



IIOp

INSTITIÚID CÓGAISÍOCHTA NA hÉIREANN
IRISH INSTITUTE OF PHARMACY

Practice Review Policy

Title:	Practice Review Policy		
Version:	5.0		
Effective Date:	25.03.2021		
Review frequency:	Annually		
Author:	Michelle Scott, Irish Institute of Pharmacy		
Approved By PSI Council	25 March 2021		
Date of last internal IIOp review:	25 March 2021	Reviewed by:	Alicia O'Dwyer
Date of last review by PSI Council:	25 March 2021		

Table of Contents

1	Abbreviations	2
2	Introduction & Scope	2
3	Overview of Practice Review Process	3
4	Peer Led Approach.....	4
5	Blueprint development.....	4
6	Pharmacist Selection Process	4
7	Indicative Timeline for Communications and Practice Review Event.....	5
8	Practice Reviewer Training.....	6
9	Extenuating Circumstances.....	7
10	Principles of Practice Review	7
11	Practice Review Analysis.....	7
12	Application of Practice Review standards.....	8
13	Final Outcomes & Delivery of Results.....	8
14	Cases where further review is required.....	8
15	Appeals Process	9
16	Disclosure of information to third parties	9

1 Abbreviations

CKR	Clinical Knowledge Review
CPD	Continuing Professional Development
Executive Director	Executive Director of the Irish Institute of Pharmacy
IIOP	Irish Institute of Pharmacy
MCQ	Multiple Choice Question
PSI	Pharmaceutical Society of Ireland
QEO	Quality Enhancement Office
RCSI	Royal College of Surgeons in Ireland
SPI	Standardised Pharmacy Interaction

2 Introduction & Scope

In August 2013, the Irish Institute of Pharmacy (IIOP) was established by the Pharmaceutical Society of Ireland (PSI) with a mandate to oversee the management and delivery of the new system of Continuing Professional Development (CPD) for pharmacists in Ireland, and to promote excellence in patient care and professional standards.

Legislation requires that all pharmacists undertake continuing professional development (CPD). The Pharmacy Act 2007 introduced mandatory CPD for pharmacists in Ireland. Furthermore, Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015 (S.I. No. 553/2015) (CPD Rules 2015) sets out the CPD obligations for pharmacists, and provides for a requirement for pharmacists practising in patient-facing roles to participate in Practice Review.

The IIOP's aim is to support pharmacists in meeting the requirements of this legislation, through the facilitation of the Practice Review process.

The Council of the PSI may elect, in any year, to cancel Practice Review, subject to any concerns it may have, that any event, beyond its reasonable control, such as a pandemic, could impact on the safety of hosting the events.

3 Overview of Practice Review Process

Practice Review is a....

*“direct evaluation ... of the **knowledge, skills and judgement of the pharmacist**, against a standard established in consultation with **peer pharmacists practising in patient-facing roles**, having regard to the Core Competency Framework for Pharmacists, with particular reference to those **competencies dealing with patient care**, including **clinical knowledge**, the ability to **gather and interpret appropriately information** from and about patients, **patient management and education and communication (including counselling) skills.**”*

Pharmaceutical Society of Ireland (Continuing Professional Development) Rules 2015, S.I. 553 of 2015

The CPD Rules 2015 therefore sets out the requirement for Practice Review under four competencies:

1. Clinical Knowledge
2. The ability to gather and interpret appropriately information from and about patients (Referred to throughout the process as Gathering Information)
3. Patient Management and Education (referred to as Management Strategies & follow-up (including patient education))
4. Communication (including Counselling) Skills

It is important that pharmacists have ample opportunity to demonstrate their competence in each competency during Practice Review. Therefore the process involves two different components.

Practice Review also incorporates elements which prompt CPD and reflective practice throughout the process in line with Rule 12(4) of CPD Rules 2015.

3.1 Clinical Knowledge Review (CKR)

Demonstration of Clinical Knowledge is reviewed as part of the Clinical Knowledge Review (CKR) component. In the CKR, pharmacists are presented with eighteen patient based cases and are asked to answer three multiple choice questions (MCQs) on each case (resulting in a total of fifty four MCQs). Each question is developed and reviewed by peer pharmacists.

3.2 Standardised Pharmacy Interactions (SPIs)

A series of Standardised Pharmacy Interactions (SPIs) form the second component of Practice Review. The three remaining competency areas identified in the legislation are reviewed during the

SPIs. Each SPI is designed to be reflective of situations with which pharmacists practising in patient-facing roles would be expected to be capable of dealing, such as counselling a patient on a prescription medication, providing advice to someone on the treatment of a minor ailment or dealing with an enquiry from a healthcare professional. These interactions are designed, developed and reviewed by peer pharmacists. Pharmacists will undertake seven SPIs, in addition to an initial trial run SPI which does not contribute to the review results.

4 Peer Led Approach

The CPD Rules 2015 states that the standards applied in Practice Review shall be “*established in consultation with peer pharmacists practising in patient-facing roles*”.

In line with legislation, peer pharmacists practising in patient-facing roles are involved throughout the Practice Review process in a number of roles;

- Blueprint development
- SPI case writing
- SPI case review
- SPI Quality Assurance
- MCQ writing and review
- Practice Reviewer
- Standard setting for the CKR
- Practice Review Board

5 Blueprint development

The scope of Practice Review is established during a blueprint development process in consultation with peer pharmacists practising in patient-facing roles, under the direction of a psychometrician.

The process involves completion of a questionnaire in which pharmacists are asked to consider what should be included in the review from two perspectives;

1. Competencies in the PSI’s Core Competency Framework (CCF)
2. Clinical Topics from the British National Formulary (BNF)

The blueprint determines the core competencies and clinical topics that are within scope for the SPI and CKR components of Practice Review.

6 Pharmacist Selection Process

All pharmacists practising in patient-facing roles are eligible for selection for Practice Review as per CPD Rules 2015. The Pharmaceutical Society of Ireland (PSI) selects pharmacists at random from the

Register of Pharmacists in line with the legislation in place. Following this selection process, the PSI communicates with the pharmacist advising them of their inclusion in Practice Review on a defined date.

This communication reiterates the importance of the pharmacist ensuring that their IIO communication address is valid and current. The PSI selection process includes managing requests from pharmacists who wish to be excluded on the basis of extenuating circumstances.

7 Indicative Timeline for Communications and Practice Review Event

Call for participation in Practice Review

Pharmacists receive a communication by email from the PSI advising them that they have been selected for Practice Review and indicating the date on which they are required to present for Practice Review.

The PSI provides the IIO with a list of pharmacists that are selected for Practice Review, including the date on which these pharmacists are required to present for Practice Review, at least four months prior to a defined Practice Review event. A maximum of 36 pharmacists can undertake Practice Review per Practice Review event.

Pharmacists are issued with a letter and an email from the IIO advising them that they are included in the forthcoming Practice Review. Pharmacists are advised in the letter that they must ensure that they have the correct email address registered with the IIO, as all communication from that point will be via email.

Pharmacists are provided with information about the process, logistical arrangements and directed to support materials. Online access to support materials for Practice Review is available to all pharmacists via the IIO website.

Reminder email

Approximately ten days in advance of a Practice Review event, pharmacists receive an email with key information points and logistics.

Practice Review Event

Practice Review events take place twice annually over two weekends in Dublin. Pharmacists are required to present at the designated time for registration on the allocated date at the Practice Review event location.

Review Analysis

Following the Practice Review event the SPIs and the CKR are analysed and the review outcomes compiled following standard setting processes.

Practice Review Board

A Practice Review Board meeting takes place following completion of the review analysis. The role of the Practice Review Board is:

- To provide external oversight of Practice Review process
- To note and address any issues that pharmacist participants encountered during Practice Review
- To review and approve the standards for Practice Review
- To review and approve the final outcomes of Practice Review
- To identify cases where referral of a pharmacist to the PSI is required

The Practice Review Board will take account of the outcomes from the review of the report on the pharmacist's CPD activities referred to in Rule 11(1) of CPD Rules 2015.

Performance Feedback Reports

Pharmacists receive a Performance Feedback Report approximately eight weeks after the Practice Review event.

8 Practice Reviewer Training

The role of the Practice Reviewer is to observe pharmacists undertaking the SPIs, and to objectively record when the pharmacist demonstrates the required skills and competencies.

For each SPI, a list of observable actions relating to each of these three competencies has been developed by a group of peer pharmacists. The Practice Reviewer observes the pharmacist undertaking the SPI and records when they observe these actions.

Under each of the three competencies the Practice Reviewer also completes a global competency rating. This enables the Practice Reviewer to give a general account of the pharmacist's overall performance for that competency. It is independent of the checklist.

Practice Reviewers are selected by the IIOP from an expression of interest cohort.

Practice Reviewers must undertake specific training for the role to ensure a standardised and robust approach. This training includes information on how to use the checklist in an objective and standardised manner.

9 Extenuating Circumstances

The PSI communicates by email with the pharmacist if they have been selected for Practice Review indicating the date on which they are required to present for Practice Review. If a pharmacist believes that they have grounds to be exempted from Practice Review on the basis of extenuating circumstances, they must seek this exemption directly from the PSI. This includes situations where extraordinary, unforeseen circumstances arise until close of registration on the morning of the defined Practice Review event. All applications must be made directly to the PSI in accordance with the relevant PSI Extenuating Circumstances policy.

An extenuating circumstance is regarded as a circumstance beyond the control of the individual, which has had and/or will have an impact on the pharmacist's ability to present for Practice Review.

The PSI will notify the IIOOP of successful outcomes of applications for exemption on the basis of extenuating circumstances. If a pharmacist is successful in their application for exemption on the basis of extenuating circumstances, the IIOOP will remove them from the Practice Review process.

10 Principles of Practice Review

Along with the requirements under Data Protection legislation, and in line with Principle Three of the Code of Conduct for Pharmacists, pharmacists should ensure that confidentiality is respected following participation in Practice Review.

A Principles of Practice Review declaration has been developed as an explicit articulation of the IIOOP's commitment to fairness and transparency. Participating pharmacists are required to sign this declaration. This document asks that pharmacists agree to act professionally in line with the Principles of Practice Review, to include maintaining confidentiality of cases and not removing/circulating materials from any component of the Practice Review process in order to ensure that Practice Review remains robust and fair for all pharmacists. Practice Reviewers are also required to sign this declaration.

All pharmacists involved as peers during the Practice Review process, working on behalf of the IIOOP, are obliged to sign a confidentiality undertaking prior to commencement of their duties.

11 Practice Review Analysis

Analysis of the outputs from the CKR and SPI component of Practice Review is conducted under the direction of a psychometrician using appropriate quality assurance and statistical approaches to analysis in accordance with the IIOOP Practice Review Analysis process.

12 Application of Practice Review standards

The Practice Review Board meets following completion of Practice Review analysis. A presentation is provided to the Practice Review Board to outline quality assurance processes and the recommended cut scores according to the IIOIP Practice Review Analysis Policy.

There are three scenarios in which referral of a pharmacist to the PSI are required;

1. Non participation - If a pharmacist fails to present for Practice Review by close of registration of their allocated Practice Review event.
2. If a pharmacist is assigned an outcome of competence not demonstrated following a maximum of three Practice Review attempts.
3. In cases where the Practice Review board identifies that the performance of a pharmacist during Practice Review indicates an immediate risk to patient safety.

13 Final Outcomes & Delivery of Results

Pharmacists receive a Performance Feedback Report approximately eight weeks after undertaking Practice Review.

This report outlines whether demonstration of competence was observed during Practice Review, in each of the four competencies dealing with patient care as indicated in the CPD Rules 2015.

There are four initial potential outcomes for Practice Review:

1. Competence demonstrated in all competencies
2. Further review required for Clinical Knowledge competency
3. Further review required for SPI related competencies
4. Non-participation

Pharmacists may receive a combination of outcome two and three above if further review is required for both clinical knowledge and SPI related competencies.

If a pharmacist has not demonstrated an appropriate level of competence following one to two subsequent Practice Review attempts within one year of notification of initial outcome, they will be assigned an outcome of competence not demonstrated.

14 Cases where further review is required

If a pharmacist is assigned with an outcome where further review is required within any competency during Practice Review, the IIOIP will initiate a support process dependent on the specific needs of the pharmacist in line with the relevant IIOIP processes.

Pharmacists may be afforded further opportunities to undertake relevant components of Practice Review to a maximum of two subsequent Practice Review attempts which must be undertaken within one year of notification of initial outcome.

15 Appeals Process

The IIOIP takes seriously its responsibility to have a mechanism in place to allow pharmacists to appeal outcomes of the Practice Review process. The relevant IIOIP appeals process lays out the procedures for appeal.

16 Disclosure of information to third parties

The Practice Review process is managed by the IIOIP, and should be considered a quality assurance process for the profession. Information submitted by pharmacists to the IIOIP is treated in the strictest confidence.

The IIOIP makes every reasonable effort to ensure that all pharmacists are supported and engaged throughout the Practice Review process. However, referral to the PSI may be required according to section 12 of this policy. This will be a fully transparent process and any communication with the PSI will be with the full knowledge of the pharmacist.