

*The Canadian Council for Accreditation of  
Pharmacy Programs*

**INTERNATIONAL ACCREDITATION  
STANDARDS AND GUIDELINES  
for  
FIRST PROFESSIONAL DEGREE  
IN PHARMACY PROGRAMS**



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

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## PREFACE

Accreditation is the public recognition accorded to a program that meets established educational standards through initial and periodic evaluation. Accreditation concerns itself with both quality assurance and program enhancement. It applies to programs and is to be distinguished from certification or licensure, which applies to individuals.

The Mission of The Canadian Council for Accreditation of Pharmacy Programs (CCAPP) is to grant accreditation awards to Pharmacy and Pharmacy Technician programs that meet the Standards set by CCAPP and to promote continued improvement of those educational programs for pharmacy practitioners and pharmacy technicians. These International Accreditation Standards address Baccalaureate in Pharmacy degree programs and First Professional Degree Doctorate of Pharmacy programs that are delivered in countries other than Canada. The Standards reflect professional and educational attributes identified by CCAPP and stakeholders as essential for International programs that intend to develop practicing, clinical, patient-focused pharmacists. The Standards are not appropriate for programs that intend to develop pharmacists for careers in industry, for degrees focused on pharmaceutical sciences, and for pharmacy degrees granted in Canadian schools.

These Accreditation Standards recognize that pharmacy education of high quality will depend on multiple components, including general knowledge, basic and professional sciences, and professional practice experience. In countries where pharmacy educational outcomes for first professional degree pharmacy programs do not exist or where a professional licensing body has not established entry-to-practice competencies, it is understood that the pharmacy curriculum will reflect the contemporary needs and emerging roles of pharmacists of the country in which the program operates. CCAPP believes that:

- Pharmacy graduates must have a broad understanding of health, the factors that contribute to a healthy community, and the structure and role of the health system in the country where the program operates.
- Pharmacy graduates must have the ability to manage and evaluate information, and the skills needed to advocate on behalf of individuals and the community.
- Pharmacists are expected to be able to work with people of different cultures with diverse values, beliefs, and customs.
- Pharmacists are expected to be trusted and respected members of the communities in which they work, develop skills in judgment and public relations, and provide support to students and new health providers.
- Pharmacists must practice with compassion, empathy, and integrity.
- Pharmacists are expected to work in intra- and inter-professional teams and be adaptable enough to work in a variety of settings.



The public is entitled to demand that the graduates of a professional degree program can demonstrate they have mastered the entry-to-practice competencies for that profession. For that reason, examples of evidence focus on educational outcome measures to the greatest extent possible, rather than structure, input or output measures of quality.

*How to cite this document:*

Canadian Council for the Accreditation of Pharmacy Programs (CCAPP).

*International Accreditation Standards for First Professional Degree in Pharmacy Programs.*

Toronto: Ibid; 2017 January.



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Because of the differences in scope of practice of the profession within other jurisdictions, in the pharmacy laws and regulations, and in the practice experiences of the students, CCAPP adds the term “International” to any level of accreditation conferred to a school of pharmacy based outside of Canada. The implication of this international CCAPP award for graduates towards future licensure or registration as a pharmacist or pharmacy technician in Canada does not change the path to licensure (requirements) the foreign pharmacy graduates will have to follow (meet) in Canada.

## Part I: Academic Program

### A. *Educational Outcomes*

**Standard 1:** The professional program in pharmacy is based on an organized educational framework that facilitates development of graduates with competencies to meet the entry-level scope of practice.

**Criterion 1.1:** Educational outcomes and entry-to-practice competencies are based, at a minimum, on a recognized national body’s current description of the ethical, legal and professional responsibilities of a pharmacist in the nation where the professional program in pharmacy is based.

*Examples of Evidence:*

- Outline of educational outcomes and entry-to-practice competencies adopted by the program
- Curriculum mapping of educational outcomes or matrix of outcomes linked to course materials and expected level of achievement
- Graduation rate

**Criterion 1.2:** The curriculum educational framework and any subsequent changes are documented and evaluated against the entry-to-practice competencies and educational outcomes.

*Examples of Evidence:*

- Evaluation of the changes made to the program and the impact on educational outcomes

### B. *Learning Environment*

**Standard 2:** The Faculty provides an environment and culture that promotes professional behaviour and harmonious relationships among students, and between students and faculty members, administrators, preceptors and staff.



**Criterion 2.1:** The Faculty has a student code of conduct that defines expected behaviours and consequences for deviation from the code. The code is consistent with University policy. Students are aware of the code of conduct and the process for appeals.

***Examples of Evidence:***

- Code of conduct and procedures regarding its communication and application
- Evidence of enforcement of the code through specific examples
- Incorporation of the code in student assessments
- Data from student surveys and assessments that indicates understanding of the code or ability to apply the code

**Criterion 2.2:** The Faculty supports student participation in pharmacy, scientific, and other professional organizations and activities.

***Examples of Evidence:***

- Policy for attendance
- Financial support
- Documentation of attendance at such events

**Criterion 2.3:** The Faculty implements strategies and activities to strengthen the professional culture of the student experience.

***Examples of Evidence:***

- Participation in professional curricular and extracurricular activities
- Service learning, volunteer experiences, community-engaged scholarship, or similar initiatives
- Other professional activities, such as white coat ceremonies and student-developed codes of conduct, etc.

## ***C. Curriculum***

**Standard 3: The professional degree program in pharmacy has a minimum of four academic years, or the equivalent number of hours or credits, including a series of core courses, practice experiences and interprofessional experiences that support educational outcomes.**

**Criterion 3.1:** The academic program leading to the Bachelor of Science in Pharmacy degree includes a total of 16 weeks (minimum) (640 hours) of practice experiences. The total hours of practice experiences provides the opportunity to develop proficiency in all competencies required for entry-to-practice pharmacy practice.



**Criterion 3.1a:** Early and mid-program practice experiences involve at least four weeks (160 hours) of student placement in direct patient care practice. Those experiences may be supplemented with additional volunteer activities, service learning or other forms of community-engaged learning.

**Criterion 3.1b:** The sustained period of required concluding practice experiences near the end of the program involves at least twelve weeks (480 hours) of full-time direct patient care practice.

**Criterion 3.2:** The academic program leading to the PharmD first professional degree includes a total of forty weeks (minimum) (1600 hours) of practice experiences. The total hours of practice experiences provides the opportunity to develop proficiency in all competencies required for entry to pharmacy practice.

**Criterion 3.2a:** Early and mid-program practice experiences involve at least eight weeks (320 hours) of student placement in direct patient care practice. Those experiences may be supplemented with additional volunteer activities, service learning or other forms of community-engaged learning.

**Criterion 3.2b:** The sustained period of required concluding practice experiences near the end of the program involves thirty-two weeks (1280 hours) of practice experience of which at least twenty-four weeks (960 hours) comprises full-time direct patient care practice.

***Examples of Evidence:***

- Description of program general design and changes in design over the last 5 years
- Evaluation of design to meet educational outcomes
- Analysis of hours relative to requirements for placements
- Documentation of direct patient care service hours

**Criterion 3.3:** The Faculty ensures that the professional program includes diversity of required and elective courses, and practice experiences that incorporate different levels of patient acuity, and an organized progression in the level of expected performance that supports growth in students' capabilities to meet educational outcomes.

***Examples of Evidence:***

- Details of program design
- Description of how the organization of foundational content, and practice experiences address achievement of educational outcomes and program goals
- Evaluation of composition of and diversity within the curriculum (e.g. foundational content, practice skills, practice experiences)



**Standard 4: The curriculum includes foundational content in: biomedical, pharmaceutical, behavioural, social, and administrative pharmacy sciences; clinical sciences including clinical practice skills; and practice experiences.**

**Criterion 4.1:** The curriculum includes foundational content in the biomedical sciences that provides the basis for understanding health promotion and disease prevention, and includes but is not limited to content in anatomy, biochemistry, immunology, microbiology, molecular and cell biology, physiology, and pathophysiology (any or all of which can be started in the pre-pharmacy program and extended in the professional program).

*Examples of Evidence:*

- Documents showing course content

**Criterion 4.2:** The curriculum includes content in the pharmaceutical sciences of such depth, scope, timeliness, quality, sequence, and emphasis to provide foundation for and support to the intellectual and clinical objectives of the professional program in pharmacy. This includes but is not limited to medicinal chemistry, pharmacology, toxicology, pharmaceutics, biopharmaceutics, pharmacokinetics, pharmaceutical biotechnology and pharmacogenomics.

*Examples of Evidence:*

- Documents showing course content, topics and learning outcomes

**Criterion 4.3:** The curriculum includes content in the behavioural, social, and administrative pharmacy sciences that provides the basis for understanding and influencing management processes in pharmacy, pharmacy and health systems, the drug safety system, the causes and prevention of health system (including medication) errors, and the role of governments in the planning, funding and delivery of health care services. This includes but is not limited to content in the profession of pharmacy, biostatistics, pharmacy informatics, pharmacoepidemiology, health care economics, pharmacoconomics, ethical and professional standards of practice, cultural diversity, health systems, business and practice management.

*Examples of Evidence:*

- Documents showing course content, topics, and learning outcomes

**Criterion 4.4:** The curriculum includes a clinical sciences component that provides for the understanding and acquisition of knowledge and development of skills necessary for the delivery of competent care to, or on behalf of, patients throughout the health care system. This includes but is not limited to content in clinical pharmacokinetics, complementary and alternative medicines, drug abuse and dependency, drugs in pregnancy, emergency first care, geriatrics, health promotion and disease prevention, immunization, information technology



and practice support tools, medication administration, nutrition, pediatrics, pharmacy law and regulatory issues, pharmacotherapeutics, the pharmacist's role in public health, the pharmacist's role in primary care, medication and patient safety practices, and self care/non-prescription drug use.

*Examples of Evidence:*

- Documents showing course content, topics, and learning outcomes

**Criterion 4.5:** Practice skills are developed to achieve educational outcomes through laboratory, simulation, and practice-based experiences.

*Examples of Evidence:*

- Outline of practice skills, for example: disease state management, dispensing and prescription processing, drug information, literature evaluation, evidence-based decision making, patient assessment, outcomes monitoring, patient and professional communications, accessing patient health information, documentation of care, medication therapy management
- Methods utilized to determine needs for the practice skills curriculum
- Mapping of practice skills to educational outcomes and contemporary practice responsibilities
- Achievement of educational outcomes

**Criterion 4.6:** The curriculum develops student leadership and professionalism.

*Examples of Evidence:*

- Examples of leadership development activities for students
- Documentation of leadership positions held by students
- Documentation of student professionalism during on and off campus activities

**Standard 5: Practice experiences are of adequate intensity, breadth, structure, duration and variety so as to achieve educational outcomes. Practice experiences are acquired in high quality practice settings in a variety of care sectors, involving patients with a variety of healthcare service needs. Experiences integrate, reinforce and advance the knowledge, skills, attitudes and values developed through the other components of the professional program.**

**Criterion 5.1:** The curriculum includes practice experiences where students develop clinical skills necessary to assist a variety of patients with acute illnesses and/or chronic conditions in primary (community, ambulatory, home care), acute, and long-term care settings in urban, rural/remote and marginalized communities, and patients in transition between care sectors or service locations.



*Examples of Evidence:*

- Outline of practice sites, for example: practice sites providing primary care, acute care, long term care; rural, urban practice sites
- Analysis of practice experiences needed to meet curricular requirements
- Mapping of practice experiences to educational outcomes, competencies and contemporary practice responsibilities
- Evaluation of practice experiences, patients, and sectors of care and how these experiences address educational outcomes
- Proportion of students engaged in practices experiences offered in the curriculum, demonstrating breadth of practice exposure over the duration of the program
- Assessment of student access to practice experiences needed to meet the Standard

**Criterion 5.2:** Student tasks at all stages of experiential learning contribute meaningfully, productively, and safely to direct patient care and other professional activities of the practice site at a level appropriate to the student's level of preparedness and year of study.

*Examples of Evidence:*

- Mapping of student tasks to year of study, educational outcomes and contemporary practice responsibilities
- Evaluation, by students and preceptors, of student tasks, contributions, and preparedness and ability to contribute meaningfully, productively and safely to care delivery

**Standard 6: The curriculum includes required intra- and inter-professional learning experiences, offered throughout the professional program to broaden understanding of roles and competencies of pharmacists and other health professionals, including pharmacist support staff such as clerks, assistant or technicians where those roles exist.**

**Criterion 6.1:** Experiences address content to develop the expected competencies for intra- and interprofessional care. Experiences are integrated throughout the professional program.

*Examples of Evidence:*

- Outline of content areas, for example: communication, teamwork, group dynamics, problem solving, negotiation, etc.
- Methods utilized to determine needs for intra- and inter-professional curriculum
- Mapping of intra- and inter-professional educational activities to educational outcomes and contemporary practice responsibilities
- Evaluation, by students, faculty members, and preceptors, of intra- and inter-professional educational activities as it relates to expected outcomes
- Proportion of students engaged in intra- and inter-professional educational activities offered in the curriculum

## ***D. Teaching, Learning, and Assessment***

**Standard 7: The Faculty utilizes a variety of teaching, learning and assessment methodologies to produce graduates who meet the required educational outcomes.**

**Criterion 7.1:** The program includes an overall plan of instructional design that supports the needs of diverse learners while developing the knowledge, skills, behaviours and judgment required of the pharmacy graduate at entry to practice.

### ***Examples of Evidence:***

- Process to determine learning needs and teaching methods
- Instructional design outline that describes teaching and learning strategies utilized in the program, for example: large group, small group, simulation, laboratory experience, case discussion, practice experience.
- Evaluation by students, faculty members and preceptors, of teaching and learning strategies

**Criterion 7.2:** A variety of assessment methods are systematically and sequentially applied throughout the program to provide formative and summative feedback to students, and to confirm students' achievement of educational outcomes.

### ***Examples of Evidence:***

- Examples of assessment methods utilized: formative, summative, self, or peer
- Mapping of teaching, learning, and assessment strategies to achievement of educational outcomes
- Outline of the reliable and valid assessment instruments utilized to measure cognitive learning and the mastery of practice skills, values and attitudes that contribute to achievement of educational outcomes
- Evidence of the effectiveness of assessment tools to achieve educational outcomes
- Evaluation of assessment methods utilized in the program, by students, faculty members and preceptors

**Criterion 7.3:** The Faculty utilizes criteria, policy, and procedures for academic progression, academic probation, dismissal, and readmission in accordance with University policy. Student responsibilities and rights to due process, including appeal mechanisms, are published and made available.

### ***Examples of Evidence:***

- Procedures utilized to document students' progressive achievement of the educational outcomes and competencies throughout the curriculum
- Process utilized to monitor student performance for the early detection of students in academic difficulty

- Evidence of expeditious intervention and access to student services, such as tutorial support or faculty advising
- Evidence of policy and procedures, website or calendar entries.
- Examples of remediation programs and outcomes
- Evaluation of assessment methodologies and student success in the program

## Part II: Governance and Program Management

### A. University Structure and Commitment

**Standard 8: The Faculty is located in a University within an academic health sciences network or has a close relationship with such a network of health care facilities that have an academic mission toward research and other scholarly activities.**

**Criterion 8.1:** At a minimum, the other health sciences programs include Medicine and Nursing with whom the Faculty has effective collaborations. If the University does not have these programs, the Faculty has a formal alliance at another university within close proximity.

*Examples of Evidence:*

- Documentation to demonstrate effective collaboration with Medicine, Nursing and other health sciences programs where applicable

**Criterion 8.2:** The University demonstrates a commitment to research and other scholarly activities through appropriate infrastructure, in order to create an environment of scholarship for faculty members and students.

*Examples of Evidence:*

- Descriptions of scholarly projects shared across health sciences programs
- Description of research and other scholarly activity by the University and by the Faculty
- Number and types of post-graduate programs
- Opportunities for student involvement in research
- Key performance indicators that measure research productivity

**Criterion 8.3:** Where two or more academic institutions jointly provide a pharmacy program, there is a contractual arrangement(s) or signed agreement(s) that defines clearly the responsibilities for all aspects of the program and that delineates the name of the jointly offered program for the purposes of conferring a credential. One academic institution is designated the primary partner who has the day-to-day authority and responsibility for the program including the quality of the program. The primary partner is responsible for all aspects relating to International Accreditation.

*Examples of Evidence:*

- Contract(s) or agreement(s) that governs the jointly operated program

**Standard 9: The Faculty has University support for affiliations, collaborations, and partnerships (internal and external to the University) necessary to advance the education, research, clinical practices, and service missions of the Faculty.**

**Criterion 9.1:** The University supports the development of suitable relationships between the Faculty and other academic and service units of the University and practice settings in order to provide an appropriate environment for education, research and patient care.

*Examples of Evidence:*

- University structure or the unit in which the Faculty resides, and how this supports the relationships with health sciences coordinating bodies

**Criterion 9.2:** Relationships, collaborations and partnerships required, supported or encouraged by the University are informed by policy, formal and informal agreements or affiliations that fully describe the terms and conditions expected or imposed on the Faculty, its faculty members and staff, and students and on the internal or external organizations, agencies, bodies, or facilities.

*Examples of Evidence:*

- Examples of how issues are addressed between partners
- Availability of University-affiliated health care teaching facilities to the professional program in Pharmacy
- Existence of formal agreements to codify the nature and intent of the relationship, collaboration, or partnership

**Criterion 9.3:** Policies, procedures, and documentation are in place to address actual, potential, or perceived conflict of interest, professional misconduct and breach of ethics.

*Examples of Evidence:*

- Conflict of interest, disclosure and development policy; policy regarding acceptance of gifts and benefits by individual faculty members, staff and students.
- Examples of how the conflict of interest policy has been utilized
- Professional conduct policy

## ***B. Faculty Organization and Leadership***

**Standard 10: The Faculty has a vision and mission aligned with that of the University in education, practice, research and other scholarly activities.**

*Examples of Evidence:*

- Documentation that faculty members, staff and students are aware of how the Faculty's vision and mission statement aligns with the University's

**Standard 11: The professional degree in pharmacy program is housed in a unit that is equivalent to a Faculty, College, or School.**

**Criterion 11.1:** A Dean/Director heads the Faculty, College or School that offers the pharmacy program.

*Examples of Evidence:*

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

**Criterion 11.2:** The unit's degree of autonomy is the same as other faculties or schools at the University.

*Examples of Evidence:*

- Description of budgeting processes relative to other health sciences faculties
- Reporting policy of the Dean/Director
- Process for curricular approval is the same as for other units in the university
- Procedure for faculty appointments is the same as for other units in the university

**Standard 12: The Faculty is organized in a manner that facilitates the accomplishment of its mission and progress towards its vision.**

**Criterion 12.1:** A Faculty governance structure is in place.

*Examples of Evidence:*

- Documentation of the Faculty governance structure, developed through faculty member consensus in accordance with University regulations
- Faculty organizational and administrative structure with lines of authority and responsibility
- Committees' structure and responsibilities

**Criterion 12.2:** The Faculty governance structure facilitates accomplishment of the mission and vision.

*Examples of Evidence:*

- Examples of how decisions are made in the context of the governance structure
- Evaluation of the governance structure's effectiveness in accomplishing the mission, vision and strategic plan

**Criterion 12.3:** The governance structure ensures that students are represented in relevant Faculty committees.

*Examples of Evidence:*

- Committee terms of reference and membership
- Opinions from students on their involvement

**Standard 13: The Faculty, under the leadership of a Dean/Director, fulfills its mandate in its professional program, research and scholarly mission.**

*Examples of Evidence:*

- Examples of the Dean/Director's role in supporting change, innovation and quality improvement activities
- Criteria for appointment and review of the Dean/Director
- Job description of the Dean/Director

### ***C. Planning and Evaluation***

**Standard 14: The Faculty has a current strategic plan that is systematically reviewed and updated to facilitate the achievement of the Faculty's mission, vision, goals and objectives. Plans and planning processes have the support and cooperation of the University administration.**

**Criterion 14.1:** The planning process provides for broad-based input from faculty members, students, practitioners, alumni, and other key stakeholders or constituent groups. The process considers financial, programmatic and academic planning within the context of professional changes occurring and anticipated.

*Examples of Evidence:*

- Description of the participants and outcomes related to the current strategic plan.

**Criterion 14.2:** The Faculty's strategic plan is current and has the support of senior University administration.

*Examples of Evidence:*

- Copy of the Faculty's strategic plan
- Description of the planning cycle for the next strategic plan
- Discussion about how the plan addresses the context of professional changes
- Description of alignment with the University plan
- Examples of senior administration support



**Standard 15: The Faculty establishes and maintains systems that measure and evaluate the extent to which the mission, vision, goals and objectives are achieved.**

**Criterion 15.1:** The Faculty's strategic plan is incorporated into operational activities.

*Examples of Evidence:*

- Communication processes to inform faculty members, students, preceptors, the profession and other interested parties of Faculty performance or achievements

**Criterion 15.2:** The Faculty establishes and maintains systems that provide information to support planning and direction that inform necessary changes.

*Examples of Evidence:*

- Performance indicators utilized to measure the progress or achievement in a program or activity (performance measures correspond to the strategic plan)
- The expected standard of performance or achievement
- The tools or sources for data utilized or collected to measure the indicator
- The frequency of data collection
- Description of the process to analyze the data and determine deviations from expected performance
- Examples of decisions made in response to data that were gathered

## ***D. Admissions***

**Standard 16: The Faculty utilizes published criteria, policy, and procedures to admit students to the professional program in pharmacy.**

**Criterion 16.1:** Admissions criteria include the satisfactory completion of post-secondary, pre-professional course requirements in general education and basic and biomedical sciences.

*Examples of Evidence:*

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

**Criterion 16.2:** Admissions criteria assess the suitability of candidates to enter the profession of pharmacy.

*Examples of Evidence:*

- Assessment methods such as (but are not limited to): the results of standardized interviews of applicants; evaluation of verbal and/or written communication skills; evaluation of an understanding of the pharmacy profession; or evaluation of the commitment to patient-focussed care
- Defined essential skills relevant to performance expectations in the academic program and subsequent practice of a pharmacist that could assist a potential applicant, with appropriate accommodations, if necessary to accurately gauge interest and suitability for the field of pharmacy.
- Level of expected performance on other standardized tests

***E. Continuous Quality Assurance of the Program***

**Standard 17: A governance structure within the Faculty directs and supports the design, development, implementation, formative assessment, and review of a curriculum that satisfies the educational outcomes required for the professional program in pharmacy.**

**Criterion 17.1:** The governance structure comprises faculty members, students and representatives from the profession or membership as permitted by University policy.

*Examples of Evidence:*

- Current membership list
- Terms of reference, structure, and reporting relationships within the Faculty
- Samples of minutes of meetings

**Criterion 17.2:** Regular systematic reviews of curricular structure, content, process, and outcomes are conducted:

- a) Evaluation of processes by which the program utilizes collected information and evaluation data to improve the quality of the various components of the program
- b) Evaluation of each component of the program, within the Faculty and at each practice site, to ensure that the educational objectives are being met
- c) Evaluation of resource allocation to ensure that resources and facilities are being utilized with optimal effectiveness across all components of the program
- d) Evaluation of faculty members, with evidence that faculty members receive feedback in a timely manner
- e) Evaluation of the effectiveness of liaison relationships between units, faculty/staff members, preceptors, and persons who come from outside the Faculty to support delivery of the curriculum
- f) Evaluation of the quality of the different learning environments (e.g. classroom, online, simulation lab, etc.)

- 
- g) Evaluation of the outcomes of the education program, which includes but is not limited to:
    - i. Measurements of student performance, including range and type of variation in student performance across practice sites and education experiences
    - ii. Feedback from recent graduates who are able to reflect on their training having acquired a perspective on requirement of clinical practice
    - iii. Feedback from employers regarding competence of recent graduates in practice
  - h) Development and implementation of plans to take action to correct or improve results

*Examples of Evidence:*

- Action plans to correct or improve academic outcomes and their linkages to the curriculum map
- Documentation of how the curriculum map is updated and utilized.
- Evaluation, quality plan, or quality improvement initiative progress and final reports
- Table summarizing the changes made to the program since the last on-site survey, and evaluation data that triggered the changes
- Minutes of meetings at which evaluation is coordinated, planned, data are reviewed, or recommendations for improvement that arise are considered or approved for implementation
- Terms of reference for committee(s) responsible for continuous quality improvement
- Correspondence or agreements with other Faculties or academic units, or entities outside the University
- Changes in practice experiences over the last 5 years
- Results of students' evaluations of practice experiences

## Part III: Resources

### A. Student Services

**Standard 18: Students are supported and have a positive, safe, inclusive, non-discriminatory, inspiring experience while enrolled in the professional program of pharmacy.**

**Criterion 18.1:** The Faculty has an ordered, accurate and secure system of student records that is maintained in accordance with University policy and privacy legislation.

*Examples of Evidence:*

- Record systems that manage, oversee, and coordinate student records and affairs.
- Policy and procedures regarding the collection and release of information
- Changes in record systems over the last five years
- Audit of compliance and/or record of breaches as permitted by privacy legislation



**Criterion 18.2:** Students have access to financial aid and health services, orientation programs, academic advising and career-pathway counselling, housing, accommodation of needs governed by legislation, and services to meet requirements of the practice sites.

***Examples of Evidence:***

- Description of the types of student services available at the Faculty and those provided centrally at the University
- Percentage of students who withdraw from the program or delay completion
- Number of pharmacy students receiving financial aid per year
- Waitlist to access student services
- Barriers to accessing student services
- Feedback from students on adequacy of advising and counselling services
- Description of orientation, advising made available to student

**Criterion 18.3:** Student services personnel within the Faculty are qualified and trained appropriately to provide information about and referral to necessary services.

***Examples of Evidence:***

- Description of training provided to student services personnel within the Faculty

**Criterion 18.4:** Students, staff, faculty members and preceptors are aware of conditions under which they may register a complaint.

***Examples of Evidence:***

- Information available to students, staff, faculty members and preceptors about the process to follow to register a complaint
- Turnaround time for investigation and resolution of complaints
- Evidence that complainants have been made aware of the outcome of the investigation

## ***B. Human Resources***

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

**Criterion 19.1:** Within each discipline and curricular area there are appropriate diversity and depth of skills and experience among faculty members with academic title. Full-time faculty members may be complemented by part-time, cross-appointed or jointly-funded faculty members, and preceptors and voluntary faculty members with adjunct status or other appropriate academic title.

*Examples of Evidence:*

- List of faculty members including credentials, and roles and responsibilities within the professional program
- Summary of preceptors including credentials, practice area, and location of practice
- Documentation of teaching, research and administrative responsibilities of faculty members
- Involvement of faculty members in provision of direct patient care and professional services to patients
- Involvement of faculty members in generating and disseminating knowledge through scholarship
- Evaluation of changes in human resources over the past 5 years

**Criterion 19.2:** There is an adequate amount of appropriately skilled staff resources, such as: administrative assistants; secretaries; student services personnel; teaching assistants; laboratory instructors; and, information and communication technology personnel.

*Examples of Evidence:*

- Number and skills of administrative, secretarial and technical personnel
- Position descriptions and roles
- Organizational charts
- Justification of changes in human resources over the last five years
- Feedback from faculty members, students and staff on adequacy of staff resources

**Criterion 19.3:** The Faculty utilizes established criteria for selection of, and processes for, orientation and training for preceptors. Preceptors are committed to supporting the teaching process.

*Examples of Evidence:*

- Initial orientation and education offered to preceptors who are new to the experiential program
- Ongoing development program for preceptors who have worked previously with the experiential program, especially when major changes are made to placement expectations, assessment practices or expected learning outcomes
- Description of educational programs or development
- Evaluation of preceptor criteria, selection and training

**Criterion 19.4:** There is evidence of University support for professional development opportunities for faculty members, staff and preceptors, consistent with their respective responsibilities as it relates to teaching and assessment of students.

*Examples of Evidence:*

- Policy related to professional development and training
- Documentation of professional development and training completed by faculty members, staff and preceptors over the last two years

- Evidence of budget and expenditure for faculty and staff member development
- Evaluation of professional development and training needs, including support to achieve professional development/training program outcomes

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

*Examples of Evidence:*

- Evidence of adherence to written policy and procedures for faculty member, staff and preceptor evaluation
- University policy related to the process of faculty evaluation/performance review in the areas of teaching, research and service
- Documentation of reviews completed within the last two years

### ***C. Practice Site Resources***

**Standard 20: The Faculty selects practice sites where student learning and skills development are adequately managed, supported and supervised. Practice sites meet relevant regulatory requirements.**

**Criterion 20.1:** The Faculty has an administrative office or system led by an individual or individuals with appropriate qualifications or expertise in selection and evaluation of practice sites, and assessment of student performance.

*Examples of Evidence:*

- Staffing, responsibilities and organizational chart for this office or system
- Evidence of meeting requirements of practice sites where defined in formal and informal agreements

**Criterion 20.2:** The Faculty utilizes criteria for selection of practice sites.

*Examples of Evidence:*

- Criteria and/or policy related to selection of practice sites
- Compliance to the criteria and/or policy related to selection of practice sites
- Evaluation of practice environments as it relates to criteria for patient/client mix, pharmacy service model, direct patient care services and professionalism
- Description of the mechanism by which information about practice sites is maintained current

**Criterion 20.3:** The Faculty provides evidence of working collaboratively with practice sites and other health sciences programs of the University to ensure that student pharmacists are provided access to patients and facilities, support, and practice tools at the level necessary to achieve intended educational outcomes and expected patient care service deliverables.



**Criterion 20.3a:** The Faculty works collaboratively with practice sites to ensure that the practice site has appropriate amenities to support student learning.

*Examples of Evidence:*

- Description of amenities required at the sites to achieve program outcomes
- Evaluation of resources at practice sites in which students are placed
- Evaluation of practice environments as it relates to workspace and equipment needed to undertake practice experiences
- Evidence that feedback is provided to practice sites that do not meet (one or more) criteria

**Criterion 20.3b:** The Faculty works collaboratively with practice sites and other health sciences programs to ensure that a suitable model(s) of supervision is in place at each stage of the practice experience curriculum so that students have adequate oversight, coordination, guidance, instruction, assessment, and feedback. Qualified preceptors oversee all practice experiences.

*Examples of Evidence:*

- Evidence of support provided by the Faculty related to capacity-building in experiential placement sites
- Models of supervision and preceptorship
- Evaluation of models by students and preceptors
- Measurement of assessment consistency across preceptors and practice sites
- Description of support provided by the Faculty to practice sites with respect to preceptor supervision of students
- Extent to which other health sciences programs provide student preceptorship
- List of preceptors and their qualifications, linked to practice activities as appropriate

## ***D. Financial Resources***

**Standard 21: The Faculty has adequate financial resources so that continuing operation of the professional programs and other elements of the Faculty mission are fulfilled.**

**Criterion 21.1:** University and Faculty consultation informs decisions about the required financial resources to deliver the professional program.

*Examples of Evidence:*

- Description of the procedures utilized in determining the program budget
- Current program budget including details of revenues and expenditures
- Description of the procedures for assessing the adequacy of financial resources for faculty and staff member salaries, materials and equipment, faculty member development, curricular development, program facilities, and the facilitation of scholarly activities of the faculty members and outcomes of these procedures

- Significant changes in operational funding over the past five years
- Evaluation of current and future human resource needs to operate the program
- Evaluation of financial resources supporting the program

### ***E. Physical Facilities and Infrastructure***

**Standard 22: Physical facilities and infrastructure of the Faculty and those at other University sites where students and faculty members are located are adequate and appropriately equipped to achieve the stated mission.**

**Criterion 22.1:** The physical facilities and infrastructure are well-maintained, provide a contemporary environment for teaching and learning, and meet legal standards for disabled individuals. All teaching facilities are sufficient in number and adequate in size to accommodate the student body.

***Examples of Evidence:***

- Description of physical facilities and infrastructure such as classroom, laboratory, and simulation teaching/learning environments, and the infrastructure that supports those environments
- Office space for faculty members that provides privacy for study and for counselling students
- Description of facilities for support staff including space for clerical and receptionist duties, copying services, and the housing of equipment and supplies
- Evaluation of physical facilities and infrastructure including feedback from students, faculty members and staff on quality and quantity of those resources

**Standard 23: The Faculty provides space for student activities and organizations.**

***Examples of Evidence:***

- Documentation of the facilities available to students
- Student statements regarding the quality of space

### ***F. Information Resources***

**Standard 24: The Faculty ensures access for all faculty members, preceptors and students to library and information resources that are sufficient in quantity and quality to support all educational and scholarly activities in accordance with the Faculty's mission and goals.**



**Criterion 24.1:** On- and off-campus access to library resources is available to students, faculty members and preceptors.

***Examples of Evidence:***

- Evaluation of integration of library and information technology resources into the teaching program
- Evaluation of the range and type of access to journals, databases, and other learning resources
- Learning programs for acquainting students with the effective and efficient use of the library, both physical and electronic, as well as with the use of information storage and retrieval techniques
- Opinions of students, faculty members and preceptors on the adequacy of library resources
- Estimates of utilization of available library resources by students and faculty members
- Feedback from students, faculty members and preceptors on reliable access to library and information resources.
- Document delivery services, and other methods for access to materials not readily available online

**Criterion 24.2:** Access to information technology and systems essential for pharmacy practice is available to students and faculty members in simulated practice environments and in practice sites.

***Examples of Evidence:***

- Demonstration of the range and type of information system access, and scope of information to which students and faculty members have access when in simulated practice environments and in practice sites
- Policy that describes how access to information technology in simulated practice environments and in practice sites is managed
- Learning programs for acquainting students and faculty members with information systems utilized in practice environments and in practice sites
- Access to help desk support for information resources and systems utilized in simulated practice environments and in practice sites
- Evaluation of student access to information resources and systems in practice sites