



Views of key healthcare stakeholders on the implementation of a clinical pharmacy competency framework for hospital pharmacists in Austria: a pilot study

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Background and Objective

Competency frameworks for clinical pharmacists in hospital practice exist across Europe. In 2017 the EAHP (European Association of Hospital Pharmacists) published their own CTF (Common Training Framework) as a foundation for European countries to adapt to their needs. In a previous study phase, this research team adapted the CTF specifically for Austrian hospital pharmacists. This study now aimed to explore the views of Austrian key healthcare stakeholders on the possible implementation of such a competency framework for hospital pharmacists in Austria.

Design

This qualitative semi-structured interview study was conducted in key healthcare stakeholders across Austria. An interview-guide was developed based on the CFIR (Consolidated Framework for Implementation Research). Question topics included personal experiences; opinions; necessity and legal issues relating to the implementation of the framework (CFIR domains Innovation, Outer Setting, Inner Setting and Individuals). A participant information leaflet, consent form and letter of invitation were developed. 22 key Austrian healthcare stakeholders from eleven different fields of healthcare practice were identified ranging from patient representatives to officials from the Ministry of Healthcare in Austria. The recruitment process, and face-to-face interviews were piloted in two stakeholders (hospital pharmacist and education sector). Interviews were recorded, transcribed and analyzed using framework analysis using the CFIR domains.

Main outcome measures

Barriers and facilitators related to framework implementation.

Results

Results aligned with the five domains of the CFIR, plus one in the Outcomes Addendum. A total of 26 sub-domains were identified. Both participants consider, that defining competencies for clinical pharmacists in Austria is necessary to facilitate interdisciplinary working and improve patient safety. Furthermore, participants stated that a solid education, followed by further education and training and additional qualifications, are of highest importance to fulfil the requirements of the stated competencies. Concerns were raised about the lack of clear definitions around professional boundaries and clinical responsibilities.

Conclusion

Results have captured invaluable information about key concerns that need to be addressed when aiming to implement a competency framework for Austrian hospital pharmacists. This will inform the development of specific implementation recommendations in the future.

Acknowledgements

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Quotes

P1: II. Outer Setting Domain; B. Local Attitudes

"(...) It facilitates (...) cooperation (...) with doctors (...)"

P1: I. Innovation Domain; C. Innovation Relative Advantage

"(...) patient safety can definitely be improved through this".

P2: III. Inner Setting Domain; A.3. Work Infrastructure

"If you (...) take on additional (...) competencies, then you will simply need more staff (...)"

P1: IV. Individuals Domain; C. Opportunity

"It [Competency Framework] ensures that colleagues are certain about what they are allowed to do and not [professional boundaries]"

P2: V. Implementation Process Domain; C. Assessing context

"[It is a concern] that certain tensions are created between those who are supposed to work together [namely doctors and pharmacists]"

P2: I. Antecedent Assessments; A. Acceptability

"Clinical pharmacists have competencies that they [have due to their education and further training], which (...) are helpful for doctors and improve patient care".

Domains/Sub-themes identified Pilot 1	Domains/Sub-themes identified Pilot 2
I) Innovation Domain	I) Innovation Domain
B. Innovation Evidence-Base	C. Innovation Relative Advantage
C. Innovation Relative Advantage	F. Innovation Complexity
II) Outer Setting Domain	II) Outer Setting Domain
B. Local Attitudes	B. Local Attitudes
C. Local Conditions	C. Local Conditions
E. Policies and Laws	E. Policies and Laws
G. External Pressure	F. Financing
G.1. Societal Pressure	
G.2. Market Pressure	
III) Inner Setting Domain	III) Inner Setting Domain
A. Structural Characteristics	A. Structural Characteristics
A.3. Work Infrastructure	A.1. Physical Infrastructure
E. Tension for change	A.3. Work Infrastructure
G. Relative Priority	J. Available Resources
I. Mission Alignment	K. Access to Knowledge and Information
J. Available Resources	
IV) Individuals Domain	IV) Individuals Domain
B. Mid-level Leaders	D. Implementation Facilitators
C. Opinion Leaders	Characteristics Subdomain A. Needs
D. Implementation Facilitators	
I. Innovation Recipients	
Characteristics Subdomain B. Capability	
Characteristics Subdomain C. Opportunity	
Characteristics Subdomain D. Motivation	
V) Implementation Process Domain	V) Implementation Process Domain
C. Assessing Context	B. Assessing Needs
D. Planning	B.1. Innovation Deliverers
E. Tailoring Strategies	C. Assessing context
I. Adapting	
Outcomes Addendum	Outcomes Addendum
I. Antecedent Assessments	I. Antecedent Assessments
B. Appropriateness	A. Acceptability
Other	Other

Table 1 Domains and sub-themes identified



Link to the Competency Framework

References

- European Association of Hospital Pharmacists (EAHP), Common Training Framework (CTF), 2017; <https://static1.squarespace.com/static/56d2b676746fb93b0-ba3e3d8/t/5a6f4b3b53450a84e9ef0e48/1517243196884/CTF+EAHP-Competency+framework.pdf>
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