Teaching How to be a Pharmacist, the EPA Way

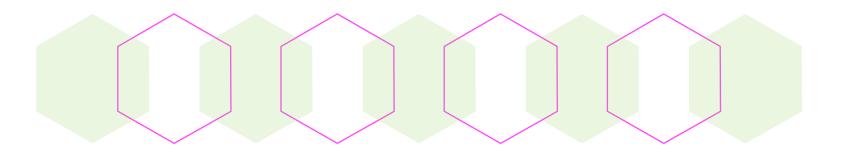
Idaliz Rodríguez-Escudero, PharmD, MS



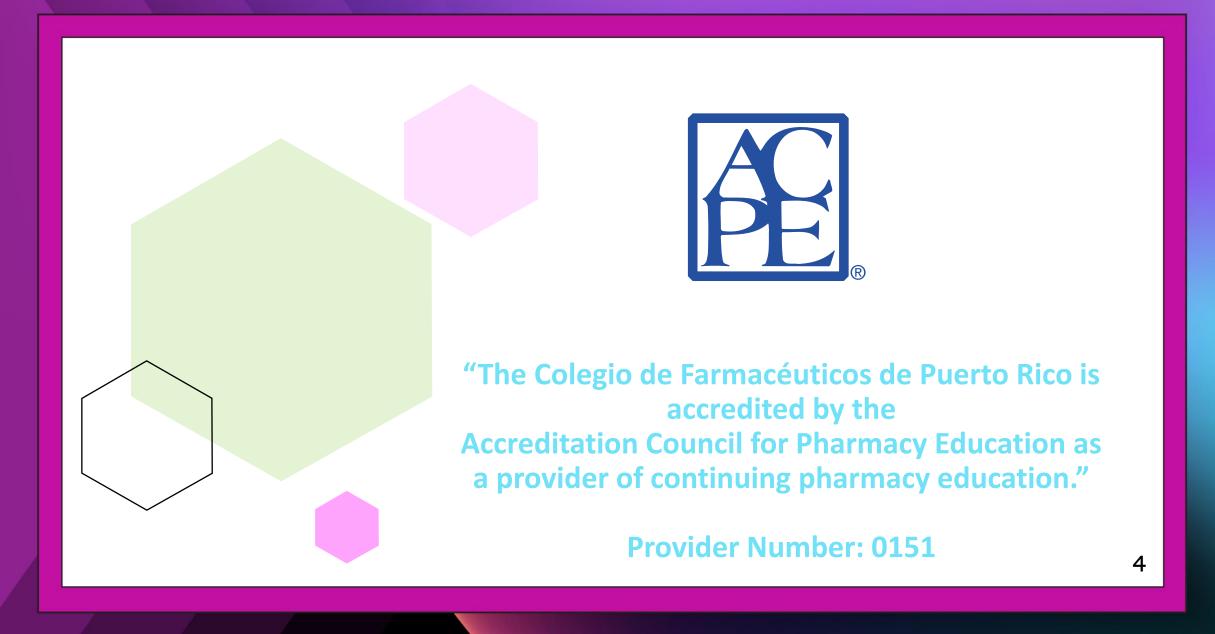
COLEGIADOS...UNIDOS SOMOS MÁS FUERTES

CONVENCIÓN ANUAL CFPR 2024

Disclosure to Learners



Idaliz Rodríguez-Escudero, faculty for this CE activity, has no relevant financial relationship(s) with ineligible companies to disclose.



Objectives

- Recognize the domains and subdomains of the 2013 CAPE-EOs
- Define core entrustable professional activities
- Recognize the 2016 core EPAs for new pharmacy graduates
- Relate the four preceptor roles to EPAs' levels of entrustment.
- Explain the steps in the Pharmacists'
 Patient Care Process (PPCP)

- 6 State changes in the new COEPAs
- Value the need for standardized educational outcomes in the experiential setting
- Propose learning activities aligned with the COEPAs in different practice scenarios
- Reflect on your role as preceptor in the development of knowledge, skills, attitudes, and behaviors of pharmacy students

Why teach?

EDUCATIONAL OUTCOMES
LEARNING MEASURABLE ATTITUDES
SKILLS RESULTS



Educational Outcomes in Pharmacy Education

1989

AACP
 Commission to
 Implement
 Change in
 Pharmaceutical
 Education

1994

 Center for the Advancement of Pharmaceutical Education (CAPE) educational outcomes

2004

Revision

2016

 AACP Academic Affairs Committee defines practice activities EPAs

















1992

 AACP recommends "pharmaceutical care" and PharmD degree 1998

Revision

2013

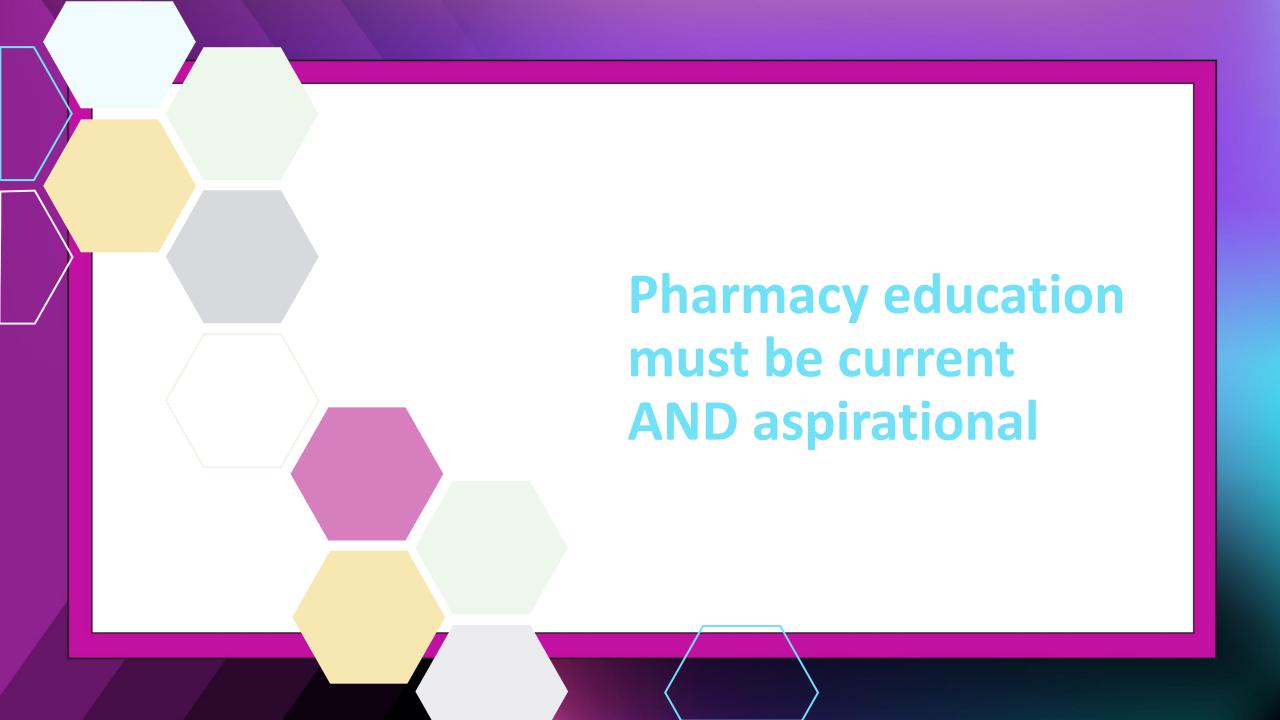
Revision

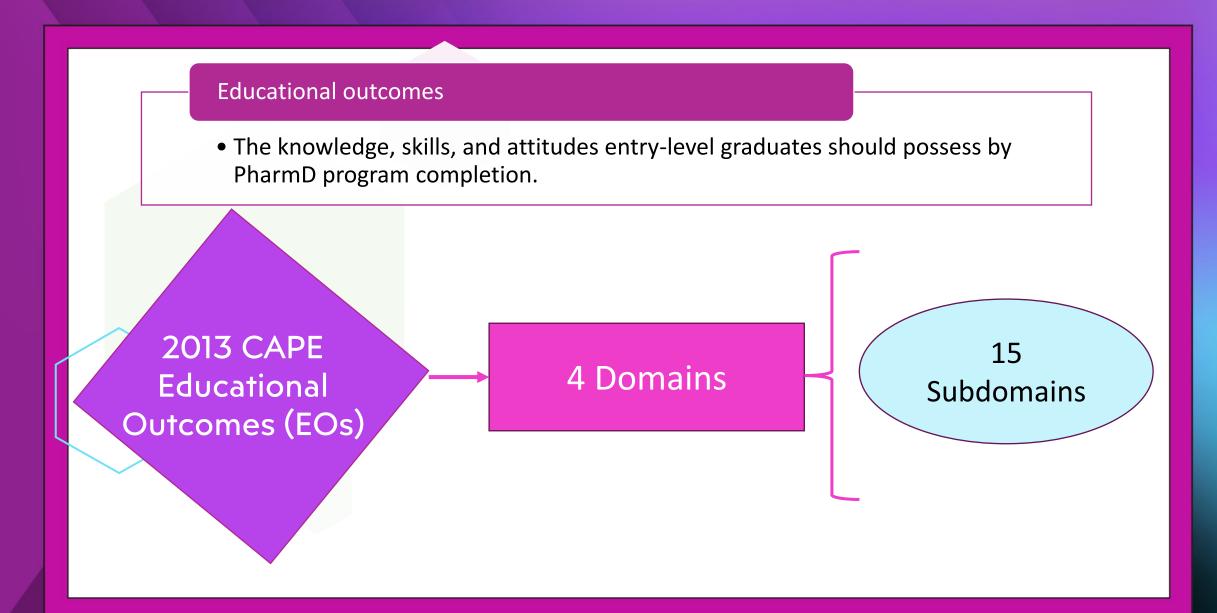
2022

•EOs and EPAs merged into COEPAs

Evolving profession = Evolving Education

AACP = American Association of Colleges of Pharmacy





CAPE EO Domains

Foundational Knowledge

Approach to Practice and Care

Essentials for Practice and Care

4

Personal and Professional Development

CAPE EO Subdomains

Foundational Knowledge

Develop, integrate, and apply knowledge from the foundational sciences (i.e., pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

Essentials for Practice and Care

Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).

Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.

Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.

Describe how population-based care influences patient-centered care and influences the development of practice guidelines and evidence-based best practices.

CAPE EO Subdomains

Approach to Practice and Care

Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.

Educate all audiences by determining the most effective and enduring ways to impart information and assess understanding.

Assure that patients' best interests are represented.

Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.

Recognize social determinants of health to diminish disparities and inequities in access to quality care.

Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

CAPE EO Subdomains



Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.

Demonstrate responsibility for creating and achieving shared goals, regardless of position.

Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals.

Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

Entrustable Professional Activities – EPAs 2016

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Shifting practice to "health system"

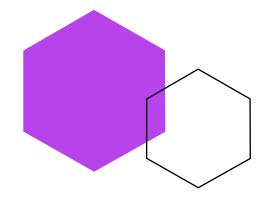
Pharmacists not recognized as a consistent member of the health care team in all clinical settings

Pharmacists not practicing at the fullest extent of licensure and education

In medical education trainee preparation for practice is assessed with EPAs.

Solution

Implement a new way of defining and assessing pharmacy practice skills



What are EPAs?

- Entrustable Professional Activities
- Descriptors of the work pharmacists do;
- Specific tasks, activities or responsibilities that trainees are entrusted to perform in the experiential setting, with direct or distant supervision.
- Independently executable, observable, measurable using entrustment scale

Poll

Think about the daily activities or responsibilities you have as a pharmacists...

- Which are most essential?
- Which should a student learn to do?



2016 EPA's 6 Domains

Patient Care Provider

Information Master

Interprofessional Team Member

5 Practice Manager

Population Health Promoter

6 Self-Developer



Patient Care Provider Domain

Collect information to identify a patient's medication-related problems and health-related needs.

Analyze information to determine the effects of medication therapy, identify medication-related problems, and prioritize health-related needs.

Establish patient-centered goals and create a care plan for a patient in collaboration with the patient, caregiver(s), and other health professionals that is evidence-based and cost-effective.

Implement a care plan in collaboration with the patient, caregivers, and other health professionals.

Follow-up and monitor a care plan.



Pharmacists' Patient Care Process

Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes.

Using principles of evidence-based practice, pharmacists:

Collect

The pharmacist assures the collection of the necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient.

Assess

The pharmacist assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care.

Plan

The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.

Implement

The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

Joint Commission of Pharmacy Practitioners. Pharmacists' Patient Care Process. May 29, 2014.

Interprofessional Team Member Domain

Collaborate as a member of an interprofessional team.

Population Health Promoter Domain

Identify patients at risk for prevalent diseases in a population.

Minimize adverse drug events and medication errors.

Maximize the appropriate use of medications in a population.

Ensure that patients have been immunized against vaccinepreventable diseases.

Information Master Domain

Educate patients and professional colleagues regarding the appropriate use of medications.

Use evidence-based information to advance patient care.

Practice Manager Domain

Oversee the pharmacy operations for an assigned work shift.

Fulfill a medication order.

Self-Developer Domain

Create a written plan for continuous professional development.

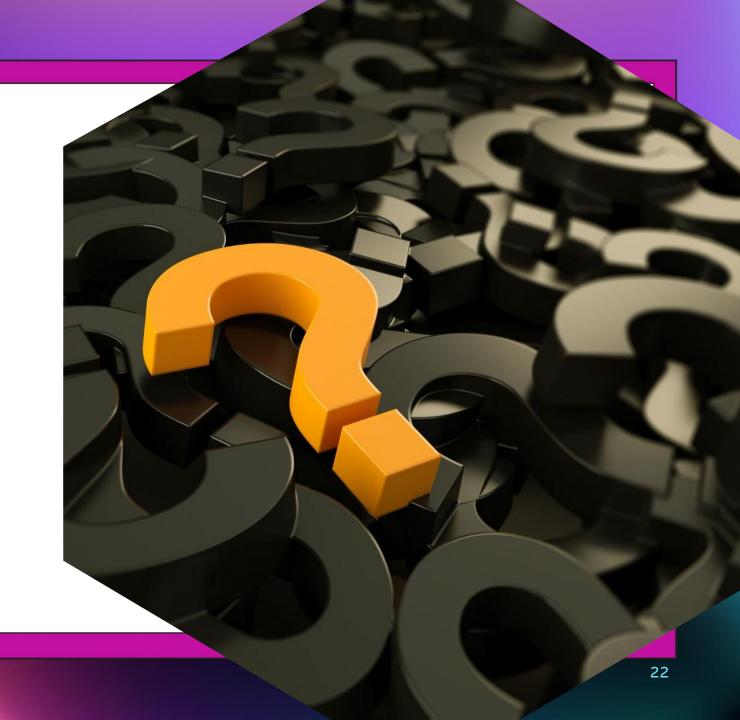
| EPA Level | EPA Description |
|-----------------------------|---|
| Observe only | Learner is permitted to observe only. Even with direct supervision, learner is not entrusted to perform the activity or task. |
| Direct Supervision | Learner is entrusted to perform the activity or task with direct and proactive supervision. Learner must be observed performing task in order to provide immediate feedback. |
| Reactive Supervision | Learner is entrusted to perform the activity or task with indirect and reactive supervision. Learner can perform task without direct supervision but may request assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of activity or task. |
| Intermittent Supervision | Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform task. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on sample of work. |
| General Direction | Learner is entrusted to independently decide what activities and tasks need to be performed. Learner entrusted to direct and supervise activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goals. |

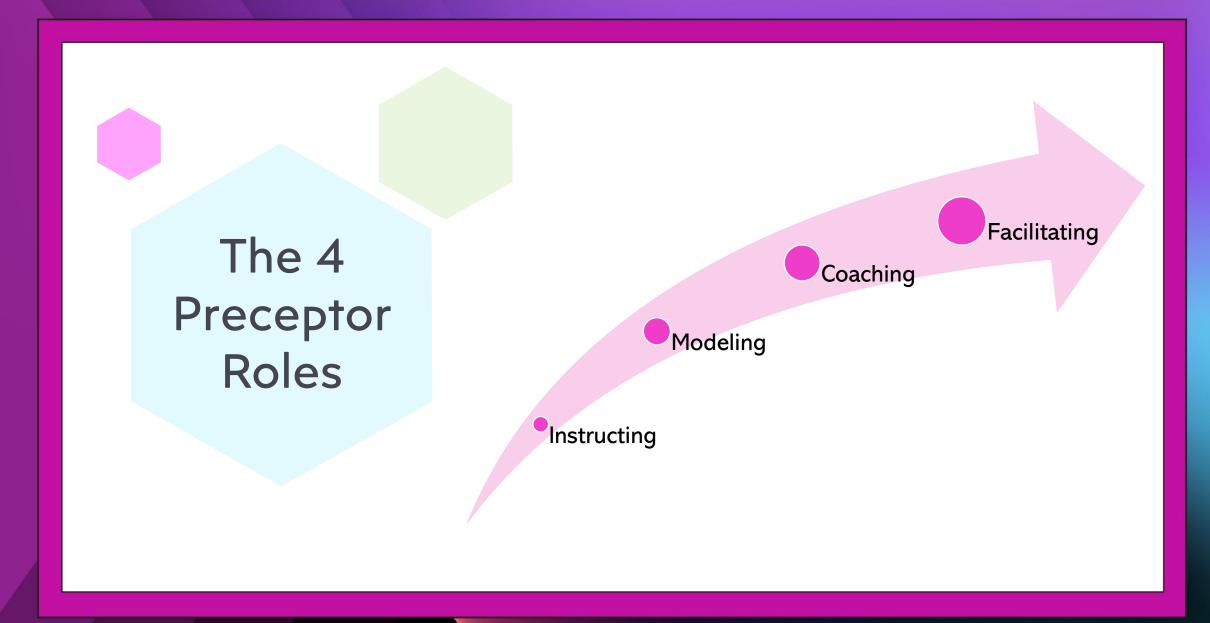
Adapted from Haines ST, Gleason BL, Kantorovich A, et al. Report of the 2015-2016 AAC. AJPE.2016;80(9):S20

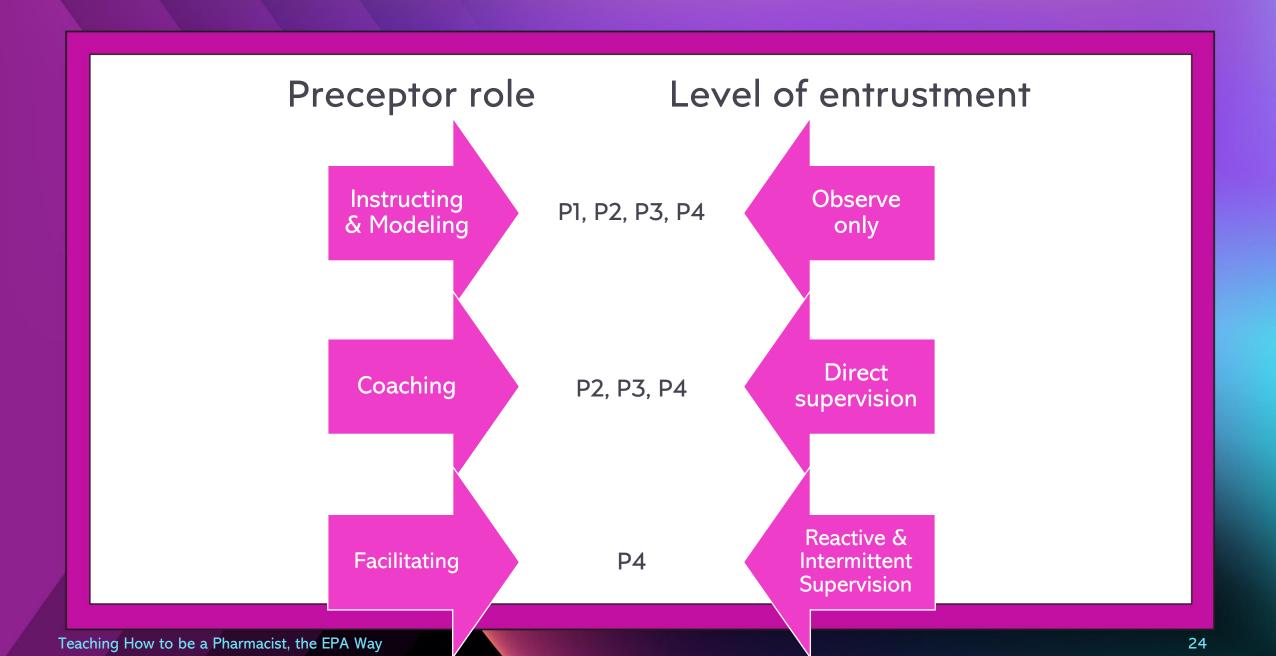
Poll question

True or False?

EPAs are evaluated on a scale of 1 to 5, being 5 equivalent to an A grade.

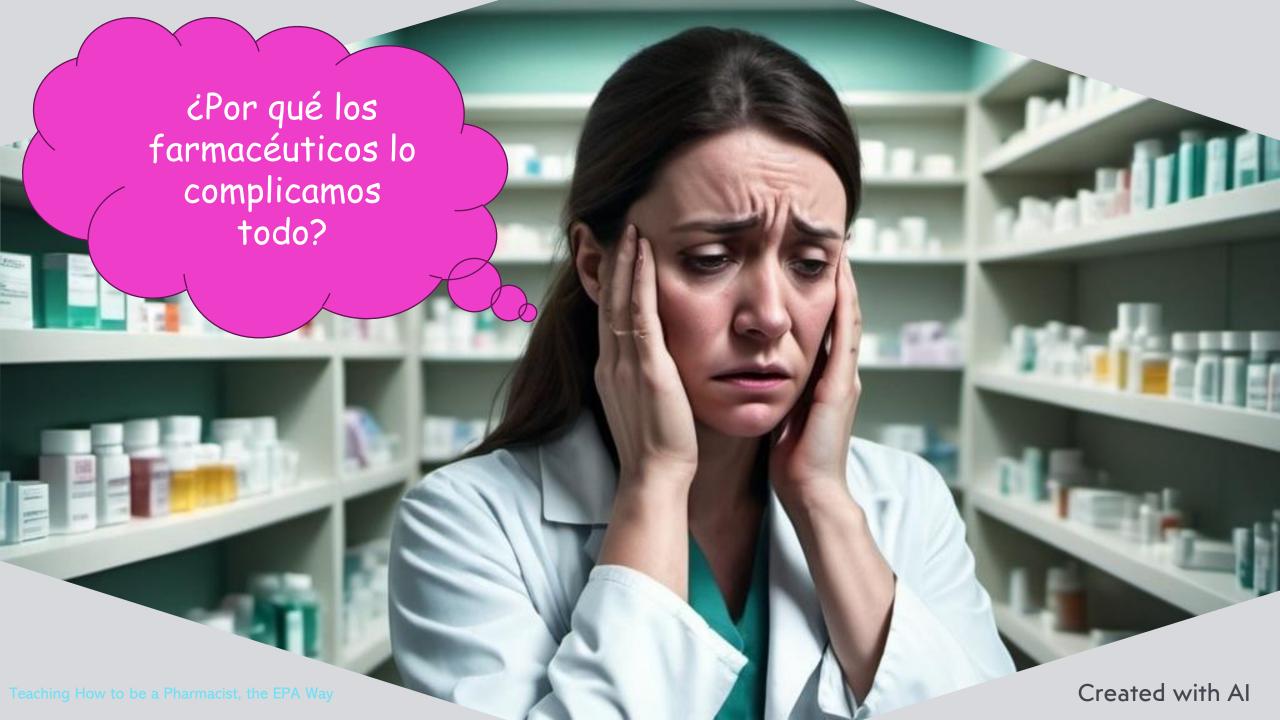








COEPAs = Curricular Outcomes and Entrustable Professional Activities



COEPAs: Revised Educational Outcomes

| Domain | Subdomain | Descriptor <abridged></abridged> |
|-----------|------------------------------------|--|
| Knowledge | Scientific thinking | Apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health). |
| Skills | Problem-solving process | Use problem solving and critical thinking skills, along with an innovative mindset. |
| | Communication | Actively engage, listen, and communicate verbally, nonverbally, and in writing. |
| | Cultural and structural humility | Mitigate health disparities by recognizing social determinants of health, diversity, equity, inclusion, and accessibility. |
| | Person-centered care | Provide whole person care to individuals using the Pharmacists' Patient Care Process. |
| | Advocacy | Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level. |
| | Medication-use process stewardship | Use human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication-use systems. |
| | Interprofessional collaboration | Actively contribute as a healthcare team member by demonstrating core interprofessional competencies. |
| | Population health and wellness | Assess factors that influence the health and wellness of a population and develop strategies to address those factors. |
| | Leadership | Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of |

Attitudes

Self-awareness

Professionalism

one's role. Examine and address personal and professional attributes (eg, knowledge, skills, beliefs, biases, motivation,

and emotional intelligence) that could enhance or limit growth. Exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with others.

COEPAs: Revised Entrustable Professional Activities

- 1. Collect information necessary to identify a patient's medication-related problems and health-related needs.
- 2. Assess collected information to determine a patient's medication-related problems and health-related needs.
- 3. Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.
- 4. Contribute patient-specific medication-related expertise as part of an interprofessional care team.
- 5. Answer medication-related questions using scientific literature.
- 6. Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.
- 7. Fulfill a medication order.
- 8. Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.
- 9. Monitor and evaluate the safety and effectiveness of a care plan.
- 10. Report adverse drug events and/or medication errors in accordance with site- specific procedures.
- 11. Deliver medication or health-related education to health professionals or the public.
- 12. Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.
- 13. Perform the technical, administrative, and supporting operations of a pharmacy practice site.

Practice

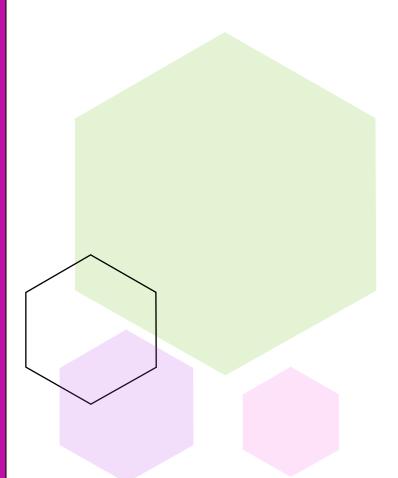
Propose learning activities aligned with the COEPAs in your practice scenario

20 minutes



Conclusion

Benefits of using EPAs in the experiential setting



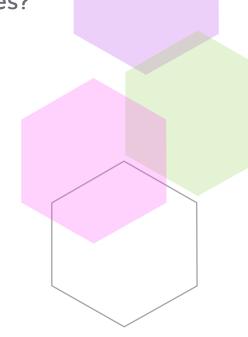
- Clear expectations
 - Preceptors
 - Know where to focus efforts
 - Establish appropriate levels of entrustment
 - Understanding of school of pharmacy required activities
 - Students
 - Can relate educational activities to their professional development
 - Know what level of entrustment is expected
- Increased student engagement
- Increased preceptor confidence

- 1. Which is NOT a step of the Pharmacists' Patient Care Process?
 - A. Assess
 - B. Dispense
 - C. Follow-up
 - D. Plan
- 2. What are EPAs?
 - A. Statements established by each academic program of their outcomes.
 - B. Statements that describe how PharmD programs should be structured.
 - C. Statements that describe the knowledge, skills, and attitudes a learner should be able to display at the end of a program.
 - D. Statements that describe the work of pharmacists as tasks and responsibilities that all students should do in the experiential setting.

- 3. What are CAPE educational outcomes?
 - A. Statements established by each academic program of their outcomes.
 - B. Statements that describe how PharmD programs should be structured.
 - C. Statements that describe the knowledge, skills, and attitudes a learner should be able to display at the end of a program.
 - D. Statements that describe the work of pharmacists as tasks and responsibilities that all students should do in the experiential setting.
- 4. What is the goal level of entrustment for each EPA?
 - A. Direct supervision
 - B. General direction
 - C. Intermittent supervision
 - D. Reactive supervision

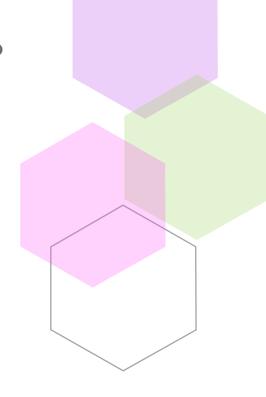
- 5. The EPA level of entrustment of "Observe only" related to this preceptor role:
 - A. Coach
 - B. Facilitator
 - C. Instructor
 - D. Model
- 6. Which of the following are revised educational outcomes subdomains?
 - A. Communication
 - B. Person-centered care
 - C. Professionalism
 - D. All of the above

- 7. Which activity aligns with the EPA: Identify populations at risk for prevalent diseases and preventable adverse medication outcomes?
 - A. Conduct a health clinic to screen for depression
 - B. Create a SOAP note
 - C. Journal club presentation
 - D. Update a pharmacy policy
- 8. Which activity aligns with the EPA: Fulfill a medication order?
 - A. Calculate a weight-based dose
 - B. Enter a prescription into a pharmacy record system
 - C. Manage pharmacy workflow
 - D. A & B are correct



9. **True/False**. Informing students of how an activity contributes to the development of an educational outcome or EPA increases engagement.

10. **True/False.** COEPAs can only be applied to clinical experiential settings with direct patient care.



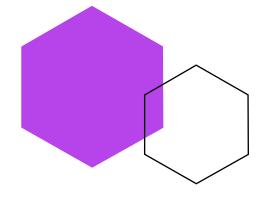
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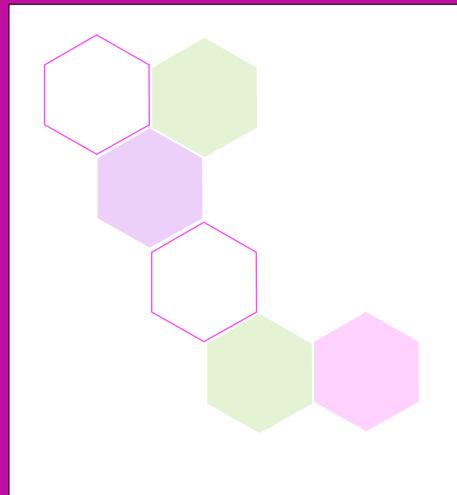
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Tiena hasta el 5 de Octubre para completer la evaluación y prueba y poder obtener su certificado



Thank you

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