



Introducing the Common Training Framework (CTF)

Keynote 3
22nd Congress of the EAHP,
24 March 2017



Conflict of Interest

No commercial conflict of interest to declare





A CTF for Hospital Pharmacy Specialisation

- Postgraduate education for over 40 years
- Change to the Professional Qualifications Directive - 2013
- EAHP members vote to pursue this opportunity





THE DEMAND FOR A COMMON EUROPEAN POST GRADUATE EDUCATION

EAHP Statement on Patient Safety

'EAHP believes that all patients must have equal access to safe high quality pharmaceutical care and that in a complex hospital setting this is underpinned by the specialised knowledge, skills and experience of the hospital pharmacist'



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*'EAHP believes that all patients must have **equal access** to **safe high quality** pharmaceutical **care** and that in a complex hospital setting this is underpinned by the **specialised knowledge, skills** and **experience** of the hospital pharmacist'*



EAHP Statement on Hospital Pharmacy Specialisation

In order to practice safely and with independent competence, hospital pharmacists require a set of specific competencies that go above and beyond the basic education of 5 years for pharmacists described in the European Directive on Mutual Recognition of Professional Qualifications



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Why Hospital Pharmacy Specialisation?

- The sickest patients
- Acute situation
- Complex medication regimes
- Risky environment
- Support other HCP practice



Post Graduate Education Needs For Hospital Pharmacy

- PHARMINE (2011)



- Existing postgraduate Hospital Pharmacist programmes

- European Statements of Hospital Pharmacy





THE 44 EUROPEAN STATEMENTS OF HOSPITAL PHARMACY

FIP Basel statements 2008

European statements
May 2014



THE VISION

44 statements - 6 sections

1. Introductory Statements and Governance
2. Selection, Procurement and Distribution
3. Production and Compounding
4. Clinical Services
5. Patient Safety and Quality Assurance
6. Education and Research



The Surveys

- Annual surveys
- Capability = recurrent theme

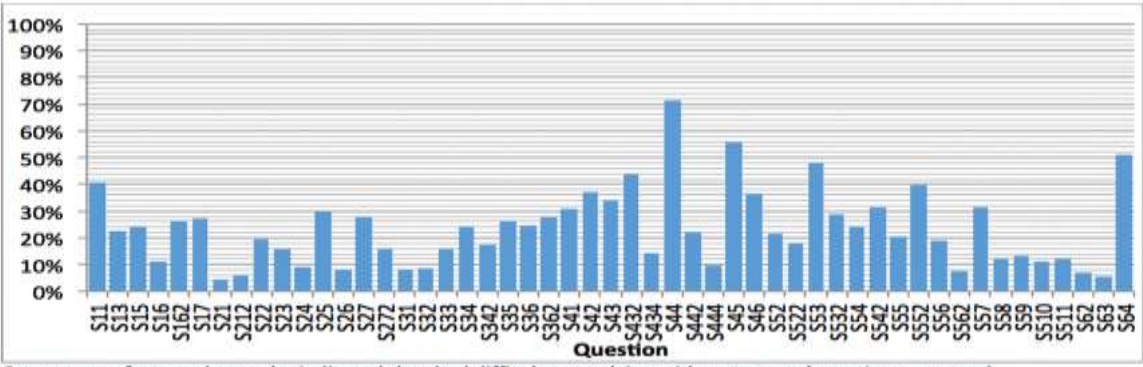


Survey

- 1. Baseline Survey Spring 2015
 - Capacity
 - Capability



- 2. Annual Survey of 3 sections. Autumn 2015/2016/2017.....



Percentage of respondents who indicated they had difficulty complying with statement (negative responses)

OPPORTUNITY FOR CHANGE



Discussion supporting the Directive

- Professions could include specialties, not currently subject to automatic recognition provisions in the Directive,which have **clearly defined specific** activities **reserved** to them....
- Common training **principles** should take the form of **common training frameworks** based on a common set of knowledge, skills and competences or standardised training tests.



Role for EAHP

Professional organisations which are **representative at Union level** and,.....

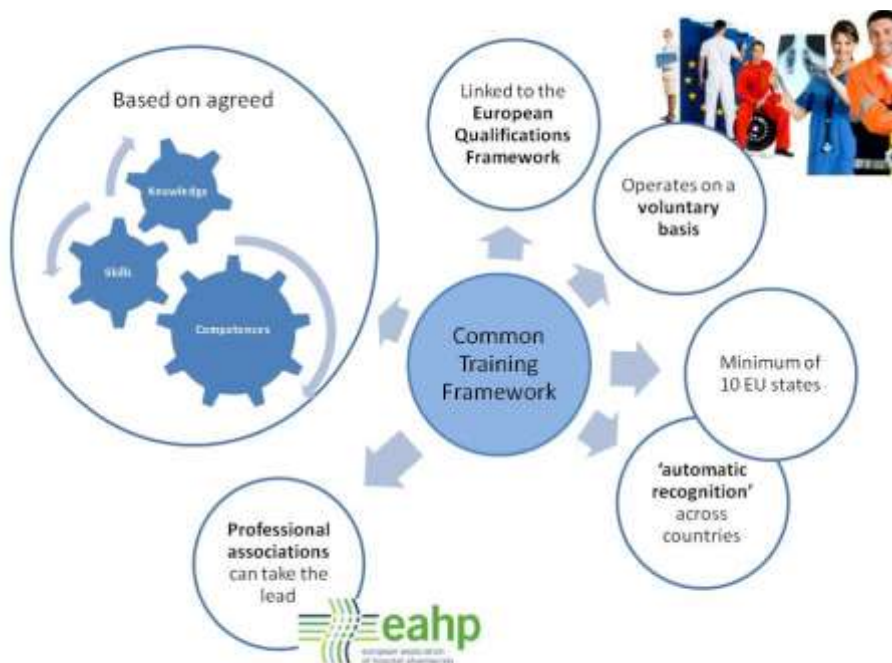
should be **able to submit** to the Commission **suggestions for common training principles**,

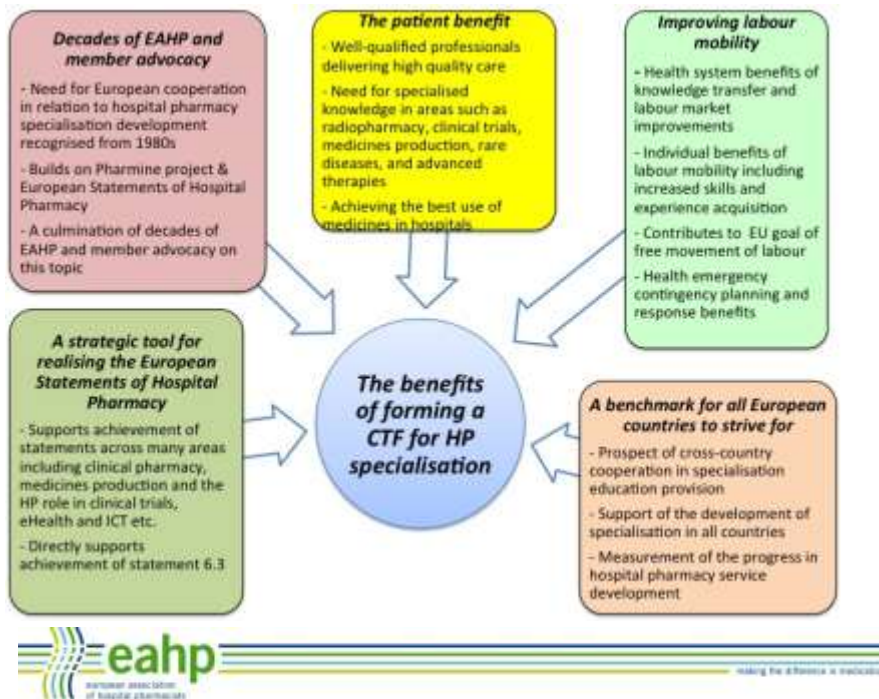


Amendment of the Directive 2005/36/EU (vote 09/10/2013)

Common Training Framework (CTF) for specialisation

- Minimum requested: 1/3 of all EU Member States (10)
- Details to be determined by “delegated act”
- Based on competencies rather than the European Credit Transfer System (ECTS*)





ACTIONS BY EAHP

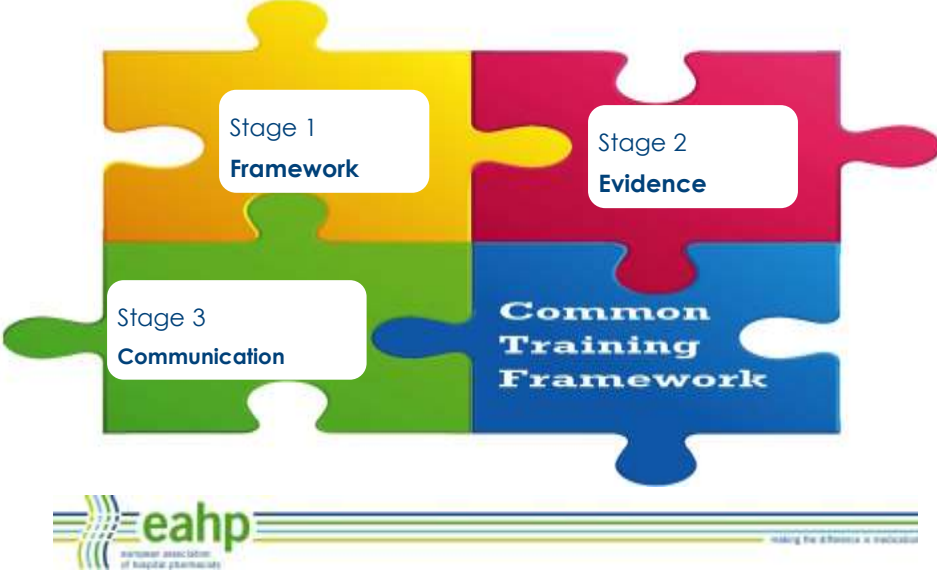


STEERING GROUP

- Ian Bates (Chair);
- Fons Verbruggen (**Belgium**, Vice-Chair);
- Andreia Bruno (Chair of Working Group 1),
- Roberto Frontini (EAHP Immediate Past President, Chair of Working Group 2)
- Joan Peppard (EAHP President, Chair of Working Group 3);
- Antonio Gouveia (**Portugal**);
- Aurelie Guerin (**France**);
- Eduardo Echarri (**Spain**);
- Jos Kosterink (**The Netherlands**);
- Juraj Sykora (EAHP Director of Professional Development)
- Kees Neef (EAHP Director of Education, Science and Research);
- Paolo Serra (**Italy**);
- Petr Horak (**Czech Republic**, also an EAHP Board Member);

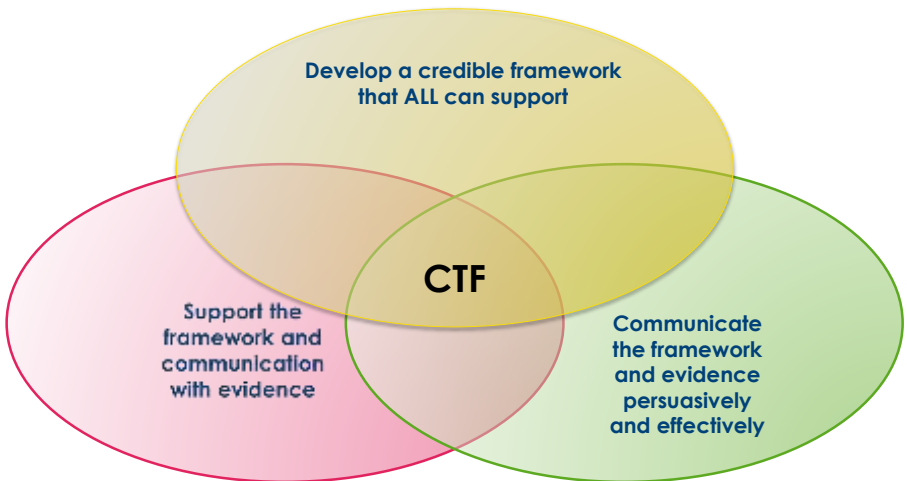


PATHWAY TO THE COMMON TRAINING FRAMEWORK



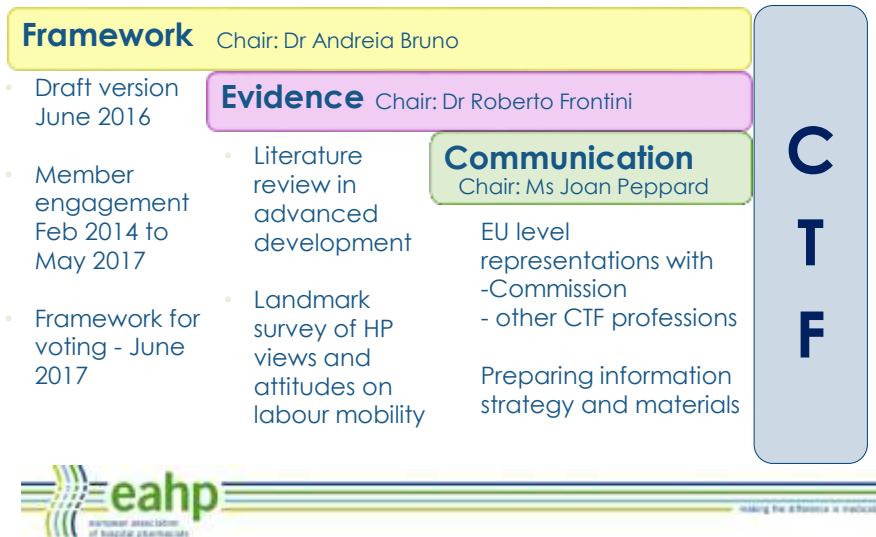
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3 PRIMARY NEEDS



28

PATHWAY TO THE COMMON TRAINING FRAMEWORK



WORKING GROUP 1 | COMPETENCY MAPPING

- Andreia Bruno | **Portugal**, Chair
- Kees Neef | **The Netherlands**
- Alfons Verbruggen | **Belgium**
- Kersti Teder | **Estonia**
- Ana Lozano | **Spain**
- Marcela Heislerova | **Czech Republic**
- Antonio Gouveia | **Portugal**
- Natasja Faganeli | **Slovenia**
- Aurelie Guerin | **France**
- Paolo Serra | **Italy**
- Evgeni Evgeniev Grigorov | **Bulgaria**
- Petur S.Gunnarsson | **Iceland**
- Gyöngyver Soos | **Hungary**
- Pierre Voirol | **Switzerland**
- Hanna Kortejärvi | **Finland**
- Steffen Amann | **Germany**
- Inese Sviestina | **Latvia**



WORKING GROUP 1 | COMPETENCY MAPPING

‘the creation of a strong agreement on the knowledge, skills and competencies required to practice hospital pharmacy at an advanced level in Europe.’



WORKING GROUP 1 | COMPETENCY MAPPING

‘the creation of a strong **agreement** on the **knowledge, skills** and **competencies** required **to practice** hospital pharmacy at an **advanced** level in Europe.’



WORKING GROUP 1 | COMPETENCY MAPPING

Phases:

1. **Current specialisation** and HP education
2. **Review** and **analyse** national programmes
3. Analyse according to the **Statements**
4. **Propose** the draft CTF



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PROCESS

Initial identification of competencies in the PHARMINE framework

21 Overall Themes identified

45 Competencies identified



PROCESS

44 Statements
analysed

15 countries
surveyed

Visual Map

- current practice
- not completely clear
- not current practice or
- not applicable.

CTF Working Group 1 Competency Mapping Country Outcomes												
Country	Current practice										Not completely clear	Not current practice or not applicable
	United Kingdom	Belgium	Czech	Estonia	France	Germany	Hungary	Italy	Latvia	Portugal	Slovenia	Spain
Section 1: Introductory Statements And Governance												
1.1												
1.2												
1.3												
1.4												
1.5												
1.6												
Section 2: Selection, Procurement And Distribution												
2.1												
2.2												
2.3												
2.4												
2.5												
2.6												
Section 3: Production And Compounding												
3.1												
3.2												
3.3												
3.4												
3.5												
Section 4: Clinical Pharmacy Services												
4.1												
4.2												
4.3												
4.4												
4.5												
4.6												
4.7												
Section 5: Patient Safety And Quality Assurance												
5.1												
5.2												
5.3												
5.4												
5.5												
5.6												
5.7												
Section 6: Education And Research												
6.1												
6.2												
6.3												
6.4												
6.5												
Missing Competencies												
7.1												

PROCESS

Framework Template

3 options provided

One chosen as a structure for the draft framework (Option 2).

OPTION 1: Example

Competency	Definition
1.1	...
1.2	...
1.3	...
1.4	...
1.5	...
1.6	...
1.7	...
1.8	...

Comments from the users:

The competency framework can be a useful guide to practice. It can be used to identify the current practice of the profession and to identify the gaps in the current practice. It can also be used to identify the areas for improvement and to develop the framework for the future.

OPTION 2: Example

Therapeutic Management			
Competence	Knowledge	Skills	Attitudes
5.5	Follow up with patients	The pharmacist should be able to identify the patient's needs and to provide the appropriate advice and support.	Multi-professional approach to effective team working.
7.1
7.2

Comments taken from the users:

The competency framework is designed to help pharmacists understand and develop the extended knowledge and skills they will require to provide services beyond the scope of their roles. Such developments are expected to occur within a national local framework.

OPTION 3: Example

Monitoring and Review	
Competence	Definition
1.1	...
1.2	...
1.3	...
1.4	...
1.5	...
1.6	...
1.7	...
1.8	...

Comments taken from the users:

The structure with competencies listed as the highest priority of the development of the new framework. It is a good structure for a competency framework.

CTF Some Numbers

4 Clusters:

- Patient care and clinical skills competencies
- Medicines and their use related competencies
- Management competencies
- Professional competencies

26 Competencies
102 Knowledge items
221 Behaviour competencies



CTF | DRAFT VERSION | OVERVIEW

Scientific knowledge			
Patient focus		Medicines focus	
Patient care and clinical pharmacy skills competencies		Medicines and their use related competencies	
1.	Patient consultation	7.	Development, production, analyses and control of medicines
2.	Medicine, medication safety and medical devices issues	8.	Provision of medicine and medical devices
3.	Gathering information	9.	Medicines and medical devices information and patient education
4.	Analysing and applying information	10.	Monitoring medicines therapy and medical devices
5.	Providing information	11.	Interface management
6.	Information expertise	12.	Evaluation of outcomes
Management knowledge			
System focus		Practice focus	
Management competencies		Professional competencies	
13.	Procurement – and management of medicines and medical devices	19.	Professionalism
14.	Hospital and medication safety management	20.	Effective communication skills
15.	Collaborative work	21.	Team work
16.	Clinical Governance	22.	Organisation
17.	Staff management	23.	Service Provision
18.	Development and research	24.	Costs systems
		25.	Training other healthcare professionals
		26.	Leadership development



FRAMEWORK & EUROPEAN STATEMENTS

Patient Focus		
Pharmaceutical care and clinical pharmacy skills competencies		
1.	Patient consultation	
2.	Medicine, medication safety and medical devices issues	4. Clinical Services
3.	Gathering information	
4.	Analysing and applying information	5. Patient Safety and Quality Assurance
5.	Providing information	
6.	Information expertise	

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FRAMEWORK & EUROPEAN STATEMENTS

Medicines Focus		
Medicines and their use related competencies		
7.	Development, production, analyses and control of medicines	2. Selection, Procurement and Distribution
8.	Provision of medicines and medical devices	3. Production and Compounding
9.	Medicines and medical devices information and patient education	4. Clinical Services
10.	Monitoring medicines therapy and medical devices	5. Patient Safety and Quality Assurance
11.	Interface management	
12.	Evaluation of outcomes	

4
0

FRAMEWORK & EUROPEAN STATEMENTS

System Focus		1. Introductory Statements and Governance
Management competencies		2. Selection, Procurement and Distribution
13.	Procurement – and management of medicines and medical devices	
14.	Hospital and medication safety management	4. Clinical Services
15.	Collaborative work	
16.	Clinical Governance	5. Patient Safety and Quality Assurance
17.	Self management	
18.	Development and research	6. Education and Research

4
1

FRAMEWORK & EUROPEAN STATEMENTS

Practice Focus		1. Introductory Statements and Governance
Professional competencies		2. Selection, Procurement and Distribution
19.	Professionalism	
20.	Effective communication skills	3. Production and Compounding
21.	Team work	
22.	Organisation	4. Clinical Services
23.	Service Provision	5. Patient Safety and Quality Assurance
24.	Costs systems	
25.	Training other healthcare professionals	6. Education and Research
26.	Leadership development	

4
2

FRAMEWORK & EUROPEAN STATEMENTS

Patient Focus	
Pharmaceutical care and clinical pharmacy skills competencies	
1.	Patient consultation
2.	Medicine, medication safety and medical devices issues
3.	Gathering information
4.	Analysing and applying information
5.	Providing information
6.	Information expertise
	4. Clinical Services
	5. Patient Safety and Quality Assurance

4
3

CTF | DRAFT VERSION | EXAMPLE – Pharmaceutical care and clinical pharmacy skills competencies

Competency	Attitude	Knowledge	Behaviour Competencies
1 Patient consultation	Patient oriented and safety attentive, reliable and confident	1.1 Patient Assessment	Is able to take a health status and medication history using <ul style="list-style-type: none"> - appropriate questioning where possible or - medical records to obtain relevant information from the patient, recognising conditions, symptoms and special needs of individual patients.
		1.2 Patient consent (if applicable)	Ensures that the informed consent of a patient is obtained when required
		1.3 Consultation or referral	Refers complex pharmaceutical and/or complex acute to senior colleague, other healthcare professional when appropriate. Ensures the standard operating procedures and guidelines are always met, especially for



WORKING GROUP 2 | EVIDENCE GATHERING

- Roberto Frontini (Germany, Chair)
- Cornelia Vetter Kerkhoff (Germany)
- Eduardo Echarri (Spain)
- Ian Bates (UK)
- Jos Kosterink (The Netherlands)
- Jose Manuel Martinez Sesmero (Spain)
- László Horváth (Hungary)
- Lorna Marie West (Malta)
- Nenad Miljkovic (Serbia)
- Stephanie Belaiche (France)

WORKING GROUP 2 | EVIDENCE GATHERING

The benefit that additional education brings to patient care

The need and potential for labour mobility among hospital pharmacist specialists in Europe



WORKING GROUP 2 | EVIDENCE GATHERING

Review of the literature on the impact of educational interventions on health outcome



WORKING GROUP 2 | EVIDENCE GATHERING

Key messages

- There is a gap in the literature on the importance of a common training framework.
- Higher education levels, translate into better patient outcomes and lower mortality.



Labour mobility in the EU

6.9 million EU citizens live and work abroad in another EU country

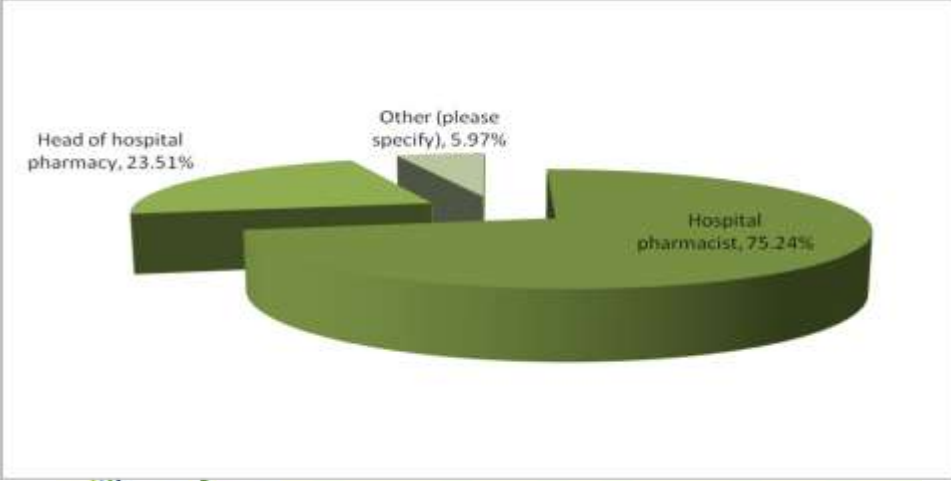
1.1 million cross-border or frontier workers

Hospital pharmacy specialists are not recognised across European borders



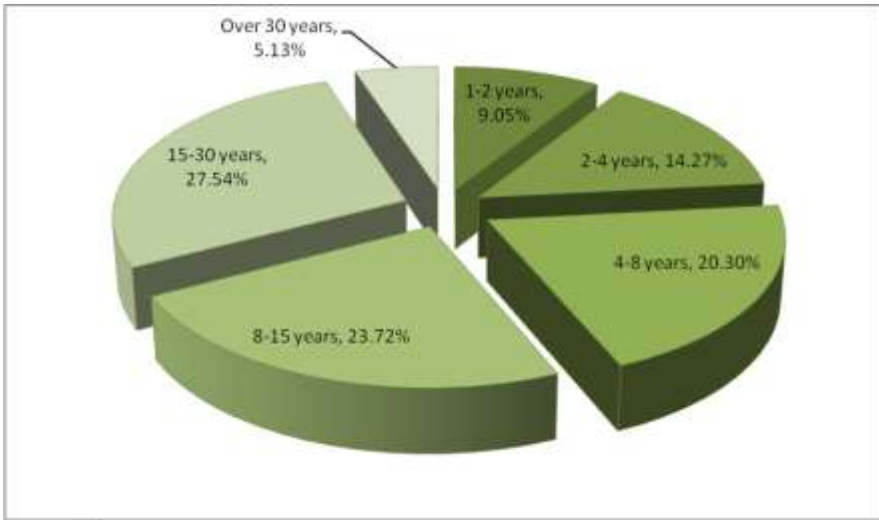
Working Group 2 Labour Mobility

Respondents



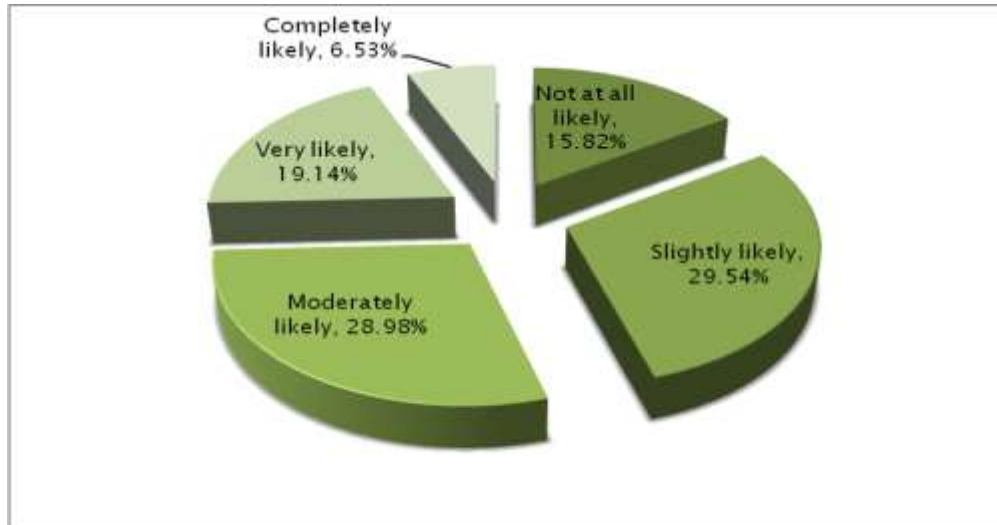
Working Group 2 Labour Mobility

Work experience



Working Group 2 Labour Mobility

Would you Move to work in another country



Working Group 2 Labour Mobility

Would you move to work in another country?

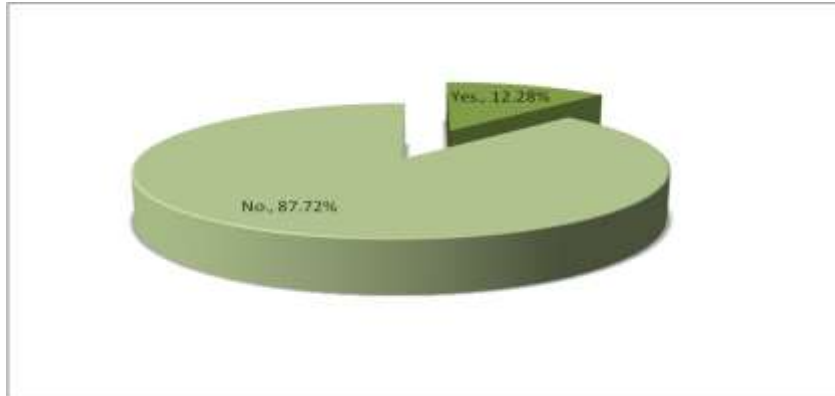
“I would be interested in doing brief stays and learn techniques that I can apply back in my country”

“Less likely due to my age and family life commitments but as a younger pharmacist this would have been very attractive to me”



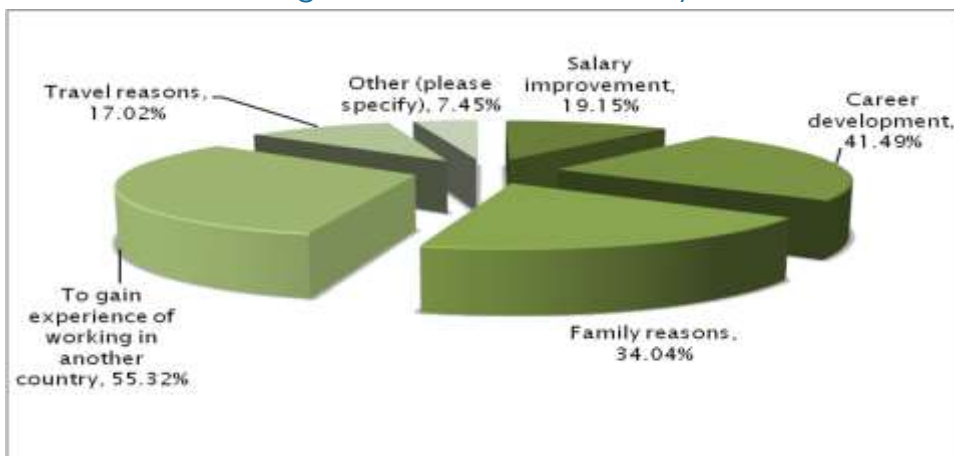
Working Group 2 Labour Mobility

Do you have experience of trying to have your hospital pharmacy qualifications recognised in another country?



Working Group 2 Labour Mobility

What was the main motivation for seeking qualification recognition in another country?





WORKING GROUP 3 | COMMUNICATION

- Joan Peppard (Ireland, Chair)
- Aida Batista (Portugal)
- Anthony Sinclair (UK)
- Despina Makridaki (Greece)
- Elfriede Dolinar (Austria)
- Gunn Fredriksen (Norway)
- Juraj Sykora (Slovakia)
- Maria Grazia Cattaneo (Italy)
- Petr Horak (Czech Republic)
- Speranta Petria Prada (Romania)
- Tony West (UK)

WORKING GROUP 3 | COMMUNICATION

- **European Commission**
- **Transparency**
- **Consultation**



Consultation

- Registration closed on 20th February
- Second Delphi round will be launched on 3rd April
- Hot of the presses – update on First Delphi round





Possible Consultation Outcomes

1. Full agreement
2. Some competencies identified as absent – more work for WG1
3. Framework rejected as unsatisfactory – back to the start to review

Next steps – with assumptions!

Step 1

Steering group to meet April/May 17

Step 2

Seek approval at the GA June 17 for

- a) framework
- b) next phase



PATHWAY TO THE COMMON TRAINING FRAMEWORK



Looking forward...



Engagement with Commission

Identify the parameters for a curriculum to meet the competencies of the CTF

Identify a quality assurance framework

- a) curriculum
- b) education providers
- c) competencies

Looking forward...



Recognition

Seek mutual recognition where countries are in agreement

Seek legal recognition under the Directive



Summary

A common training framework to benchmark hospital pharmacy postgraduate education is within reach

All hospital pharmacists have a role to play in communicating this news and encouraging the use of the framework in their own country

Automatic recognition of the hospital pharmacy speciality will enhance labour mobility and sharing of best practice in the interest of patient care

References

- <http://www.consilium.europa.eu/en/policies/labour-mobility/>
- www.hospitalpharmacy.eu
- <http://www.eahp.eu/practice-and-policy/hospital-pharmacy-specialisation>
- https://ec.europa.eu/growth/single-market/services/free-movement-professionals_en
- Data on file - EAHP