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: PHM386H1

Course Title: Mental Health and Addictions Elective

Outline Version Code:

Course Description:

This course is designed to provide students interested in mental health and addictions with a broader knowledge base in the field. It will introduce students to the mental health and addiction system in Canada, the role of stigma in accessing and providing care, the role of psychotherapy and the evidence base for specific modalities, including cognitive behaviour therapy (CBT), interpersonal psychotherapy (IPT), mindfulness therapy, and motivational interviewing. The course will also address issues such as medication adherence and mental health first aid. Students will also be taught how to use validated scales to assess for psychotropic-induced movement disorders. The course will introduce additional mental health disorders/issues, not covered in PHM 302 including psychotropic medication use in pregnancy and lactation and child and adolescent psychiatry. It will also cover key substance use disorders/issues in more depth than was possible in PHM 302, including harm reduction principles, cannabis use (recreational and medicinal), recreational drugs and anabolic steroids. The course will be taught using a variety of techniques including didactic lectures, observed patient interviews (video-simulation), case-based learning and interactive group learning.

Semester: ☒ Winter

Course Type: ☒ Elective

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 evidence of non-drug measures used to treat different mental health disorders (e.g., Electroconvulsive Therapy (ECT), Repetitive Transmagnetic Stimulation (rTMS), Cognitive Behavioural Therapy (CBT), Interpersonal Psychotherapy (IPT), Mindfulness therapy and Motivational Interviewing. Describe the role of Mental Health First Aid programs in Canada and the utility for practicing pharmacists. Discuss the evidence of non-drug measures used to treat different substance use disorders (e.g., Cognitive Behavioural Therapy (CBT), Interpersonal Psychotherapy (IPT), Mindfulness therapy, Motivational Interviewing, and group versus individual therapy. Identify key referral resources for patients experiencing problems related to substance use.

**Intermediate Level:**

Discuss the Mental Health and Addiction System in Canada and identify the strengths and limitations of such systems. Recognize the intersection of the health and legal systems as they relate to mental illness in Ontario. For the following selected mental health disorders, summarize the etiology, neuroscience concepts, epidemiology, clinical presentation, risk factors and progression: personality disorders and attention deficit and hyperactivity disorders. Identify the diagnostic criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders IV and 5, used in the diagnosis and ongoing monitoring of the selected disorders. Recognize different movement disorders in patients with mental illness and be able to apply the following rating scales (Abnormal Involuntary Movement Scale [AIMS], Barnes Akathisia Rating Scale [BARS], Symptom Angus Scale [SAS]) to a patient for the purpose of assessing side effect severity at the time of diagnosis and throughout treatment. Compare and contrast the available classes of medications used for the selected disorders based on the following criteria: indications, efficacy, mechanism of action, pharmacokinetics, pharmacodynamics, pharmacogenomics, adverse effects, warnings/precautions, contraindications, drug interactions (drug-drug, drug-food, drug-laboratory), convenience, cost, formulations and stability. Recognize the role of the pharmacist in medication adherence and identify evidence based strategies to facilitate this process in patients with mental illness. Identify the role for psychotropic medications in pregnancy and lactation. Explain stigma and how it impacts patient care. Compare and contrast the available classes of medications used for the selected disorders based on the following criteria: indications, efficacy, mechanism of action, pharmacokinetics, pharmacodynamics, pharmacogenomics, adverse effects, warnings/precautions, contraindications, drug interactions (drug-drug, drug-food, drug-laboratory), convenience, cost, formulations and stability. Recognize the intersection of provincial, national and international health and legal systems as they relate to addiction. Describe how harm reduction principles are important in providing patient-centred care. Justify an evidence-based, patient-centered approach in managing patients with concurrent opioid use disorders and pain.

**Advanced Level:**

**Skills**

**Introductory Level:**


Intermediate Level:

Select relevant data from patient demographics, review of systems (ROS), laboratory tests, medical imaging, and, drug therapy in order to identify drug therapy problems. Analyze relevant information from subjective and objective sources, (e.g., review of systems, medical imaging, diagnostic tests, biochemical markers), to identify 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 the assessment of relevant therapeutic alternatives and specific patient population. Develop a care plan for a given clinical situation. Locate reliable sources of information in the area of psychiatric therapeutics. Demonstrate the ability to critique and interpret results from observational studies, randomized controlled trials and meta-analyses in mental health and addictions. Assess patients for movement related disorders using the Abnormal Involuntary Movement Scale [AIMS], Barnes Akathisia Rating Scale [BARS], Simpson Angus Scale [SAS]. Evaluate the scientific literature for evidence for or against the use of psychoactive substances for therapeutic purposes.

Advanced Level:

Demonstrate the skills required to initiate varenicline and bupropion for smoking cessation, and to adapt and renew medications for the selected disorders.

Atitudes/Values:

Introductory Level:

The student will integrate sexual orientation and gender identity in the assessment and treatment process.

Intermediate Level:

The student will undertake assessment and care plan development activities in a manner that illustrates their understanding of the importance of respecting patient autonomy and individual therapeutic goals. The student will use interprofessional patient-centered care principles to reach decisions for therapeutic alternatives with members of their peer groups. The student demonstrates a non-judgmental, empathetic, and professional attitude towards patients who have psychiatric and substance use disorders, which continue to be associated with significant stigma.

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

Mental Health Disorders account for significant morbidity and mortality worldwide. The World Health Organization lists several mental health disorders on their list of the top 10 leading causes of disability worldwide. In Canada, 1 in 5 Canadians will personally experience a mental illness during their lifetime. (Health Canada. A Report on Mental Illness in Canada, 2002). In Ontario, the Select Committee on Mental Health and Addiction reviewed the mental health system in Ontario and in their final report (2010), recommended that primary care providers should be given the proper tools and support to enable them to develop a greater sensitivity for the mental health and addictions needs of their patients, and that all interdisciplinary primary care models should include a mental health and addictions treatment component. A key recommendation in the College of Physicians and Surgeons of Ontario report entitled, “Avoiding Abuse, Achieving a Balance: Tackling the Opioid Public Health Crisis” (2010) is that enhanced training and ongoing education of health care providers in the safe use of opioids is needed. For students with a particular interest in the field of Mental Health and Addictions, this course provides learning and experiences beyond the core disorders and pharmacotherapy taught in Phm 302: Neuropsychiatry. It introduces students to the mental health system in Canada, the social issues faced by patients with mental illness, the role of non-drug measures in the treatment of mental illness and provides enhanced learning opportunities for pharmacy students who wish to learn how to manage patients with complex mental health disorders.

3. Pre-requisites:

PHM302H1

4. Co-requisites:

5. Course Contact Hours and Teaching Methodologies:

<table>
<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large group problem-based/ case-based learning (group size: )</td>
<td>Hours:</td>
</tr>
<tr>
<td>Laboratory or Simulation</td>
<td>Hours:</td>
</tr>
<tr>
<td>Tutorial/Seminar/Workshop/Small Group (group size: )</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><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, required readings, and notes for each lecture (3 hrs/ week), higher during weeks of assignment and exams.

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**

**Lecture Topic:** Introductions/Course Overview/Expectations/Delivery and Nonpharmacological Treatments for Psychiatric Disorders
Lecture Learning Objectives:

- List alternative treatment modalities for mental health disorders
- Describe ECT, rTMS, VNS, DBS, and their place in therapy
- Identify key types of psychotherapy and their role in treating mental illness
- Describe the role of mindfulness for smoking cessation

Week 2
Lecture Topic: Mental Health & the Law

Lecture Learning Objectives:

(via video)

- Define 'not criminally responsible'
- Outline experiences of individuals affected by mental illness, directly or indirectly

Week 3
Lecture Topic: Harm Reduction

Lecture Learning Objectives:

- Define and provide examples of harm reduction
- Reflect on your own thoughts and opinions about harm reduction
- Summarize the evidence for supervised injection facilities
- Provide education regarding opioid overdose prevention and management, including naloxone administration
- Describe the role pharmacists can play in reducing harms associated with drug use

Week 4
Lecture Topic: Asking the Right Questions Gender Identity and Sexual Orientation

Lecture Learning Objectives:

- Define key terms related to sexual orientation and gender identity
- Reflect on own thoughts and biases related to the LGBTIQ community
- Provide examples of how discrimination may impact mental health
- Discuss how LGBTIQ-specific life experiences impact mental health

Week 5
Lecture Topic: Mental Health First Aid, and Psychotropic drugs in pregnancy and lactation

Lecture Learning Objectives:

- To describe what mental health first aid (MHFA) is and what its purpose is
- Discuss the evidence to support MHFA
- Demonstrate knowledge as to how to perform a suicide risk assessment for patients
• Identify warning signs, risk and protective factors associated with suicide

**Week 6**
**Lecture Topic:** Stigma and Personality disorders

**Lecture Learning Objectives:**

For stigma:

• Define stigma
• Provide examples of how stigma impacts mental health and its care
• Recognize and address stigmatizing language
• Justify the role of the pharmacist in combating stigma

For personality disorders:

• Brief overview of theories of personality development
• Recognize key features of each personality disorder
• Utilize skills to work with difficult patients (and sometimes colleagues)

**Week 7**
**Lecture Topic:** Understanding and Assessing Movement related disorders and Tardive Dyskinesia in patients with Mental Health Disorders

**Lecture Learning Objectives:**

(IN CLASS ASSIGNMENT DURING THIS LECTURE)

• Recognize and assess movement disorders using scales

**Week 8**
**Lecture Topic:** Child and Adolescent Psychiatry: Attention Deficit Hyperactivity Disorder

**Lecture Learning Objectives:**

By the end of this lecture students will be able to:

• Summarize the historical evolution of ADHD
• Describe the etiology associated with ADHD
• List key diagnostic features of ADHD
• Discuss the pharmacological and non-pharmacological treatment options for ADHD
• Discuss the role of the pharmacist in ADHD

**Week 9**
**Lecture Topic:** Cannabis: Recreational and Medicinal Use
Lecture Learning Objectives:

- Describe the prevalence of cannabis use in Canada
- Explain the adverse effects of cannabis use
- Summarize the current state of evidence pertaining to the use of marijuana for medical purposes
- Describe the Marijuana for Medical Purposes Regulation in Canada
- Discuss the potential merits and risks associated with legalizing cannabis

Week 10
Lecture Topic: Recreational Drugs and Anabolic steroids

Lecture Learning Objectives:

- Describe trends in recreational drug use amongst Ontario youth
- Compare and contrast commonly used groups of recreational drugs
- Describe pharmacists' roles in assisting patients with recreational drug use

Week 11
Lecture Topic: Therapeutic applications of recreational drugs

Lecture Learning Objectives:

- Evaluate the evidence for the use of ketamine, ayahuasca, and MDMA as pharmacotherapies
- Summarize the evidence for the abuse of psychotropic medications, excluding opioids, benzodiazepines and stimulants
- Outline current approaches for evaluating abuse potential on micro- and macro- levels

Week 12
Lecture Topic: Opioids & Pain

Lecture Learning Objectives:

- Utilize a therapeutic thought process and a stepwise approach in assessing, managing, and monitoring pain and opioid use
- Identify the role of opioids in acute and chronic pain
- Apply national opioid use guidelines
- Apply concepts of opioid stewardship to practice

Week 13
Lecture Topic: Smoking Cessation – Ready to Prescribe?

Lecture Learning Objectives:

- Describe the Ontario Pharmacy Smoking Cessation Program and evaluate its uptake and effectiveness
- Prescribe or recommend appropriate pharmacotherapy for patients who wish to quit smoking
- Create a comprehensive care plan, including specific monitoring parameters, for patients who wish to quit smoking
- Dispel common myths held by patients and health care providers regarding smoking and smoking cessation
- Justify the role of the pharmacist in supporting smoking cessation initiatives at the level of the individual and on a population level

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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</thead>
<tbody>
<tr>
<td>☒ Assignment</td>
<td>Written and critical thinking skills used to identify, discuss, and defend evidence-informed opinions pertaining to current events.</td>
<td>Assessment of writing and critical thinking skills via Blackboard Discussion Board of current events.</td>
<td>10%</td>
<td>N/A</td>
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<tr>
<td>☐ Presentation</td>
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<td>☐ Participation</td>
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<td>☐ Mid-term</td>
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<td>☐ Final Exam</td>
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<tr>
<td>☒ Assignment</td>
<td>Skills used to identify and assess patients for movement related side effects.</td>
<td>Assessment of Movement Related Disorders Using validated scale.</td>
<td>10%</td>
<td>N/A</td>
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<td>☐ Presentation</td>
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<td>☒ Final Exam</td>
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<tr>
<td>☐ Assignment</td>
<td>Relevant knowledge, skills, attitudes/values for topics in weeks 1-7 as per Topic Outline/Schedule above.</td>
<td>MCQ, short answer questions.</td>
<td>40%</td>
<td>N/A</td>
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<td>☐ Assignment</td>
<td>Relevant knowledge, skills, attitudes/values for topics in weeks 8-13 as per Topic Outline/Schedule above.</td>
<td>MCQ, short answer questions.</td>
<td>40%</td>
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Expectation for pass grades for all Pharmacy courses is 60%

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

Student who present late to the in-class assignment will not have any additional time to complete the in-class assignment.

Students who are late in submitting their 'In the News' assignment will be deducted marks as per the assignment rubric.

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

Only students who miss an examination or in-class assignment and 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
- CP2.4.4 dispensing and/or compounding and/or 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 Demonstrates 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.