Why pharmacists need advanced practice specialist residences: The GB-Australia story

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The Royal Pharmaceutical Society has signed a partnership agreement with the Society of Hospital Pharmacists of Australia (SHPA). The SHPA is a national professional membership body in Australia, representing over 4,500 pharmacists, pharmacy technicians and pharmacists in training, who are working in Australia’s public and private hospitals and other clinical healthcare settings.

How did this agreement come about? The RPS and the SHPA share a common vision to lead, develop and support the pharmacy profession to improve patient care for the benefit of patients and the public. A new agreement between the RPS and the SHPA will see the two organisations working together to develop mutually accredited, two-year advanced practice specialist residencies for pharmacists in Australia as well as a model where the two societies will recognise advanced pharmacists through a reciprocal arrangement. On 31 March 2017 Michael Dooley, president of the SPHA, visited the RPS in London to sign the 2017 agreement on behalf of the Australian society.

The purpose of the agreement is to deliver quality assured education, training and development opportunities, mapped to the RPS and SHPA career stages from Foundation to Faculty. Since 2010, the RPS has been working with all sectors of the profession to develop standards, frameworks, portfolios and models of accreditation through our professional development programmes. In September 2016 the SHPA launched a two-year general residency programme intended to provide structured, accredited professional development for pharmacists in the early (foundation) stage of their careers. The plan going forward is to develop and recognise two year advanced practice residencies across a range of practice areas, including general medicine, surgery and more specialised areas such as cancer care, cardiology, or critical care.

The frameworks that have been developed in the UK and Australia are based on the Competency Development and Evaluation Group (CoDEG) work of the previous decade, which have been adapted and adopted across nations, incorporating additional transnational research conducted by FIP (International Pharmaceutical Federation). The new agreement between the RPS and the SHPA builds on a mutual vision to share and develop programmes of support and recognition that could “count” in either nation.

Previous work by FIP has shown that at foundation level there exists a common set of practice-related competencies that are globally applicable (see Global Competency Framework). Both the UK and Australia have a similar practitioner program of intern or pre-registration year structured residency or foundation training programs, using similar general or foundation level competency based developmental frameworks (Coombes I., Avent M., Cardiff L., Bettanay, Coombes J., Whitfield K., Stokes J., Davies J., Bates I. et al. Improving pharmacist performance using the competency based General Level Framework. J Pharm Pract Res; 2010;40: 111-118). In the past five years both pharmacy workforces have introduced advanced practice frameworks to guide the development of practitioners leading to advanced practitioner credentialing.\(^1\),\(^2\),\(^3\),\(^4\).

1 RPS Faculty Programme
New evidence\textsuperscript{5} emerging from joint workforce research from the UK and Australia demonstrates that for advanced pharmacy practice, there is transnational applicability of nationally recognised advanced development. Moreover, following a cross-over trial, practitioners from both countries indicate that the respective advanced level frameworks are similar in developmental terms: the advanced stage competencies in both frameworks were useful in clarifying expectations of practice and identifying common skills development needs. There is now good evidence for the comparability and transnational parity of advanced pharmacy practice.

Working together will allow us to share expertise across defined areas of pharmacy practice, delivering mutually beneficial programmes and services. The relationship between the RPS and the SHPA will allow for the development of a new model of accredited specialist residencies, designed for the needs of UK and Australian clinical pharmacists. The healthcare systems, health issues and the practice of pharmacists, are very similar between the UK and Australia.

\textbf{Why do we need this agreement?}

Across the UK, we need a pharmaceutical workforce that can deliver the same standard of care across different settings and sectors, whether they are providing care and medicines optimisation in hospital, community, care homes or general practice. The standards of care need to be the same. In addition, ways in which we can demonstrate stages of advancement and experience can help patients and other professions to understand the impact of our role better.

Pharmacists working in areas of highly specialist practice increasingly find they have to draw on their advanced generalist knowledge and expertise as patients present with multiple co-morbid disease, often relating to ageing. The care of patients and the use of medicines and is getting more complex, in all the care sectors. A practitioner may be working with patients with diabetes, cardiac disease, cancer, or, HIV – all of the above! It is essential to have formalised experiential training programmes that are recognised by the profession for pharmacists who are working in all these areas.

The need for the “advanced generalist” is growing and we have to support the profession to be able to adapt to this healthcare need. Hence, programmes that support advancement across all sectors and specialisms which, critically, do not always require mandated or extra training, has to be a useful way to develop the whole workforce with a recognised transferable skill set. The key is to adopt a core development roadmap (foundation training) that provides a consistent experiential programme with clear stages of progression; in particular, supporting newly qualified pharmacists in consolidating their early experiential learning in practice, whether this be residency training or foundation programmes. Both partners in the new agreement fully acknowledge this imperative, which has led to this concordat of collaboration and reciprocity.

\textbf{What will be the outcome, and when?}

The outcome of the formal RPS and SHPA alliance will be an ability to collaboratively share frameworks, training and development and recognition programs to increase the overall competency, capability and capacity of the pharmacy workforce and ultimately improve our profession’s contribution to patient care. Working together will allow us to share expertise across defined areas of pharmacy practice, delivering mutually beneficial programmes and services.

Over the next two years SHPA and RPS will be working to progress this exciting initiative and develop a range of workforce development opportunities across a range of clinical practice.

The vision of RPS and SHPA is that this transformational model will develop the future workforce and be one that will become widely adopted across many countries in years to come. An added benefit of bilateral collaboration on developmental programmes is that pharmacists who have been credentialed\textsuperscript{6} in Australia (via SHPA) for stage of development would have parity of assessment and therefore recognised credentials in GB (via the RPS) and \textit{vice versa}. This reciprocity would be hugely beneficial for both workforces in relation to potential mobility and would offer opportunities for both nations to work even more closely over coming years.


\textsuperscript{6} Credentialing is sometimes referred to as professional recognition.