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: PHM385H1

Course Title: Diabetes Care

Outline Version Code:

Course Description:

This course is designed for pharmacy students to develop a detailed understanding of the pathophysiology, nutrition and non-pharmacologic management of diabetes, advanced pharmacotherapy in diabetes, and practical scenarios in managing diabetes. This course is intended to provide the theoretical background preparation for writing the Certified Diabetes Educator (CDE) credential examination within 1 year of graduation from pharmacy school and the learning objectives of the course are largely modeled on the CDE learning objectives. The course will use a combination of lectures and large group problem-based cases approach with emphasis on the integration and application of principles to specific clinical situations seen in diabetes clinical practice.

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:**

Discuss the pathophysiology, epidemiology, clinical presentation, risk factors, drugs that may cause/exacerbate, natural history, diagnosis and differential diagnosis for the following conditions: metabolic syndrome/ prediabetes, type 1 and type 2 diabetes. Describe the Canada Food Guide/ Just the Basics and its utility in diabetes management. Discuss the utility of food records in the management of diabetes. Describe the importance and utility of food label reading in the management of diabetes. Discuss the principles behind carbohydrate counting. Discuss the principles of sick day management. Discuss the principles of hypoglycemia management including key safety issues regarding hypoglycemia. Discuss the principles of exercise/ activity in diabetes management. Discuss key literature studies that inform diabetes practice. Discuss the pathophysiology, epidemiology, clinical presentation, risk factors, drugs that may cause/exacerbate, natural history, diagnosis and differential diagnosis, and treatment for the following conditions: diabetes complications including sexual dysfunction, mental health issues including depression. Discuss diabetes management in special situations including travel, corticosteroids, transplantation medications. Describe principles of education theory including program development.

**Intermediate Level:**

Discuss the principles of insulin adjustment and pattern management. Discuss the principles of blood glucose monitoring and pattern management.

**Skills**

**Introductory Level:**

Demonstrate the ability to critique and interpret results from observational studies, randomized controlled trials, and meta-analyses.
Intermediate Level:

Select relevant data from: review of systems, physical examination, laboratory tests, medical imaging to assess diabetes drug therapy and non-pharmacologic needs. Apply relevant findings from case studies: review of systems, physical examination, laboratory tests, medical imaging to determine actual and potential diabetes related drug therapy and non-pharmacologic needs. Analyze relevant information from subjective and objective sources using case studies (review of systems, physical examination, medical imaging, diagnostic test, biochemical markers) to determine diabetes related drug therapy and non-drug therapy problems, urgency, and priority for a given clinical situation. Justify the selection of a preferred alternative for a given therapeutic scenario based on assessment of relevant therapeutic and non-pharmacologic alternatives. Develop and justify a care plan with follow up for a given clinical situation. Evaluate the quality, accuracy, and completeness of the care plan. Interpret pharmacokinetic variables used to assess renal elimination of drugs. Adjust drug dosages for varying severity of renal impairment and for dialysis. Calculate the dose/interval of selected medications (e.g., metformin) for patients with reduced renal function and for dialysis. Alter or initiate insulin regimens and adjust insulin doses based on blood glucose readings.

Advanced Level:

Attitudes/Values:

Introductory Level:

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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Advanced Level:
2. Rationale for Inclusion in the Curriculum:

There is growing support within the pharmacy profession to require pharmacists to acquire specialized skills for chronic disease state management, including diabetes. As diabetes becomes a growing health concern for people of all ages, pharmacists need the knowledge and skills to help their patients live with the best possible outcomes. Although pharmacists have sufficient knowledge and skills to provide medication advice to their patients, there are many aspects of care that can be enhanced to provide more comprehensive care and education. The Certified Diabetes Educator (CDE) credential is awarded to health care professionals who have specialized knowledge and skills to be able to provide these enhanced services to patients with diabetes and is considered the industry standard. This course will provide much of the knowledge background needed to write the CDE examination.

3. Pre-requisites:

Anatomy/physiology (topics related to endocrinology). Pharmacokinetics (understand the effect of renal dysfunction on drug elimination and dose adjustment). Biostatistics (understand and critically appraise clinical trials). All required PCT Therapeutics courses. Patient Care Process (on-line component); on-line components MTM-1 PHM 105.

4. Co-requisites:

5. Course Contact Hours and Teaching Methodologies:

<table>
<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 26</th>
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</thead>
<tbody>
<tr>
<td>Large group problem-based/ case-based learning</td>
<td>(group size: )</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</td>
<td>(group size: )</td>
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<tr>
<td>Experiential</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>
</tr>
<tr>
<td><strong>Total Course Contact Hours</strong></td>
<td><strong>Hours: 26</strong></td>
</tr>
</tbody>
</table>

6. Estimate and description of student's weekly out-of-class preparation time excluding exam preparation:

Review learning objectives + prepared materials for classes (2-3 hrs/ week)

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**

**Lecture Topic:** Introduction to course + epidemiology and pathophysiology of diabetes

**Lecture Learning Objectives:**
Discuss the epidemiology of diabetes. Discuss the pathophysiology of different types of diabetes and insulin resistance syndrome.
Week 2
Lecture Topic: Insulin Regimens and Insulin Dose Adjustment

Lecture Learning Objectives:

Describe insulins available in terms of their pharmacokinetics. Describe insulin regimens and how they are constructed. Alter or initiate insulin regimens and adjust insulin doses based on blood glucose readings in patient cases. Select, apply, analyze relevant laboratory findings. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 3
Lecture Topic: Nutrition for diabetes I

Lecture Learning Objectives:

Discuss nutrition management of diabetes including the Canada Food Guide and Just the Basics. Compare and contrast different components of diet therapy. Discuss appropriate circumstances to refer a patient to a Registered Dietitian. Select, apply, and analyze relevant laboratory findings. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 4
Lecture Topic: Nutrition for diabetes II/ Carbohydrate counting

Lecture Learning Objectives:

Discuss the principles behind label readings. Describe the utility and the components of food records and diet histories. Identify the reasons to utilize carbohydrate counting. Discuss the principles behind carbohydrate counting. Select, apply, analyze relevant laboratory findings and diet histories. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.
Week 5
Lecture Topic: Exercise and activity in diabetes

Lecture Learning Objectives:

Discuss the use of exercise and activity in the management of diabetes. Describe the Canadian Diabetes Association’s strategies regarding exercise. Apply exercise and activity in the management of diabetes cases. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 6
Lecture Topic: Diabetes self-care I

Lecture Learning Objectives:

Discuss acute diabetes complications: hypoglycemia and hyperglycemia management, sick day management, diabetic ketoacidosis (DKA) and Hyperosmolar hyperglycemia state (HHS) management. Identify relevant laboratory findings and treatment targets for diabetes and acute diabetes complications management. Describe key safety issues with regards to diabetes self-care topics. Describe key patient counselling components regarding diabetes self-care topics. Select, apply, and analyze relevant laboratory findings. Counsel and adapt diabetes self-care needs for patients. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 7
Lecture Topic: Diabetes self-care II

Lecture Learning Objectives:

Describe the pathophysiology and management of the microvascular and macrovascular complications of diabetes mellitus. Describe the diagnosis and screening of microvascular and macrovascular complications of diabetes mellitus. Describe the pharmacist’s role in the prevention and management of the chronic complications of diabetes. Identify relevant laboratory findings and treatment targets for diabetes and diabetes complications management. Discuss key diabetes studies related to microvascular and macrovascular complications of diabetes mellitus in terms of their design, results, and impact on clinical practice. Describe key areas of controversy in diabetes clinical practice where trial data is lacking or inconclusive. Select, apply, and analyze relevant laboratory findings. Develop and justify care plan. Alter or initiate insulin regimens and adjust insulin doses based on blood glucose readings. Integrate nutrition and exercise knowledge from previous lectures and apply to diabetes management cases. Evaluate relevant clinical studies regarding diabetes practice. Apply relevant clinical studies to diabetes clinical practice controversies. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.
Week 8
Lecture Topic: Monitoring + Diabetic Foot Complications

Lecture Learning Objectives:

Discuss self-monitoring of blood glucose including appropriateness, frequency, and key teaching points for patients. Discuss A1C monitoring including frequency, proper use of A1C, clinical circumstances that limit A1C utility. Discuss ketone monitoring including appropriateness, frequency, and key teaching points for patients. Describe situations where continuous blood glucose monitoring may be appropriate. Discuss other self-monitoring activities regarding diabetes management. Discuss key diabetes studies in terms of their design, results, and impact on clinical practice. Describe key areas of controversy in diabetes clinical practice where trial data is lacking or inconclusive. Describe the diagnosis and screening of diabetic foot complications. Describe the pathophysiology and management of diabetic foot complications. Describe the pharmacist’s role in the prevention and management of diabetic foot complications. Describe the role of the chiropodist and other foot specialists in the management of diabetic foot complications. Select, apply, analyze relevant blood glucose logbook findings and make therapy recommendations based on pattern management principles. Develop and justify care plan including appropriate patient counselling. Alter and initiate insulin regimens and adjust insulin doses based on blood glucose readings. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 9
Lecture Topic: Special Situations I

Lecture Learning Objectives:

Describe appropriate diabetes management and explain relevant diabetes self-care counseling in the following special situations: Elderly (discuss implications of using drugs in geriatric patients), Pregnancy in Diabetes, Gestational diabetes. Diabetes as a secondary complication: New-onset diabetes after transplant, Steroid induced diabetes, Schizophrenia, Cystic fibrosis. Diabetes and Mental Illness. Explain relevant diabetes self-care counselling around special situations including diabetes management around colonoscopies and surgical preparation, diabetes management with travel, transplantation and diabetes, corticosteroids and diabetes. List depression screening tools, describe the impact of depression on diabetes, and discuss management strategies for diabetes in patients with depression. Select, apply, and analyze relevant laboratory and blood glucose findings. Counsel and adapt diabetes self-care and management for transplantation patients. Counsel and adapt diabetes self-care and management for patients started on corticosteroids. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.
Week 10
Lecture Topic: Pediatrics/Insulin Pumps

Lecture Learning Objectives:

Explain relevant diabetes self-care counselling and diabetes management in pediatric patients. Discuss the use of insulin pumps in diabetes management. Select, apply, and analyze relevant laboratory and blood glucose findings. Counsel and adapt diabetes self-care and management plans for patients using insulin pumps. Counsel and adapt diabetes self-care and management plans for pediatric patients. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 11
Lecture Topic: Special Situations II

Lecture Learning Objectives:

Describe appropriate diabetes management and explain relevant diabetes self-care counseling in the following special situations: Pre-op care in diabetes, Travel and diabetes, Sexual dysfunction in diabetes. Counsel and adapt diabetes self-care and management for sexual dysfunction in diabetes. Counsel and adapt diabetes self-care plans for special situations including colonoscopy and surgical preparation, travel. Select, apply, and analyze relevant laboratory and self-monitoring of blood glucose findings. Counsel and adapt diabetes self-care plans for complex patients. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.

Week 12
Lecture Topic: Complex Patients with Diabetes

Lecture Learning Objectives:

Describe pattern management techniques for patients with complex or multiple diabetes management related issues (e.g., renal patients, multiple diabetes complications present, psychiatric diagnoses, etc.). Select, apply, and analyze relevant laboratory and self-monitoring of blood glucose findings. Counsel and adapt diabetes self-care plans for complex patients. Develop and justify care plan. 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 inter-professional patient centered care principles to reach decisions for therapeutic alternatives. The student will demonstrate respect and collaboration in team functioning.
Week 13
Lecture Topic: Education Theory and Program Development for Diabetes

Lecture Learning Objectives:

Describe relevant adult education principles applicable to diabetes management both for individual and group teaching sessions. Describe the steps in developing a diabetes education program. Identify methods of evaluating the comprehension regarding diabetes learning for patients. Select appropriate teaching methods for patient education for both individual and group education.

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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<tr>
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<tr>
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<td>☐ Final Exam</td>
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Expectation for pass grades for all Pharmacy courses is 60%

9. Policy and procedure regarding late assignments/examinations/laboratories:

N/A

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

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 make-up 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.
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.