

National Consensus on Core Competencies for Clinical Pharmacists in Norway

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What was done?

Integrated Medicines Management (IMM) in Norway consists of the tasks medicines reconciliation, medicines review, patient counseling and discharge service (see fig 1).

- We have compiled the core competencies clinical pharmacists need when executing each of the tasks in the IMM-model.
- We have suggested educational activities in order to reach the competency needed.

Why was it done?

Since 2012 there has been a national agreement on using the IMM-model in hospitals among all four Hospital Pharmacy Trusts in Norway. A complete post-graduate educational program for clinical pharmacists did not exist, and defining core competencies was necessary in order to prioritise educational activities.

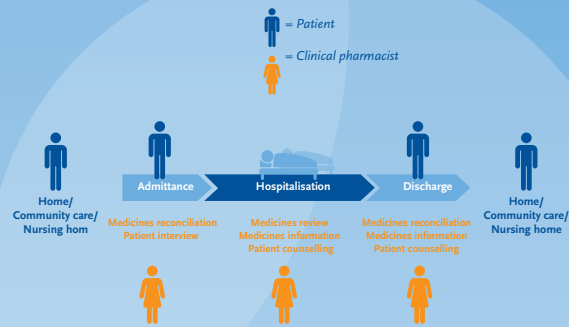
How was it done?

Six experienced clinical pharmacists representing all four Hospital Pharmacy Trusts and the two independent hospital pharmacies in Norway agreed on which competencies a clinical pharmacist needs. The competencies were finally compiled as core competencies, further specified with learning objectives. For each learning objective, existing educational opportunities were assessed and the need for any additional training was specified. A suggested time schedule for the recommended training was made.

What has been achieved?

Due to an agreement on core competencies including the educational activities:

- Mutual expectations on competencies makes it easier for both clinical pharmacists and their leaders to identify the need of further training and also to prioritise the right educational activities.
- Areas with limited educational opportunities were revealed (e.g adherence, handling of side effects and communication)



Figur 1. Illustration of the IMM-model in a standard patient care pathway, depicting roles, settings and tasks.



What next?

- The report will be implemented in all Norwegian hospital pharmacies following local adjustments.
- An initiative to integrate relevant competencies into the curricula of Pharmacy Programmes in Norwegian Universities has started, and this will continue.
- Hopefully, our work will encourage further cooperation on educational activities between health regions in Norway.
- Another effect of this joint effort may be that less training will be needed when, clinical pharmacists move between regions.

Medicines reconciliation	Medicines review	Patient counselling	Discharge service
Competencies essential to perform the task			
<ul style="list-style-type: none"> • Health care system incl. sources for drug information • Working Method • Medical Records; understanding of, and documentation in • Practical knowledge of medicines (i.e administration forms, generics, aids) • Communication (with patients and other health care professionals) • Understanding the mechanisms of adherence to drug treatment • Hygiene and HSE (Health, Safety and Environment) 	<ul style="list-style-type: none"> • Working method • Pharmacotherapy, interactions and EBM (Evidence Based Medicine) • Practical knowledge on medicines incl. drug distribution • Preparation and administration of drugs; incl fluid therapy and nutrition as needed • Monitoring of effects and side effects • Adherence to drug treatment • Communication (other health care professionals) • Medical Records; understanding of, and documentation in 	<ul style="list-style-type: none"> • Working method including communication skills • Adherence to drug treatment • Pharmacotherapy • Handling side effects • Medical Records, documentation 	<ul style="list-style-type: none"> • Communication (patients and other health care professionals) • Practical knowledge of medicines • Pharmacotherapy • Adherence to drug treatment • The health care system incl drug prescribing routines in different health units, and cooperation between health care units (how to contribute to seamless care)

Table 1: Competencies essential to perform medicines reconciliation, medicines review, patient counselling and discharge service respectively

Area of competence	Learning objectives	Relevant training opportunities and courses (pre- certificate)	Post-certificate training
Health care system incl. sources for drug information	<ol style="list-style-type: none"> 1. Method of reconciling 2. Organization of health care system 3. Use of and interpretation of drug information sources 4. Ethics (professional cooperation and patient's integrity) 	<p>Learning objectives 1-3:</p> <ul style="list-style-type: none"> • Local IMM-course incl practical in-clinic training with trained supervisors <p><i>Suggested alternative courses:</i></p> <ul style="list-style-type: none"> • Course FARM3001 Clinical Pharmacy and Pharmacotherapeutics, Norwegian University of Science and Technology (NTNU) or • Course FRM 5905V – Clinical pharmacy work methods, University of Oslo <p>(Both courses requiring additional practical in-clinic training)</p>	<p>Learning objective 4:</p> <p>Suggested training:</p> <ul style="list-style-type: none"> • Cases discussed locally • Ethics book (2017) and Course under planning by H Frøyland (2017)

Tabell 2. Example of competency area to be covered including the specified learning objectives. Relevant training suggested completed pre- or post certificate.