

IDENTIFICATION OF EDUCATIONAL OBJECTIVES FOR PHARMACEUTICAL CARE IN RESIDENCY PROGRAMS IN THE HOSPITAL AREA

Gonsalves, Z. S.^{1*}; Calil-Elias, S.²; Castilho, S. R.²

¹UFF Faculty of Pharmacy/Graduate Program in Sciences Applied to Health Products - PPG-CAPS – Address: 523, Mário Viana street - Santa Rosa - Niteroi, Rio de Janeiro, Brazil

²UFF Faculty of Pharmacy, Address: 523, Mário Viana street - Santa Rosa - Niteroi, Rio de Janeiro, Brazil*
zildagonsalves@id.uff.br

Introduction

Pharmacy residency programs emerged in the hospital scenario as a way of reorganizing health services, focused on integrated practice. Characteristically, competency-oriented curricula must align teaching-learning methodologies, pedagogical practices, different learning contexts and scenarios, assessment methods and research activities with curriculum organization principles⁽¹⁾. Considering these criteria, the objective of this research was to discuss competency-based training by evaluating educational objectives for Pharmacy Residency Programs, with a focus on pharmaceutical care processes in the hospital scenario.

Materials and Methods

This is a case study of the Fluminense Federal University Residency programs for pharmacists. This stage verified the perception of professors, tutors/preceptors and graduates about professional activities and educational goals to identify the competences to be developed in residency programs in hospital pharmacy service. The research was approved by CEP - HUAP/UFF. from the multiprofessional and unique professional residency programs at Fluminense Federal University (UFF). The research was developed in two stages.

First, there was the creation of a data collection tool, which was based on documents from SBRAFH⁽²⁾ and on a “Quality Assurance in European PHARmacy Education and Training” questionnaire⁽³⁾. The form was structured in Professional Profile and Domain (Competence Area) of “Pharmaceutical Care”.

The evaluation focused on the resident pharmacist's activity in promoting the rational use of medicines, with a focus in clinical care. To obtain these dates, six (6) Educational Objectives (EO) was evaluated.

In the study, three standard questions were asked for each EO: 1. What is the relevance of the educational objective for this domain? 2. How can you identify the level of competence (Intermediate, Advanced or Full), and the moment (semester) of the course that each of these levels should be reached? 3. What is the level of learning, which the evaluator considers that the resident should reach at the end of the training process?

In the second stage, 70 professionals were invited to answer the questionnaire and evaluate the Domain and EO: two (2) coordinators, six (6) teachers (three (3) from each program), 10 tutors, 20 preceptors and 32 graduates. They were recruited by e-mail with an invitation letter containing a link to access the Informed Consent Form (ICF) and an electronic questionnaire. The research was approved by the Research Ethics Committee (REC) from the University (CAAE No.: 21292919.7.0000.5243).

Results and Discussion

From the invited individuals, 48 (68,6 %) answered the survey questionnaire. The data related to the professional profile were: Occupation of respondents: 1 (2.1%) Coordinator - 8 (16.7%) Tutors - 10 (20.8%) teachers - 11 (22.9%) preceptors, and 16 (33.3%) graduates. Regarding the type of residency program: 40 (83.3%) work or studied in the hospital pharmacy residency program (in a professional area) and 10 (20.8%) in the multiprofessional residency program.

The evaluation of the domain “Pharmaceutical Care” showed the relevance of the EO proposed were considered "Essential" by teachers and that the "Full" level can be reached at the end of the Residency in 98 % of the EO. The last point evaluated showed that the level of learning at the end of the course, in most objectives, permeates the “To do” stage of Apply to Create (Figure 1).

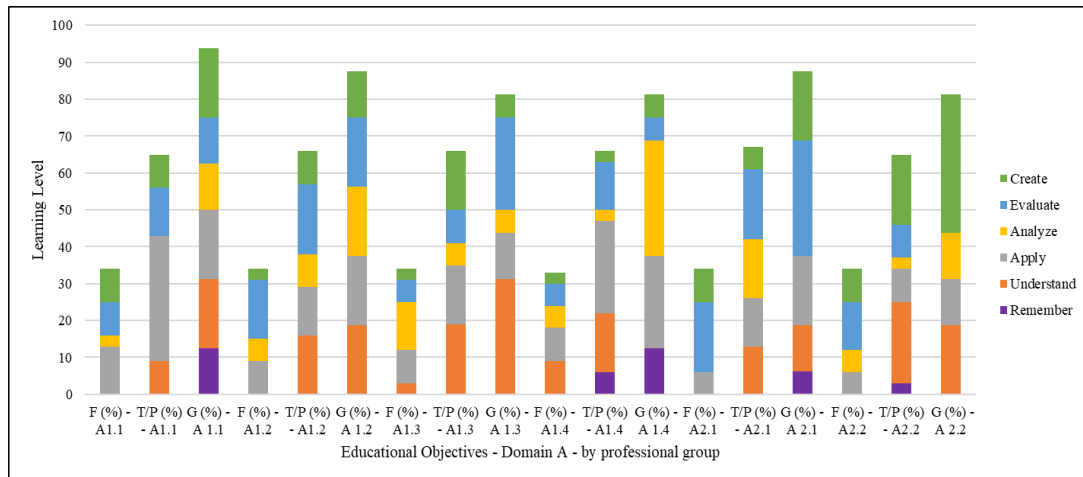


Figure 1 - Perception of the learning level of residents according to Faculty (F), Tutors/Preceptors (T) and Graduates (G) related to the Domain "Pharmaceutical Care for the Patient" - Rio de Janeiro (RJ), Brazil, 2021

It can be observed from the results that the participants think that training in pharmaceutical care is essential up to the level of application of the activity. Such analysis is in line with the resident's training profile, where 80% of the course must be practical⁽⁴⁾.

In Brazil, advances in the curricular bases of graduate courses for teaching pharmaceutical care are incipient in the global scenario. Many of the professionals involved in teaching residents have not had any learning in the pharmaceutical care in their curricula; and for them, the residency course is the best possible performance. Also, the educational goals proposed in this domain are in accordance with standards and competences defined by the FIP for hospital pharmaceutical professionals, and by some countries in Europe, as well as standards for pharmacy residencies in the USA⁽⁵⁻⁸⁾.

Conclusion

The majority assessment for the aspect of relevance as "Essential" for the educational goals facing the practices of pharmaceutical care, associated with checking the progress of performance levels according to the periods (semesters), and defining the level of learning that residents should be reached at the end of the course can help in the guidelines for the training of hospital pharmacists, and can serve as a basis for certification by SBRAFH of Residency Programs for hospital pharmacists in Brazil. Future studies are needed to propose the adoption and incorporation of competency-based training strategies in residency programs for pharmacists in Brazil.

Acknowledgments

Thanks to FAPERJ (Faperj's Edictal 22/2016 – Emergency Support for *Stricto Sensu* Graduate Programs and Courses in the State of Rio de Janeiro Project E -26/200.930/2017) and CAPES (Finance Code 001).

Bibliographic References

1. ASHP. Guidance document for the ASHP accreditation standard for postgraduate year one (PGY1) pharmacy residency programs. 2020.
2. SBRAFH. Standards for Pharmaceutical Residencies in Hospitals and other Health Services – PaRes. 2nd ed. 2017.
3. PHAR--QA. The European network evaluation of the PHAR-QA framework. The PHAR-QA “Quality Assurance in European PHARMacy Education and Training” project. 2015.
4. CNRMS. Resolution N° 5, of november 7, 2014 - Provides for the duration and workload of residency programs. Vol. 217, DOU de 11.8.2014 - Edição extra. Seção 1. Brasília, Brazil; 2014. p. 34.
5. FIP. FIP Global Conference on the Future of Hospital Pharmacy: Final Basel Statements [Internet]. Basel; 2008 Dec [cited 2021 May 17]. Available from: www.fip.org/globalhosp.
6. ASHP. Required competency areas, goals, and objectives for postgraduate year one (PGY1) pharmacy residencies. American Society of Health-Systems Pharmacists. Ottawa; 2015.
7. RPS. Professional Standards for Hospital Pharmacy Services [Internet]. Royal Pharmaceutical Society. 2017 Dec [cited 2021 Jul 28]. Available from: [https://www.rpharms.com/Portals/0/RPS document library/Open access/Professional standards/Professional standards for Hospital pharmacy/Hospital Standards-2017.pdf?ver=2017-12-21-132808-697](https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/Professional%20standards%20for%20Hospital%20pharmacy/Hospital%20Standards-2017.pdf?ver=2017-12-21-132808-697)
8. AACP. Directory of Residencies, Fellowships, and Graduate Programs [Internet]. American College of Clinical Pharmacy. 2021 [cited 2021 Jul 29]. Available from: <https://www.accp.com/resandfel/index.aspx>