

## President's Section

### *Picking up the Pace...*

### Nontraditional Education

David A. Knapp

*School of Pharmacy, University of Maryland at Baltimore, 20 North Pine Street, Baltimore MD 21201-1180*

By the year 2000, almost 75 percent of the nation's schools and colleges of pharmacy will offer the PharmD as the sole first professional degree. This dramatic change, accompanied by improvements in both the content and process of pharmaceutical education, will better prepare graduates to take responsibility for the outcome of drug therapy in their patients. This is pharmaceutical care.

The move to PharmD programs has been supported by the largest national practitioner organizations, with the caveat that academia would take care of current practitioners when the time comes. Academia has defined a new curriculum, and outcome competencies will soon be established through the Center for Advancement of Pharmaceutical Education (CAPE). Current practitioners need the opportunity to achieve these competencies, or demonstrate them, and earn the PharmD.

As Lowell Anderson pointed out in his keynote address at the annual meeting in July, the health care system needs pharmacists today who are equipped to deliver pharmaceutical care. The system not only can't wait for our students who are just entering the pipeline, but also the demand cannot be met by new graduates alone. Our current practitioners must participate by learning and performing new roles.

Many practitioners not only can, but have, adopted new roles and are participating in health care change. They are the lifelong learners who have kept up, been perceptive and are in the forefront of change. Another large group has most of the knowledge, skills, and abilities to provide pharmaceutical care, but aren't quite convinced that they know what it is or that they can do it themselves. A smaller group lacks the will or the willingness to adapt, and will be observers as change passes them by.

Our schools and colleges must pick up the pace to provide the educational tools necessary to help current practitioners deliver pharmaceutical care. There is much we can do through nontraditional education: curricular-based continuing education, certificate programs, and feasible, reasonable approaches to earning the PharmD degree. Providing these opportunities is critical to keeping our part of the bargain with practitioners.

We should not let rhetoric about degree exchange or grandfathering divert us from developing legitimate programs to help practitioners earn the Pharm.D. It is reasonable for practitioners to expect educators to:

- Take seriously their concerns about the change in the entry level degree. This applies both to the substance of the change and the degree title.
- Help them understand what additional knowledge, skills and abilities are part of the entry-level Pharm.D. program, and give them the opportunity to obtain them.
- Recognize that the degree title change is significant in the practice environment, and work with the profession to avoid employer discrimination based upon degree title rather than competency.
- Establish feasible programs to provide the opportunity to earn the PharmD at a reasonable price and in a feasible manner.
- Develop programs that are truly nontraditional. One striking conclusion from CAPE's May Conference on nontraditional education was how traditional current "nontraditional" programs really are!

On the other hand, practitioners must understand the legitimate concerns of educators. It is reasonable for educators to expect practitioners to:

- Recognize the need for quality in nontraditional programs. The curriculum proposals of the Change Commission result in an education program much different from those which have gone before. The degrees will not be interchangeable. Educators want to make sure that everyone earns the Pharm.D. degree by exhibiting similar outcome competencies.
- Understand that nontraditional education must be self-supporting. The budgets of our schools and colleges are almost entirely devoted to entry-level education. With the exception of small amounts of funding for core support at some schools,

all of the costs of adult education must be borne by the learners.

- Realize that nontraditional education is more complex to develop and deliver than is the entry-level curriculum which deals with fewer students located in one place. The potential demand for nontraditional education is at least ten times larger than that for entry-level education.

Nontraditional education leading to the doctor of pharmacy degree is a project that truly requires a partnership between the profession and academia. Both have much to gain by working together to find a reasonable solution to meet the demands of a profession that needs the education that we have to offer.