



## SMART PHARMACY PROGRAM

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Mike Rouse & Arijana Meštrović



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Competency Development Manager
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- Community pharmacist
- Education and competency development in Eastern Europe
- Independent consultant
- Lectures and workshops in CPD programs for pharmacists, implementing new services
- Lecturer in Social Pharmacy and Pharmaceutical Care
- Global Competency Framework
- FIP/UNESCO/WHO Education Development Team
- Co-Author of the new version of FIP Global Framework for Quality Assurance of Pharmacy Education
- Member of the International Services Program Advisory Group of the ACPE, USA
- Co-Chair of the FIP Programme Committee
- Expert Member of the FIP Board of Pharmaceutical Practice (BPP)
- Member of PCNE (Pharmaceutical Care Network of Europe).
- WHO international consultant for Patient care



### Michael J. Rouse

Mike Rouse B. Pharm (Hons); MPS; FFIP

Assistant Executive Director, Professional Affairs and Director, International Services Accreditation Council for Pharmacy Education (ACPE), Chicago, USA

- Hospital and community pharmacist
- Assistant Executive Director, Professional Affairs, and Director, International Services ACPE
- Professional affairs, strategic initiatives and projects, and international services and collaboration.
- Development of ACPE's PharmD Degree Standards 2007
- Global leader in initiatives to introduce a CPD approach to self-directed lifelong learning.
- Papers published on CPD, global trends and initiatives in pharmacy education, post-licensure credentialing of pharmacists, and education and training of pharmacy technicians.
- Quality Assurance Domain Lead in FIP Education (FIPEd)
- Author of the Global Framework for Quality Assurance of Pharmacy Education, which was adopted by FIP in 2008 and updated in 2014.
- FIP Board of Directors ("Bureau"), Foundation for Education and Research, BPP and several other FIP committees.
- Consultant, trainer and invited speaker in more than 60 countries.

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# Why a SMART Pharmacy Program?

- National needs (patients and profession perspectives)
- Changing practice and economic realities; concerns for the future
- Lack of motivation and self-image of pharmacist
- Previous professional initiatives have not had the desired effect; why should SMART be any different?
- Healthcare system effectiveness
- Practice is changing in the pharmacy world education must change too!



# Committed to Quality – Committed to Change





- The new innovative educational model offers structured, comprehensive and competency-based education for pharmacists
- To assure the quality, global educational tools and best practices are used, respecting the national context

# The SMART Pharmacy Program

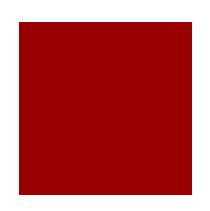






- SMART Pharmacy Program is designed to be a sustainable, evidence-based educational initiative with all elements of the Continuing Professional Development (CPD) Cycle, including application and impact on everyday pharmacy practice
- When managed with strong leadership and motivation, it has been shown that the SMART Program shows results on the individual pharmacist, organizational, national and patient levels
- ✓ Education and application process address all components of competency: knowledge, skills, attitudes and values
- ✓ Quality of education is assured by appropriate structure, process and outcomes of learning, all designed in national context and with strong impact on the personal motivation of pharmacists and patient care

# SMART Pharmacy around the World







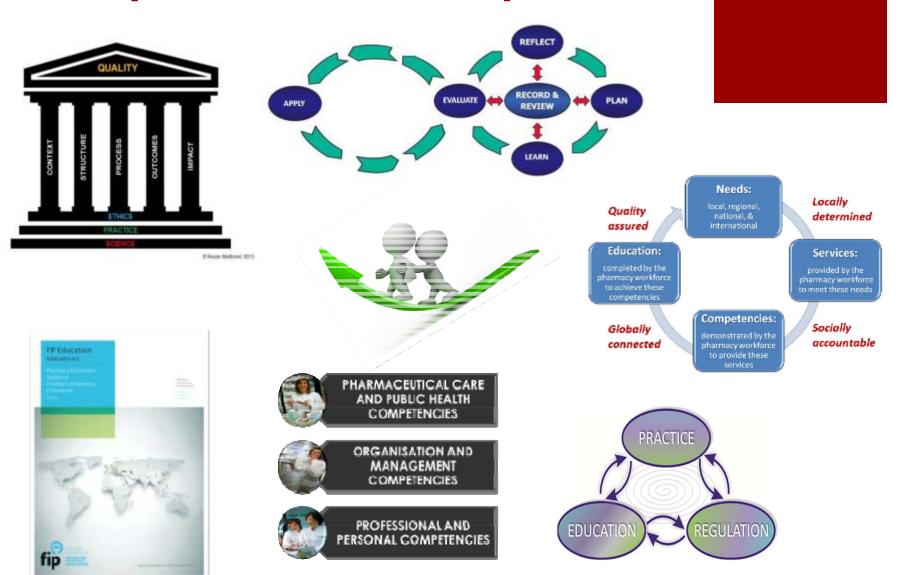




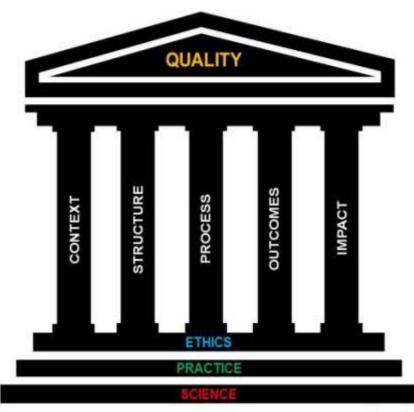


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## **Principles and Concepts**

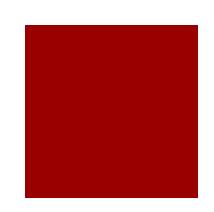


# Pillars and Foundations of Educational Quality



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## For the SMART Pharmacy ...



#### Competency – individual level

• Increase the evaluation score – National Competency Framework, CPD portfolio

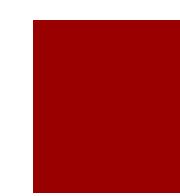
#### Quality Indicators - organizational level

• Increase the score in all clusters (CPD, Follow up, New services, interprofessional collaboration...)

#### SMART face of pharmacy - national level

• New visual identity, new services, new approach, self-image, attitudes, motivation

## For the patient ... (Asthma)



#### Asthma control test

• Better asthma control after the service

#### Peak flow meter values

• Higher values as a result of better asthma control

#### Inhalation technique

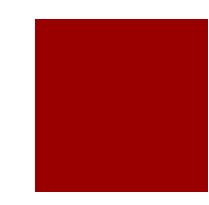
• Fewer mistakes, better medicine administration, fewer adverse drug reaction

## Turkish patients' lives dramatically improved as a result of pharmacists' care



Actual patients ... actual pharmacists (May – October, 2015; Turkey)

## For national organizations



#### New educational model

• Better attendance, more engaged learners, alignment with global standards (based on Pillars and Foundations of Quality

#### Stronger association

 Active members, new projects, strengthened leadership, research, publications, presentations

#### Political advocacy and impact

 Social security administration, stakeholder collaboration, more visibility in health system





### **Innovation Workshop**

Participants: 40 leaders - START group



- Discuss and allow all stakeholders involvement
- Start the change management process
- Work on SWOT analysis to define the national context
- Explain CPD Principles and Concepts
- Understand Pillars and Foundations of Educational Quality
- Introduce Competency Framework (to assess the pharmacists)
- Discuss Indicators of Quality of Services (to assess the pharmacy)
- Develop the SMART Plan Define the national pilot project and identifying possible participants
- Initiate Commitment to Change



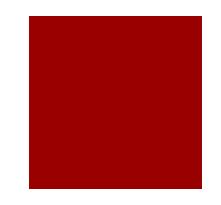
Format: lectures, workshops, open space training, small group discussions, round table discussions

#### Expert Team (International + local) 4 – 6 months work

## SMART PLAN – designing the model Define change management Technical and marketing support



- Continue the change management process
- Validate National Competency Framework
- Design Indicators of Quality of Services Catalogue
- Prepare technical support to the pilot project
- Prepare PR and marketing plan
- Select participants for pilot project
- Complete the materials and equipment for the pilot project
- Explore and discuss the legal and regulatory implications
- Predict the challenges and threats
- Motivate and engage partners in the project
- Format: teleconferences, share point, on-line documentation development, design, enrollment, analysis, expert panels, working and advisory groups (e.g. legal)



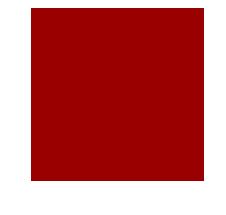


# Train the Trainers – Starting pilot project

- Example of possible content of the training —
- Dependent on outcomes of Innovation Workshop

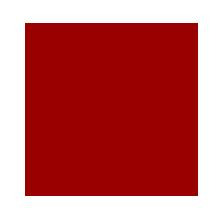
Day 1 - CPD: WHAT - SO WHAT - WHAT NOW?

- CPD Concepts, Components and Commitment
- Pillars and foundations of quality of pharmacy education
- Commitment to change
- New Model of Pharmacy Education
- Enrollment, Objectives, Process,
   Leadership, Implementation, Timeline





# Train the Trainers – Starting pilot project



- Day 2 PHARMACY COMPETENCIES AND NEW SMART SERVICES
- National Competency Framework
- Indicators of Quality National Catalogue
- New services in pharmacies
- SMART Project Following the New Model of Pharmacy Education
- (Education, Certification, Added value, PR and Marketing activities, Promotions)

# Train-the-Trainer Schedule: Day 1 (example from Turkey)

10:00 – 10:30	Welcome and Introductions
10:30 – 11:00	Presentation of SMART Pilot Project
11:00 – 12:00	Introduction to CPD, Needs-Based Education, Pillars & Foundations of Quality
12:00 - 12:30	Introduction to New Educational Model - Asthma Example
12:30 – 12:45	Break
12:45 – 13:30	Introducing CPD Portfolio for SMART Pharmacies
13:30 – 14:00	Introducing the Process of Documentation - Asthma Example
14:00 – 15:00	Lunch
15:00 – 15:30	The New Face of SMART Pharmacy
15:30 – 16:00	Change and Time Management in Pharmacy - SMART priorities
16:00 – 16:15	Break
16:15 – 16:45	Learning Styles – Self-Assessment
16:45 – 17:15	Questions and Answers + Wrap Up
17:15 – 17:30	Break
	Parallel Sessions:
17:30 – 18:30	Asthma Course Details for Educators
17:30 – 18:30	Learning Styles for SMART Participants

# Train-the-Trainer Schedule: Day 2 (example from Turkey)

9:00 - 9:30	Recap: What Did We Learn from Day 1?
9:30 – 10:00	Indicators of Quality of Services; Checklist for SMART Pharmacy
10:00 – 11:00	Workshop: self assessment of Quality Indicators
11:00 – 11:30	Break
11:30 – 12:00	Pilot Data Collection and Evaluation: Instructions for the Pilot Coordinators
12:00 – 12:30	Introducing National Competency Framework
12:30 – 13:00	Competency Assessment and Plans for the Future
13:00 – 14:00	Lunch
14:00 – 14:30	New Educational Model and Plans for the Future
14:30 - 15:00	Announcing the dates for Assessors + NEMT Training and Follow-Up Workshop Questions and Answers
15:00 – 15:30	Wrap Up & Commitment to Change
15:30 – 16:00	Presentation of Certificates to Trainers

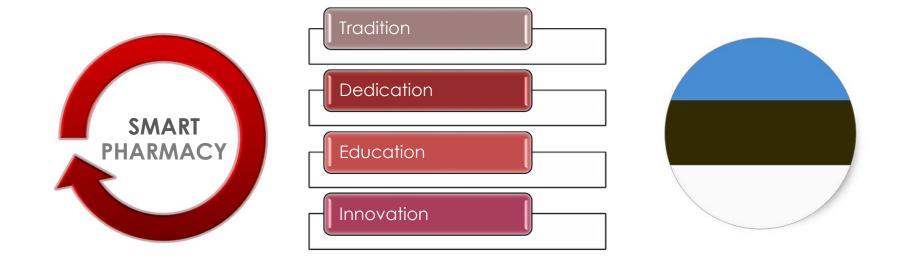
## SMART Pilot Project – Translation to the National Level

#### **Example dates from Turkey:**

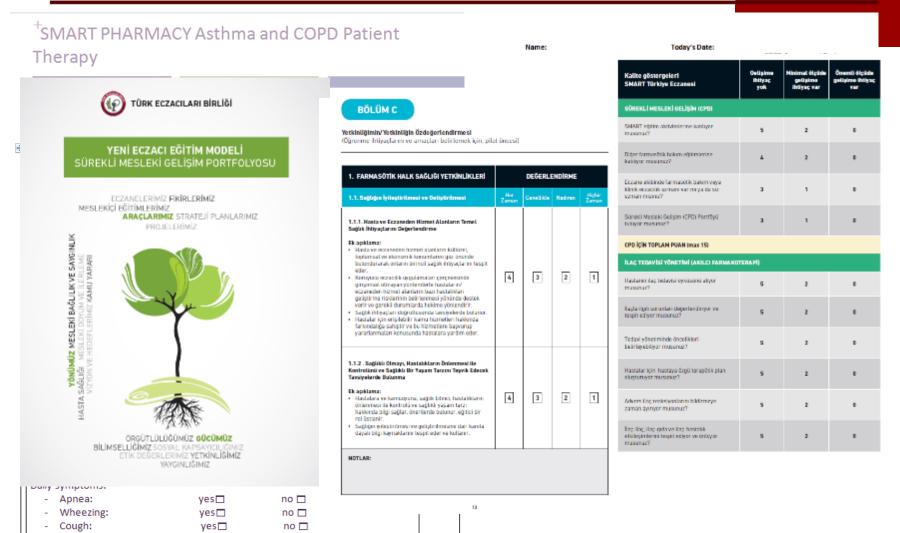
- First results January 2016
- Evaluation and follow up workshop March 2016
- National level implementation plan April, May 2016
- Train the trainers June 2016
- National implementation and launch September 2016



## **National visibility**



## SMART Pharmacists offer a pharmacy service evidence based model – document!



# Question: How many Turkish people with asthma don't know how to correctly use an inhaler?



Answer: 90 – 95%

Source: Based on pharmacists' experience in the SMART Pharmacy Project 8-Chamber Pilot; May to October 2015

### Advocacy



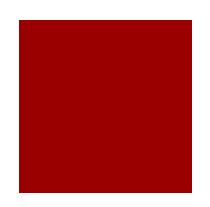
- ✓ The average improvement in 80 patients of the Asthma Control Test Score compared with the
  first visit was 76%
- ✓ The average improvement in 80 patient of the PEAK flow value compared with the first visit was 40%
- ✓ 30% decrease occurred in the *Salbutamol* usage of the patients.

## Introduction to Certification in Pharmacy Practice

- Main elements
  - Identification of required competencies
  - Pre-reading and pre-work in hours
  - Reflection and self-assessment (portfolio)
  - Assessment of knowledge at beginning of the course (module)
  - Competency and practice-based modules
  - Assessment of skills and attitudes at the end of the module
  - Assignments application in practice (minimum 10 cases in 3 - 6 months)
  - Evaluation and certification requirements
  - Time limitations
  - Re-certification



# What has the SMART Program model been successful?



- Committed to quality and committed to change
- Brings all key stakeholders together
- "Innovation Workshop" SWOT Analysis, setting priorities, developing/adapting/adopting national frameworks and resources
- Strategic change management
- Uses Needs-Based Model



## Why has the SMART Program model been successful?



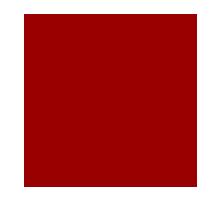
- Addresses national context
- Uses globally adopted tools, frameworks and models
- Local leadership and expertise, supported by external advisors/experts
- Practical, relevant, and simple
- Motivates and empowers participants to change

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## What Gets Measured Gets Done

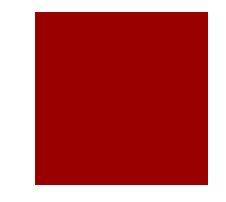
- [Self] Assessment of competence/performance
- [Self] Assessment of quality of services
- Measurable patient interventions and outcomes/impact

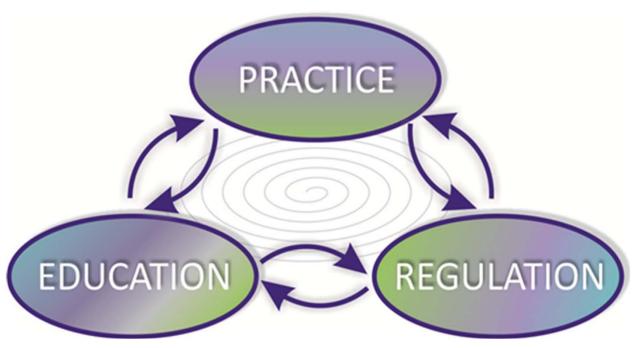




- Set personal and/or organizational goals and targets
- Measure progress
- Celebrate success (motivation)

## Don't forget!









# THE SMART PHARMACY EXPERIENCE INTERNATIONALLY

Mike Rouse & Arijana Meštrović

