

National Conference in Patient safety
April 22-23, 2016

Continuing Professional Development in Pharmacy: The Qatar Experience

Dr. Nadir Kheir; PhD



Disclaimer:
PRESENTING AUTHOR HAVE NO RELATIONSHIPS TO DISCLOSE



Aim

- To introduce Qatar's CPD experience using the CPD-HCP Program of the College of Pharmacy; Qatar University as a model

Innovation is always triggered by Need!

Realities and Challenges

Realities

- New complex drug therapies and associated DRPs
- New and expanding healthcare facilities
- Changing disease patterns
- Emerging need for interprofessional education and collaboration

Challenges

- Diverse medical, nursing, pharmacy curricula
- Inconsistent training and competencies
- Pluralistic societies and complex needs

The Solution:

A culture of
Life Long
Learning

CPD: definitions

Continuing Professional Development (CPD):

- *A self-directed, ongoing, systematic and outcomes-focused approach to lifelong learning* that is applied into practice
- Involves the process of active participation in formal and informal learning activities

Purpose of CPD

- To help improve the safety and quality of care provided for patients and the public
- To keep professionals updated with relevant training, information, skills and knowledge to remain competent throughout their career journey.
- This continuous learning will also help to improve the profession as a whole.
- The MAIN and ULTIMATE beneficiary is the PATIENT

Benefits of CPD

Benefits to the organization:

- ✓ CPD programs contribute to meeting the increasing demand for an accountable and skilled workforce
- ✓ They improve inter-professional collaboration
- ✓ They help meet organizational objectives
- ✓ They improve staff motivation and morale
- ✓ They contribute to Quality Assurance

CPD as an Ethical Responsibility

The seven principles:

1. Make the care of patients your first concern
2. Exercise your professional judgment in the interests of patients and the public
3. Show respect for others
4. Encourage patients to participate in decisions about their care
5. **Develop your professional knowledge and competence**
6. Be honest and trustworthy
7. Take responsibility for your working practices

CPD Requirements

1. Mandated by the Government
2. Continuing
3. Relevant
4. Based on quality and standards
5. Inclusive

Qatar National Health Strategy

- Qatar's National Health Strategy of 2011-2016 articulated its goal of developing a comprehensive world-class healthcare system, and advocated the introduction of disease management, health insurance and greater integration between government and private sector



The National Health Strategy (NHS) is a comprehensive program of reforms, aligned to the Qatar National Vision 2030 that will advance Qatar's Healthcare Vision of creating a world-class, patient-centered healthcare system.

Qatar Council for Healthcare Practitioners

- QCHP was established to ensure that the workforce in Qatar is appropriately qualified and supported
- One of the stated deliverables of the NHS is the creation of the QCHP's **accreditation department (QCHP-AD)** which was tasked with improving healthcare quality in collaboration with other stakeholders
- QCHP-AD started a process of accrediting medical and other healthcare-related educational institutes and programs times

إدارة الاعتماد

ACCREDITATION DEPARTMENT

Circular No (1/2014)

From	Dr. Jamal Rashid Al Khanji A/Chief Executive Officer(CEO) Qatar Council for Healthcare Practitioners(QCHP)
To	<ul style="list-style-type: none">• All Healthcare Practitioners in the State of Qatar• All Healthcare Facilities in the State of Qatar(Public and Private sectors)
Subject	CME/CPD Mandatory Participation Policy
Date	3, November 2014

The Accreditation Department of the Qatar Council for Healthcare Practitioners presents to you its compliments.

As part of the NHS Project 5.2.7 – Framework for CME/CPD Accreditation and oriented stakeholders we would like to inform all healthcare practitioners in the state of Qatar that the QCHP is introducing the mandatory CPD policy effective January 2016 requiring all registered health practitioners to participate in CPD activities according to the policies and regulations of the Accreditation Department of the QCHP. The following will apply:

- Participation in CPD activities will no longer be optional for healthcare practitioners in the State of Qatar.
- All the licensed health practitioners will be required to provide evidence of fulfilling the CME/CPD credit requirements **as applicable to their profession**. (more details available on the CPD Accreditation Manual)
- Records of CME/CPD activities will be maintained by the healthcare practitioners in their portfolios with all the appropriate information and supporting documentation .
- Please note that only QCHP recognized Credit Units will be considered for renewing the license.

For more information, please refer to the Accreditation Departments' CME/CPD Accreditation Manual- Provisional Version which is available on the SCH website:

<http://www.sch.gov.qa/qatar-council-of-health-practitioners/accreditation>

CPD: Qatar's Experience: The Accreditation Department

Mission: To improve healthcare quality in collaboration with other stakeholders and national & international partners by accrediting medical and other healthcare-related educational institutes and programs and by inspiring the healthcare practitioners to stay competent at all times and excel in quality.

Vision: To achieve the goals of Qatar National Vision 2030 and National Health Strategy 2011 – 2016 and to develop and implement a sustainable internationally-recognized system for accreditation of health professional education.








Values: The department is committed to values of integrity, transparency, cooperation, self- and client-respect, evolving innovation, comprehensive organization, uniqueness and excellence in service provision.

Division of Medical Education and Continuing Professional Development

- Concerned with developing mechanisms to regulate and accredit activities of CPD and to monitor such activities to ensure their adequacy, quality and compliance with national and international accreditation standards

[The Accreditation Department-SCH](#)

Useful Downloads

-  [CPD Framework for Healthcare Practitioners](#)
-  [FAQs for Practitioners](#)
-  [FAQs for Providers](#)
-  [National CME/CPD Accreditation System for CPD Providers & CPD Activities](#)
-  [List of QCHP Accredited CME/CPD Providers in Doha, Qatar](#)
-  [Accredited CPD activities for healthcare practitioners](#)
-  [Educational presentation about the National CME/CPD Framework for Healthcare Practitioners](#)

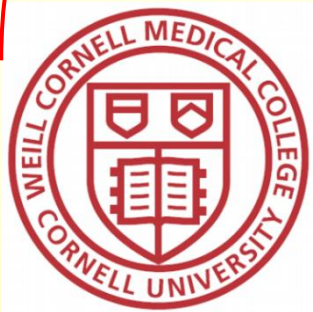
Accrediting CPD Providers



Who is required to participate in the CPD Program?



All licensed healthcare practitioners are required to participate in the CPD program for sustaining (renewal of) licensure.



ALL health practitioners registered in Qatar are required to fulfill the annual requirements of CBD for maintenance and renewal of licensure.



المجلس القطري للتخصصات الصحية

QATAR COUNCIL FOR HEALTHCARE PRACTITIONERS (QCHP)

إدارة الاعتماد

ACCREDITATION DEPARTMENT

List of QCHP Accredited CME/CPD Providers in Doha, Qatar

Academic Institutions:

1. Qatar University :
 - 1.1. College of Pharmacy
 - 1.2. Department of Health Sciences
2. College of North Atlantic, Qatar (CNA-Q):
 - 2.1. School of Health Sciences
3. Weill Cornell Medical College in Qatar(WCMCQ)
4. College of Nursing, University of Calgary, Qatar

Governmental Healthcare Providers:

1. Primary Health Care Corporation (PHCC), Workforce Training & Development Department
2. Hamad Medical Corporation (HMC), Office of Professional Pharmacy Development, Pharmacy Department

Private Healthcare Providers:

1. Al Emadi Hospital

Online CPD Providers:

1. UpToDate by Wolters Kluwer Health
2. BMJ Learning
3. Swank Healthcare

Others

1. Supreme Council of Health (SCH), Learning & Development, Human Resources Department

What is a CPD Cycle?

Each CPD Cycle is two years (24 months) in duration unless an extension is granted as per the QCHP-AD's Cycle Appeals Process Policy. The start date of an individual CPD cycle will align with each healthcare practitioner's date of licensure.

To maintain licensure the QCHP-AD has established three mandatory requirements for all healthcare practitioners in the State of Qatar. Healthcare practitioners have to ensure they complete each of the requirements described below:

1. The annual CPD requirement: Healthcare practitioners must complete and document a minimum of 40 credits each year.
2. The CPD cycle requirements: Healthcare practitioners must complete and document a minimum of 80 credits every two years.
3. Health-care practitioners must complete and document at least 40 credits in Category 1 and 40 credits across Category 2 and/or Category 3, in any combination.

CPD FRAMEWORK TABLE - CPD ACTIVITIES CATEGORIES

	Category	Description	CPD Activities	Credit Rating	Supporting Documentation Requirements	
	Category	Description	CPD Activities	Credit Rating	Supporting Documentation Requirements	
	1	Accredited Group Learning Activities	<ul style="list-style-type: none"> Conferences, symposia, seminars and workshops Educational rounds (including morning report in healthcare facilities, Grand rounds, Morbidity and Mortality rounds, tumor boards and case based discussions). Journal clubs Online synchronous and blended learning activities 	1 credit/hour	Certificate of attendance or letter describing the total hours / credits completion from the responsible organization	
	2	Self-Directed Learning Activities: Clinical Practice	<ul style="list-style-type: none"> Answering self-identified clinical questions 	0.5 credits/hour	Document these self-learning activities in the CPD portfolio or (where applicable) the provision of a transcript from a third party	
			<ul style="list-style-type: none"> Reading journals, books or monographs 	1 credit/hour		
			<ul style="list-style-type: none"> Viewing podcasts or webcasts 	0.5 credits/hour		
		Self-Directed Learning Activities: Education and Training	<ul style="list-style-type: none"> Postgraduate degrees or diploma programs recognized by a relevant professional body 	25 credits/ semester or course	Certificate of completion Transcript of the course from the responsible organization	
			<ul style="list-style-type: none"> Preparation for formal teaching activities 	2 credits/hour	Teaching schedule from the responsible organization or academic institution	
			<ul style="list-style-type: none"> Development of assessment tools or activities (including Objective Structured Clinical Examination (OSCE), MCQ or short answer questions) 	2 credits/hour	Letter describing participation in the development of assessment tools or activities from the responsible organization	
			<ul style="list-style-type: none"> Educational sessions to enhance the skills of examiners 	1 credit/hour	Certificate or letter of participation from the responsible organization	
			<ul style="list-style-type: none"> Mentoring students, trainees, or peers 	1 credit/hour	Letter from the responsible organization	
		Self-Directed Learning Activities: Research and Quality Improvement	<ul style="list-style-type: none"> Development of a research grant or peer-reviewed publication 	1 credit/hour	Letter of acceptance of a grant or publication or letter of participation in peer review or participation in QI from the organization, journal or health care facility	
			<ul style="list-style-type: none"> Peer review of a clinical practice 	1 credit/hour		
			<ul style="list-style-type: none"> Peer review for journals or research grants 	1 credit/hour		
			<ul style="list-style-type: none"> Participating in or leading quality improvement projects 	10 credits/project		

CPD FRAMEWORK TABLE - CPD ACTIVITIES CATEGORIES

Category	Description	CPD Activities	Credit Rating	Supporting Documentation Requirements
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Continued..

3	Accredited Assessment Activities	<ul style="list-style-type: none">• Knowledge assessment programs• Simulation• Clinical audits• Multi-source feedback• Direct observation of procedures or performance in practice	2 credits/hour	Certificate, letter or report of completion or participation from the responsible organization	
		<ul style="list-style-type: none">• Feedback from annual performance review• Feedback on teaching effectiveness	2 credits/hour	Summary of the feedback from the responsible organization or participants	

Annual and Cycle Requirements

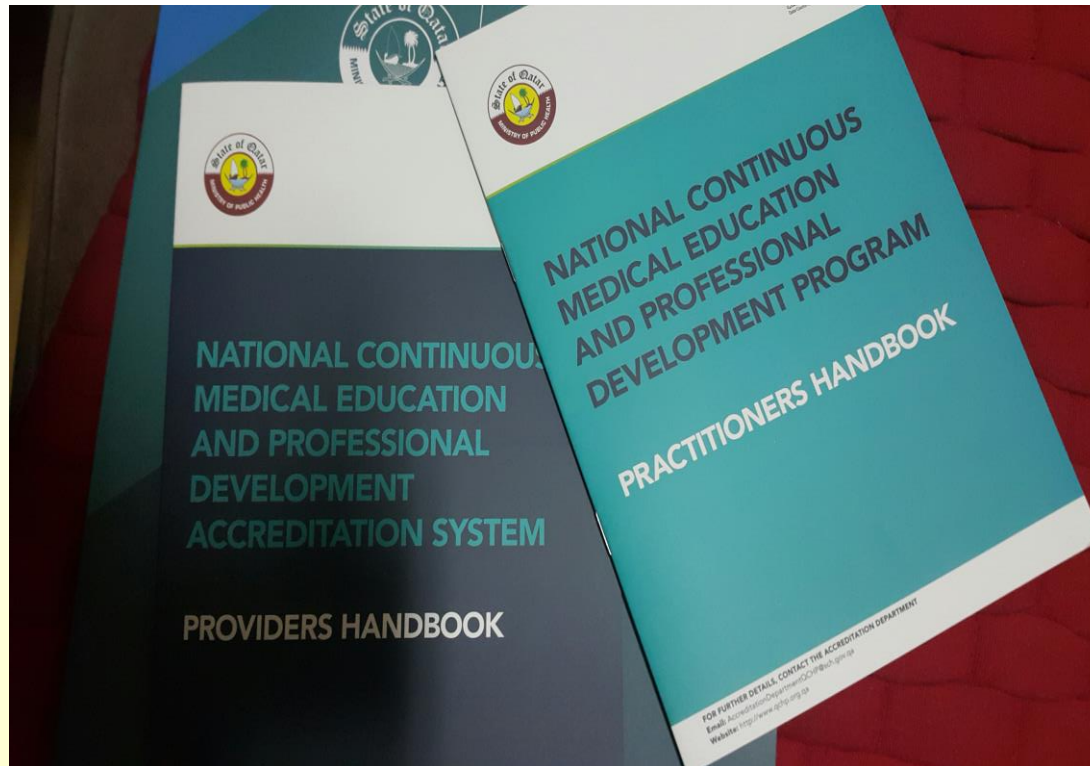
Duration between the CPD System launch and the date of renewal of licensure	Annual Credit Requirements	Cycle Requirements
Less than 3 months	None. Delay start of the CPD cycle until the date of renewal of registration	Not applicable
3 – 6 months	10 credits	Not applicable
6 – 9 months	20 credits	Not applicable
9 - 12 months	30 credits	Not applicable
12 – 15 months	40 credits	20 credits in Category 1 20 credits in Category 2 or 3
15 – 18 months	50 credits	25 credits in Category 1 25 credits in Category 2 or 3
18 – 21 months	60 credits	30 credits in Category 1 30 credits in Category 2 or 3
21 – 24 months	70 credits	35 credits in Category 1 35 credits in Category 2 or 3

The QCHP-AD has determined that healthcare practitioners will be permitted to transfer up to 10 credits (in any category) that they completed in the 6 months prior to the launch of the CPD Program. This ability to transfer credits is only applicable for the first CPD cycle.

Documentation

- Every healthcare practitioner is required to maintain an individual CPD activity record, which will constitute his/her CPD Portfolio
- A **CPD portfolio** will typically include:
 1. A planning section – to state the individual learning needs identified
 2. Ways in which the identified learning needs have been fulfilled (record of attendance)
 3. Evaluation of meeting learning needs, or professional development obtained

07 March 2016: Launching of the Mandatory CPD



QCHP-AD

- Visit: <http://www.moph.qa/qatar-council-of-health-practitioners/accreditation>



CPD-College of Pharmacy

<https://www.facebook.com/QUCPPD/>



4. Mandate of the CPD

The CPD-HCP is committed to the continuing professional development of pharmacists and other healthcare providers in Qatar and is aimed at supporting lifelong learning to ensure optimal patient care. This commitment has been included in one of the specific goals of the CPH under its strategic plan: [goal no. 3. *To contribute to the professional education of practitioners*].

5. Vision

The CPD-HCP will be recognized locally and globally as an accredited and distinguished provider of an innovative continuing professional development program for health care professionals. (August 2015)

6. Mission Statement

The mission of the CPD-HCP is to provide pharmacists and other healthcare professionals in Qatar with an accredited continuing professional development program that supports the implementation of the National Health Strategy through addressing their educational and professional needs towards lifelong learning, advancing expanded scope of practice, and healthcare outcomes. (August 2015)

Self and Observer-Assessed Training Needs and Professional Competencies of Practicing Pharmacists in the State of Qatar

Muna Al-Ismael, Reem Al Nakeeb, and Nadir Kheir
College of Pharmacy, Qatar University

Qatar Pharmacists Continuing Professional Development Needs Assessment Survey

Kerry Wilbur, BScPharm, AC
College of Pharmacy, Qatar University

Pharmacy in Qatar

- Contemporary patient care requires sustained pharmacist competency through maintenance and improvement of knowledge, skills, and performance
- Existing continuing professional development (CPD) models reflect a wide spectrum of international approaches to life-long learning
- The State of Qatar is an Arab emirate occupying a small peninsula in the Persian Gulf
- This gas- and oil-rich nation has an estimated population of 1.5 million (predominantly expatriate) and is purported to have the highest Gross Domestic Product in the world
- Qatar is an emerging economy but infrastructure for health care professionals lags considerably behind other developed countries
- There is no pharmacy regulatory body serving the protection of the public and there exists no non-academic society to represent or promote the profession
- Furnish of activities to maintain or advance knowledge and skills is largely self-directed and voluntary
- An individual bears no penalty for failure to participate in CPD as licensure to practice in Qatar is not linked to any continuing education (CE) requirement
- The actual number of pharmacists practicing in Qatar is unknown



Figure 1: Qatar

Table 1: Pharmacists in Qatar

Length of time since obtaining initial pharmacy degree	< 5 years	6-10 years	11-15 years	> 15 years
	17 (36%)	38 (79%)	21 (44%)	10 (21%)
Length of time practicing as a pharmacist in Qatar	< 2 years	3-5 years	6-10 years	> 10 years
	22 (47%)	34 (71%)	27 (56%)	10 (21%)



Figure 2: Country where highest pharmacy degree

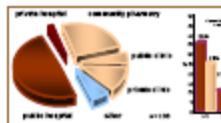


Figure 3 & 4: Pharmacy practice site and CPD activity

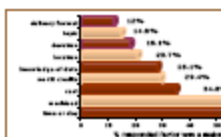


Figure 5: Barriers to CPD participation

Pharmacy Education in Qatar

- The College of Pharmacy at Qatar University is the first and only pharmacy degree program in the country
- The first students were enrolled in 2007
- As part of its specific objective to contribute to the professional education of practitioners, a CPD program has been established by the College of Pharmacy
- The QCPD program seeks to fill the void for development and delivery of CE for pharmacists in Qatar and while cultivating potential pharmacy student interest

Objectives

- A continuing professional development needs assessment was conducted to guide the development and implementation of a CPD program for pharmacists in Qatar

Methods

- A systematic review of allied health literature was conducted to identify published experience with creation and administration of a needs assessment survey
- Content from relevant papers were considered and adapted into our questionnaire
- Domains of interest included pharmacist demographics, access to internet resources, frequency and characteristics of past CE activities, preferences for delivery and content, barriers to participation, and plans for future CE activities
- The questionnaire was created in a web-based platform and following pilot at a final draft, the 10-minute survey was launched at pharmacist stakeholder meeting in April 2008
- Invitations to participate in the anonymous web-based survey were then emailed and faxed to 523 pharmacists

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Research Paper

Continuing professional pharmacy development needs assessment of Qatar pharmacists

Kerry Wilbur

College of Pharmacy, Qatar University, Doha, Qatar

Abstract

Objectives: Maintenance and improvement of knowledge, skills and performance for provision of contemporary patient care is at the core of continuing professional pharmacy development (CPD). Existing CPD models worldwide reflect different approaches to lifelong learning. Before implementing the first country-wide CPD programme in Qatar, pharmacists were surveyed to determine their specific continuing education (CE) needs, preferences and attitudes.

Methods: A systematic review of allied-health literature was conducted to help devise an anonymous web-based CPD needs-assessment survey. Questions were characterized into domains of interest including pharmacist demographics, internet access, frequency and characteristics of past CE activity, preferences for delivery and content, barriers to participation, and plans for future CE activities. All pharmacists in Qatar were invited to participate through e-mail and fax invitations.

Key findings: After 4 months, 134 of 523 (~25%) pharmacists had completed the survey. Practice sites (hospital and community) and gender were equally represented. Approximately one-third had no or inadequate internet access in the workplace. In the past 2 years, one-quarter had not attended any live local educational programmes. Major obstacles included poor timing (66%) and excessive workload (56%). Most pharmacists preferred interactive CE programme formats and one-third indicated Arabic as delivery language of choice. The majority expressed high motivation to achieve their CPD goals and only 12% outrightly opposed mandatory CE for pharmacist re-licensure.

Conclusions: Qatar pharmacists demonstrated support for enhanced CE opportunities. While views and preferences mirror those of colleagues elsewhere, current conditions merit careful consideration of CPD programme development and delivery, including language and technology capabilities.

Keywords: continuing professional development; needs assessment; pharmacists; Qatar; survey

- The online questionnaire was also sent to pharmacy students, and to members of 3rd group
- Two follow-up email reminders sent out
- Data collection started in Oct. and ended in Nov 2010

Statistical analysis

- The difference between group variables were calculated as means and standard error of the differences
- Between-group differences were expressed as Fisher's test and reported student's t test where statistical significance was expressed as p-value of < 0.05
- Associations between variables were measured using correlation statistics (Spearman Rank) in preference to Pearson Chi-square



Background		Table 1. Gender		Distribution and Years of Experience	
Gender	Percentage %	Gender	Percentage %	Years of Experience	Percentage %
Male	50%	Male	50%	0 years or less	10%
Female	50%	Female	50%	1 to 5 years	20%
				6 to 10 years	20%
				11 to 15 years	20%
				Over 15 years	30%

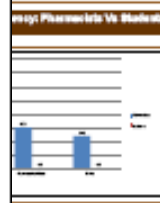
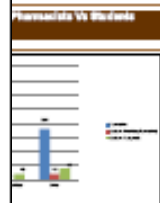
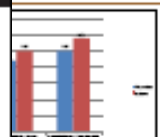


Figure 4: Satisfaction with Professionalism Pharmacists Vs. Student

Results

- Gender distribution of pharmacists is shown in Table 1, where the number of male pharmacists slightly exceeds that of female pharmacists (p = 0.85)
- The years of experience, among pharmacists, spread along a spectrum from 3 years or less (20%) to over 15 years (30%) (Table 1)

Results- cont'd

- Figure 1 compares the opinions of pharmacists on the most prevalent 4 topics identified in terms of importance in a CPD program with students
- Pharmacists identified Drug Information, Communication skills and Pharmacotherapy as their 1st, 2nd, and 3rd preferred activities to be provided early in CPD program, while students identified Communication Skills, Drug Information, and Health Promotion (p < 0.005)
- There was statistically significant difference in the proposed order of topics to be provided in a CPD program between pharmacists and students (p < 0.005)
- Years of experience, gender, or number of past CE events attended did not influence self-assessment of competency or how frequently the pharmacists perform certain professional pharmacy activities (p > 0.05)
- There was no association between the competency level of pharmacists as perceived by students and as self-assessed by pharmacists (p > 0.05) (Figure 2)
- The frequency of performing professional pharmacy activities as perceived by students were significantly lower than self-assessed by pharmacists (p < 0.001) (Figure 3)
- Pharmacists self-assessed competency level was consistently higher than that assessed by students (p < 0.001) (Figure 4)

Discussion

- This study provided an insight into self-assessed competency among pharmacists and pharmacy students in Qatar
- Identifying CPD needs of pharmacists represents the reflective process which is the first stage of a learning cycle and it helps tailoring relevant CPD programs
- The results showed that pharmacists were more inclined to choose face-to-face topics while students' preferences were more towards self-paced topics
- The same trend had been seen with the choice of the order of CPD topics
- While there was no association between responses of pharmacists and students, a high concordance existed between students and the group of academics, managers, and policymakers
- Pharmacists assessed their competence at higher level than that observed by the other two groups
- This trend was also seen in other areas such as frequency of performing activities and the satisfaction with professional competency
- This could be explained by Dunning-Kruger effect (people with poor competency will tend to overestimate their own level of skill)
- The variation between the perceptions of students and the pharmacists could also be explained by the fact that the cohort of students were receiving pharmacy courses based on an accredited program which uses RACPA standards, while most practicing pharmacists were graduates from pharmacy schools using local clinical programs

Conclusions

- Practicing pharmacists in Qatar perceived face-to-face topics to be priority in CPD programs with concordance with the perception of students
- Pharmacists' self-assessed competency level and satisfaction were consistently higher than observed by students and the pharmacy management, academics, and policy

Limitations

- Sample size of pharmacists was limited to pharmacists who had email and internet access

References

1. Dunning KR, Kruger JM. Unskilled and unaware of it: how difficult is self-assessment? *Am Psychol*. 1998;53:568-81.
2. Dunning KR, Kruger JM, Anderson DR. The unskilled and unaware of it: further explorations of the Dunning-Kruger effect. *Organ Behav Hum Decis Process*. 2003;87:467-81.

April 19, 2011

Dear Colleagues:

I am pleased to announce that the National Association of Pharmacy Regulatory Authorities (NAPRA) has formally approved a request to adopt and adapt Professional Competencies for Canadian Pharmacists at Entry to Practice (Second Revision, March 2007) for use in Qatar. In her correspondence to the college, Car Bouchard, Executive Director thanked Qatar for the acknowledgement of the quality of their work in producing these important benchmarks and was pleased to give permission to use these towards the advancement of pharmacy education and practice in this country.

With the NAPRA organization's permission and with acknowledge of the source, minor modifications to the professional competencies document have been made to reflect practice in Qatar. The original NAPRA competencies were incorporated into the 5-year BSc (Pharm) curriculum in 2007 and were approved in conjunction with the creation of the college by the Board of Regents under the leadership of the Her Highness Sheikha Tamim bin Hamad Al Thani in 2008. The competency elements also form a focus of the college's Continuing Professional Pharmacy Development Program currently under the coordination of Dr. Nadir Kheir.

The professional competencies for pharmacists at entry to practice have been endorsed by the Medical Licensure Department and the Pharmacy and Drug Regulation Department of the Supreme Council for Health, as well as some major employers of pharmacists in Qatar including Hamad Medical Corporation and Qatar Petroleum. A signing agreement between the college and the Supreme Council for Health is expected shortly.

We look forward to continuing to work with our partners towards the advancement of pharmacy education and practice in this country. Together we will achieve the Qatar Vision 2030 goal of delivering world-class educational and healthcare systems to meet the needs of Qatar's society.

Sincerely,



Dr. Peter J. Jewesson PhD ACPR FCSHP
Professor and Dean
College of Pharmacy
Qatar University
RTH



Competency Categories

There are seven basic competency categories in which a practicing pharmacist in Qatar should demonstrate proficiency. These are summarized in the following table:

#	Category	Description
1	Patient Care	Pharmacists, in partnership with patients and other health care professionals, use their unique knowledge and skills to meet patients' drug and health related needs and to achieve optimal patient outcomes and patient safety.
2	Professional Collaboration and Team Work	Pharmacists work in collaboration with other health care professionals to optimize patient safety and improve health outcomes.
3	Ethical, Legal and Professional Responsibilities	Pharmacists practice within legal requirements, demonstrate professional integrity and act to uphold professional standards of practice and codes of ethics.
4	Drug, Therapeutic and Practice Information	Pharmacists assume responsibility for accessing, retrieving, evaluating and exchanging relevant information to ensure safe and effective patient care.
5	Communication and Education	Pharmacists communicate with and provide education to groups and individuals in order to promote and support optimal patient care and well-being.
6	Drug Distribution	Pharmacists manage the drug distribution system to ensure the safety, accuracy and quality of supplied products.
7	Understanding Management Principles	Pharmacists apply knowledge, principles and skills of management with the goal of optimizing patient care and inter-professional relationships.

PRE-POST CPPD EVENT SELF-ASSESSMENT FORM

Title of Workshop: _____

Workshop Started at:PM Ended at:

Workshop Location: Trainer's Name:(optional)

LEARNING EXPERIENCE: Please rate the learning outcomes below using the following rating scale:

1	2	3	4
I have little or no understanding of the concepts covered	I have basic understanding of the concepts covered, but cannot demonstrate it	I have good understanding of the concepts covered and can demonstrate it with assistance	I have full understanding of the concepts covered and can demonstrate without assistance

How would you rate your learning experience on the following areas:

BEFORE TRAINING					
1	2	3	4	5	1.
1	2	3	4	5	2.
1	2	3	4	5	3.
1	2	3	4	5	4.

Continuing Professional Pharmacy Development (CPPD) Event Trainee Evaluation Form

Workshop Title _____ Workshop Duration _____

Facilitators _____ Date _____

Competency Standard

Thank you for participating in this workshop. Please spare few minutes to fill this short questionnaire, which will help us evaluate the workshop.

Are you Qatari?(Yes/No) -----

Demographics:

Place of Work (please select from the list below):

- ☐ Hospital Pharmacy
☐ Community Pharmacy
☐ Primary health care pharmacy
☐ Policy, regulation
☐ Academia
☐ Other (specify: _____)

Please rate this training workshop by placing a check in the space that expresses your judgement, and adding a comment where applicable (rating : 1=poor , 2=fair , 3=average 4=good and 5=excellent)

Evaluation Items	Rating					Comments
	1	2	3	4	5	
📌 Workshop Content						
-The topic was well structured and consistent with learning objectives.						
-The workshop materials were relevant, well organized and easy to follow.						
-The time allotted for this workshop was adequate.						
-The workshop met my expectations.						
📌 Workshop Facilitator 1: Name:						
-Clearly defined and explained course learning objectives/outcomes.						
-Was well prepared and organized.						
-Demonstrated command of the subject matter.						
-Presented the course materials in a clear and interesting way.						
-Maintained a class climate that was conducive to effective learning.						
📌 Workshop Facilitator 2: Name:						

Feedback on April, 24th CPPD session

- Generally speaking the event went well. It was well-organized in a professional manner. The speakers were highly prepared, provided their best, and tried hard to satisfy almost all the audience
- Few issues worth highlighting though:
 - o The time issue; since the didactic lecture took more time, the audience were already kind of bored because of the long lecture
 - o In my opinion, the concept of care planning was not translated into a clear meaning. It was kept as a concept. During the cases, many were not able to identify appropriate goals, or appropriate time frame. I think it would have been better to spend more time doing a case study with the audience specially that most of them are either from community or hospital pharmacists but not clinical ones. So the idea of care planning, alternatives, knowing what the guidelines really recommend, and the audience
 - o Pharmaceutical care planning and SOAP note writing are two different things. Putting them together led to some distractions of the audience. Next time, we were aiming for more oriented examples pertaining to all (HGH, HH, NCCCR,...) and vice versa with community/HC. If we had those separated into different sessions so that deep dive into each in a manner that would benefit all audience
 - o The room was almost filled with pharmacists but the problem was that not all figures were clear and some were small to be seen clearly. This could have caused losing some of the audience
 - o If possible for next time, during the discussions with the patients (if the lecturer asked a question or opened a discussion), try to cover as much as possible of the area. Many pharmacists were not giving answers to the questions but because they were at the end of the session which caused them at the end to stop participating!
 - o For the pre-post quiz, I think you might need to incorporate a question where you anticipate none of the audience to get 5/5 from the pre-quiz weren't much interested to what would be given. They were thinking that they are not going to get the content. Putting at least one DIFFICULT question would have been an answer and thus would stay focus.
- Case Discussions
 - o Case discussion session went well. The four groups (hospital, community, etc.) were enthusiastic and all members were participating with different ideas held as needed and settling to an opinion took place at the end of the session

Dana Bakdach

Title: Feedback on March, 19th, 2013 CPPD session entitled as medication therapy management
Date: April, 10th, 2013

Group 1:

- Group was assigned to provide a rationale for MTM project
- Members were all hospital pharmacists
- Team members were able to rationalize their service based on what was presented in the dedicated lecture
- Observations on group performance :
 - o Understanding that MTM is a special service that is provided for patients with multiple medical conditions, patients who are at higher risk for experience ADRs (geriatrics, pregnant ladies, impaired kidney function patients, impaired hepatic function patients) , and those with serious conditions
 - o Identifying the different steps included in MTM including comprehensive revision of the patient case, monitoring, follow up, and referral
 - o Linking the application of this service to decreasing the cost which is crucial for the acceptance of their proposal when reviewed by the stakeholders
- Overall intra-group discussion and communication was fascinating and it was obvious that the group had absorbed the lecture content and did their best to apply it while performing the post lecture exercise

Group 2:

- Group was assigned to describe the structural and other requirements required for establishing the MTM service:
- Members were a mixture of 2 students, 1 community pharmacist, 1 medical representative, and 1 clinic pharmacist
- Intra-group communication was respectful but there was a communication gap due to the difference in practice setting which take a longer time from each member to explain his/her ideas to the other group members and more effort from the facilitator to ensure the smooth progression of the exercise outcome
- Highlights of group members comprehension and application of dedicated lecture content :
 - o Although it took time to efficiently start the discussion, members raised the idea of formulating regulations, having access to electronic health records, standard operating procedures, and marketing tools
 - o They bring up the importance of initiating training programs
 - o They attractively overlapped with the other groups when they mentioned cost and other basic technical requirements such as computers, telephones, as well as the different types of promotional materials

Overall: based on my observations, I can see that both groups had fully digested the lecture content. Focusing on building creative working groups and having authorities support they will create successful MTMSs

Sunday, April 28, 2013

CONTINUING PROFESSIONAL DEVELOPMENT 2014-2015 Activity Details

#	Month	Topic	Speakers (affiliations)
1-	Sep 30	Launching: Advancing Pharmacy Practice in Qatar: A Regulator- Academia Partnership Model	Dr. Samar Albsoud (SCH)
2-	Oct 21	Counseling on Natural Health Products: A tool Kit to Pharmacists	Dr Sherief Khalifa (CPH), Dr Maral Yazdandoost (CPH), Dr. S K (Well care group)
3-	Nov 17	OSCEs: How to achieve practice standards for licensure and continual competency assessment	Dr. Kyle Wilby (CPH), Dr. N Kheir (CPH)
4-	Dec 22	The care for geriatric patients	Dr. Monica Zolezzi (CPH), M Al Salimy (Hamad Medic Corporation-HMC)
5-	Jan 19	Patient Safety	Dr. Shane Pawluk (CPH), I Hisham Aljadhey (King Sa University), Mr. Imran Khu (HMC)
6-	Feb 23	Online Drug Information Resources: A Toolkit to help pharmacists get it right	Mrs. Alla El Awaisi (CPH), I Eman Remodan (HMC)
7-	April 20	An Introduction to Pharmacogenomics	Dr. Hazem Elewa (CPH)
8-	May 12	Pharmacist Management of Diabetes Patients during Ramadan	Dr. Kerry Wilbur (CPH), C Nadir Kheir (CPH)
9-	Jun 15	How to educate newly diagnosed cancer patients in the day care	Dr. Shereen El Azzazy (Nati Center of Cancer Care ar Research-NCCCR), Dr. Far Jibril (NCCCR)

CONTINUING PROFESSIONAL PHARMACY DEVELOPMENT 2015-2016 Activity Details

#	Month	Topic	Proposed Speaker(s)	Need Assessment
1.	Oct 21 st	New Models of Healthcare: Evidence from Research Findings		Observed Need
2.	Nov 23 rd	A bundle of Communication Skills to the healthcare provider		Expressed need
3.	Dec 26 th	Sport Pharmacy: A role for the Pharmacist?		Emerging professional service
4.	Jan 18 th	Travel Medicine: An opportunity for interprofessional healthcare providers		Emerging professional service
5.	Feb 22 nd	Managing Diabetes: an Interprofessional Collaborative Approach		Expressed need
6.	Mar 22 nd	Exercise and Life Style Modification as a Tool in Cardiac Rehabilitation: What does it mean exactly?		Observed Need
7.	April 25 th	Conducting Medication Management: an emerging service		Expressed need/emerging professional service
8.	May 23 rd	Women Health		Expressed need

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CPPD#9: Pharmacist Management of Diabetes Patients during Ramadan



CPPD#10: "How to Educate Newly Diagnosed Cancer Patients in the Day Care"



National Patient Safety Conf-CPD-Q-NK 2016

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