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## **Using the PCNE classification in Continuing Professional Education**

### **Background**

Pharmaceutical care process has to be structured to help practitioners to provide comprehensive service, asking right questions and providing right answers to the patients. In educational activities it is important to develop not only the knowledge, but also skills to use adequate tools in decision-making process.

### **Purpose**

In CE activities participants always appreciate well-organized process and materials, so it was decided that DRP classification and Medication review templates would be used in 2 main courses organized on the national level. Purpose was to encourage the participants to document the data in pharmaceutical care process and to find out how helpful those tools are in decision-making process.

### **Method**

PCNE classification of DRP was used in 2 different workshops in Croatia, on topics: Asthma and Hypertension. Both workshops were repeated 5 times in different cities all over country.

The participants filled DRP tables while the case studies were presented. After the participants were recognizing DRP, we have teach them how to set priorities in decision making process. They were suggesting their own created plans for pharmaceutical care according to these findings.

### **Findings**

It was obvious that DRP classification has helped the participants to collect important data and to ask right questions in pharmaceutical care process. Organizing data in the table was very helpful to recognize the priorities and make decision about solving the problems in pharmacotherapy. Participants were active and open for discussion as DRP were listed and suggested in advance, so they were sure what they are looking for and what they suppose to identify in conversation wit their patients. In the evaluation forms they have rated the workshop with highest grades.

### **Conclusion**

PCNE classificarion of DRP as well as templates for medication review could be helpful to the practitioners if they are well presented and implemented in CE

activities. National organisations should validate translation of those documents and recommend their use in community setting.

Those templates could be useful also in collecting data and documenting pharmacists work, and also in IT support in community pharmacies.