

#### **Department of Addictology**

First Faculty of Medicine and General University Hospital in Prague Charles University in Prague

### Quality Standards and Quality Assurance Systems in Addiction Specific Academic Education and Trainings: From curricula doctrine to competency models

Michal Miovsky GCCC Session: ISSUP Annual Conference Abu Dhabi. Thursday, May 12<sup>th</sup> 2022.

### **A Major Challenge in addiction field**

- Scientific research is not being translated to the workforce and we have a poor dialog between science, practice and employers.
- Addiction remains misunderstood, resulting in nonevidence-based practices for prevention.
- Failure of non-scientific interventions results in loss of public confidence in the field

<u>Conclusion</u>: We need to do a better job of preparing the addictions workforce and improve dialog between academic sphere, professional societies, workforce and employers – **including quality system and standards**.

# **C O** The Global Context

- Addiction Prevention and Treatment is not recognized as a unique field; incorporated within other disciplines:
  - <u>Treatment</u>: psychology, public health, medicine, social work, nursing
  - <u>Prevention and HR</u>: psychology, public health, communications, education, communication
- **Tangential and fragmented focus**; multidisciplinary specialization is lacking
- University consortium needed to shape the discipline and advocate for formal academic training programs in addiction studies and standard quality system for staff and for methods/interventions.

# Addiction specific infrastruture: position of prevention (Miovský et al., 2019)

Addiction discipline/field (theories, methods, and terminology)					
	$\checkmark$				
(A) Self-help and patient activities	(B) Service providers	(C) Addiction studies			
(A1) Self-help groups	(B1) Prevention services	(C1) Specialized journals			
(A2) Recovery groups	(B2) Treatment and rehabilitation services	(C2) Research centres			
(A3) Natural recovery	(B3) Harm reduction and risk reduction services and activities	(C3) Professional societies			
(A4) Patient initiatives		(C4) Specialized libraries and			
		documentation centres			
(A5) Public interest groups		(C5) Training and education			
		programmes and institutions			
		(C6) Funding agencies and policy			
		makers			

Fig. 1. Key disciplinary components in the field of addiction.



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#### NATIONAL ADDICTION-SPECIFIC INSTITUTIONAL INFRASTRUCTURE – FUNDAMENTAL PREREQUISITE FOR SUCCESSFUL IMPLEMENTATION OF SPECIALIZED ACADEMIC DEGREE STUDY PROGRAMMES: A CASE STUDY IN HISTORICAL PERSPECTIVE

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#### SUMMARY

Objective: Human resources are crucial for addiction treatment and prevention services, as well as for science and research. The aim of this historical case study is to explain and demonstrate the role of specialized university academic degree study programmes in addictions in the context of a national institutional infrastructure. This specific group of very highly specialized academic programmes represents the highest level of professional development and is producing a totally new generation of addiction specialists with a very distinctive professional identity.

Methods: The study protocol is based on a case study research design and the case is defined as the historical development of addiction specialized institutions closely related to self-help, prevention, and treatment activities on the historical territory of the Czech Republic. We identified relevant historical sources related to establishing and/or running activities or institutions according to the categories specified in our concept

### Availability of Quality Standards (Burkhart, 2015)

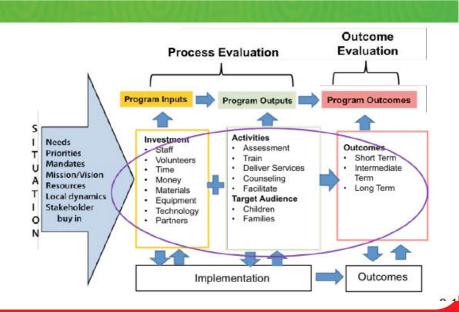
	Coverage	Levels	Areas	Targets	Language
UNODC	World	n. a.	Prevention	Evidence for interventions	EN ES PT FR RU +
EDPQS	Europe	Basic + Expert	Prevention	Intervention de- sign and process + Workforce	EN +>10 languages
CCSA	Canada	n. a.	Prevention	Intervention de- sign and process + Evidence	EN FR
COPO- LAD	Latin America	Basic + Advanced	Prevention Treatment Harm Reduc- tion Reinte- gration	Intervention de- sign and process + Evidence	ES PT
CICAD	South-Amer- ica	Minimum	Prevention Treatment	Intervention process + Work- force	ES EN
SPR	US	Highly ad- vanced	Prevention	Evidence of interventions	EN

### **Contractions** Various Perspectives in Quality

- Quality of interventions/methods (content, parameters).
- Quality of implementation process and providing of interventions (process/delivering).
- Quality of institutional frame and provider (institutional aspects, safety rules etc.).
- Quality of workforce (qualification, training, staff skills and competencies, knowledge (staff/professionals).
- Ethical rules and standards.

(Sloboda et al., 2015)

#### Monitoring and Evaluation System



# EQUS: Framework / type of standards (2011)

	Level 1: interventions	Level 2: services	Level 3: systems & policies
Structural quality	Type of setting needed for implementation	Resource standards (infrastructure, human resources)	Legal & ethical adequacy standards (adequate to legal & ethical national norms)
Process quality	Procedural standards	Procedural standards	Standards for networking & cooperation among services
Outcome quality	Efficacy standards (having the intended effect)	Effectiveness standards (reaching useful results)	Coverage standards (proportion of those in need who are covered)
Economic outcome quality	Cost-benefit ratio (economic benefits in relation to costs)	Cost-utilisation ratio (utilisation in relation to costs)	Cost-effectiveness ratio (positive results in relation to costs)

### **FENIQS (2021-2023): European-wide project** focus on implementation praxis

- Quality become a critical issue in Europe but no existing evidence and experiences with real implementation praxis (Van der Plashen et al., 2020).
- **Scope:** prevention, harm reduction, treatment.
- Task no. 1: Mapping Study (WP2, University of Zagreb).
- Task no. 2: Case studies (WP3, Charles university).
- Task no. 3: Recommendation standard procedure and Manual (WP4, University of Gent).
- Expected results: winter 2022.
- FENIQS is followed by Wave project focus on staff and quality assurance and standards for staff.

# **C** Phase I: Mapping period

- What exactly represents addictions specific academic education and training programs?
- How many?
- Where?
- Whats is the content and focus?
- 2013-2014: preparatory phase (tool and procedure)
- 2015-2016: Conducting Google Survey leaded by dr. Pavlovska/Lososova
- 2017-2022: analysing and publishing work

### **Addiction education on Universities**

- specialized training and education programs as a separate component of existing undergraduate, graduate, or postgraduate programs in different disciplines (typically psychology, medicine, social work, nursing, etc.) such as, e.g., specialized courses, training modules, study visits, e-learning lessons, etc.;
- **summer or winter schools specializing in addiction** and dedicated to different kinds of target groups and topics (public health, mental health, risk reduction management, clinical or academic training, etc.);
- comprehensive academic degree programs that focus on addictions at the bachelor's, master's, and doctoral levels and similar programs specifically dedicated to addictions;
- any kind of **lifelong education training and education activities** for substance use professionals and/or for different kinds of health or

social work professionals (e.g., motivational interviewing, etc.).

### A/EU Survey: for more details



#### **Drugs: Education, Prevention and Policy**

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#### Overview of the European university-based study programmes in the addictions field

Amalie Pavlovská, Michal Miovský, Thomas F. Babor & Roman Gabrhelík

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# **B**/University survey: results 1

- 17 programmes provide **no information on their websites** about clinical internships as a part of the study.
- 17 programmes at all levels have placements or clinical practice as an integral part of the programme.
- 13 programmes include clearly defined placements or internships in practice/service settings.
- Four programmes specify how many hours in a clinical setting students have to undergo (from 100 to 400 direct hours).
- One has a practical way of teaching standard modules and one has a six-month-long clinical placement.
- Five programmes encourage students to work in a relevant job or volunteer activity in the field of addictions, or they are supposed to accomplish this before starting the study programme.

### C/ University survey: results 2

Table 3: Subjects taught according to the frequency in study programmes

E Key word	Frequency
Research methods, statistics, methodology, evaluation, evidence-based practice, data analysis	25
Introduction to substance use and addiction, basic theories, models of addiction	18
Intervention methods and skills, motivational interviewing	17
Treatment, recovery	10
Criminal justice system, law, drugs and crime	10
Mental healh, dual diagnoses	10
Social science, work, policy, sociology	9
Clinical placement, practice	8
National, international policy in relation to addiction	8
Harm reduction	7
Psychology	7
Theories and skills of counselling	7
Service/organization management, leading people	7
Psychopharmacology	7
Psychotherapy, cognitive-behavioral therapy, psychoanalysis	7
Prevention	6
Child protection, family therapy	6
Publid health	5

### **US Survey: for more details**



Journal of Substance Use

#### Journal of Substance Use

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# Overview of the university-based addiction studies programs in the United States

Amalie Pavlovská, Roger H. Peters, Roman Gabrhelík, Michal Miovský, Zili Sloboda & Thomas F. Babor

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#### Journal of Substance Use

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# Overview of university-based academic programs in addiction studies in Africa

Amalie Lososová , Kimberly A. Johnson , William Sinkele , Isidore Silas Obot & Michal Miovský

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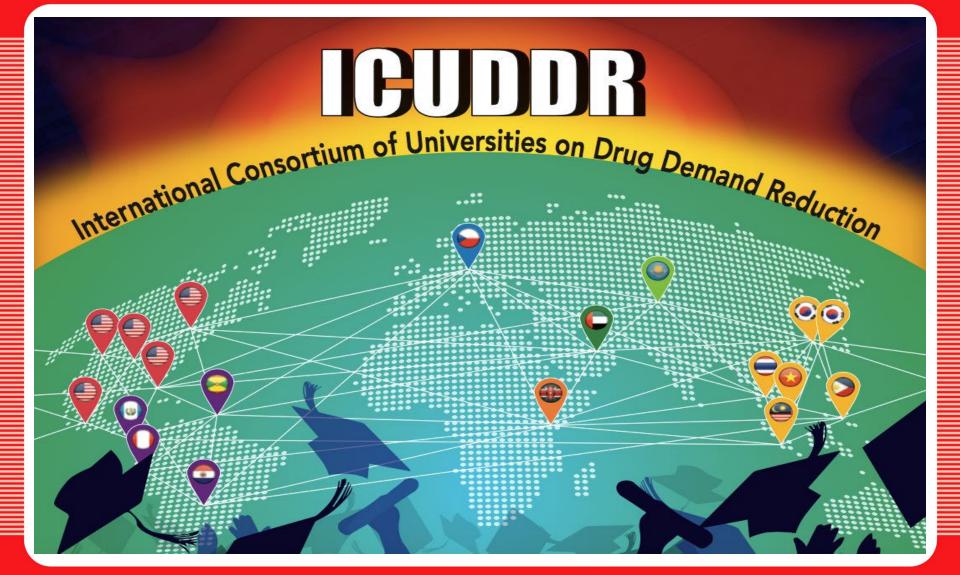
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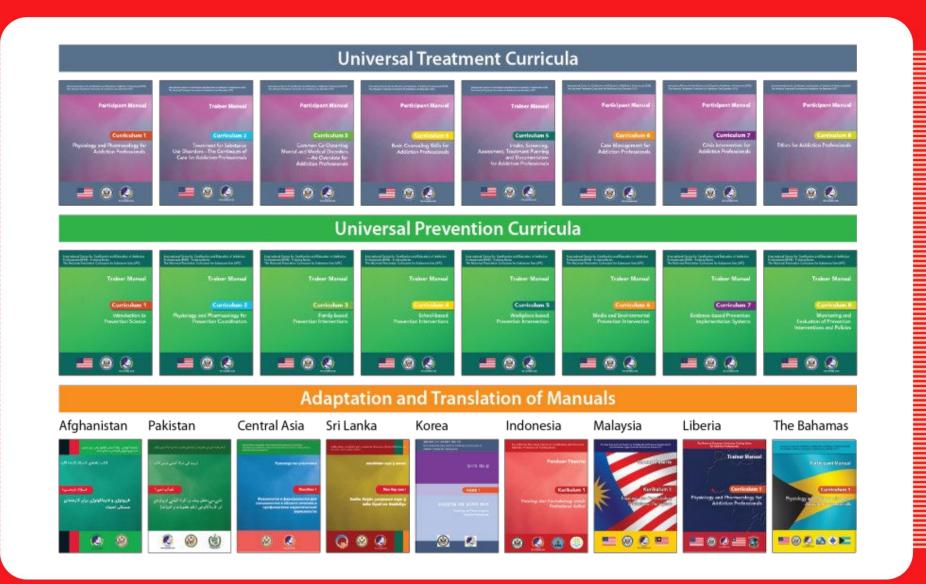
### **C** Phase II: Curricula doctrine

- What curricula university use?
- Is there anything to share?
- Is there any kind of international initiative in this area?
- NAASAC, NAADAC, ASAM, ISAM, INCASE, ISSUP etc....
- Need to have a communication platform for academic educators/providers
- Establishing the ICUDDR in 2016
- UPC, UTC, URC and other curricula
- 2 critical tasks: (a) availability/accessibility of curricula and (b) specific implementation support for universities





### First international curricula UTC/UPC/URC





Specialized addiction education and training curricula for the academic sphere:

### Implementation Guide

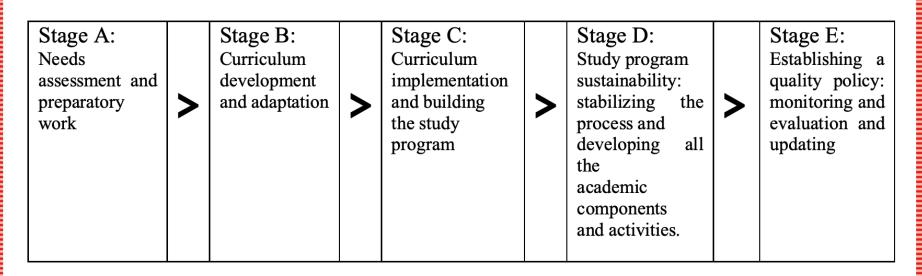


Figure 1: The process of establishing an academic study program in five stages<sup>2</sup>

### **Phase III: Quality, Quality standards** and competency models

- Establishing an international group together with ISSUP and NAASAC.
- European wide project Wave (June 2022)
- Specific searching of competency models (SAHMSA, NAASAC, ASAM/ISAM, APA etc. (on-going task).
- First conducted and published studies focus on competency models (e.g. Vondrova et al., 2020).
- Planning an systematic work based on international network under ICUDDR platform: (a) project based on "Champions Forum" represented by leading providers with longer tradition and sustainable programs (2022-2023), (b) project based on all ICUDDR member universities operating academic addiction specific programs (2023-2024).



- There is obviously running fascinating process/wave of establishing academic addiction specialty programs.
- We can recognize plenty of original curricula but with very clear and similar focuses/topics/subjects.
- There is only one real international network sharing curricula and supporting implementation praxis based on open-access principles.
- Quality, quality standards and competency models became a critical issue and movement forward is represented by international network and standard academic collaboration.
- The most challenging issue seems to by represented by establishing a real new and unique professionals, profession and field with some first real national models including legislative background, links to insurance companies etc.







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### 70 years anniversary \_\_\_\_\_1948 - 2018

# Thank you for your attention

