

Plenary Sessions

Plenary Sessions**Plenary Session 01****NEW DEVELOPMENTS ON PHARMACY EDUCATION**

Ian BATES

The School of Pharmacy, University of London, United Kingdom

Bio

Ian Bates is Professor of Pharmacy Education at the School of Pharmacy, University of London and Head of Educational Development. He is currently on secondment to the NHS in North-Central London, as workforce development facilitator for three large university teaching hospitals in London. He is Director of the FIP Global Education Taskforce, an international team appointed by the International Pharmaceutical Federation (FIP), WHO and UNESCO, and additionally Editor-in-Chief of Pharmacy Education, an international journal for pharmaceutical education, which publishes peer reviewed research and development in both undergraduate and postgraduate fields. Professor Bates is Professional Secretary of the UK Clinical Pharmacy Association (UKCPA), a Fellow of the Royal Statistical Society and a Trustee for the European Pharmaceutical Students' Association. Ian has a first degree in pharmacy, and went on to further advanced studies in neuro-pharmacology, biopharmacy and toxicology before settling down to work for a living in the National Health Service. He was later tempted into an academic career, and teaches on a wide range of subjects from clinical pharmacokinetics to medical sociology, which has subsequently fuelled his reformist tendencies in higher education. Applied statistics retains a particular attraction for Ian, but not for anyone else.

Abstract

The lecture will explore current trends in higher and professional education and assess the potential impact on practice and pharmaceutical care. In particular, the current policies on CPD will be evaluated and matched against the evidence base and theoretical issues. Health care policies related to service provision, the patient safety agenda and practitioner regulation will be placed in context. We will examine the evidence base and attempt to find a pragmatic view of the concept of professional education in a contemporary world. The presentation will try to establish links with the notion of professional competence and performance, and will argue that the real debate should be about how to ensure practitioner competence. Above all, we will discuss the potential value of experiential learning as applied

to a needs-based education model (education fit for local needs). The lecture will aim to define new career pathways for practitioner development that satisfy policy trends whilst providing an infrastructure for development of higher levels of practice. Education policies will be discussed, and an assessment made of likely impact on workforce development and future pharmaceutical care delivery.

Plenary Session 02**LESSONS LEARNED IN TEACHING CLINICAL ASSESSMENT SKILLS TO PROFESSIONAL PHARMACY STUDENTS**

Bill BOYCE

College of Pharmacy, Oregon State University, United States

Bio

Robert (Bill) W. Boyce went to Oregon State University and obtained a B.S. degree in Pharmacy graduating June 1977. After graduation he began his 21 year career in the Public Health Service (PHS), assigned to the Indian Health Service. He worked at several locations, Fort Defiance Indian Hospital and Winslow Indian Health Center on the Navajo Indian Reservation in northern Arizona; Clinical Support Center in Phoenix, Arizona and Chemawa Indian Health Center in Salem, Oregon. He also did a short detail to the Pharmacy Directors office for the Indian Health Service and USAID in Washington, DC as a disaster relief consultant. During his time in Phoenix, he coordinated and developed the Pharmacist-Patient Consultation Program which was released in 1990 and is still being used in schools and colleges of pharmacy in the United States. In 1993, Bill developed and directed the first ASHP non-hospital special practice residency in primary care which later received a full 6 year accreditation. Honors that Bill received during his time in the PHS include being selected as a Fellow of American Society of Health Systems Pharmacist, PHS Surgeon General's Exemplary Service Award, and the 47th Julius W. Sturmer Memorial lecture. In August 1998, Bill retired from the Public Health Service as a Captain and accepted the position as Director of Pharmacy at the Oregon State University Student Health Center, and instructor in pharmacy practice. At Oregon State University he developed and was the course master for pharmacy practice 740, 741 and 742. This is a required course where pharmacy students develop their clinical pharmacy assessment skills. Just recently, Bill has step aside from course master and is assisting in the series and teaching patient counseling to first year pharmacy students and has continued as the

Director of Pharmacy at the Student Health Center.

Abstract

Presentation will present an overview of the development and evolution of a pharmacy practice course for second year professional pharmacy students at Oregon State University. Assessment of student clinical skills, including the use of objective structure clinical exams (OSCE's) for final exams, Student Auscultation Manikin (Cardionics), blood pressure simulation and other simulations will also be discussed.

Objectives:

At the end of the presentation the participants will be able to:

1. Describe the evolution of the curriculum in the development of a clinical skills assessment course to second year professional pharmacy students
2. Explore and apply assessment strategies for student evaluations.
3. Discuss strategies to involve faculty and volunteers in objective structure clinical exams (OSCE)
4. Utilize simulations to enhance student learning.

Plenary Session 03

TRANSFORMING MEDICAL COMMUNICATION TO AN EFFECTIVE DIALOGUE

Debra ROTER

Department of Health, Behavior and Society, Johns Hopkins University, United States

Bio

Dr. Debra Roter is Professor of Health, Behavior and Society at the Johns Hopkins Bloomberg School of Public Health and holds appointments of Professor in the Schools of Medicine and Nursing and the Kimmel Comprehensive Cancer Center. She has authored over 200 articles and book chapters and authored or edited 3 books related to the subject of patient-health care provider communication. She is recognized by the Web of Science as among the highly cited authors in the social sciences.

Dr. Roter's work is especially notable in regard to its contribution to measurement of communication dynamics through worldwide adoption of her method of coding medical dialogue, the Roter Interaction Analysis System (RIAS). The RIAS is the most universally used system of its kind with current translations in 9 languages (Spanish, French, Portuguese, Dutch, German, Swedish, Japanese, Korean, Chinese) and 225 published studies to date (in English language journals) using the system.

She is currently Principal Investigator of two NIH funded studies. The first is an NICHD funded study to assess oral literacy burden of medical communication and develop an ameliorative

patient activation intervention for pregnant women with poor literacy skills. The second, funded by a joint US/UK partnership between the NIH and the ESRC, explores communication issues associated with health disparities in the identification and treatment of depression among African American and white patients in the US and African Caribbean and white patients in the UK. Over her career, she has been PI on ten NIH grants, Co-PI on 8, and co-investigator on more than 30 grants and contracts.

Abstract

Literacy deficits are widespread; one-quarter the US population has below basic literacy skills and comparably low rates have been reported across Europe. The health consequences of literacy deficits are well known and significant. While the need to simplify written health education print material is widely recognized, there has been little attempt to reduce the literacy demand of the medical dialogue. Patients with limited literacy complain they are not given information about their problems in ways they can understand leaving them uninformed, frustrated, and distrustful. These issues are of great importance to all health care providers and especially so for pharmacists.

The objectives of this address are threefold: first, to explore the role of communication in the critical domains of cognition and emotion, second, to consider the cognitive challenges of complex communication and its consequences in terms of patient satisfaction and recall of information, and finally, to propose practical ways by which small but critical changes can transform complex communication to an effective dialogue for all patients.

Plenary Session 04

NATIONAL COMPETENT AUTHORITY (NCA): ROLE ON INFORMATION

Helder MOTA FILIPE

Faculty of Pharmacy, University of Lisbon, Portugal

Bio

Helder Mota Filipe Dias was born on 8 October 1965. Completed his degree in Pharmaceutical Sciences from the Faculty of Pharmacy, University of Lisbon in 1990, when he began his teaching activity as teacher assistant and researcher. Achieved the degree of Doctor of Pharmacology from the same University in 1996 and completed the post-doc at The William Harvey Research Institute (Department of Experimental Medicine) in London in 1999. He is currently Associate Professor of Pharmacology, Professor of Immunopharmacology and researcher at the Unit of Pharmacology and Pharmacotoxicology, Faculty of Pharmacy University of Lisbon. Over the years he has also given its contribution as a

member of the Drug Evaluation Committee, the National Ethics Committee for Clinical Research (CEIC), the Directorate of the Portuguese Society of Pharmacology and as an expert at the EMEA, between other national and international activities. Throughout his career he authored more than a hundred communications to scientific meetings and more than 40 articles in various international publications in the fields of pharmacology and experimental medicine. Since 2005, holds the office of Vice President of Infarmed, the Portuguese national authority for medicines.

Abstract

Infarmed - National Authority for Medicines and Health Products, is the Portuguese competent authority, legally supervising the medicines and health products market. Providing information on medicines is one of the main goals of the European NCAs. Infarmed developed several information tools for health professionals and citizens in order to promote the rational use of medicines. Since five years ago, the combat to counterfeited medicines was also considered an important mission. Some of Infarmed's experience information activities on counterfeiting and the role of the national authority on public health care and medicines will be presented and discussed.

Plenary Session 05

WORDS DON'T COME EASY- HOW CAN WE IMPROVE WRITTEN MEDICINE INFORMATION

Parisa ASLANI

Faculty of Pharmacy, University of Sidney, Australia

Bio

Associate Professor Parisa Aslani has been a researcher and educator in the field of consumer medicine information and adherence for the past 16 years. In the last 8 years, A/Prof Aslani and her research colleagues have received over \$2.6 million in research funds from both public and private sectors, including the recent \$1 million tender from the Department of Health and Ageing managed by the Pharmacy Guild of Australia, for developing and evaluating Consumer Medicine Information (CMI). A/Prof Aslani also leads a project funded by the Heart Foundation which aims to develop an education package on adherence to cardiovascular medications for nurses, pharmacists and general practitioners. A/Prof Aslani has co-authored 5 books, > 45 peer-reviewed journal articles, and numerous contributions to professional journals.

Her research addresses areas of fundamental significance: the design of CMI; and, issues that impact the Quality Use of Medicines (QUM), specifically adherence to therapy.

Abstract

Background: Anecdotal and research evidence has highlighted the limited use of Consumer

Medicine Information (CMI) in Australian community pharmacies. Issues related to the document itself, and its limited provision by pharmacists, has been cited as reasons for why consumers are not regularly receiving CMI.

Aims: This study aimed to consolidate the evidence related to CMI effectiveness, and substantiate the validity of anecdotal evidence. It aimed to develop and evaluate alternative CMI formats to ensure optimal effectiveness and best practice delivery in community pharmacy practice.

Methods and Findings: This project consisted of several steps. The presentation will focus on, firstly how evidence from the literature and a needs analysis step (consisting of focus groups and quantitative surveys with consumers and healthcare professionals), together with information design, functional linguistics and medicine information expertise, was used to develop new alternative CMI for both a prescription and pharmacist-only medicine. Secondly, it will demonstrate how the consumer user-testing process of the alternative CMI formats was used as an iterative process in CMI development. Finally, the results of trialling the new CMI in community pharmacies across three Australian states will be presented.

Conclusions: Existing Australian CMI can be improved through the input and involvement of consumers, and experts in information design, functional linguistics and medicines information. Several alternative CMI formats were developed; most performing better than the currently available ones. The new formats overall were better utilised and received by participating pharmacists. Consumers demonstrated a preference for a summary one-page CMI for the study prescription medicine and a more detailed CMI for the pharmacist-only medicine. A more detailed version was reported to be the most useful in information content

Acknowledgements: This project was funded by the Australian Government Department of Health and Ageing through the Fourth Community Pharmacy Agreement and managed by the Pharmacy Guild of Australia.

Plenary Session 06

PREVENTIVE HEALTH CARE AND THE NEW COMMUNICATION CHANNELS

Arnstein FINSET

Department of Behavioral Medicine, University of Oslo, Norway

Bio

Arnstein Finset is Professor and Head of Department at Department of Behavioural Science, Institute of Basic Medical Sciences, Faculty of Medicine, University of Oslo. He has a background in clinical neuropsychology and rehabilitation medicine. His primary current area of research is in clinical health communication. He is

currently Editor-in-Chief of Patient Education and Counseling.

Abstract

Abstract: Different traditions of writing scientific papers in social science on one hand and in medicine and pharmacy on the other will be discussed. Suggestions will be presented for how these two traditions may be combined in papers in the area of social pharmacy, and some examples of such papers will be discussed.

Plenary Session 07

WORKSHOP CLOSURE AND FUTURE ORGANIZATION

Timothy F. Chen

Faculty of Pharmacy, University of Sidney, Australia

Bio

Tim Chen is a pharmacist with clinical hospital and community pharmacy experience. He completed his Diploma in Hospital Pharmacy in 1989 and his PhD in 2002. Tim's main area of research has focused on the development of professional roles for pharmacists in the area of medication review and mental health. He is the academic coordinator for the graduate Masters of Pharmacy programme and coordinator for the Mental Health unit of study. Tim contributes to several national organisations including the National Prescribing Service Research & Development Working Group. Tim's doctoral research involved the first major Australian study evaluating the role of the pharmacist in conducting medication review and interprofessional collaboration between pharmacists and medical practitioners. This body of research and his subsequent studies in medication review have helped inform a model for practice which has been taken up by the Commonwealth Government. Tim leads a productive research team which includes main supervision of six PhD candidates. He has published three books on medication review and more than 50 scientific papers. Tim has been an invited speaker at numerous national and international conferences. Tim was awarded the medal for Young Pharmacist of the Year Excellence Award by the Pharmaceutical Society of Australia (2001) in recognition of his research and teaching in Home Medicines Review.

Abstract

The 16th International Social Pharmacy Workshop (ISPW) was held in Lisbon, Portugal, from 23rd to 28th August 2010, under the Chairmanship of Afonso Cavaco. ISPW is a conference well known for the quality of presenters; long-standing friendship and collaboration formed between delegates; and an open and supportive environment for exchange of ideas between new and experienced social pharmacy researchers, from across the globe.

The primary aim of this presentation is to provide an overview of some of the key messages and notable highlights of the workshop, both scientific and social. The secondary aim is to oversee the nominations for and selection of the next host nation for the 17th ISPW. A range of methods will be used to gather data for this presentation, pending ethics approval of the Scientific Committee of ISPW. These include personal observation/s and reflection, unstructured interviews with delegates, use of the LISBOA-PC scale (a validated instrument for benchmarking conferences) and most importantly, with the assistance of delegates (anecdotes and photos gratefully received). Qualitative and quantitative data will be triangulated and systematically abstracted.

The second part of this session will involve a series of short presentations from those interested in hosting the next ISPW in 2012, after which delegates will submit their preferences for analysis. As background information, past workshops were held in New Zealand (2008), United Kingdom (2006), Malta (2004), Australia (2002), Finland (2000), Belgium (1998). Finally, "The Bell" hand-over ceremony will see the formal closure of the 16th ISPW and hand-over to ???? for the next ISPW.