New Course Outline

- The **PharmD Approval Process for New Course Outlines** document provides for more information on next steps and approval timelines.
- The **Course Outline Submission Overview** document provides more detailed guidelines on course learning objectives, topic outlines/scheduling requirements, and assessment methods.
- The **AFPC Educational Outcomes for Professional Programs** document provides complete information on roles and key competencies for Pharmacy Degree Programs.

**Course Number:** PHM305

**Course Title:** Medication Therapy Management 4 (MTM4)

**Outline Version Code:**

**Course Description:**
Medication Therapy Management 4 (MTM4) is the final course in a four-part course series that is delivered longitudinally over three years of the pharmacy undergraduate program. MTM4 builds on the skills developed in previous MTM courses, offering students opportunities to apply and integrate materials learned through many courses in the curriculum to date. This course focuses on developing and enhancing skills needed to optimize the pharmacist's scope of practice in providing effective patient care in Ontario. Lectures and simulations emphasize the pharmacist's roles (CanMEDS, 2015, AFPC, 2010) as a communicator, care provider, scholar, professional, manager, collaborator, and advocate, to prepare students for their Advanced Pharmacy Practice Experience rotations.

**Semester:** ☒ Fall ☐ Winter ☐ Summer

**Course Type:** ☐ Elective ☐ Selective ☒ Mandatory

1. **Course Learning Objectives:**
Upon completion of this course, students will have achieved the following level of learning objectives:
Introductory = knowledge and comprehension of concepts, definitions
Intermediate = application of concepts to simple situations
Advanced = application of concepts to more complex situations with ability to synthesize and evaluate

**Knowledge**
Introductory Level:
Intermediate Level:

- Apply knowledge of communication techniques to demonstrate enhanced patient interviewing skills
- Apply knowledge of the pharmacist’s scope of practice to demonstrate skills pharmacists need to deliver these practice activities and services
- Apply knowledge of medication reconciliation to demonstrate skills required to perform in practice sites

Advanced Level:

Skills

Introductory Level:

Intermediate Level:

- Apply motivational interviewing strategies to identify and resolve clients' feelings of ambivalence or resistance to change
- Apply communication strategies to identify and resolve potential conflict and build collaborative relationships with other healthcare providers
- Assess patient's symptoms of common minor ailments and recommend therapy and self care measures
- Demonstrate understanding of the pharmacist's responsibilities in rational prescribing of pharmacotherapy, including initiating pharmacotherapy for smoking cessation, adapting and modifying prescriptions, and renewing prescriptions
- Demonstrate an understanding of the role of the pharmacists in providing medication reconciliation by identifying and resolving DTPs, establishing a plan and providing follow-up at “Interfaces of Care”.
- Demonstrate the role of the pharmacist in health promotion and facilitating patient access to public health preventive healthcare care services

Advanced Level:

Attitudes/Values:

Introductory Level:

- Exemplify professionalism in a manner that demonstrates respect and cooperation with clinical teaching assistants, peers and staff when participating in all course activities, both in and outside the “classroom” as guided by faculty expectations on professionalism as well as the Ontario College of Pharmacists' Standards of Practice
Intermediate Level:

Advanced Level:

2. Rationale for Inclusion in the Curriculum:
The Association of Faculties of Pharmacy of Canada (AFPC) has established competences for the first professional degree program with the goal of graduating students as Care Providers who are Medication Therapy Experts. (http://www.afpc.info/system/files/public/AFPC - Educational%20Outcomes%202017_final%20Jun2017.pdf) This requires that graduates meet specific competencies including roles relating to care and services for individual patients as well as roles emphasizing the responsibilities to populations of patients, to communities and to the profession. PHM 305 provides opportunities for students to continue to expand their skills as communicator and care provider, in addition to developing the skills of collaborator and advocate.

Medication reconciliation is a key aspect of pharmacy practice through the emphasis of safe medication use at all transitions of care. This is recognized through several key initiatives such as the Ministry of Health Long Term Care funded Meds Check program in community pharmacies and as a Required Organizational Practice for Accreditation Canada in hospitals. Opportunities for students to enhance their knowledge and application skills in this area will enable them to better provide safe, patient focused care.

3. Pre-requisites:
PHM 206 (MTM 3);
PHM 202 (PCT Endocrine);
PHM 203 (PCT Infectious Diseases);
PHM 204 (PCT Cardiology);
PHM 230 (Physical Assessment)

4. Co-requisites:
PHM 301 (PCT Hematology, Oncology and Immunotherapies);
PHM 302 (PCT Neuropsychiatry);
PHM 310 (Health Systems II)
5. Course Contact Hours and Teaching Methodologies:

<table>
<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 13</th>
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<tbody>
<tr>
<td>Large group problem-based/ case-based learning  (group size: 240 )</td>
<td>Hours:</td>
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<tr>
<td>Laboratory or Simulation</td>
<td>Hours: 27</td>
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<tr>
<td>Tutorial/Seminar/Workshop/Small Group      10 )</td>
<td>Hours:</td>
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<tr>
<td>Experiential</td>
<td>Hours:</td>
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<tr>
<td>On-line</td>
<td>Hours:</td>
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<tr>
<td>Other (please specify):</td>
<td>Hours:</td>
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<tr>
<td><strong>Total Course Contact Hours</strong></td>
<td>Hours: 40</td>
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6. Estimate and description of student's weekly out-of-class preparation time excluding exam preparation:
It is anticipated that students may spend up to 3 to 5 hours per week preparing for simulations.

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**
**Lecture Topic:** Course Orientation

**Lecture Learning Objectives:**

**Week 2**
**Lecture Topic:** Course Orientation Continued & Lab 1 Prep

**Lecture Learning Objectives:**
Lab: Clinical Queries; Prescriber and Patient Communication - September 19 and 21
Students will communicate with health care providers and patients to demonstrate collaborative patient care and apply principles of EBM.

**Week 3**
**Lecture Topic:** Lab 1 Debrief, Prep for Lab 2, Patient Centered Clinical Method Review

**Lecture Learning Objectives:**
Lab: Minor Ailments - Sept 26 and 28
Students will assess and make recommendations regarding therapy for minor ailments, with documentation.
**Week 4**  
**Lecture Topic:** BPMH Review & Medication Reconciliation (Labs 3 & 4)

**Lecture Learning Objectives:**  
Best Possible Medication History & Medication Reconciliation - October 3 and 5 & October 10 and 12  
Students will perform a BPMH and conduct medication reconciliation to ensure safe medication use at different Interfaces of Care.

**Week 5**  
**Lecture Topic:** No Class - Thanksgiving

**Lecture Learning Objectives:**  
Best Possible Medication History & Medication Reconciliation - October 3 and 5 & October 10 and 12  
Students will perform a BPMH and conduct medication reconciliation to ensure safe medication use at different Interfaces of Care.

**Week 6**  
**Lecture Topic:** Lab 2 Debrief & Prep - Oral Case Presentation (Lab 5)

**Lecture Learning Objectives:**  
Oral Case Presentation: October 17 and 19  
Students will "present a case" orally in a simulated setting based on Minor Ailments lab.

**Week 7**  
**Lecture Topic:** Preparation for Expanded Scope Series (Renew Lab 6)

**Lecture Learning Objectives:**  
Extending/ Renewing Prescriptions: October 24 and 26  
Students will determine appropriateness of renewing prescriptions, and complete required documentation.

**Week 8**  
**Lecture Topic:** Renew Lab Debrief, Prep for Adapt (Lab 7)

**Lecture Learning Objectives:**  
Adapting/Modifying Prescriptions: October 31 and Nov 1
Week 9
Lecture Topic:  Debrief Adapt, Prep for Health Promotion (Lab 8)

Lecture Learning Objectives:
Health Promotion (Influenza Immunization, Smoking Cessation, and Harm Reduction) - November 7 and 9
Students will use a stepwise approach to assess and recommend a publicly funded health service to meet an identified patient need (funded programs such as smoking cessation, influenza immunization, naloxone injection, colon cancer check program etc.)

Week 10
Lecture Topic:  Hospital Setting / Discharge Counseling, Prep for Lab 9

Lecture Learning Objectives:
Discharge Counseling: November 14 and 16
Students will apply the pharmaceutical care model to assess (includes identifying and resolving DTPs) while undertaking Discharge Planning

Week 11

Lecture Learning Objectives:
Make Up Lab & Tutoring for Milestone November 23 For students with Valid Petitions and appointments with CIs

Week 12
Lecture Topic:  Prep for Final Exam

Lecture Learning Objectives:
Final Examination (2 stations/cases with documentation) Nov 28 and 30 TBA

Week 13
Lecture Topic:  Course Evaluation & Milestone/Course Debrief

Lecture Learning Objectives:
8. Assessment Methodologies Used:

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Course Learning Objectives Addressed</th>
<th>Assessment Method Used</th>
<th>Percent of Course Grade</th>
<th>For Group Work: Individualized or same mark for all group members</th>
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<tbody>
<tr>
<td>☒ Assignment</td>
<td>A validated Global Rating Scale will be used where the student may receive one of the following: (i) Honours (ii) Pass (iii) Developing (Low Pass) and (iv) Fail.. Documentation will be graded and returned for feedback. To pass Term Work student must successfully pass 5 out of 9 weekly simulations. Documentation is required for each weekly simulation; feedback will be provided throughout the term, with the expectation that appropriate skills are demonstrated at the final milestone examination.</td>
<td>Performance-based summative assessments will be used for the weekly simulations (e.g. Weeks 1 through 9).</td>
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<td>☐ Presentation</td>
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<td>☐ Participation</td>
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<td>☒ Final Exam</td>
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<td>☐ Assignment</td>
<td>Will consist of 2 Simulated Practice interactions, integrating skills developed during the term work, including documentation. Students must pass 1 out of 2 interactions to pass the Final</td>
<td>Overall Course Mark: is based on the Final Simulated Practice Exam and Term Work and will be Honours, Pass or Fail. Weekly simulated practice sessions tasks and comments from Clinical Instructors (CIs) are used to determine consistent areas of weakness or strength.</td>
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Expectation for pass grades for all Pharmacy courses is 60%

9. Policy and procedure regarding late assignments/examinations/laboratories:
Late Assignment Policy:
N/A. All documentation must be uploaded or completed by due dates
10. Policy and procedure regarding missed assignments/examinations/laboratories:
All students must attend all weekly labs as per their assigned group. Failure to attend a lab requires follow up with the Faculty Registrar within 7 days, and a valid petition must be submitted. Failure to do so will result in an automatic FAIL for that lab.

Due to scheduling and cost constraints, a student who misses a lab and files a valid petition will be invited to a makeup lab at the end of term.

Labs begin punctually. A student who is consistently late will be required to complete supplemental work which may include a verbal or written assignment, at the discretion of the Course Coordinator.

11. AFPC Education Outcomes addressed (check all those that apply):
- Refer to AFPC Educational Outcomes for Professional Programs for further information about the role and key competencies.

As Care Providers, pharmacy graduates:

**CP1 – Practice within the pharmacist scope of practice and expertise**

☐ CP1.1 Apply knowledge from the foundational sciences to make decisions relevant to the contemporary and evolving scope of pharmacist practice;

☒ CP1.2 Integrate AFPC Communicator, Collaborator, Leader-Manager, Health Advocate, Scholar, and Professional roles in their practice of pharmacy;

☒ CP1.3 Recognize and respond to the complexity, uncertainty and ambiguity inherent in pharmacy practice;

☒ CP1.4 Explain the benefits, risks and rationale associated with pharmacist-provided care as an important step in obtaining and documenting consent to pharmacist care;

☒ CP1.5 Recognize and take appropriate action when signs, symptoms and risk factors that relate to medical or health problems that fall into the scope of practice of other health professionals are encountered.

**CP2 – Provide patient-centred care**

☒ CP2.1 Collect, interpret, and assess relevant, necessary information about a patient’s health-related care needs;

☒ CP2.2 Formulate assessments of actual and potential issues and in collaboration with the patient and other health team members as appropriate, prioritize issues to be addressed in a given patient encounter;
Create and document plans in collaboration with the patient and other health team members as appropriate, and make recommendations to prevent, improve or resolve issues;

Implement plans in collaboration with the patient and other health team members as appropriate, including:

- obtaining consent
- making a referral or consulting others
- adapting, initiating, renewing/continuing, discontinuing or administering medication as authorized
- dispensing and/or compounding and/or delegating/authorizing such tasks to others appropriately
- engaging the patient or care-giver through education, empowerment and self-management, and
- negotiating the role of pharmacy and non-pharmacy team members in continuity and transitions of care.

Follow-up by monitoring, evaluating progress toward achievement of the patient’s goals of therapy, adjusting plans in collaboration with the patient and health team members across the care continuum.

**CP3 – Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety**

Recognize and respond to harm and potential harm from health care delivery, including patient safety incidents;

Adopt strategies that promote patient safety and address human and system factors;

As Communicators, pharmacy graduates:

**CM1 – Communicate in a responsible and responsive manner that encourages trust and confidence**

Select and use oral, non-verbal and written communication strategies (tools, techniques, technologies, etc.) effectively so that the patient’s best interests are foremost;

Provide timely, clear responses that are tailored to the context and audience;

Express facts, evidence, opinions and positions accurately and effectively, with clarity and confidence;

Listen, actively solicit and respond appropriately to ideas, opinions and feedback from others;

Use language, pace, tone, and non-verbal communication that is suitable for:

a) the intended outcomes of the communication, and
b) the complexity, ambiguity, urgency and/or difficulty of a situation, conversation or conflict

☐ CM1.6 Seek and synthesize relevant information from others in a manner that ensures common understanding and where applicable, clarifies and secures agreement and/or consent;

☐ CM1.7 Compose and share oral, written, and electronic information in a manner that optimizes patient safety, dignity, confidentiality, and privacy.

CM2 – Communicate in a manner that supports a team approach to health promotion and health care

☐ CM2.1 Engage in respectful, empathetic, compassionate, non-judgmental, culturally safe, tactful conversations with patients, communities, populations, and health team members;

☐ CM2.2 Demonstrate awareness of the impact of one’s own experience level, professional culture, biases and power and hierarchy within the health team on effective working relationships, communication and conflict resolution with health team members and adapt the approach to the situation appropriately;

☐ CM2.3 Demonstrate accuracy and appropriateness of communication as well as respect for the role of other health team members when disclosing information about harmful or potentially harmful situations;

☐ CM2.4 In word and in action, convey the importance of teamwork in patient-centred care, patient safety, health care quality improvement and health program delivery.

As Collaborators, pharmacy graduates:

CL1 – Work effectively with members of the health team including patients, pharmacy colleagues and individuals from other professions

☐ CL1.1 Establish and maintain positive relationships;

☐ CL1.2 Recognize, respect and negotiate the roles and shared/overlapping responsibilities of team members;

☐ CL1.3 Join with others in respectful, effective shared decision-making.

CL2 – Hand over the care of the patient to other pharmacy team members and non-pharmacy team members to facilitate continuity of safe patient care

☐ CL2.1 Determine when and how care should be handed over to another team member;

☐ CL2.2 Recognize, respect and honour the negotiate shared and overlapping responsibilities of patients, pharmacy team members and other health members when handovers occur;

☐ CL2.3 Demonstrate safe handover of care, using oral, written, and electronic communication, during a patient transition to a different care provider or setting.
As **Leader-Managers**, pharmacy graduates:

**LM1 – Contribute to optimizing health care delivery and pharmacy services**
- □ LM1.1 Work with others to apply quality improvement strategies and techniques to optimize pharmacy care;
- □ LM1.2 Contribute to a culture of patient safety;
- □ LM1.3 Confirm the quality, safety, and integrity of products;
- □ LM1.4 Use health informatics to improve the quality of care, manage resources and optimize patient safety.

**LM2 – Contribute to the stewardship of resources in health care systems**
- □ LM2.1 Apply evidence and management processes to achieve cost appropriate care;
- □ LM2.2 Allocate health care resources for optimal patient care;
- □ LM2.3 Contribute to the management of finances and health human resources in pharmacy practice settings;

**LM3 – Demonstrate leadership skills**
- □ LM3.1 Demonstrate leadership skills to enhance pharmacy practice and health care.

**LM4 – Demonstrate management skills**
- □ LM4.1 Work with others to apply the principles of effective management and supervision of health human resources and medication use systems;
- □ LM4.2 Use effective strategies to manage and improve their own practice of pharmacy.

As **Health Advocates**, pharmacy graduates:

**HA1 – Respond to an individual patient’s health needs by advocating with the patient within and beyond the patient care environment**
- □ HA1.1 Work with patients to address determinants of health that affect them and their access to needed health services or resources;
- □ HA1.2 Work with patients to increase opportunities to adopt healthy behaviours;
- □ HA1.3 Incorporate disease prevention, health promotion and health surveillance into interactions with individual patients.
HA2 – Respond to needs of communities or populations they serve by advocating with them for system-level change in a socially accountable manner

☐ HA2.1 Work with community or population to identify the determinants of health that affect them;
☐ HA2.2 Participate in health promotion and disease prevention programs.

As Scholars, pharmacy graduates:

SC1 – Apply medication therapy expertise to optimize pharmacy care, pharmacy services and health care delivery

☒ SC1.1 Use knowledge and problem-solving to arrive at recommendations and decisions that are appropriate, accurate, and practical;
☐ SC1.2 Use professional experience to solve routine, previously encountered problems;
☒ SC1.3 Use established decision-making frameworks and apply learning required to manage new situations and problems.

SC2 – Integrate best available evidence into pharmacy practice

☐ SC2.1 Generate focused questions related to needs for information, recommendations and decisions in practice;
☒ SC2.2 Use systematic approaches in the search for best available evidence;
☒ SC2.3 Critically appraise health-related research and literature;
☒ SC2.4 Incorporate best available evidence in the decision-making process.

SC3 – Contribute to the creation of knowledge or practices in the field of pharmacy

☐ SC3.1 Apply scientific principles of research and scholarly inquiry;
☐ SC3.2 Apply ethical principles that underlie research and scholarly inquiry.

SC4 – Teach other pharmacy team members, the public and other health care professionals including students

☒ SC4.1 Provide effective education to others;
☐ SC4.2 Employ appropriate teaching roles when teaching others;
☐ SC4.3 Deliver effective feedback in teaching and learning situations;
Use appropriate learning assessment and evaluation strategies when working with patients, team members, students and teachers.

As Professionals, pharmacy graduates:

PR1 – Committed to apply best practices and adhere to high ethical standards in the delivery of pharmacy care

• PR1.1 Exhibit professional behaviour whether face-to-face, in writing, or via technology-enabled communication. Professional; behaviour includes, but is not limited to:
  a) demonstrating honesty, integrity, humility, commitment, altruism, compassion, respect for diversity and patient autonomy;
  b) being accessible, diligent, timely and reliable in service to others;
  c) abiding by the principle of non-abandonment;
  d) maintaining appropriate interpersonal boundaries;
  e) maintaining professional composure, demeanor, and language even in difficult situations, and;
  f) maintaining privacy and confidentiality;

• PR1.2 Use ethical frameworks as one component of professional judgment;

☐ PR1.3 Recognize and respond to situations presenting ethical dilemmas, including conflicts of interest;

☐ PR1.4 Engage in activities that:
  a) protect the public, and;
  b) advance the practice of pharmacy.

PR2 – Able to recognize and respond to societal expectations of regulated health care professionals

• PR2.1 Take responsibility and accountability for actions and inactions;

• PR2.2 Demonstrate a commitment to patient safety and quality improvement;

• PR2.3 Honour the laws, ethical codes, and regulatory requirements (by-laws, standards, policies) that govern the self-regulated profession of pharmacy;

• PR2.4 Demonstrate an understanding of federal, provincial/territorial, and municipal laws, policies and standards that apply to pharmacy workplaces;

☐ PR2.5 Demonstrate an ability to maintain competence to practice through evaluating areas for improvement and planning, undertaking learning activities to address limitations in competence and/or performance and incorporating learning into practice;

☐ PR2.6 Identify and respond to unprofessional, unethical, and illegal behaviours in pharmacists, other pharmacy team members, and other health professionals.
PR3 – Committed to self-awareness in the management of personal and professional well being

☒ PR3.1 Set professional and personal goals, priorities, and manage their time to balance patient care, workflow, and practice requirements;

☒ PR3.2 Examine, reflect upon, and manage personal attributes (knowledge, skills, beliefs, biases, motivations, emotions, etc.) that could influence self-development and professional performance;

☐ PR3.3 Adapt their practice of pharmacy to fulfill evolving professional roles;

☐ PR3.4 Recognize and respond to self and colleagues in need.