3. A COMMON CURRICULUM

3.1 What is a curriculum?

This curriculum is intended to guide education and training for healthcare professionals in their work with patients and their medication. It sets out a series of intended learning outcomes and associated educational content about medication adherence. The curriculum may be adapted for different levels of study and incorporated into existing education and training curricula for health professionals.

"It sets out a series of learning outcomes and associated educational content about medication adherence"

3.2 Who can use this curriculum?

This curriculum was principally developed for the professions of medication, pharmacy and nursing, although it will also be of relevance to other health professions that are involved in medication adherence. Specifically, it can be used by:

Education and training providers

- In the initial education of health professionals
- In postgraduate education and training programmes

Individual students and health professionals

- To assess own performance and identify gaps in knowledge and skills
- To identify education, training and professional development needs

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Regulatory and professional bodies

- To set standards
- To provide a framework for accreditation of health professionals
- To identify and remedy poor performance

3.3 How to use the curriculum

The educational content outlined in the curriculum may be incorporated into any of the following examples of learning and teaching activities that encourage active student participation:

- Interactive small group workshops
- Interaction with simulated patients and feedback on performance
- Case studies
- Directed and self-directed study
- Inter-professional learning activities
- Personal reflections on placement activity

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3.4 A common curriculum for managing and supporting medication adherence with patients

COMPETENCY AREA	LEARNING OUTCOMES	EDUCATIONAL CONTENT
Communicating with patients about medication	1. Listen actively to patients 2. Help patients to interpret information in a way that is meaningful to them	Theory, evidence, best practice and techniques on: ▪ Effective patient centred communication, including non-verbal communication, in relation to medication ▪ Reflecting on and developing communication skills
	3. Define and agree the purpose of consultations with patients 4. Demonstrate up-to-date knowledge of area of practice and wider health and social services	Theory, evidence, best practice and techniques on: ▪ How to effectively prepare for and manage consultations with patients ▪ Maintaining up-to-date professional knowledge and skills appropriate to own role ▪ Maintaining up-to-date knowledge of effective interventions and practical resources to support patients with medication adherence, and current terminology on adherence ▪ Evaluating and improving / developing broad strategies and policy aimed at managing and supporting adherence ▪ Working in partnership with colleagues and service providers to support patients with medication adherence
Managing and supporting medication adherence	5. Recognise that the patient is an individual 6. Discuss illness and treatment options, including no treatment 7. Decide with the patient the best management strategy 8. Support the patient with medication-taking	Theory, evidence, best practice and techniques on how to: ▪ Understand the patient's current circumstances and previous experiences and how these may impact on their beliefs and behaviour about their illness and its treatment. This includes recognising beliefs and behaviours found to be detrimental to adherence (e.g. low self-efficacy) ▪ Discuss with the patient their current symptom experience and management, and health outcomes related to treatment options, including no treatment. ▪ Discuss and agree with the patient their preferred option for treatment and the treatment decision ▪ Recognise non-adherence (i.e. identify patients at risk of non-adherence, assess patients' adherence and recognise the effects of non-adherence) ▪ Identify reasons for / causes of non-adherence, and barriers to future adherence ▪ Manage adherence by providing effective practical support where the patient needs / wants help with adherence ▪ Support patients by providing ongoing information and feedback (including encouraging patients to come back with any questions), and monitoring adherence

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