



**International Pharmaceutical Federation
Fédération Internationale Pharmaceutique**

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FIP STATEMENT OF POLICY QUALITY ASSURANCE OF PHARMACY EDUCATION

Preamble

Many countries have expanded or are expanding and/or undertaking a major reform of pharmacy education. Others have only recently established educational programmes for pharmacists. Further, education for pharmacists is not offered in a significant number of countries. In 2000, FIP published its *Statement of Policy on Good Pharmacy Education Practice (GPEP)*.¹ The GPEP statement is aimed primarily at pharmacy educators and education policy-makers and it provides a conceptual framework for the design, implementation and assessment of contemporary educational programmes.

This statement is intended as a companion piece to FIP's *Statement of Policy on Good Pharmacy Education Practice*. The two documents have a different yet complementary focus.

Introduction

Globally, pharmacy practice and education are undergoing unprecedented changes as additional roles for pharmacists, as providers of health-care services and as scientists, are increasingly recognised and valued. Many countries are, however, faced with critical shortages of pharmacists, pharmaceutical scientists and pharmacy support personnel needed to manage all aspects of the pharmaceutical supply chain (from research and development to production, wholesale distribution and dispensing). These critical shortages also affect the availability of pharmacist-provided patient-care services for patients and communities. In Uganda, for example, there is one pharmacist for every 140 000 people; local health authorities estimate that there is only one-third of the required pharmacist workforce in the public sector.² The WHO has concluded that in many countries health-care targets cannot be realised until sufficient workforce (capacity) is built in the health-care system.³ A primary focus in this regard is the development of an adequate and appropriate health-care workforce, along with the academic and institutional infrastructure to deliver the required competency-based education and training.

Background

Multiple stakeholders have a strong interest in the quality of pharmacy education, notably: governments, policy-makers and regulators; the academic community; leaders and practitioners

¹ FIP Statement of Policy on Good Education Practice. 2000.

² Matsiko CW, Kiwanuka J. A review of human resources for health in Uganda. *Health Policy and Development* 2003; 1(1):15-20.

³ World Health Organization. *The world health report 2006: working together for health*. © World Health Organization 2006.

in the pharmacy profession; students; sponsors and funders of education; and ultimately the public. Many countries have well-established systems of quality assurance (QA) for institutions of higher education, some of which include internal processes and self-assessment. The majority of QA systems are governmental, but a growing number have some degree of independence with varying levels of government oversight. National QA systems specific to pharmacy education are, however, not as prevalent. FIP, WHO and UNESCO have recognised a need to build capacity and expertise in this regard. Whether nationally or regionally applicable, QA systems must ensure that educational programs are competency-based, reflect a vision for pharmacy practice and education developed through profession-wide consensus, are of high quality and appropriate, and meet the needs of the country and its people.

The *International Forum for Quality Assurance of Pharmacy Education* was established within FIP to promote and facilitate international dialogue and collaboration in the area of QA of pharmacy education. Members of the Forum recognised a need for greater international consensus regarding QA of pharmacy education but believed that global standards, as had been developed for medical education⁴, were not appropriate. Therefore, the Forum developed a *framework* to identify the *core principles* and *elements* considered essential for an effective approach to QA of pharmacy education. Broad input was sought and incorporated into the document in 2008 version one of the *Global Framework for Quality Assurance of Pharmacy Education* (“*Framework*”) was completed, adopted by FIP’s Bureau and launched at FIP’s Third Global Pharmacy Consultation in Basel, Switzerland.⁵

The *FIP Framework* is intended as a foundation that can be adapted and built upon to suit national needs, systems and conditions. It focuses on the elements that need to be included and how these elements are applied in principle rather than being too specific or prescriptive. The *Framework* does not advocate for any one model or QA system but describes different approaches to QA and emerging trends.

Reflecting a heightened commitment to enhance and expand global efforts in pharmacy education development, FIP convened two consultations (2006 and 2007) on pharmacy education. Following these consultations, a *Pharmacy Education Taskforce* was established with the support of FIP, WHO and the United Nations Educational, Scientific and Cultural Organization (UNESCO). An Action Plan for 2008-2010 was adopted, which incorporated the top four priorities (“domains”) identified during the two consultations. These domains are: quality assurance, academic and institutional capacity, competency framework and vision for pharmacy education.⁶ Completion of the *Framework* initiated by the Forum was a priority for the *Pharmacy Education Taskforce* in view of its strong alignment with complementary initiatives in WHO and

⁴ World Federation for Medical Education Global Standards www.wfme.org

⁵ The *Framework* is posted on FIP’s website www.fip.org/education.

⁶ See www.fip.org/education

UNESCO. While it is envisioned that the *Framework* will primarily be used at a national level in the context of QA or review by “external” evaluators, it was recognised that the *Framework* could also be used by individual institutions in their self-assessment and quality improvement efforts. With this application in mind, the *FIP Framework’s* quality criteria have been incorporated into a tool for institutional self-assessment for schools of Pharmacy.

It is the belief of FIP that in order to support the development of an adequate and appropriate pharmacy workforce and the academic and institutional infrastructure to deliver the required competency-based education and training, each country should have its own standards-based system for the quality assurance of pharmacy education. The QA system should:

- Reflect the vision for pharmacy practice and education that has been developed through profession-wide consensus
- Allow appropriate input from all stakeholders, including students and the public
- Ensure that educational programs are evidence and competency-based, of high quality and meet the needs of the people, the pharmacists and their country
- Evaluate programmatic outcomes as well as institutional structures and processes
- Be transparent and be free of inappropriate influences and appearances of conflicts of interest in its development and implementation
- Promote and foster self-assessment and continuous quality improvement of educational institutions
- Be accountable to the appropriate governmental authorities

Against this background, FIP recommends and encourages the following action by stakeholders:

National Governments, Regulatory and Quality Assurance Organisations:

- Establish or enhance systems for quality assurance of pharmacy education that are based on standards or criteria of quality, and policies and procedures, which have been developed with broad stakeholder involvement, and provide opportunity for ongoing stakeholder involvement, including the public.
- Establish, enhance or adopt competency-based educational outcomes that reflect a profession-wide vision for pharmacy practice and education, and meet national needs.
- Promote innovation and mission-related differences among institutions, while maintaining full compliance with standards of quality.
- Establish consequences for educational institutions that fail to remedy areas of non-compliance with standards, or otherwise fail to comply with policies and procedures in a timely manner.
- Review the *FIP Framework* and consider its applicability, adoption or adaptation to support the development or improvement of pharmacy education.

- Consider the applicability of the *FIP Framework* to the establishment and maintenance of regulatory mechanisms used to assure educational preparedness and entry-to-practice competency of pharmacists.

Member Organisations:

- Collaborate with all key stakeholders to:
 - develop or revise the national vision for pharmacy practice and education based on current and future needs
 - develop and implement strategies to work towards the achievement of the vision
- Establish or enhance collaborative working relationships with other organisations to advance health-professional education, including inter-professional educational opportunities, and other quality-related educational initiatives.
- Encourage members to support and be actively involved in the education of pharmacists including serving as preceptors for student and intern pharmacy practice experiences.
- Review the *FIP Framework* and consider its applicability as a basis for collaborative efforts with government, regulatory and quality-assurance organisations to support the delivery and advance the quality of pharmacy education in the country and region.
- Collaborate with FIP to validate and revise the *Framework* and other quality-assurance related tools and resources.

Universities, Colleges and Schools of Pharmacy:

- Facilitate collaborative working relationships with other departments of the academic institution, as well as research, business, technical and community partners.
- Involve all stakeholders, including students, wherever possible, in quality assurance and quality advancement strategies and activities.
- Foster and maintain an institutional culture of assessment and continuous quality improvement.
- Advance professional practice through community engagement.
- Review the *FIP Framework* and consider its applicability for adoption or adaptation to support the delivery and quality assurance of contemporary, evidence-based, patient-centred curricula for pharmacy education.
- Collaborate with FIP to validate and revise the *Framework* and other quality-assurance related tools and resources.

Proposed use of the FIP Framework

The *FIP Framework* is offered as a tool to facilitate the establishment of QA systems and standards in countries where no such formal systems exist and to improve existing systems. Where regional similarities and collaborations exist or are possible, the *FIP Framework* may also be adapted and applied at a regional rather than national level. Where resources or other

constraints limit the immediate application of some of the principles of the framework, the document can serve as a “road map” to the future.

Supporting document: *A Global Framework for Quality Assurance of Pharmacy Education*

Proposed by the International Forum for Quality Assurance of Pharmacy Education.