

Methodological approach of a multi-method study to allow the development and implementation of a clinical pharmaceutical competency framework for hospital pharmacists in Austria

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Background

Competency frameworks (CFs) from hospital pharmacists are successfully implemented in many countries around the world (e.g. Australia, UK etc.). The successful development and implementation of such a bespoke framework however, continues to pose a considerable challenge.

Purpose:

This study aimed to justify the chosen methods needed to develop and implement a bespoke national competency framework.

Methods:

An adopt and adapt approach is often used in the development of CFs. To this end a systematic review (SR) was carried out as a first step in this multi-method approach (s. figure 1) to comprehensively collate all published CFs. The protocol was registered with PROSPERO and the documents' quality assessed to allow a robust selection of included CFs. The most applicable competency framework to adapt to the Austrian context was identified to be the Common Training Framework (CTF) for hospital pharmacy practice across Europe. After extracting behavioural competencies from all additionally identified documents, discursive analysis within the team (BBM/JTS/AEW) assessed contextual national appropriateness and allowed mapping of the selected behavioural competencies to the CTF. This resulted in a preliminary national competency framework. Validation was carried out by an expert panel consisting of the board members of the Austrian Association of Hospi-

tal Pharmacists AAHP), which led to the final version of the competency framework. This resulted in the final version of the competency framework. The final step in this multi-method study was an analysis of possible barriers and facilitators for its implementation into practice. A phenomenological approach was chosen using face-to-face interviews with key healthcare (policy) stakeholders across Austria. The interview study used the domains of the Consolidated Framework for Implementation Research (CFIR) to underpin interview guide development and framework analysis (s. figure 2).

Findings:

The development of the bespoke competency framework and the related identified barriers and facilitators helped to inform a law change for hospital pharmacists in Austria which enables hospital pharmacists to work under the delegation of a medical prescriber. This represents the first significant role extension for hospital pharmacists since 1984.

Conclusion:

This multi-method approach could serve as a supporting guideline for other countries that might struggle when trying to develop and implement a bespoke competency framework for hospital pharmacy practice.

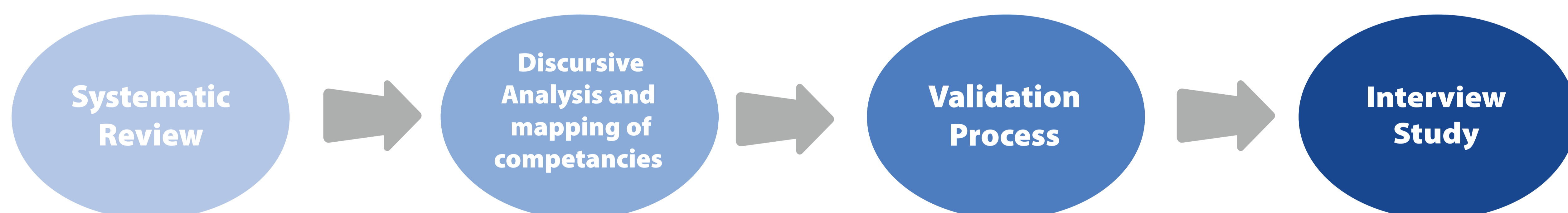


Figure 1: Multimethod approach graphically displayed



Figure 2: Link to publication about the updated CFIR (Damschroeder et al., 2022)