice; and the responsibility for Compounding and Labeling of Drugs and Devices (except Labeling by a Manufacturer, Repackager, or Distributor of Non-Prescription Drugs and commercially packaged Legend Drugs and Devices), proper and safe storage of Drugs and Devices, and maintenance of required records. The practice of pharmacy also includes continually optimizing patient safety and quality of services through effective use of emerging technologies and competency-based training.
Pharmacy

Educational Outcomes

Graduates must possess the basic knowledge, skills, attitudes, and values to practice pharmacy, independently, at the time of graduation

This includes…
ACPE Standards 2007

Standard 12; Guideline 12.1

The ability to design, implement, monitor, evaluate, and adjust pharmacy care plans that are patient specific. It also includes the ability to manage a successful patient-centered practice.

= Direct Patient Care
ACCP and ASHP made “residency for all” recommendations in 2006-2007

Improved preceptors
Evolution of curriculum
MTM authorization
Immunizations
Increase in pre-pharmacy
Increase in experiential ed.

Shaped by personal experiences and perceptions of 10, 15, 20 years earlier

Prior to full implementation of Standards 2007

2012
Responsibility-centered education

• Create closer links between learning and application
• Hold students continuously accountable for their learning
• Similar to on the job training, quality APPE training, residency training
• Builds life-long learning skills
• Shifts focus from instructor evaluation of learning to student evaluation of learning
Does passing NAPLEX demonstrate competence in providing direct patient care?

Recommendation:

Changing NAPLEX to more carefully assess outcomes associated with ACPE Standard 12 would be a great incentive for educational programs to ensure that graduates have met direct patient care competencies.
Competencies Required of a Practice Ready Pharmacist (AACP COD Task Force)

- Perform physical assessment for MTM
- Promote wellness and life-style modification
- Provide education to enhance self-monitoring of medication therapy
- Provide preventative services
- Identify and resolve issues with transitions in care
- Utilize p’economic principles in decision-making
- Utilize patient-specific information to develop and monitor medication management plan
- Work collaboratively within interprofessional setting
Summary

We cannot rely on PGY1 residencies to create the pharmacy workforce that is desperately needed to meet the medication-related health care needs of society.

We can produce practice ready pharmacists by:
- Improving the quality and expectations of APPEs
- Providing more responsibility-centered education
- Improving patient assessment skills
- Documenting critical competencies
A Final Thought

Are we training drug therapy experts?

No!

Our graduates are entry-level health care practitioners who are trained to improve patient safety and drug-related outcomes in any practice setting.
Thank You

WesternU. We’re Unique.

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