

*The Canadian Council for Accreditation of
Pharmacy Programs*

**ACCREDITATION STANDARDS
for
CANADIAN
EDUCATIONAL PROGRAMS LEADING TO THE
DOCTOR OF PHARMACY (PHARM.D.) DEGREE**

June 2023



The Canadian Council for Accreditation of Pharmacy Programs
Le Conseil canadien de l'agrément des programmes de pharmacie

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PREFACE

Accreditation is the public recognition accorded to a professional program that meets established professional qualifications and educational standards through initial and periodic evaluation. Accreditation concerns itself with both quality assurance and program enhancement from a health equity and cultural safety perspective. It applies to programs and is to be distinguished from certification, registration, or licensure which applies to individuals. Graduating from a program accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) is a requirement to be eligible for direct entry into Part I and Part II of the Qualifying Examination offered by the Pharmacy Examining Board of Canada (PEBC). CCAPP sets standards for pharmacy and pharmacy technician education programs, grants accreditation awards to programs that meet the standards, and promotes continued quality improvement of accredited programs.

These accreditation standards are intended for Canadian educational programs leading to the entry-to-practice Doctor of Pharmacy (PharmD) degree. The standards reflect professional and educational attributes identified by CCAPP and stakeholders as essential for Canadian programs that intend to develop practicing, patient-focused pharmacists. **The standards are not appropriate for programs that intend to develop pharmacists for careers in industry, for degrees focused on pharmaceutical sciences, and for degrees granted in countries other than Canada.** The standards embrace the philosophy that graduates of accredited programs have achieved the outcomes and possess the competencies necessary for entry into the profession of pharmacy in Canada. These are based, at a minimum, on the latest versions of the “Educational Outcomes for First Professional Degree Programs in Pharmacy” developed by the Association of Faculties of Pharmacy of Canada (AFPC) and the “Professional Competencies for Canadian Pharmacists at Entry to Practice” specified by the National Association of Pharmacy Regulatory Authorities (NAPRA).

The standards recognize that quality pharmacy education encompasses multiple components including fundamental, biomedical, pharmaceutical, behavioral, social, and administrative sciences. Pharmacy practice experiences are critically important in preparing graduates to embrace the scope of contemporary pharmacy practice as well as emerging practice roles. CCAPP believes in the preparation of competent graduates who identify as medication therapy experts. They are able to work with other healthcare providers to make decisions that improve the safety and effectiveness of medications and the health of the patients in their community while providing culturally safe care. Pharmacy graduates must have a broad understanding of health, the factors that contribute to a healthy community including the social determinants of health, and the structure and role of the healthcare and public health systems. Graduates must also be able to manage, evaluate, and communicate information, and possess the skills needed to advocate on behalf of individuals and the community. An understanding of the ethical requirements and standards of professionalism (as articulated by NAPRA in the document “Principles of Professionalism for the Profession of Pharmacy”) is expected from graduates of CCAPP-accredited programs.



Pharmacists must be able to work with and care for people of different cultures with diverse values, beliefs, and customs. They must practice with compassion, empathy, and integrity in providing care to all patients. They must recognize the impact of colonialism and the interests of Indigenous Peoples (First Nations, Métis and Inuit) as well as other equity-deserving groups such as Black people, people of colour, racialized persons, members of the 2SLGBTQIA+ community, persons with disabilities, and other traditionally made-marginalized populations. Pharmacists are expected to be trusted and respected members of the communities in which they work, and possess the knowledge, skills, and judgment to support the continuing education of students, recent graduates, and other health providers. The ability to work collaboratively with registered pharmacy technicians, other pharmacy professionals, and interprofessional healthcare teams is essential and graduates must be sufficiently adaptable to work in a variety of healthcare settings.

CCAPP believes that the educational outcomes established for a Doctor of Pharmacy program must encompass the entry-to-practice competencies specified by the appropriate regulatory authority. The public is entitled to demand that the graduates of a professional degree program can demonstrate they have mastered competencies for that profession as evidenced by the national certification and/or provincial licensure process. It is important that all educational programs are supportive of, and have an effective working relationship with, the organizations responsible for national certification as well as the applicable provincial or territorial regulatory authority to ensure that graduates have achieved the educational outcomes required for licensure/registration and practice.

The document entitled “CCAPP Guidance for the Accreditation Standards for Canadian Educational Programs leading to the Doctor of Pharmacy (PharmD) Degree” is intended to be utilized in conjunction with this document. It contains a glossary, information about accreditation procedures, and detailed information to assist programs in preparing a self-study in advance of an accreditation site visit.



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Part I: Academic Program

A. *Educational Outcomes*

Standard 1: Graduates from the professional program in pharmacy meet the program’s educational outcomes and are prepared for entry-level scope of practice.

Criterion 1.1: Intended outcomes are based on the current Association of Faculties of Pharmacy of Canada (AFPC) “Educational Outcomes for First Professional Degree Programs in Pharmacy,” the current National Association of Pharmacy Regulatory Authorities (NAPRA) “Professional Competencies for Canadian Pharmacists at Entry to Practice,” and other relevant sources of educational outcomes (e.g., provincial standards of practice, Truth and Reconciliation Calls to Action)

Examples of Evidence:

- Description of the program’s intended educational outcomes and their alignment to AFPC, NAPRA and other relevant sources of educational outcomes
- Description of process used to create and update intended educational outcomes


Criterion 1.2: Graduates demonstrate practice-readiness through knowledge of, and an ability to perform, the pharmacist patient care process (collect, assess, plan, implement, follow up, evaluate, collaborate, document, communicate) that enables them to provide patient care as a collaborative member of a care team.

Examples of Evidence:

- Description of the assessment methods utilized to confirm student readiness for practice at the completion of the program (e.g., capstone courses, high-stakes exams)
- Student success rates from advanced pharmacy practice experiences
- Graduation rate trends
- Success rate in national board examinations, where applicable
- Graduating student feedback about preparedness to take on AFPC roles and responsibilities

B. *Curriculum*

Standard 2: The professional degree program in pharmacy includes a series of core courses, practice experiences, and interprofessional experiences that are designed to support students’ growth toward meeting the program’s educational outcomes.



Criterion 2.1: The curriculum is based on intended educational outcomes and reflects an organized progression in the level of expected performance to support students' growth.

Examples of Evidence:

- Description of the general educational framework (e.g., high level principles used to guide program design, visual overview of how the program is organized with a general description and any supporting rationale)
- Mapping of intended educational outcomes to courses or course objectives that shows support for the organized educational framework
- Description of how all program courses, including practice experiences, and interprofessional educational experiences integrate and build on one another to address achievement of educational outcomes and program goals
- Metrics of student performance that reflect achievement of educational outcomes throughout the curriculum

Criterion 2.2: The professional degree program is a minimum of 4 academic years, or the equivalent number of hours or credits, and includes required and elective courses, practice experiences, and intra- and inter-professional educational experiences.

Examples of Evidence:

- Details of program design including courses and credit hours
- Description of variety of elective courses and practice experiences within the curriculum

Standard 3: The required curriculum includes content in biomedical, pharmaceutical, behavioural, social, and administrative pharmacy sciences; clinical sciences including practice skills; practice experiences; intra- and inter-professional collaborative practice; cultural safety, humility, and responsiveness; and Indigenous history, values, and healthcare needs.

Criterion 3.1: The curriculum has content of sufficient depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation for the full scope of contemporary pharmacy practice responsibilities. Course content includes topics listed in Appendix 1.

Examples of Evidence:

- Methods utilized to determine needs for core content
- Map of where core content is located within the curriculum
- Graduating student feedback, and/or those of other interested parties (i.e., preceptors, employers), about how well the curriculum developed core knowledge and skills as listed in Appendix 1



Criterion 3.2: Practice skills listed in Appendix 2 are developed through laboratory, simulation, and practice-based experiences.

Examples of Evidence:

- Methods utilized to determine needs for the practice skills curriculum
- Evidence of mapping of practice skills across the curriculum
- Graduating student feedback, and/or those of other interested parties (i.e., preceptors, employers), about how well the curriculum developed core knowledge and skills as listed in Appendix 2

Criterion 3.3: The curriculum supports development of student leadership, professionalism, and professional identity.

Examples of Evidence:

- Examples of leadership development activities for students
- Documentation of the ways student leadership groups work with faculty to support curricular activities
- Description of professionalism expectations and processes used during on-campus and experiential activities
- Description of activities that facilitate the development of the principles outlined in NAPRA's "Principles of Professionalism for the Profession of Pharmacy"
- Examples of strategies used to support professional identity formation

Criterion 3.4: The curriculum has Indigenous led, co-led, or co-created content of sufficient depth, scope, timeliness, quality, sequence, and emphasis on Indigenous health and cultural safety, including Canada's history and legacy of residential schools, past and present practices of colonialism, Indigenous rights to self-determination, anti-Indigenous racism, and Indigenous teachings and practices.

Examples of Evidence:

- Description of the Indigenous content within the curriculum (including interprofessional and co-curricular activities) and evidence of integration throughout years of study and streams of learning
- Description of the process, involvement, and reciprocity/compensation for Indigenous Peoples in creating or revising the Indigenous content of the curriculum
- Examples of changes in this area of the curriculum since the last accreditation cycle (e.g., additions, modifications, removal)

Criterion 3.5: The curriculum has sufficient depth, scope, timeliness, quality, sequence, and emphasis to develop appropriate understanding and attitudes related to anti-racism, anti-oppression, cultural safety, and health equity.

Examples of Evidence:

- Description of content related to anti-racism, cultural safety, and health equity that exists within the curriculum and evidence of integration throughout years of study and streams of learning
- Examples of topics and content covered including but not limited to anti-Black and other forms of racism and discrimination based on religion, ethnicity, or disability. Other related topics may include 2SLGBTQIA+, ethnic diversity, the impact of lower socio-economic status, trauma-informed care, and the role of intersectionality
- Examples of curricular changes in this area of the curriculum since the last accreditation cycle (e.g., additions, modifications, removal)
- Examples of cases and scenarios that use diverse identities to stimulate equity-based discussions for the diversity of populations served

Criterion 3.6. There is a regular process for program leaders to consider new developments relevant to pharmacy practice for curriculum integration.


Examples of Evidence:

- Description of how existing curriculum is evaluated
- Description of how decisions to change or remove programming are made
- Description of processes for integrating new content into the curriculum including any stakeholder involvement
- Description of curricular oversight and processes to document and monitor curricular changes
- Examples of curricular changes since the last accreditation cycle (e.g., additions, modifications, removal)

Standard 4: Practice experiences are of adequate breadth, duration, structure, and variety to achieve the educational outcomes. Practice experiences are acquired in practice settings in a variety of care sectors, involving patients with a variety of healthcare service needs. Experiences integrate, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the professional program, including collaboration and teamwork.

Criterion 4.1: The academic program leading to the PharmD degree includes a total of forty weeks (minimum) (1600 hours) of practice experiences. The total hours of practice experiences provide the opportunity to develop proficiency in all competencies required for entry to pharmacy practice.

Criterion 4.1a: Introductory practice experiences involve at least 320 hours (8 weeks) of student placement in direct patient care practice. Those experiences may be supplemented with additional volunteer activities, service learning, or other forms of experiential learning.



Criterion 4.1b: The sustained period of required concluding practice experiences (advanced pharmacy practice experiences) near the end of the program involve a minimum of thirty-two weeks (1280 hours) of which at least twenty-four weeks (960 hours) comprises full-time direct patient care practice in both primary care and acute care. Programs can allocate 8 weeks (320 hours) or more in non-patient care or combinations of non-patient care/patient care experiences if the requirement for 24 weeks (960 hours) of direct patient care practice has been met.

Criterion 4.2: Practice experiences allow students to develop clinical skills necessary to provide care for a variety of patients with acute illnesses and/or chronic conditions. Each student acquires practice experience in primary care (i.e., community, ambulatory clinics) and acute care over the course of their program, with opportunities for other practice settings (home care, long-term care, supportive living, research/academia, leadership, drug information, professional organizations, as examples) as an asset to expand student learning.


Examples of Evidence:

- Outline of practice sites, for example: practice sites providing primary care, acute care, long-term care; rural, urban practice sites as well as opportunities to develop skills in non-patient care practice settings in the final year
- Feedback from students about preceptors/practice experiences regarding development of clinical skills and other knowledge/skills/attitudes as outlined in course syllabi

Criterion 4.3: Student tasks at all stages of experiential learning allow the student to actively practice and learn in supportive learning environments that foster growth in patient care and professional roles. Learning activities are designed to enable the student to practice at a level appropriate to their level of preparedness and year of study.

Examples of Evidence:

- Mapping of student tasks to year of study, educational outcomes, and contemporary practice responsibilities
- Description of activities that students are expected to do as part of experiences (that demonstrate active participation versus observing others)
- Feedback from students and preceptors on student tasks and preparedness for and ability to assume responsibility for patient care and other professional duties within the practice setting
- Description of processes utilized to confirm student readiness for culminating practice experiences (i.e., assessment methods, professional activities completed, limits on activities based on federal or provincial laws, regulations and/or practice standards)



Standard 5: The curriculum includes required learning experiences throughout the professional program that enable a graduate to collaborate effectively with other pharmacists, pharmacy technicians, other healthcare professionals, patients, and families to provide team-based patient-centred care. Intra- and interprofessional learning and collaborative practice are included in the policies and strategic plan of the Faculty and supported by the Faculty and the University.

Criterion 5.1: Experiences and activities develop the required competencies for intra- and interprofessional care and collaborative practice and are integrated throughout the professional program.

Examples of Evidence:

- Documentation that the Faculty has developed or adopted an intra-/interprofessional framework or strategy
- Outline of the content areas included in the intra- and interprofessional framework or strategy. Examples include communication with patients and other healthcare professionals, teamwork, group dynamics, problem solving, negotiation, collaborative leadership, role clarification, conflict resolution skills and collaboration.
- Description of activities in which pharmacy students interact with and collaborate with pharmacists, pharmacy technicians, pharmacy technician students, and students and practitioners from other health professions including medicine and nursing
- Documentation of opportunities for pharmacy students to learn from and work collaboratively with patients and families as partners in developing care plans
- Evidence that the intra- and interprofessional curriculum adopted by the Faculty and other appropriate units within the University is integrated throughout the program
- Feedback from students, faculty members, and preceptors on intra- and inter-professional educational activities as they relate to expected competencies, outcomes, and key performance indicators
- Processes that document the engagement of all students in intra- and inter-professional educational activities throughout the curriculum
- Assessment of student ability to effectively engage in authentic intra- and interprofessional collaboration during experiential placements

Criterion 5.2: The Faculty and the University enable and support intra- and interprofessional learning.

Examples of Evidence:

- Resources allocated to support intra- and interprofessional education (e.g., time, space, positions, funding)
- Evidence that organizational structures and processes are in place to support intra- and interprofessional learning and that the effectiveness of these procedures has been evaluated

- Examples of training received by faculty or staff engaged in leading or providing intra- and interprofessional education activities
- Documentation of the level of engagement of intra- and interprofessional education instructors and recognition that it is a valued teaching activity
- Examples of scholarship related to intra- and interprofessional education and evidence that it is valued in the promotion and tenure process
- Evidence of a commitment to intra- and interprofessional teaching and learning in the policies, mission and/or strategic plan of the Faculty
- Documentation of efforts to evaluate the achievement of strategic goals related to intra- and interprofessional learning and collaborative practice

C. Teaching, Learning, and Assessment

Standard 6: The Faculty uses a variety of teaching, learning, and assessment methods that support the needs of diverse learners to produce graduates who meet the educational outcomes.

Criterion 6.1: The program includes an overall plan of instructional design that supports the needs of diverse learners while developing the knowledge, skills, behaviours, and judgment required of the pharmacy graduate at entry to practice.

Examples of Evidence:

- Instructional design plan that is based on an explicit theoretical framework of learning (e.g., revised Bloom's Taxonomy, Marzano's Taxonomy, Dreyfus Model of Skill Acquisition, socio-cultural learning) and that describes teaching, learning, and assessment strategies used in the program, for example: large group, small group, simulation, laboratory experience, case discussion, practice experience
- Processes to determine learning needs
- Processes used to reduce challenges to learning and assessment to ensure fair and equitable access to learning and assessment
- Processes used to provide accommodation(s) for learners related to learning and assessment
- Descriptions of how patients and caregivers are incorporated into various teaching and learning opportunities
- Feedback from students, faculty members, and preceptors about the effectiveness of teaching strategies to support training

Criterion 6.2: A variety of assessment methods are systematically applied throughout the program to provide formative and summative feedback to students, and to confirm students' achievement of educational outcomes.

Examples of Evidence:

- Examples of assessment methods used: formative, summative, self, or peer
- Mapping of teaching, learning, and assessment strategies to educational outcomes and learning outcomes
- Descriptions of resources, supports, and processes that are in place to help faculty members develop assessments that reliably and validly assess learning outcomes
- Examples of how students are provided with specific, timely feedback, where appropriate
- Feedback from students, faculty members, and preceptors about assessment methods and feedback processes used in the program

Criterion 6.3: The Faculty uses criteria, policy, and procedures for academic progression, academic probation, dismissal, and readmission in accordance with University policy. Student responsibilities, rights to due process including appeal mechanisms, student supports and resources, are published and made available.

Examples of Evidence:


- Procedures used to document students' progressive achievement of the educational outcomes and competencies throughout the curriculum
- Process used to monitor student performance for early detection of difficulties in academic and non-academic settings
- Evidence of expeditious intervention and access to student services, such as tutorial support or faculty advising
- Evidence of policy and procedures, website, or calendar entries
- Examples of remediation programs and outcomes

Standard 7: The Faculty provides an environment and culture that promotes professional behaviour that includes respectful relationships among students, faculty members, administrators, preceptors, and staff.

Criterion 7.1: The Faculty has a student code of conduct and/or a policy for fitness to practice or professionalism that describes expected behaviours and remedial actions relating to professional behaviour in the program. Policies are consistent with University guidance. Students are aware of the policies and the process for appeals.

Examples of Evidence:

- Code of conduct and procedures regarding its communication and application
- Evidence of application of the code through specific examples
- Incorporation of the code in student assessments (e.g., academic integrity, plagiarism)
- Feedback from faculty members and students about their understanding of the student code of conduct and their ability to apply it
- Terms of reference from a Fitness to Practice or Professionalism Committee (or equivalent) and/or examples of its activities



Criterion 7.2: The Faculty supports fair and equitable student participation in provincial, regional, and national pharmacy, scientific, and other professional organizations, and activities.

Examples of Evidence:

- Policy for attendance at meetings and conferences
- Financial support with evidence of equitable distribution
- Student feedback regarding Faculty support for participation in professional events and activities
- Documentation of attendance at such events

Criterion 7.3: The Faculty implements strategies and activities to strengthen the professional culture of the student experience.

Examples of Evidence:

- Participation in professional curricular and extracurricular activities
- Details of service learning, volunteer experiences, community-engaged scholarship, social accountability, or similar initiatives
- Participation in student-inspired interprofessional activities
- Other professional activities and student-developed codes of conduct, honour codes, etc.

Part II: Governance and Program Management

A. University Structure and Commitment

Standard 8: The Faculty is located in a University that is committed to supporting education and research related to pharmacy and other health sciences. The University and Faculty have a relationship with a network of healthcare facilities and institutions that enables the Faculty to fulfil its academic mission. The University and Faculty are committed to anti-racism and anti-oppression in all forms and to creating an environment that promotes equity, diversity, and inclusion.

Criterion 8.1: The Faculty is a valued partner in university affairs and has effective collaborations with medicine, nursing, and other health science programs within the university or at other universities in proximity if the university does not have such programs.

Examples of Evidence:

- Representation and decision-influencing participation (e.g., voting privileges) by faculty, staff, and administrators of the Faculty in university governance, committees, task forces, and other activities that contribute to the mission of the University

- Description of projects and other activities demonstrating effective engagement and collaboration in education and research between pharmacy and other health sciences programs including medicine and nursing

Criterion 8.2: The University demonstrates a commitment to health-related research, scholarship of teaching and learning, and other research activities through appropriate infrastructure that supports an environment for scholarship by faculty members and students.

Examples of Evidence:

- Description of how offices and services available within the University facilitate research and scholarship within the Faculty
- Faculty member feedback about the University's commitment to health-related research and other scholarly activities through appropriate infrastructure that supports an environment for scholarship by faculty and students
- Impact of research and scholarship (e.g., improvements in patient care, new professional services developed, changes to pharmaceutical or health policy, advances in fundamental science, changes to pedagogy or assessment resulting from the scholarship of teaching and learning, etc.) and other measures of research productivity (e.g., citations, grant funding, etc.)
- Description of postgraduate programs of study offered by the Faculty and the number of students enrolled
- Undergraduate student research opportunities and evidence of student participation in such activities
- Research and other scholarly activities involving collaborations with other health sciences programs or healthcare facilities affiliated with the University

Criterion 8.3: The Faculty and University recognize and commit to the Truth and Reconciliation Commission (TRC) of Canada's Calls to Action, and/or celebrate local Indigenous cultures, and engage in respectful and reciprocal relationship building.

Examples of Evidence:

- Faculty or institutional processes, supports, and/or initiatives to support community and partner relationships between the Faculty and the Indigenous community. This may include specific policies related to Indigenous engagement and financial guidelines for adequate compensation and honoraria for Indigenous partners.
- Faculty and institutional strategic planning that incorporates the TRC Calls to Action, specifically Calls to Action 18 through 24
- Faculty or institutional events featuring local Indigenous experts, knowledge keepers and community members
- Commitment to making meaningful territorial acknowledgements
- Partnerships with University-level offices of Indigenous initiatives

Criterion 8.4: The Faculty and University recognize and commit to anti-racism and anti-oppression of equity-deserving groups, celebrate a diversity of cultures, and engage in respectful and reciprocal relationship building.

Examples of Evidence:

- Faculty or institutional events featuring experts from equity-deserving groups
- Faculty or institutional policies, processes, or leadership activities that promote equity, diversity, and inclusion
- Commitment to workshops on topics such as health equity and the impact on equity-deserving groups
- Participation in cultural celebrations and activities within the institution or community

Standard 9: The University and Faculty develop policies, affiliations, contractual agreements, collaborations, relationships, and partnerships (internal and external to the University) necessary to advance the education, research, and service missions of the Faculty.

Criterion 9.1: The University supports the development of suitable relationships between the Faculty and other academic and service units of the University to provide an appropriate environment for education, research, and service. These relationships are informed by policy, formal and informal agreements or affiliations that fully describe the terms and conditions expected or imposed on the Faculty, its faculty members and staff, and students and on the internal or external organizations, agencies, bodies, or facilities.

Examples of Evidence:

- University offices and services that support and facilitate the development of appropriate collaborations and partnerships required by the Faculty
- University policies that guide the development of internal and external partnerships and agreements
- Agreements that specify the nature and intent of the relationship, collaboration, or partnership between the Faculty and other units within the university
- Formal relationships (e.g., memorandum of understanding) with other universities, pharmacy technician programs, and other external organizations including resolution of potential issues between partners
- Data sharing agreements for research collaborations

Criterion 9.2: The University and the Faculty have policies, procedures, and documentation in place to address actual, potential, or perceived conflicts of interest, unethical behaviour, and professional misconduct related to teaching, research, and service activities.

Examples of Evidence:

- Faculty and University policies governing conflict of interest and breach of ethics by faculty, staff, and students
- Policies related to development activities and sponsorship of Faculty activities and events by the pharmaceutical industry, donors, and other external parties
- Policies governing acceptance of gifts and benefits by individual faculty members, staff, students, and student organizations

- Examples of how such policies have been utilized or applied

Criterion 9.3: Formalized affiliation or contractual agreements between the University and practice sites outline the authority, privileges, obligations and responsibilities of the Faculty, faculty members, and students at the practice site and addresses obligations to provide a safe practice environment for students. Such agreements address student-related matters such as access to health services at the practice site, liability, insurance coverage, criminal records and abuse registry checks, student disclosures, immunization policy, patient confidentiality and privacy of records, and professional conduct expectations. Agreements provide for sufficient advance notice of termination by either party to permit the development of alternative arrangements where necessary.

Examples of Evidence:

- Documentation that formalized affiliation or contractual agreements are in effect at all practice sites where students are placed
- Examples of formalized affiliation or contractual agreements between the Faculty and the practice site
- Support provided by University legal services or other similar units in the development and approval of formalized affiliation agreements
- Availability of University-affiliated healthcare teaching facilities to the professional program in pharmacy
- Evidence of contingency procedures if practice sites withdraw from placement commitments (e.g., job action, public health emergency, business closure, etc.)
- Formalized agreements, memoranda of understanding, letters of secondment, or appointment letters outlining the authority, privileges, obligations, and responsibilities for faculty members who provide patient care, supervise students, or conduct research on an intermittent or full-time basis at a practice site

B. Faculty Organization and Leadership

Standard 10: The professional program in pharmacy is housed in a unit equivalent to a Faculty, College, or School.

Criterion 10.1: A Dean/Director heads the Faculty, College, or School that offers the pharmacy program.

Examples of Evidence:

- Description of the unit within the University's overall organizational structure

Criterion 10.2: The unit's degree of autonomy is the same as other Faculties, Colleges, or Schools at the University.

Examples of Evidence:

- Description of the University's budgeting process for pharmacy relative to other health science Faculties, Colleges, or Schools
- Reporting structure for the Dean/Director relative to individuals leading other health sciences Faculties, Colleges, or Schools
- Approval process for curriculum as well as other policies and procedures related to the delivering the PharmD program relative to other units in the university
- Process and procedures for faculty appointments relative to other units in the university

Standard 11: The Faculty is organized in a manner that facilitates the accomplishment of its mission and progress towards its vision.

Criterion 11.1: An effective Faculty governance structure is in place that facilitates the achievement of its mission and vision

Examples of Evidence:

- Documentation of the Faculty governance structure developed through faculty member consensus in accordance with University regulations (e.g., constitution, bylaws, University and Faculty policies, etc.)
- Examples of how decisions are made in the context of the governance structure
- Committee structure and responsibilities
- Faculty and staff member feedback about the effectiveness of the governance structure in place to support the accomplishment of the Faculty's mission, vision, and strategic plan

Criterion 11.2: The governance structure ensures that relevant Faculty committees include students, other appropriate stakeholders, and representation from equity-deserving groups as defined by university policies.

Examples of Evidence:

- Committee terms of reference and membership
- Evaluation of the achievement of equity, diversity, and inclusion objectives
- Feedback from students and other stakeholders on their participation and engagement on Faculty committees

Standard 12: The Dean/Director and the leadership team within the Faculty effectively support the achievement of the Faculty's mission.

Examples of Evidence:

- Examples of the role that the Dean/Director and the pharmacy leadership team have played in successful and ongoing advocacy and support for change, innovation, and quality improvement

- Evidence that faculty members, staff, students, and other stakeholders are able to contribute to a transparent quality assurance process regarding the effectiveness of the Dean/Director and the leadership team
- Criteria for appointment and review of the Dean/Director
- Description of the roles and responsibilities of the Dean/Director
- Description of the roles and responsibilities of the individuals on the Dean/Director's leadership team in supporting the achievement of the Faculty's mission
- Procedures and processes for recruiting and selecting members of the pharmacy leadership team (other than the Dean/Director)

Standard 13: The Faculty engages with regulatory, certification, and licensing authorities such as the provincial/territorial regulatory authority (PRA), professional associations, CCAPP, PEBC and other stakeholders with respect to certification and licensing/registration processes and requirements, practice requirements, practice standards and health human resource planning. This relationship facilitates meeting professional, educational, and societal needs.

Examples of Evidence:

- Documentation of effective communication and engagement with the relevant PRA(s) and other professional bodies and stakeholders on specific issues
- Faculty participation in the activities of the PRA(s) and healthcare planning and health services delivery bodies
- Participation of the PRA(s) and other health planning and health services delivery bodies in Faculty activities or on faculty committees
- Facilitation of interactions and communications between students and PEBC
- Activities demonstrating support for the certification and licensing processes
- Documentation of opportunities for student interaction with professional associations, PRA(s), and other stakeholders

C. Planning, Evaluation and Continuous Quality Assurance

Standard 14: The Faculty has a current strategic plan with priorities, goals, and objectives that are aligned to the Faculty's mission, vision, and values. The plan and planning processes have the support and cooperation of the University administration. The plan is systematically monitored and updated to facilitate achievement of its stated goals and objectives.



Criterion 14.1: The Faculty has a vision, mission, and values statement informed by the needs of society and aligned with that of the University.

Examples of Evidence:

- Description of how the Faculty’s vision, mission, and values align with that of the University
- Description of how the Faculty’s vision, mission, and values were determined and how they support the needs of society
- Documentation of the Faculty’s vision, mission, and values with examples of education, practice, research, and other scholarly activities that demonstrate alignment

Criterion 14.2: The Faculty’s strategic plan is current and has the support of senior University administration. The strategic planning process provides for broad-based input from faculty members, students, practitioners, federal, territorial, and provincial (FPT) regulatory authorities, alumni, and other key stakeholders or constituent groups. The process considers financial, programmatic, and academic planning within the context of institutional and professional changes occurring and anticipated.

Examples of Evidence:

- Documentation of the Faculty’s strategic plan
- Description of the planning process for the current strategic plan demonstrating broad stakeholder input, alignment to the Faculty’s vision, mission, and values, and alignment to the University’s strategic plan
- Examples of key stakeholders and constituent groups such as Indigenous communities, patient advocacy groups, Faculty social accountability committees or equivalent that provided input to the strategic plan
- Discussion regarding how the plan would adapt to the context of institutional and professional changes
- Description of the planning cycle for the next strategic plan
- Documents showing senior administration support from the University for the strategic plan

Criterion 14.3: The Faculty establishes and maintains systems to evaluate progress toward strategic goals, gathers information to inform necessary changes, and communicates performance and achievements to relevant stakeholders.

Examples of Evidence:

- Description of resources (human, infrastructure, and systems) used to guide and support monitoring progress toward achieving strategic goals and objectives
- Documentation of the plan used to monitor progress toward achieving strategic goals and objectives including descriptions of process, timelines, indicators/data, and reporting
- Decisions made in response to data that were gathered

- Description of communication processes used to inform stakeholders (e.g., faculty members, students, preceptors, practicing members of the profession, and other interested parties) of Faculty performance or achievements

Standard 15: A governance structure and system of resources within the Faculty are in place to direct and support the design, development, implementation, and evaluation of a program that satisfies the educational outcomes required for the professional program in pharmacy.

Criterion 15.1: The governance structure responsible for program evaluation comprises faculty members, students, and representatives from the profession or membership as permitted by University policy. The system of resources has dedicated administrative leadership, support staff, and evaluation tools dedicated to continuous quality improvement.

Examples of Evidence:

- Description of the human resources and tools in place to support ongoing program evaluation
- Current governance committee(s) membership list(s)
- Terms of reference, structure, and reporting relationships within the Faculty
- Minutes of meetings related to program evaluation

Criterion 15.2: The Faculty has a formal process in place to systematically review program content, structure, support, and outcomes. Regular evaluations are conducted, resulting information is disseminated in a timely manner, and action plans are developed and implemented to improve results in a cycle of continuous quality improvement. This process includes, at a minimum, evaluation and action related to the program components listed in Appendix 3.

Examples of Evidence:

- Description of evaluation plan and details of implementation
- Description of reporting processes used to disseminate and track program evaluation results
- Action plans developed to address challenges identified from ongoing program evaluation activities
- Table summarizing major changes made to the program, including practice experiences, admissions requirements, etc., since the last accreditation cycle and evaluation data that triggered the changes
- Minutes of meetings at which evaluation is coordinated, planned, data are reviewed, or recommendations for improvement that arise are considered or approved for implementation
- Terms of reference for committee(s) responsible for continuous quality improvement

D. Admissions

Standard 16: A recruitment program is transparent in its intention to attract a diverse pool of well-qualified applicants.

Criterion 16.1: The program has a process for recruiting applicants suitable to the profession of pharmacy.

Examples of Evidence:

- Recruitment materials
- Description of recruitment events or communications

Criterion 16.2: The recruitment program has a process for recruiting individuals from equity-deserving groups.

Examples of Evidence:

- Recruitment materials specific to recruiting applicants from equity-deserving groups
- Description of recruitment events or communications
- Description of the method used to address quality and diversity in the applicant pool

Criterion 16.3: The recruitment program has a process for recruiting Indigenous students consistent with TRC Call to Action 23.

Examples of Evidence:

- Recruitment materials specific to recruiting Indigenous applicants
- Description of recruitment events or communications and feedback on the methods used to recruit Indigenous students
- Evidence that Indigenous recruitment is Indigenous-led or co-led (students, faculty, Indigenous offices, community groups) in collaboration with the Faculty
- Examples of early intervention outreach (high school or elementary school collaborations or visits)

Standard 17: The Faculty uses and communicates to applicants the published criteria, policy, and procedures to admit students to the professional program in pharmacy.

Criterion 17.1: Admissions processes include attention to equity, diversity, inclusion, anti-racism, and anti-oppression in its selection of candidates, with a specific focus on Indigenous applicants consistent with TRC Calls to Action 23.

Examples of Evidence:

- Diversity of the admissions committee and those making admissions decisions
- Training requirements for the admissions committee and those making admissions decisions related to systemic and individual manifestations of bias(es)

- Description of how systemic bias is considered in the admissions requirements and processes
- Quality assurance procedures to ensure that admissions processes are non-discriminatory (e.g., for an applicant with a speech impediment that affects oral communication)
- Allowance for support persons to accompany applicants throughout the process where applicable
- Evidence that admissions processes are specific for ensuring equity for Indigenous applicants. This may include a separate admissions process or pathway for Indigenous applicants and Indigenous representation on interview panels and candidate scoring.
- Evidence of reserved seats or pathways for applicants from equity-deserving populations

Criterion 17.2: Admissions criteria include the satisfactory completion of post-secondary, pre-professional course requirements in general education, and basic and biomedical sciences.

Examples of Evidence:

- Pre-professional courses or requirements chosen to allow the students to be successful in the pharmacy program
- Established levels of expected academic achievement in the pre-professional requirements

Criterion 17.3: Admissions criteria include an equitable assessment of the suitability of candidates to enter a pharmacy degree program.

Examples of Evidence:

- Assessment methods such as standardized interviews of applicants; evaluation of oral and/or written communication skills, understanding of the pharmacy profession, and commitment to patient-focused care
- Opportunities for applicants to demonstrate dispositions or characteristics to complement cognitive abilities that strengthen suitability (e.g., respect, independence, caring)
- Criminal record and abuse registry check(s)
- Immunization requirements (if appropriate)

Criterion 17.4: The criteria used to determine offers of admission are made public.

Examples of Evidence:

- Website location(s) for information provided to applicants
- Admission policy and procedures
- Printed materials



Part III: Resources

A. Student Services

Standard 18: The Faculty and the University provide sufficient resources including appropriately trained staff to ensure that students are supported and have a respectful, safe, inclusive environment free of harassment and discrimination while enrolled in the professional program of pharmacy.

Criterion 18.1: Students at all stages of the program have access to financial aid and health services, orientation programs, academic advising, and career-pathway counselling. Housing assistance and services to support the requirements of students participating in experiential education are provided. Requests for accommodation of student needs are met in a manner consistent with applicable legislation. Supports are provided in an anti-oppressive manner and appropriate resources are in place to support equitable learning.

Examples of Evidence:

- Description of the types of student services available at the Faculty as well as those provided centrally at the University
- Wait times and barriers associated with accessing student services
- Description of processes and procedures for addressing student requests for accommodation
- Assessment of adequacy of program resources in meeting student accommodation requests
- Evidence of communication of policies and support pathways for reporting incidents of racism, harassment, or oppression experienced by students, faculty, and staff
- Student and faculty member feedback about the effectiveness of the Faculty's strategies and activities to strengthen the professional culture of the student experience with an emphasis on equity, diversity, and inclusion
- Results from student surveys regarding the adequacy and effectiveness of advising, counselling, and other student services
- Documentation of changes made to student services and action plans developed in response to gaps identified through student feedback and other means
- Support provided to students participating in off-campus experiential placements particularly those that are not in proximity to the area where the University is located
- Description of orientation programs available to students
- Availability of financial aid opportunities (scholarships, bursaries, loans, etc.) for students

Criterion 18.2: The Faculty has an administrative office led by an individual or individuals with appropriate qualifications, training, and expertise to provide information about and referral to student services.

Examples of Evidence:

- Number of staff within the Faculty and University whose primary role is to support and provide services to pharmacy students
- Description of background and training received by student services personnel within the Faculty

Criterion 18.3: Students are aware of conditions under which they may file a grievance, appeal, or complaint. Students are informed about resources to help them navigate university policy and procedures, such as Faculty advisors, University ombudspersons, conflict mediators, or student advocates.

Examples of Evidence:

- Faculty and University policies and procedures related to student grievances, appeals and complaints
- Documentation that students have been informed regarding how to file a grievance, appeal, or complaint
- Number of grievances, appeals or complaints received from students on an annual basis
- Assessment or root cause analysis of trends related to grievances, appeals or complaints
- Turnaround time for investigation and resolution of grievances, appeals and complaints
- Evidence that complainants have been made aware of the outcome of the investigation

Criterion 18.4: The Faculty has an ordered, accurate, and secure system of student records that is maintained in accordance with University policy and privacy legislation.

Examples of Evidence:

- Record systems that manage, oversee, and coordinate student records and affairs
- Policy and procedures regarding the collection and release of information
- Changes in record systems made since the last accreditation cycle
- Audit of compliance and/or record of breaches in accordance with relevant privacy legislation

B. Human Resources

Standard 19: The Faculty has sufficient human resources, including appropriately qualified and trained faculty members as well as support and administrative staff, to effectively deliver and evaluate the professional program.

Criterion 19.1: Within each discipline and curricular area, there is an appropriate breadth and depth of skills and experience among faculty members with academic title. Full-time faculty members may be supplemented by an appropriate number of part-time, cross-appointed, or jointly funded faculty members, and voluntary faculty members with adjunct status or other appropriate academic title.

Examples of Evidence:

- List of faculty members including credentials, areas of expertise, and roles and responsibilities within the professional program
- Documentation of teaching, research, service responsibilities, and workload expectations for tenure-track and other faculty members
- Feedback from faculty members regarding the appropriateness of responsibilities and workload expectations
- Longitudinal faculty workload data used to support hiring decisions
- Involvement of faculty members in provision of direct patient care and professional services to patients
- Documentation of retention/turnover rate and average time to fill vacant faculty positions since last accreditation cycle
- Evaluation of net change in faculty complement since the last accreditation cycle
- Comparison of number of students per faculty member to other pharmacy programs in Canada using AFPC benchmark data
- Feedback from faculty members on adequacy of faculty resources and workload associated with their roles

Criterion 19.2: There is an adequate amount of appropriately skilled staff resources including but not limited to administrative assistants, student services personnel, teaching assistants, laboratory instructors, and information and communication technology personnel.


Examples of Evidence:

- Numbers, skills, position descriptions and roles of administrative, secretarial, and technical personnel
- Organizational charts with reporting relationships
- Documentation of retention/turnover rate and average time to fill vacant staff positions since the last accreditation cycle
- Evaluation of net changes in staff complement since the last accreditation cycle
- Comparison of number of students per support staff to other pharmacy programs in Canada using AFPC benchmark data
- Feedback from faculty members, students, and staff on adequacy of staff resources and workload associated with their roles

Criterion 19.3: Selection and promotion of staff and faculty is regulated by a defined process within the Faculty consistent with University policy. This process includes careful definition of needs associated with the role, selection methods designed to reduce bias toward candidates, and a formal strategy to attract and hire a diverse workforce.

Examples of Evidence:

- Description of hiring procedures, selection criteria, and promotion process for staff and faculty
- Description of strategy/plan to encourage hiring and promotion of a diverse workforce
- Faculty and staff feedback regarding selection and promotion processes



Criterion 19.4: Preceptors are offered or are eligible for an appropriate academic appointment or affiliation consistent with University policy to recognize their critical role in the education of students.

Examples of Evidence:

- Description of academic appointment or affiliation procedures for preceptors
- Documents or correspondence informing preceptors about academic appointment or affiliation procedures
- Number or percentage of preceptors who have received academic appointments or other appropriate affiliations
- Preceptor feedback regarding recognition of their role in the education of students

Criterion 19.5: Faculty members and staff are evaluated in accordance with Faculty policy using multiple sources of information with reference to clearly outlined criteria. The Faculty performance evaluation policy is consistent with University policy.

Examples of Evidence:


- Evidence of adherence to written policy and procedures for faculty member, staff, and preceptor evaluation
- University policy related to the process of faculty evaluation/performance review in the areas of teaching, research, and service
- Faculty and staff feedback about the performance evaluation process and criteria

Standard 20: The Faculty and University provide essential training for faculty members and staff and support professional development opportunities consistent with staff and faculty responsibilities.

Criterion 20.1: There is evidence of University and Faculty support for professional development opportunities for faculty members and staff, consistent with their respective responsibilities as it relates to teaching and assessment of students. Major changes in educational offerings (e.g., a shift from in-person to remote teaching) are met with corresponding training for instructors to ensure continued quality of instruction.

Examples of Evidence:

- Policy related to professional development and training
- Documentation of professional development and training completed by faculty members and staff over the last two years
- Documentation of formal peer mentoring or support programs offered by the Faculty
- Evidence of budget and expenditures for faculty and staff member development
- Evaluation of professional development and training needs, including support to achieve professional development/training program outcomes
- Faculty and staff feedback about professional development opportunities and training



Criterion 20.2: Faculty members and staff participate in training on systemic oppression and anti-racism, including but not limited to information on Indigenous health and wellness and the historical and current policies, practices, and effects of colonialism.

Examples of Evidence:

- Description of training offered, including information about session leaders and sources of information
- Documentation of faculty members and staff participation in training sessions
- Feedback from staff and faculty on availability and accessibility of training in this domain

C. Practice Site Resources

Standard 21: The Faculty selects appropriate preceptors and practice sites so that student learning and skills development are adequately managed, supported, and supervised. Practice sites and preceptors meet relevant regulatory requirements.

Criterion 21.1: The Faculty utilizes established criteria for selection of preceptors and practice sites that meet or exceed the Standards of Practice for the jurisdiction. There are processes for orientation, initial training, and ongoing training and development for preceptors. Preceptors are committed to supporting the teaching and student assessment processes. Qualified preceptors oversee all practice experiences, with most being pharmacists.

Examples of Evidence:

- Process for selection of preceptors and practice sites and adherence to set criteria which must meet or exceed Standards of Practice for the jurisdiction
- Initial orientation and education offered to preceptors who are new to the experiential program such as cultural safety training or other mandatory or strongly encouraged training that faculty must complete e.g., accessibility legislation
- Ongoing development program for preceptors
- Feedback from preceptors regarding opportunities for professional development and training
- Description of the process for maintaining current information about practice sites
- Rationale for using preceptors who are not pharmacists

Criterion 21.2: Preceptors and practice sites are evaluated using multiple sources of information with reference to clearly outlined criteria.

Examples of Evidence:

- Process for documenting reviews of preceptors and practice sites
- Description of frequency and mode of preceptor and site evaluation (e.g., in-person, online or telephone discussions, student feedback, preceptor debriefs), and how information gathered is used to inform program decisions to retain or remove a site/preceptor

- Process for dealing with preceptors who no longer adhere to or meet preceptor criteria

Criterion 21.3: The Faculty has an administrative office or system led by an individual or individuals with appropriate qualifications or expertise in selection and evaluation of practice sites, and assessment of student performance.

Examples of Evidence:

- Staffing, responsibilities and organizational chart for this office or system
- Description of qualifications/expertise of faculty/staff who oversee the experiential office
- Comparison of number of practice sites per experiential support staff member using AFPC benchmark data


Criterion 21.4: The Faculty provides evidence of working collaboratively with practice sites and other health sciences programs of the University to ensure that students are provided access to practice environments with appropriate amenities to support student learning which allows them to achieve the intended educational outcomes. A suitable model(s) of supervision is in place at each stage of the practice experience curriculum so that students have adequate oversight, coordination, guidance, instruction, assessment, and feedback.

Examples of Evidence:

- Description of amenities required at the sites to achieve program outcomes (e.g., patients and facilities to allow student contribution, appropriate IT access, adequate space for students)
- Evaluation of resources at practice sites in which students are placed
- Evaluation of practice environments as it relates to workspace and equipment needed to undertake practice experiences
- Evidence that feedback is provided to practice sites that do not meet criteria
- Evidence of support provided by the Faculty related to capacity-building in experiential placement sites
- Description of models of supervision and preceptorship used
- Evaluation of models of preceptorship by students and preceptors
- Process to train preceptors to provide consistent and standardized assessment of students.
- Description of support provided by the Faculty to practice sites with respect to preceptor supervision of students

D. Financial Resources

Standard 22: The Faculty has adequate financial resources to ensure the continuing operation of the professional program and the fulfillment of other elements of the Faculty mission.



Criterion 22.1: University and Faculty consultation informs decisions about the required financial resources to deliver the professional program.

Examples of Evidence:

- Current program budget including details of revenues and expenditures
- Description of the process and procedures utilized in determining the program budget
- Evaluation of the adequacy of the financial resources to support the current and anticipated future needs of the program. This includes faculty and staff member salaries, materials and equipment, faculty and staff development, curricular development, physical facilities and infrastructure needs, and the support of scholarly activities of the faculty members and students.
- Description of open positions, ongoing searches and new faculty and staff positions needed to meet current and future strategic goals
- Significant changes in operational funding since the last accreditation cycle
- Benchmark funding data from other pharmacy programs in Canada and, where relevant, comparative per student funding for other health profession programs at the University


Standard 23: The Faculty, with the support of the University, has access to diverse financial support to improve its program, including development and advancement activities to facilitate enrichment of the program.

Examples of Evidence:

- Staffing within the Faculty and/or University to support development and advancement activities of the Faculty
- Documentation of funds obtained
- Plans and strategies to enhance development and advancement
- Examples of specific fund-raising initiatives
- Evaluation of how funds obtained through advancement activities have been distributed and utilized

E. Physical Facilities and Infrastructure

Standard 24: Physical facilities and infrastructure of the Faculty and those at other University sites where students, staff and faculty members are located are adequate and appropriately equipped to achieve the stated mission.



Criterion 24.1: The physical facilities and infrastructure are well-maintained and provide a safe, healthy, and contemporary environment for the achievement of the Faculty’s mission related to teaching and learning, research, and service. The facilities must meet legal standards for individuals with disabilities. Teaching facilities are sufficient in number, size, and quality to accommodate the student body.

Examples of Evidence:

- Description of physical facilities and infrastructure such as classrooms, laboratories, simulation teaching/learning environments, and office space, and the infrastructure that supports those environments
- Adequacy of the space and equipment available for research and other scholarly activities
- Summary of updates and renovations to the physical facilities and infrastructure since the last accreditation cycle such as improvements to support curricular innovations, online learning, new areas of research focus and enhancements to the physical plant that address the health and safety of the faculty, staff, and students e.g., upgrades to ventilation
- Description of space and equipment available to support administrative staff
- Examples of how physical facilities are welcoming to Indigenous and other equity-deserving groups as described by individuals who belong to the particular groups or communities of interest e.g., dedicated space for prayer, displays of culturally diverse artifacts
- Evaluation of physical facilities and infrastructure including feedback from students, faculty members and staff on quality and quantity of those resources


Criterion 24.2: The Faculty provides space for student activities and organizations.

Examples of Evidence:

- Documentation of the facilities available to students
- Feedback from students regarding the quality and quantity of space available for student activities and organizations

F. Information and Technology Resources

Standard 25: The Faculty ensures access and training for all faculty members, preceptors, and students related to educational technology as well as library and information resources sufficient in quantity and quality to support all educational and scholarly activities in accordance with the Faculty’s mission and goals.



Criterion 25.1: On- and off-campus access to library resources is available to students, faculty members, and preceptors.

Examples of Evidence:

- Evaluation of integration of library and information technology resources into the teaching program
- Evaluation of the range and type of access to journals, databases, and other learning resources
- Learning programs for acquainting students with the effective and efficient use of the library, both physical and electronic, as well as with the use of information storage and retrieval techniques
- Feedback from students, faculty members and preceptors on the adequacy and reliability of access to library and information resources
- Estimates of utilization of available library resources by students and faculty members

Criterion 25.2: Access and training related to information technology and systems essential for pharmacy practice is available to students and faculty members in simulated practice environments and in practice sites to ensure that graduates are digitally competent practitioners.

Examples of Evidence:

- Description of the range and type of information system access, and scope of information to which students and faculty members have access when in simulated practice environments and in practice sites
- Policy that describes how access to information technology in simulated practice environments and in practice sites is managed
- Learning programs and training for ensuring that students and faculty members are competent with information systems utilized in simulated practice environments and in practice sites
- Description of technology and systems to support intra- and interprofessional pharmacy practice in simulated practice environments and practice sites, such as electronic charting, simulated laboratory viewers, provincial drug information systems and electronic health records
- Description of technology for the provision of virtual patient care
- Training programs to ensure students are competent health information custodians and able to protect patient privacy as per ethical and legal requirements in their jurisdiction
- Access to help desk support for information resources and systems utilized in simulated practice environments and in practice sites
- Feedback from students regarding access to information resources and systems in practice sites



Criterion 25.3: Digital infrastructure is available to support online learning and assessment.

Examples of Evidence:

- Description of the range and type of educational software platforms used within the program for instruction and assessment
- Access to support related to the use of educational technology (e.g., staff, help desk support)
- Description of physical equipment available to instructors to support online instruction (e.g., cameras, projectors, microphones)
- Training programs for acquainting students and instructors with educational technology platforms
- Feedback on the quality of educational software and other resources for remote learning and assessment by instructors and students



Appendix 1 – Foundational Content

It is expected that the curriculum has content of sufficient depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation at an entry level for the full scope of contemporary pharmacy practice responsibilities. The curriculum (or courses in the pre-professional curriculum that are requirements for admission) is expected to include sufficient content in biomedical sciences; pharmaceutical sciences; behavioural, social, and administrative pharmacy sciences; pharmacy practice; and treatment and prevention of conditions involving major organ systems. Suggested content areas include:

Biomedical Sciences

- Anatomy
- Biochemistry
- Immunology
- Microbiology
- Physiology
- Pathophysiology

Pharmaceutical Sciences

- Pharmacology
- Pharmaceutics
- Biopharmaceutics
- Pharmacokinetics
- Pharmacogenomics
- Toxicology
- Medicinal chemistry
- Pharmaceutical biotechnology

Behavioural, social, administrative pharmacy sciences

- Indigenous history (residential schools, colonialism), anti-Indigenous racism, right to self-determination, values, teachings, practices, and healthcare needs
- Pharmacoepidemiology
- Healthcare systems and health economics
- Health systems planning
- Digital health
- Pharmacoeconomics
- Cultural diversity
- Cultural safety, humility, and responsiveness
- Global citizenship
- Management and leadership
- Quality improvement
- Research methods
- Biostatistics
- Professional identity formation
- Climate change and its effects on health
- Health equity and social determinants of health



Pharmacy practice

- Pharmacist patient care process
- Ethical and professional standards of practice
- Pharmacotherapeutics
- Compounding
- Impact of pharmacy practice on environmental sustainability
- Collaboration
- Communication
- Leadership
- Pharmacy law and regulatory issues
- Pharmacy informatics
- Professional wellbeing
- Patient self-care and management of minor ailments
- Patient safety
- Healthcare education
- Health advocacy
- Professional learning and development
- Traditional, complementary, and alternative medicine
- Public health
- Indigenous health policy

Treatment and prevention of conditions involving major organ systems in adults, pediatrics, and older adults as appropriate

- Psychiatry and mental health
- Neurology
- Cardiology
- Respiriology
- Gastroenterology
- Endocrinology
- Nephrology
- Dermatology
- Hematology
- Rheumatology
- Oncology
- Infectious diseases
- Drugs in pregnancy and lactation
- Pain
- Nutrition
- Substance use disorders, dependency, and addiction
- Sexual, reproductive, and gender-related health
- Urology
- Conditions affecting head, eyes, ears, nose, throat (EENT)



Appendix 2 – Required practice skills

It is expected that the following practice skills are developed through laboratory, simulation, and practice-based experiences to enable students to care for patients and their medication-related needs and to continually develop as a professional:

- Collection of patient data
 - Information gathering
 - Accessing patient health information
 - Physical assessment
 - Diagnostic and point-of-care testing
 - Best possible medication history and medication reconciliation
- Patient assessment/pharmacotherapy work-up
- Care plan development
- Care plan implementation
 - Patient education
 - Dispensing and prescription processing
 - Compounding
 - Prescriptive decision-making (i.e., prescribing, deprescribing, adapting a prescription, refusing to fill, referring, substituting)
 - Administration of drugs by injection
- Monitoring & follow-up
- Documentation of care
- Patient and professional communications
- Collaborative care and shared decision-making
- Virtual care provision
- Drug information provision
- Critical appraisal of medical literature
- Evidence-based decision making
- Compounding



Appendix 3 – Required Program Components for Evaluation

The program should have processes in place for evaluating and improving the following, at a minimum:

- a. The overall curriculum, including course sequencing, coverage of foundational and new content as required by professional changes, and opportunities for practising clinical and professional skills
- b. Teaching, student assessment, and learning environments (e.g., classroom, online, simulation lab, experiential placements, etc.)
- c. Outcomes of the education program, including results from national board exams; feedback from students, alumni, employers, and local pharmacy regulators; and measurement of student performance across education experiences
- d. Resources and infrastructure supporting the education of students, including human resources, financial resources, facilities, and liaison relationships with partners supporting delivery of the curriculum
- e. Recruitment and admissions processes and outcomes including those related to increasing representation of Indigenous pharmacists and other equity-deserving groups
- f. Student support services and resources, including academic support and health services
- g. Program evaluation and continuous quality improvement processes within the Faculty

In responding to this standard, the Faculty is encouraged to describe their processes for evaluating these areas and disseminating and using the information gathered from evaluations, rather than presenting all the data discussed here.