Foundation Programme

Handbook - hospital

NICPLD is a Royal Pharmaceutical Society Foundation School

Preface

Welcome to the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD) Foundation Programme (FP) for pharmacist practitioners working in the hospital sector.

The NICPLD Foundation Programme incorporates competencies from the Royal Pharmaceutical Society (RPS) Foundation Pharmacy Framework (FPF)[1], and builds on the NICPLD Hospital Vocational Training (VT) Programme which was implemented in Northern Ireland in 2008. The Hospital VT Programme incorporated the Competency Development and Evaluation Group (CoDEG) General Level Framework (GLF), which has been used by the RPS to develop the FPF.

NICPLD is a Royal Pharmaceutical Society Foundation School. By achieving Royal Pharmaceutical Society Foundation Programme accreditation for NICPLD we have demonstrated that as a School we meet recognised Royal Pharmaceutical Society standards for quality and content and that we are committed to pursuing excellence.

The aim of this handbook is to provide background information and details about the content and structure of the NICPLD Foundation Programme.

Acknowledgements

CoDEG   Competency Development & Evaluation Group

Contents

1. Introduction

The aim of the NICPLD Foundation Programme (FP) is to provide structured work-based training and experience for all pharmacists working in a patient-facing role in Northern Ireland, enabling them to deliver safe and effective pharmaceutical care to individual patients. The NICPLD FP has been designed to support pharmacists in Northern Ireland to implement best practice in medicines optimisation, as recommended in the Medicines Optimisation Quality Framework[2]. The emphasis in the FP is on developing competence *(the ability to perform consistently to the required standard)* using authentic activities in the workplace *(rather than classroom activities)*.

The hospital FP focuses on in-practice training and experiential learning in the workplace, and is intended to be flexible to accommodate individual learning needs and service requirements. The full Foundation Programme should take two academic years (approximately 18-20 months) to complete. However, experienced pharmacists may be able to demonstrate their competence in a shorter time than this, and those working part-time may require longer. During their in-practice training, FP pharmacists develop a portfolio and undertake practice activities which help them to develop and demonstrate their competence in a range of different practice areas (or domains). How this works in practice will depend on both the workplace establishment and the individual pharmacist. In some larger workplace establishments, for example, it may be suitable for the FP pharmacist to rotate through the four discrete practice areas in a sequential fashion. However, this may not be practical in smaller establishments, and the FP pharmacist will need to cover the competencies and practice activities as and when time allows. In each practice area, FP pharmacists are also required to undertake a minimum of 10 hours of CPD to develop their underpinning knowledge. Reflective practice is encouraged and FP pharmacists are expected to maintain appropriate CPD records. Therefore, undertaking the Foundation Programme should also help pharmacists to meet their CPD requirements.

Throughout the Foundation Programme, FP pharmacists are supported in the workplace by an Educational Supervisor (ES) / mentor. The ES / mentor will meet regularly with the FP pharmacist and may be assisted by local Practice Supervisors (PS) / trainers who are able to support the FP pharmacist's training and development and observe their practice on a more routine basis. There are also workshops and online courses for FP pharmacists and a formal assessment process.

2. Who can enrol on the NICPLD FP?

The NICPLD hospital Foundation Programme is open to all pharmacists who are working in the hospital sector in Northern Ireland. Pharmacists wishing to enrol on the Foundation Programme must complete and submit an application form, which can be accessed via the NICPLD website, www.nicpld.org.

3. Competencies and the FP competency framework

A competency is a quality or characteristic of a person which is related to effective or superior performance. Competencies are described as a combination of knowledge, skills, motives and personal traits, and can help individuals to continually improve their performance and to work more effectively. A competency framework is a collection of competencies which are thought to be central to effective performance. Competency frameworks can be used to identify learning needs and aid development, and to demonstrate consistent performance to the expected standard.

The NICPLD Foundation Programme uses the RPS Foundation Programme Framework (FPF), which has four key competency clusters, as illustrated in the diagram below:

Cluster 1: Patient and Pharmaceutical Care – focuses on the patient and medicines.
Cluster 2: Professional Practice – identifies support, practice guidance and professional support tools.
Cluster 3: Personal Practice – relates to development, developing one's own practice.
Cluster 4: Management and Organisation – relates to leadership and service delivery.

Each of the four clusters comprises closely related competencies as shown below:

The 4 FP competency clusters and the 26 related FP competencies

1. Patient and Pharmaceutical Care	2. Professional Practice	3. Personal Practice	4. Management and Organisation
1.1 Patient Consultation	2.1 Professionalism	3.1 Gathering Information	4.1 Clinical Governance
1.2 Need for the Medicine	2.2 Organisation	3.2 Knowledge	4.2 Service Provision
1.3 Provision of Medicine	2.3 Effective Communication Skills	3.3 Analysing Information	4.3 Organisations
1.4 Selection of the Medicine	2.4 Team Work	3.4 Providing Information	4.4 Budget and Reimbursement
1.5 Medicine Specific Issues	2.5 Education and Training	3.5 Follow up	4.5 Procurement
1.6 Medicines Information and Patient Education		3.6 Research and Evaluation	4.6 Staff Management
1.7 Monitoring Medicine Therapy			
1.8 Evaluation of Outcomes			
1.9 Transfer of care			

Each of the 26 FP competencies has a number of descriptors, known as behavioural statements, that define how each competency would be recognised. These competencies and behavioural statements are used to plan, conduct and evaluate the FP pharmacist's in-practice training.

4. In-practice training

It has long been recognised in the educational literature that, in most workplaces, work-based training is considered to be less important than providing the service[3]. However, workplace environments can offer a comprehensive breadth of learning opportunities for individuals[4]. One way of enabling individuals to experience this breadth of learning opportunities is to structure activities for them to undertake in a range of practice areas[5]. This is the approach taken in the NICPLD Foundation Programme to promote effective in-practice training, as described below.

4.1 Practice areas

FP pharmacists have the opportunity to gain knowledge, skills and experience in **three core** practice areas (or domains), **plus one additional sector-specific area** relevant to their area of practice:

Core practice areas:
- Dispensary services
- Medicines optimisation
- Evidence based practice

Sector-specific practice areas (complete one only):
- Technical services (hospital)
- Public health (community / primary care)

These areas have been chosen because they cover a comprehensive breadth of pharmacy practice in Northern Ireland. The core areas can be completed by pharmacists working in the hospital, community and primary care sectors. This common curriculum allows Foundation training to continue seamlessly should the pharmacist change sector during the FP. The sector-specific areas enable pharmacists to develop competence relevant to their area of practice.

For each practice area there is a specified set of competencies which are used to plan, conduct and evaluate the FP pharmacist's in-practice training. These competencies are listed in the table on page 6. Some of these 26 competencies are relevant to one practice area only. For example, '3.6 Research and Evaluation' applies only to Evidence Based Practice and therefore only needs to be demonstrated in this practice area. Other competencies, such as '2.1 Professionalism', must be demonstrated in all practice areas because they are relevant to all areas of pharmacy practice.

4.2 Practice activities

Practice activities provide a 'scaffold' which allows the learner to construct the relevant knowledge and skills[6]. Practice activities are used in the NICPLD FP because scaffolded instruction has been found to result in faster and better maintenance of learning compared to non-scaffolded instruction[6]. The NICPLD practice activities are intended to help the FP pharmacist to develop and demonstrate best practice in each of the practice areas. The practice activities associated with each practice area, together with guidance on the core competencies that they cover, are shown in the table on page 7. Other forms of evidence (e.g. testimonials, reflective records, CPD cycles) should be used for any competencies that are not covered by the practice activities.

The 26 FP competencies and the practice areas (domains) where they apply

Competency	A. Dispensary Services	B. Medicines Optimisation	C. Evidence Based Practice	D. Technical Services	E. Public Health
1. Patient and Pharmaceutical Care					
1.1 Patient Consultation		✓		✓	✓
1.2 Need for the Medicine		✓		✓	
1.3 Provision of Medicine	✓				
1.4 Selection of the Medicine	✓	✓		✓	
1.5 Medicine Specific Issues	✓	✓		✓	
1.6 Medicines Information and Patient Education		✓		✓	✓
1.7 Monitoring Medicine Therapy		✓		✓	✓
1.8 Evaluation of Outcomes		✓		✓	✓
1.9 Transfer of care		✓			
2. Professional Practice					
2.1 Professionalism	✓	✓	✓	✓	✓
2.2 Organisation	✓	✓	✓	✓	✓
2.3 Effective Communication Skills	✓	✓	✓	✓	✓
2.4 Team Work	✓	✓	✓	✓	✓
2.5 Education and Training	✓		✓		
3. Personal Practice					
3.1 Gathering Information	✓	✓	✓	✓	✓
3.2 Knowledge	✓	✓	✓	✓	✓
3.3 Analysing Information	✓	✓	✓	✓	✓
3.4 Providing Information	✓	✓	✓	✓	✓
3.5 Follow up	✓	✓	✓	✓	✓
3.6 Research and Evaluation			✓		
4. Management and Organisation					
4.1 Clinical Governance	✓		✓	✓	
4.2 Service Provision	✓		✓	✓	
4.3 Organisations	✓		✓		
4.4 Budget and Reimbursement			✓		
4.5 Procurement			✓		
4.6 Staff Management			✓		

Practice activities by practice area (domain) and the core* competencies covered

A. Dispensary services:	
In-house checks	1.3, 1.4, 1.5
Internal audit	4.1, 4.2
SOP review	3.1, 3.3, 3.4, 3.5, 4.1
Dispensary 'project'	2.1, 4.1, 4.2, 4.3
Time management & prioritisation	2.1, 2.2, 2.3, 2.4
Intervention records / medication incidents - a minimum of 20	2.4, 2.5, 3.1, 3.3, 3.4, 3.5
CPD - a minimum of 10 hours relevant to the practice area	3.2
B. Medicines optimisation:	
Accompanied ward visits *(minimum 1 medical & 1 surgical)* – 5	1.1, 2.1, 2.2, 2.3, 2.4
Pharmaceutical care plans – 8, + 4 reflections	1.2, 1.4, 1.5, 1.7, 1.8, 1.9
Oral case presentation – 1	1.2, 1.4, 1.5, 1.7, 1.8, 2.3
Significant intervention records - a minimum of 20	3.1, 3.3, 3.4, 3.5
CPD - a minimum of 10 hours relevant to the practice area	3.2
C. Evidence based practice:	
Completion of MLP & MiCAL	3.2
MI queries answered satisfactorily - 20	3.1, 3.3, 3.4, 3.5
Risk assessment report, or a critical incident reflective record	4.1
Procurement activity reflective record	4.4, 4.5
Audit presentation	2.3, 3.6, 4.2
Staff training activity	2.3, 2.5, 4.6
CPD - a minimum of 10 hours relevant to the practice area	3.2
D. Technical services (hospital):	
Introduction of a new product	3.1, 3.3, 3.4, 3.5, 4.1
Cancer clinic / nutrition ward round	1.1, 2.1, 2.2, 2.3, 2.4
Cancer or PN pharmaceutical care plan + reflection	1.2, 1.4, 1.5, 1.7, 1.8
Weekly diary	2.1, 2.2, 2.3, 2.4
Pharmaceutical Quality Systems (PQS) activity	4.1, 4.2
CPD - a minimum of 10 hours relevant to the practice area	3.2
E. Public health (community / primary care):	
Public health activity report	2.4, 3.1, 3.2, 3.3, 3.4
Behavioural change patient case study and follow up	1.1, 1.6, 1.7, 1.8, 2.1, 3.5
Reflection on a brief intervention	1.1, 1.6, 2.3
CPD - a minimum of 10 hours relevant to the practice area	3.2

*NB this table is for <u>guidance</u> only - the actual competencies covered will depend on the content and standard of the evidence provided. Other forms of evidence (eg testimonials, reflective records, CPD cycles) should be used for any competencies that are not covered by the practice activities. In addition, some of the practice activities submitted may cover more than the core competencies listed.

Further information on the Foundation Programme practice activities, including downloadable forms, can be accessed via the NICPLD website, www.nicpld.org.

4.3 Practice portfolio

FP pharmacists record evidence of their learning achievements against the FP competencies in an online portfolio. The NICPLD online portfolio user guide can be downloaded at www.nicpld.org

When they start each practice area, the FP pharmacist, with the help of their ES / mentor, uses the practice portfolio to assess their baseline competency status at T(0) for each of the specified competencies using the following assessment ratings:

	Assessment rating	Definition
1	**Rarely** meets the expected standard practice (or yet to encounter)	*Meets standard approximately **0-24%** of the time*
2	**Sometimes** demonstrates the expected standard practice (haphazardly)	*Meets standard approximately **25-50%** of the time*
3	**Usually** demonstrates the expected standard practice (with occasional lapses)	*Meets standard approximately **51-84%** of the time*
4	**Consistently** demonstrates the expected standard practice (with very rare lapses)	*Meets standard approximately **85-100%** of the time*

This enables them to identify their individual learning needs for the practice area by considering the competencies where they have not yet achieved the required standard (ie an assessment rating of 4). FP pharmacists are encouraged to record these learning needs on a Personal Development Plan (PDP) (available at www.nicpld.org). In addition, each learning need should be recorded in detail in the 'reflection' stage of a new Continuing Professional Development (CPD) cycle. The PDP helps the FP pharmacist to plan and prioritise how and when they will develop competence in these areas.

During their in-practice training the FP pharmacist collects evidence to demonstrate their developing competence and stores it in their practice portfolio. This will include evidence that they have completed the practice activities and undertaken a minimum of 10 hours of CPD relevant to the practice area, plus other forms of evidence such as testimonials/observation records. The evidence is mapped against the relevant competency statements in their practice portfolio (NB one piece of evidence may be used to demonstrate competence against more than one competency statement). FP pharmacists are also encouraged to reflect on what they have learnt during their in-practice training, and a reflective record template is provided at www.nicpld.org. It is recommended that the FP pharmacist communicates regularly with their ES / mentor (eg monthly) on an informal basis to discuss their progress. Additionally, it is recommended that the FP pharmacist and their ES / mentor meet at least twice during each practice area (at T(1) and T(2)) to evaluate the pharmacist's progress in acquiring and demonstrating competence. At these meetings, the ES / mentor will help the FP pharmacist to assess their competency status, again using the assessment ratings above, and to update their portfolio and their PDP. For the competencies where they have yet to meet the expected standard, FP pharmacists will have the opportunity to discuss with their ES / mentor how they plan to develop competence in that area.

The practice area is completed when the FP pharmacist has:
- an assessment rating of 4 at T(3) for each of the competencies;
- at least one piece of supporting evidence for each of the competencies;
- at least one Professional Practice Testimonial;
- satisfactorily completed all of the practice activities.

The FP pharmacist's ES / mentor will assess whether the evidence submitted meets the following quality criteria:

Validity – the evidence must clearly relate to the competencies being assessed

Authenticity –the evidence must have wholly originated from the FP pharmacist

Currency – the evidence must have originated within the last 5 years

Sufficiency – supporting evidence must be provided for each competency; there must be 'No Empty Competencies'.

When all four practice areas have been completed satisfactorily, the FP pharmacist can submit their completed portfolio to NICPLD for a Foundation Portfolio Review (FPR) assessment. The FPR assessment process is described in detail in section 9.1.

5. FP workshops

To support Foundation Pharmacists, NICPLD offers workshops relating to the range of practice areas. The workshops cover important subjects and skills that may not be covered specifically in the workplace. All FP workshops use case-based discussions in small groups to help FP pharmacists to apply their learning.

6. FP online courses and resources

NICPLD provides a number of online courses and other resources to support FP pharmacists in their development of underpinning knowledge relevant to the Foundation Programme. These can be accessed via the NICPLD website, www.nicpld.org.

7. FP Educational Supervisor (ES) / mentor

Each FP pharmacist has an Educational Supervisor (ES) / mentor to support them through the Foundation Programme. The ES / mentor must be a senior pharmacist with a minimum of 3 years' post-registration experience in pharmacy. They must have completed the NICPLD 'Effective mentoring' online course prior to mentoring an FP pharmacist. This can be accessed via the NICPLD website, www.nicpld.org.

The ES / mentor will have a supportive role. This involves helping the FP pharmacist to identify and meet their learning and development needs, and advising and encouraging them during their in-practice training. The roles and responsibilities of the ES are summarised in a checklist for Educational Supervisors that has been derived from a Professional Development Framework for Pharmacy Staff involved in Education, Training and Workforce Development (www.nhspedc.nhs.uk). The downloadable checklist and additional information and resources for Educational Supervisors can be accessed via the NICPLD website, www.nicpld.org.

The ES / mentor will meet regularly with the FP pharmacist, but is unlikely to see them every day. Educational Supervisors may sometimes be assisted by local Practice Supervisors who are able to support the FP pharmacist's training and development and observe their practice on a day-to-day basis.

The ES / mentor will be asked to complete an annual progress report, or Record of In-Training Assessment (RITA), for their FP pharmacist. They will also complete a final declaration on the FP pharmacist's portfolio submission form to confirm that all four practice areas have been completed satisfactorily, and that their completed portfolio is suitable for submission to NICPLD for a Foundation Portfolio Review (FPR) assessment. The FPR assessment process is described in detail in section 9.1.

8. FP Practice Supervisor (PS) / trainer

The FP pharmacist may encounter a number of different Practice Supervisors (PS) / trainers in their workplace establishments. The PS / trainer can support the FP pharmacist's training and development and observe their practice on a day-to-day basis. The PS / trainer may be asked to sign off the FP pharmacist's practice activities, and to provide a Professional Practice Testimonial relating to a specific practice area or domain. It is recommended that Practice Supervisors complete the NICPLD 'Effective workplace training' online course prior to undertaking the role of FP trainer. This can be accessed via the NICPLD website, www.nicpld.org.

The roles and responsibilities of the FP Practice Supervisor are summarised in a checklist for Practice Supervisors that has been derived from a Professional Development Framework for Pharmacy Staff involved in Education, Training and Workforce Development (www.nhspedc.nhs.uk). The downloadable checklist for FP Practice Supervisors can be accessed via the NICPLD website, www.nicpld.org.

9. FP assessment process

The FP assessment process has two parts:
- Foundation Portfolio Review (FPR)
- Final Foundation Assessment (FFA)

These are described in detail in sections 9.1 and 9.2. The FP pharmacist must pass each part independently to pass the FP Programme. NICPLD issues a Certificate of Completion to FP pharmacists who successfully complete both parts of the FP assessment process.

9.1 Foundation Portfolio Review (FPR)

The FP portfolio must be submitted to NICPLD by the specified submission date. A two-week extension for FP portfolio submissions may be given in Exceptional Circumstances only. Queen's University Belfast guidelines will be used to determine acceptable Exceptional Circumstances. Any pharmacist who requires an extension must complete and return a portfolio extension request form before the specified FP portfolio submission date.

Submitted portfolios will be assessed by a Foundation Assessor who does not work in the same workplace establishment as the FP pharmacist. The Foundation Assessor will verify that the FP pharmacist has provided sufficient relevant evidence to demonstrate competence against the Foundation Programme Framework (FPF). RPS assessment guidance will be used to determine the outcome of the FPR. FP pharmacists must pass a minimum of two of the four practice areas (or domains) of the portfolio (which must include Medicines optimisation). The remaining two practice areas may be borderline.

FP pharmacists who have submitted an acceptable portfolio will be invited to attend the Final Foundation Assessment (FFA). FP pharmacists wishing to attend the FFA who have failed to meet the FPR standards will be required to undertake remedial work, and will be invited to resubmit their portfolio at an appropriate time.

9.2 Final Foundation Assessment (FFA)

The Final Foundation Assessment (FFA) is an oral interview assessment to confirm that the FP pharmacist has demonstrated their competence against the Foundation Programme Framework (FPF). It also provides the FP pharmacist with an opportunity to demonstrate ownership of their portfolio, defend their decisions, and showcase their work.

Interview assessments will be scheduled for 45 minutes and will cover the following elements:
  i. Discussion of unseen clinical case (max 10 minutes; NB additional preparation time will be provided beforehand) – covering the Patient and Pharmaceutical Care competency cluster.
  ii. Discussion of an allocated clinical case from their own practice (max 15 minutes total) – covering the Personal Practice competency cluster.
  iii. Questions relating to the dispensary +/or technical services practice areas (or domains) of the portfolio (max 10 minutes) – covering the Professional Practice competency cluster.
  iv. Questions relating to the evidence based practice domain of the portfolio +/or interventions (max 10 minutes) – covering the Management and Organisation competency cluster.

RPS assessment guidance will be used to determine the outcome of the FFA. FP pharmacists must pass a minimum of two of the four elements of the interview assessment (which must include element i. Discussion of unseen clinical case). The remaining two elements may be borderline. Pharmacists wishing to complete the FP who have failed to meet the FFA standards will be required to undertake remedial work, and will be invited to attend a re-sit at an appropriate time.

9.3 Appeals procedure

NICPLD will treat all FP pharmacists fairly, equally and with respect in relation to any assessment. If an FP pharmacist is dissatisfied with the outcome of their FP assessment, they must contact the NICPLD FP Course Director within five working days of their FP assessment giving notice of their dissatisfaction and of their intent to forward an appeal. The formal appeals procedure must then be followed:

1. All appeals against the conduct, adequacy or outcome of an assessment must be forwarded, in writing, to the NICPLD FP Course Director within 10 working days after the FP pharmacist has given notice of their intent. Written support from the FP pharmacist's Educational Supervisor (ES) / mentor and their Pharmacy Manager must accompany each notification of an appeal.

2. On receipt of notification of an appeal, the NICPLD FP Course Director will set a date for the appeal to be heard by an Appeals panel. The Appeals panel will be formed from a sub-group of the FP steering group, and will consist of personnel not otherwise involved in the appeal. The FP pharmacist will be offered the opportunity to be accompanied by another person not involved in the FP assessment to help them present their case.

3. The Appeals panel will meet within 30 working days of receipt of the written notification of the appeal.

4. The Appeals panel will reach a decision and all involved parties will receive verbal notification of the outcome on the day of the appeal and written notification within five working days. This decision will be final.

10. NICPLD contact details

For any queries regarding the NICPLD FP, please contact:

FP Course Director
NICPLD
Beechill House
42 Beechill Road
Belfast BT8 7RL
Tel: 028 9097 4477
Email: nicpld@qub.ac.uk

11. References

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