



NI Centre for
**Pharmacy Learning
& Development**

/Newsletter/August 2009/

Distance learning MCQs

For distance learning courses that are requested from August 2009 we are moving to an online-only submission of MCQ answers. We feel this move is timely as 95% of pharmacists in Northern Ireland have registered with the NICPLD website and 85% of those submitting MCQs for assessment do so online. The other reason for moving to online only submission of MCQ answers is that it allows us to update questions more easily, as questions can become out-of-date.

Therefore, from August there will be a number of changes to the online submission of MCQ answers for marking. You will be able to enter your answers online and save them as you go along, which means you can complete the questions over a number of sessions, before submitting your answers for marking. The current system only allows you to enter and submit your answers for marking and this has to be done in one session.

You will also be able to print out a paper copy of the questions, and, if you wish, enter your answers on the paper copy and submit them to NICPLD for marking.

We will also move the course evaluation to an online-only format and the evaluation form will appear on your screen once you have submitted your answers.

Finally, for those pharmacists who received their distance learning course before August 2009, they may continue to use the answer and evaluation forms that accompanied the course.

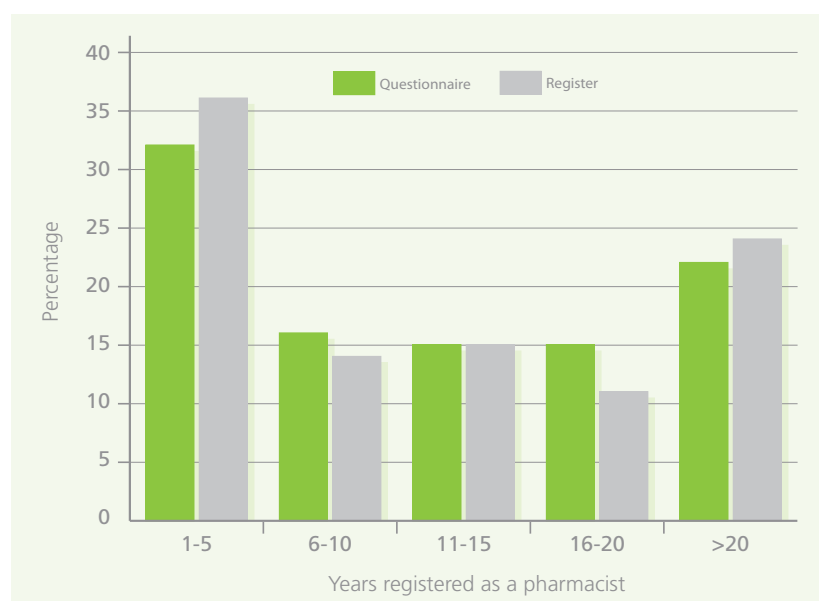


Needs assessment

In February 2009 we sent an email to all pharmacists asking about your learning needs for the coming year. While we previously have used postal questionnaires to assess learning needs, this can be time consuming to complete and expensive. Therefore as a trial we used an online questionnaire, the link to which was emailed to all pharmacists in Northern Ireland. Overall, this trial worked well with almost 500 pharmacists responding and, on average, the questionnaire took 6 minutes to complete. In this edition of the NICPLD newsletter we provide a summary of the key points from the questionnaire:

Of the 476 responses to the online questionnaire, 65% were female and 35% male. This compared favorably with the gender breakdown on the pharmaceutical register for females (61%) and males (39%). Similarly, the age distribution of respondents also correlated well with the age distribution of the pharmaceutical register (Figure 1). Sixty three percent of responses were from community pharmacists, 27% from hospital, 5% from those working in primary care and 5% from others.

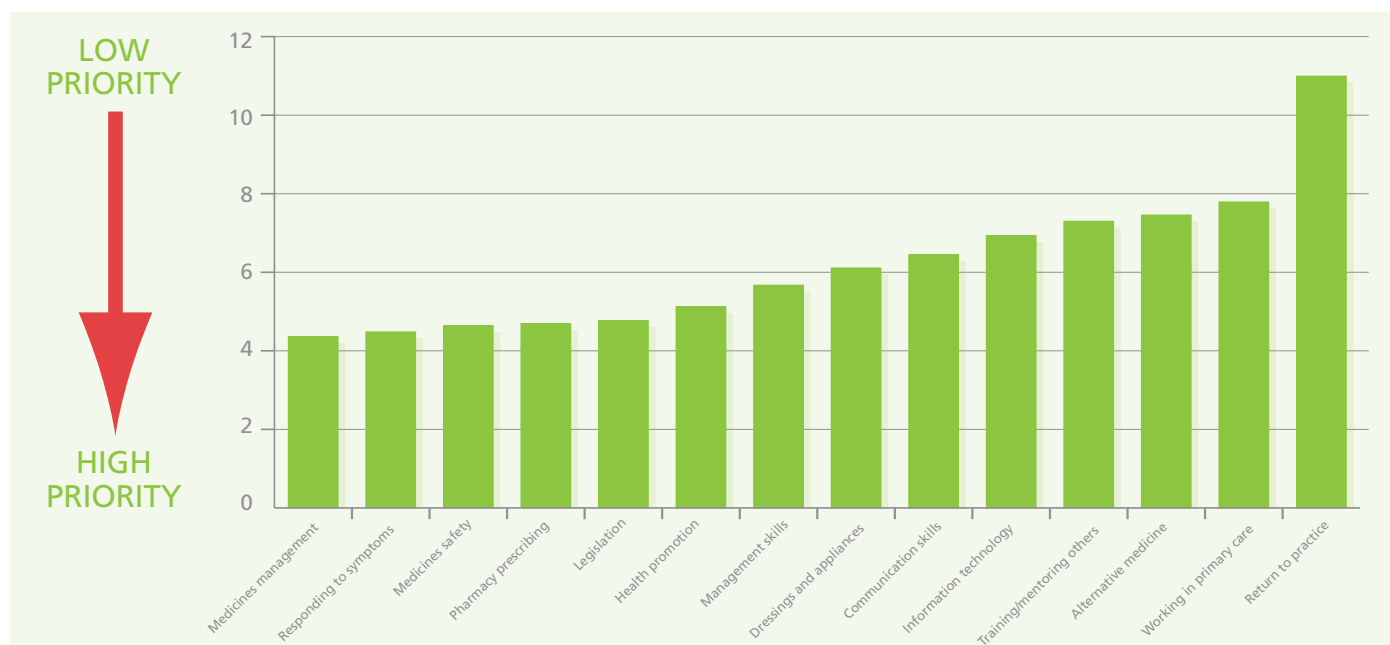
Figure 1. The breakdown of respondents by years on the register



On previous occasions in which a postal questionnaire was used it has been difficult to prioritise learning needs, as opposed to identifying the main themes that respondents would like to address as part of their CPD. The online facility allows respondents to prioritise their learning needs in the coming year for both skills/services and therapeutics. These are shown in Figure 2 and Figure 3 respectively, in which weighted averages have been calculated. The weighted average take into account the priority and the number of responses and, therefore, in each of these figures the lower number indicates a higher overall priority.

From Figure 2 it is evident that medicines management, responding to symptoms,

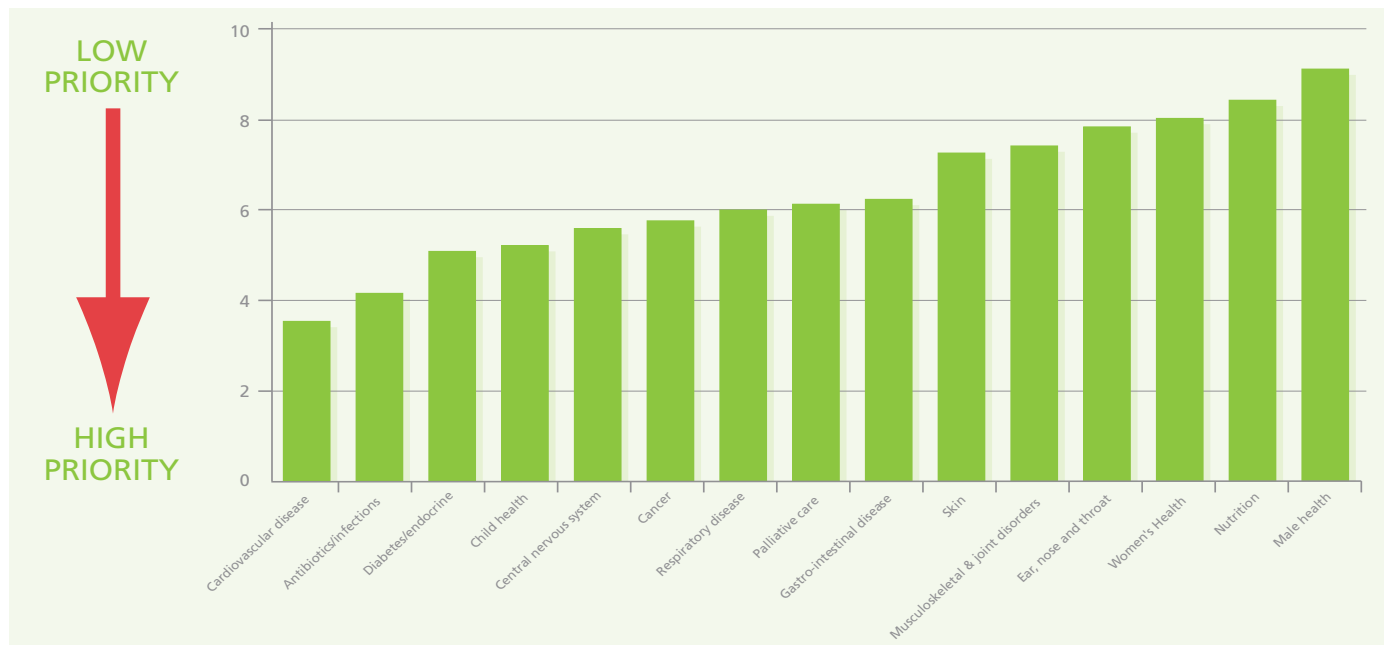
Figure 2. Learning needs priorities for skills/services



medicines safety, pharmacy prescribing and legislation are all very close in terms of their priority rating and this was consistent across age groups. These areas suggest that pharmacists increasingly view the proactive management of patients' medicines as important for effective treatment and safety. Return to practice was ranked as the lowest priority, perhaps because this area applies to relatively few pharmacists at any one time.

Turning to therapeutic areas, cardiovascular disease and antibiotics were ranked as the top priorities. However, when only responses from hospital pharmacists are included, antibiotics are the highest priority, followed by cardiovascular disease.

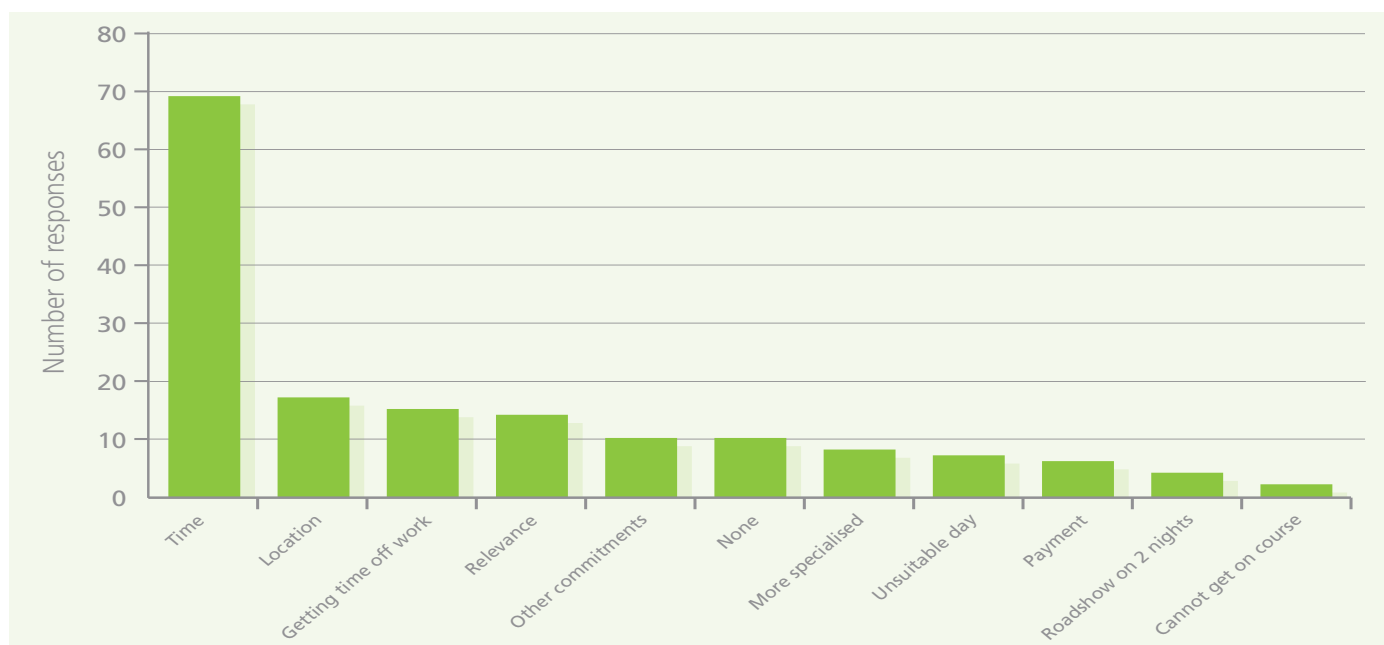
Figure 3. Learning needs priorities for therapeutic areas



While many of these areas will be covered in the coming years, we have addressed some of these in view of your responses. For example, later this year we will launch a new online course on antibiotics and the regional programme, starting in January 2010 will address hypertension and stroke. The regional programme for September - December 2009 will cover legislation changes surrounding the responsible pharmacist regulations. The regional programme running from October 2009 - March 2010 will address controlled drugs and will be a multidisciplinary event with GPs. To better inform pharmacists about how independent prescribing works in practice and what the training involves, two events have been scheduled towards the end of the year.

Figure 4 shows the factors that were cited as barriers to participating in CPD. Time, which includes family commitments, was the most prevalent barrier and this has been a consistent factor over numerous learning needs analyses.

Figure 4. Barriers to CPD



Finally, the questionnaire asked what NICPLD did well and how we could improve. A large number of areas were cited for each, but space does not permit us to include all of these. Instead we have reported the top ten for each and these are shown in Figures 5a and 5b.

In recognising the requests for more online learning we have recently appointed a lead pharmacist for elearning and will be adding to the provision of online courses in the coming years. This will also help to support courses for more advanced training.

Figure 5a. What NICPLD does well

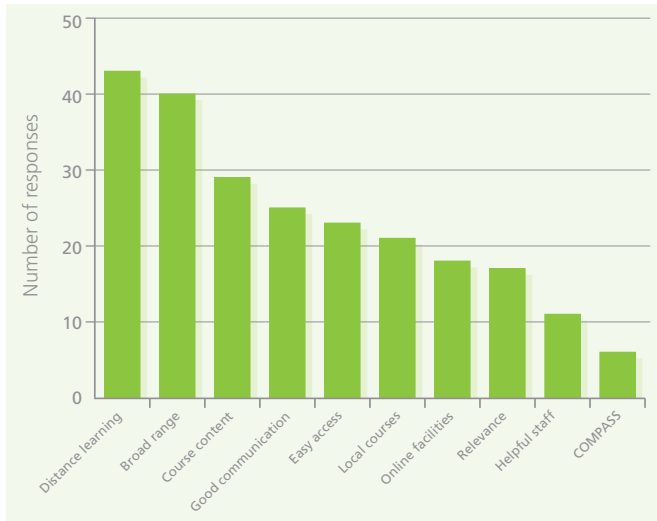
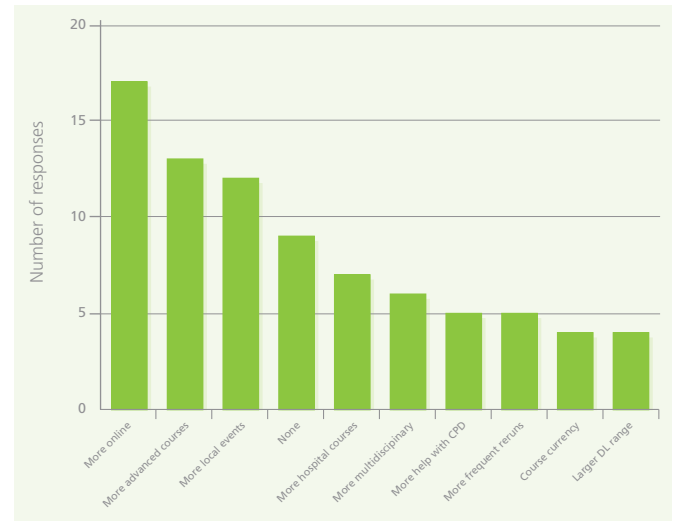


Figure 5b. How NICPLD can improve its provision



Vocational Training for hospital pharmacists

In 2008 NICPLD introduced the vocational training (VT) programme for newly qualified pharmacists working in hospital. This provides structured work-based training in which participants develop a portfolio and undertake practice activities in the workplace to develop competence in the following four rotational areas:

- dispensary
- technical services
- clinical/medicines management
- clinical effectiveness.

Recruitment is underway for the second intake to the VT programme. If you are interested in participating, please speak to your line manager. Full details of the programme can also be found on www.nicpld



www.nicpld.org