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:** PHM350H1/PHM550H1

**Course Title:** Pharmacotherapy in Ambulatory Care

**Outline Version Code:**

**Course Description:**

Ambulatory care pharmacists are accountable for addressing drug therapy needs and developing sustained partnerships with patients in an outpatient environment. They practice in primary care, family health teams, community pharmacies and specialty clinics. This practice can be independent or in collaboration with other health care providers. Ambulatory care pharmacists require the knowledge and skills to triage, prescribe, administer and monitor medication therapies. They provide pharmaceutical care to patients with a variety of medical conditions and levels of acuity. This course will provide students with the knowledge, skills, and values to be a contemporary ambulatory care practitioner with an emphasis on selected ambulatory care sensitive conditions, and preventive care, and minor ailments and natural health products.

**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:

Describe the clinical characteristics and long-term complications of vaccine preventable diseases.

Intermediate Level:

Define ambulatory care pharmacy practice. Discuss the management of ambulatory care sensitive conditions (ACSC) and describe their significance to the Canadian health care system. Distinguish among commonly used health screening devices and discuss their role and limitations. Evaluate the indication, effectiveness and safety of commonly used natural health products (e.g. vitamins, supplements). Determine whether a specific vaccine is recommended for a given patient case. Review the literature for associations between vaccines and adverse effects. Provide patient level education on the indication, effectiveness, and safety of common vaccines. Address common questions arising regarding routine vaccination practices (e.g. vaccination schedules, administration, storage, stability).

Advanced Level:

Summarize the etiology, pathophysiology, epidemiology, clinical presentation, risk factors, risk stratification, prevention and natural history of conditions encountered in ambulatory care pharmacy practice including hypertension, stable angina, chronic obstructive pulmonary disease (including smoking cessation), asthma, congestive heart failure, diabetes, anticoagulation (in the context of atrial fibrillation and venous thromboembolism), mental health (including anxiety and depression), pain (including chronic non-cancer pain and use of opioids). Compare the relevant (available, investigational, complementary and alternative, emerging) classes of agents used for the identified conditions encountered in ambulatory care pharmacy practice based on the following criteria; indications, efficacy, mechanism of action, pharmacokinetics, pharmacodynamics, pharmacogenomics, adverse effects, contraindications, drug interactions (drug-drug, drug-food, drug-laboratory), convenience, cost, formulations, stability.

Skills
Introductory Level:

Develop a process for assessing the importance of drug-drug interactions between prescription, over-the-counter and natural health products.

Intermediate Level:

Gather and interpret relevant patient data (demographics, review of systems/physical assessment, laboratory tests, diagnostic testing and current/past drug therapy) in order to identify drug therapy problems. For complex patients with multiple medications and/or medical conditions: a. Prioritize drug therapy problems; b. Justify the selection of a preferred therapeutic regimen scenario based on the assessment of relevant alternatives; c. Develop, justify and evaluate a care plan; d. Develop follow-up plans for patients with multiple indications for drug therapy. Locate, critique and apply reliable sources of information to address knowledge required to support an ambulatory care practice.
Advanced Level:
N/A

Attitudes/Values:
Introductory Level:
N/A

Intermediate Level:

The student will undertake assessment and care plan development activities in a manner respecting patient autonomy and the individual therapeutic goals. The student will use interprofessional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in a team environment. The student will recognize the role of the pharmacist in preventive medicine and wellness promotion.

Advanced Level:
N/A

2. Rationale for Inclusion in the Curriculum:

N/A

3. Pre-requisites:

Pharmacotherapy 1-5 (PHM101, PHM201, PHM202, PHM203, and PHM204), PHM230: Physical Assessment and Injection techniques, MTM 1-4 (PHM105, PHM205, PHM206, and PHM305)

4. Co-requisites:

N/A
5. Course Contact Hours and Teaching Methodologies:

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<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 26</th>
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<tr>
<td>Large group problem-based/ case-based learning (group size: )</td>
<td>Hours:</td>
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<tr>
<td>Laboratory or Simulation</td>
<td>Hours:</td>
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<tr>
<td>Tutorial/Seminar/Workshop/Small Group (group size: )</td>
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<td>Experiential</td>
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<tr>
<td>On-line</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><strong>Hours: 26</strong></td>
</tr>
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6. Estimate and description of student's weekly out-of-class preparation time excluding exam preparation:

5 hours

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**

**Lecture Topic:** Course Outline and Orientation, Introduction to Ambulatory Care Pharmacy Practice, Critical Appraisal Review, Ontario Public Drug Programs Review

**Lecture Learning Objectives:**

- Course introduction and overview
- Review principles of critical appraisal from a specified framework
- Apply the critical appraisal framework to relevant primary literature
- Review the range of programs and available resources
- Develop an approach to determining drug coverage for patients covered under Ontario Public Drug Programs

**Week 2**

**Lecture Topic:** Documentation Review and Integrated Case Discussion: Diabetes

**Lecture Learning Objectives:**

- Discuss the rationale for documentation
- List the essential components of patient care documentation
- Be able to effectively and succinctly document a patient interaction
- Describe the natural history and progression of type 2 diabetes as it pertains to both glycemic control and the development of micro- and macrovascular complications
- Identify relevant lab values as they pertain to the diagnosis and management of type 2 diabetes
- Provide an evaluation of the appropriateness of a patient's pharmacotherapy for type 2 diabetes, including an assessment of the effectiveness and safety of alternatives for the management of:
  - Glycemic control
  - Macrovascular complications (e.g. cardiovascular disease)
  - Microvascular complications (e.g. neuropathy, nephropathy, retinopathy)
Week 3
Lecture Topic: Integrated Case Discussion: Asthma

Lecture Learning Objectives:

- Review the role for objective testing of lung function in the diagnosis and management of asthma
- Identify and describe the stepwise approach to pharmacotherapy for asthma
- Describe the role of selected pharmacotherapies for asthma:
  - short-acting beta-agonists (SABA)
  - long-acting beta-agonists (LABA)
  - inhaled corticosteroids (ICS)
  - oral corticosteroids
- Consider self-management strategies to support optimal asthma management
- Evaluate the appropriateness of the current pharmacotherapy for asthma
- Identify all actual and potential drug therapy problems and develop a pharmaceutical care plan for asthma

Week 4
Lecture Topic: Integrated Case Discussion: Mental Health

Lecture Learning Objectives:

- Define the following mechanisms of drug interaction:
  - Pharmacokinetic
  - Pharmacodynamic
- Describe the following adverse reactions attributable to psychotropic medications:
  - Serotonin syndrome
  - Neuroleptic Malignant syndrome
  - QTc prolongation
  - Antidepressant discontinuation syndrome
- Develop a pharmaceutical care plan to address the identified drug interactions

Week 5
Lecture Topic: Integrated Case Discussion: COPD and Smoking Cessation

Lecture Learning Objectives:

- Interpret the provided diagnostic test results for a patient with COPD and classify disease severity
- Identify and describe the role of preventive care strategies (e.g. vaccination) relevant to the care of patients with COPD
- Describe the available pharmacotherapies for COPD (e.g. pharmacology, efficacy, place in therapy, etc.)
- Describe the available pharmacotherapies for smoking cessation (e.g. pharmacology, efficacy, place in therapy, etc.)
- Identify all actual and potential drug therapy problems for a patient with COPD
- Develop a pharmaceutical care plan to address identified DTPs
Week 6
Lecture Topic: Integrated Case Discussion: Pain, Midterm Exam Review

Lecture Learning Objectives:

- List non-pharmacologic alternatives for pain
- Describe the role of the following agents in the management of chronic non-cancer pain:
  - Acetaminophen
  - NSAIDs
  - Muscle relaxants
  - Antidepressants
  - Gabapentinoids
  - Cannabinoids
  - Opioids
- Outline a stepwise approach to the treatment of chronic non-cancer pain
- Outline practice tools to support safe opioid prescribing
- Evaluate the indication, effectiveness and safety of commonly used natural health products (e.g. vitamins, supplements)

Week 7
Lecture Topic: Integrated Case Discussion: Anticoagulation

Lecture Learning Objectives:

- Determine appropriate duration of therapy for anticoagulant treatment
- Describe the role of the following anticoagulant agents:
  - Unfractionated heparin
  - Low-molecular weight heparin
  - Fondaparinux
  - Warfarin
  - Direct-acting oral anticoagulants
- Develop a pharmaceutical care plan for anticoagulation for prevention of recurrence of VTE
- Outline an approach to risk stratification for stroke prevention in AF
- Develop a pharmaceutical care plan for stroke prevention in AF

Week 8
Lecture Topic: Point-of-Care and Disease Screening

Lecture Learning Objectives:

- Review currently available point of care tests
- Highlight the benefits of implementing testing into practice
- Describe the patient screening and identification process
- Review administration of the different tests
- Discuss strategies to overcome barriers when attempting to implement into practice
Week 9  
Lecture Topic: Integrated Case Discussion: Stable Angina

Lecture Learning Objectives:

- Describe the role of the following agents in the management of the patient with stable angina:
  - Beta-blockers
  - Calcium channel blockers
  - Nitrates
  - Antiplatelet therapy
  - Lipid modifying therapy
- Develop a pharmaceutical care plan for the medical management of stable angina
- Outline an approach to identification, interpretation, and resolution of actual and potential drug interactions
- Evaluate the indication, effectiveness and safety of commonly used natural health products (e.g. vitamins, supplements)

Week 10  
Lecture Topic: Integrated Case Discussion: Hypertension

Lecture Learning Objectives:

- Evaluate potential drug causes of hypertension
- Describe the approach to diagnosis of hypertension
- Determine the thresholds for treatment and blood pressure targets for patients according to their medical history
- Describe the role of the following agents in the management of hypertension:
  - ACEI/ARB
  - Beta blockers
  - Calcium channel blockers
  - Diuretics
  - Others (centrally-acting alpha agonists, peripherally-acting alpha antagonists, direct vasodilators, combined alpha and beta antagonists)
- Outline the preferred antihypertensives for patients with and without compelling indications (DM, CAD, CKD, HF, CVA)

Week 11  
Lecture Topic: Vaccine Therapeutics

Lecture Learning Objectives:

- Describe the clinical characteristics and long term complications of vaccine preventable diseases
- Determine whether a specific vaccine is recommended for a given patient case
- Review the literature for associations between vaccines and adverse effects
- Provide patient level education on the indication, effectiveness, and safety of common vaccines
- Address common questions arising regarding routine vaccination practices (e.g. vaccination schedules, administration, storage, stability)
Week 12
Lecture Topic: Integrated Case Discussion: CHF

Lecture Learning Objectives:

- Describe heart failure symptoms, physical activity limitations, and structural heart disease using NYHA Classification and ACCF/AHA Stages of Heart Failure
- Identify drug causes of heart failure symptoms
- Rationalize the medications for heart failure with reduced ejection fraction (HFrEF) and preserved ejection fraction (HFpEF). Describe the place in therapy for each of the following medications:
  - RAAS Antagonists – ACE, ARB, MRA, ARNI
  - Beta-blockers
  - Diuretics
  - Digoxin
- Describe an approach to diuretic dosing in patients with heart failure. Develop a plan for self-management of diuretic in an ambulatory care environment for an individual patient

Week 13
Lecture Topic: Assistive Devices and Aids to Daily Living, Final Exam Review

Lecture Learning Objectives:

N/A

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>Documentation for the patient case is submitted at the beginning of the class following each integrated case discussion. Students will receive individual marks for their submitted documentation on 5 cases per term.</td>
<td>Documentation is graded using a global assessment rubric</td>
<td>5x3% = 15% total</td>
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9. Policy and procedure regarding late assignments/examinations/laboratories:

Late Assignment Policy: Students who fail to submit an assignment by the specified due date will receive a deduction of 10% for each day beyond the due date, to a maximum of 50%. Assignments will not be accepted for grading after 5 late days.

10. Policy and procedure regarding missed assignments/examinations/laboratories:

Missed Exam Policy: Students who miss an examination or a test and who have a valid petition filed with the Registrar’s office will be eligible to complete a makeup examination or test. The format of this examination or test will be at the discretion of the course coordinator and may include, for example, an oral examination.

Missed Assignment Policy: Students who fail to submit an assignment by the specified due date, and who have a valid petition filed with the Registrar’s office will be eligible to submit the completed assignment, or an alternative assignment based on course requirements, with no academic penalty.

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;

☒ CP2.3 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;

☐ CP2.4 Implement plans in collaboration with the patient and other health team members as appropriate, including:

- CP2.4.1 obtaining consent
- CP2.4.2 making a referral or consulting others
- CP2.4.3 adapting, initiating, renewing/continuing, discontinuing or administering medication as authorized
- CP2.4.4a dispensing and/or
- CP2.4.4b compounding and/or
- CP2.4.4c delegating/authorizing such tasks to others appropriately
- CP2.4.5 engaging the patient or care-giver through education, empowerment and self-management, and
- CP2.4.6 negotiating the role of pharmacy and non-pharmacy team members in continuity and transitions of care.

☐ CP2.5 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

☐ CP3.1 Recognize and respond to harm and potential harm from health care delivery, including patient safety incidents;

☐ CP3.2 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

☐ CM1.1 Select and use oral, non-verbal and written communication strategies (tools, techniques, technologies, etc.) effectively so that the patient’s best interests are foremost;

☒ CM1.2 Provide timely, clear responses that are tailored to the context and audience;
CM1.3 Express facts, evidence, opinions and positions accurately and effectively, with clarity and confidence;

CM1.4 Listen, actively solicit and respond appropriately to ideas, opinions and feedback from others;

CM1.5 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;
SC4.4 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.