

*The Canadian Council for Accreditation of
Pharmacy Programs*

**ACCREDITATION STANDARDS
for
CANADIAN
EDUCATIONAL PROGRAMS LEADING TO THE
DOCTOR OF PHARMACY (PHARM.D.) DEGREE**

June 2023



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

Leslie Dan Faculty of Pharmacy, University of Toronto
1207 – 144 College St., Toronto, ON, Canada M5S 3M2
Phone (416) 946-5055 • Website: www.ccapp.ca



Table of Contents

	Page
Preface	5
Acknowledgments	7
General Instructions to Complete the Self-Study	8
Part I: Academic Program	
A. Educational Outcomes	
Standard 1: Graduates from the professional program in pharmacy meet the program's educational outcomes and are prepared for entry-level scope of practice.	10
B. Curriculum	
Standard 2: The professional degree program in pharmacy includes a series of core courses, practice experiences, and interprofessional experiences that are designed to support student's growth toward meeting the program's intended educational outcomes.	10
Standard 3: The required curriculum includes content in biomedical, pharmaceutical, behavioural, social, and administrative pharmacy sciences; clinical sciences including practice skills; practice experiences; intra- and inter-professional collaborative practice; cultural safety, humility, and responsiveness; and Indigenous history, values, and healthcare needs.	11
Standard 4: Practice experiences are of adequate breadth, structure, duration, and variety to achieve the educational outcomes. Practice experiences are acquired in 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, including collaboration and teamwork.	13
Standard 5: The curriculum includes required learning experiences throughout the professional program that enable a graduate to collaborate effectively with other pharmacists, pharmacy technicians, other healthcare professionals, patients, and families to provide team-based patient-centred care. Intra- and interprofessional learning and collaborative practice are included in the policies and strategic plan of the Faculty and supported by the Faculty and the University.	16
C. Teaching, Learning, and Assessment	
Standard 6: The Faculty uses a variety of teaching, learning, and assessment methods that support the needs of diverse learners to produce graduates who meet the required educational outcomes.	16
Standard 7: The Faculty provides an environment and culture that promotes professional behaviour that includes respectful relationships among students, faculty members, administrators, preceptors, and staff.	17
Part II: Governance and Program Management	
A. University Structure and Commitment	
Standard 8: The Faculty is located in a University that is committed to supporting education and research related to pharmacy and other health sciences. The University and Faculty have a relationship with a network of healthcare facilities and institutions that enable the Faculty to fulfil its academic mission. The University and Faculty are committed to anti-racism and anti-oppression in all forms and to creating an environment that promotes equity, diversity, and inclusion.	18

Standard 9:	The University and Faculty develop policies, affiliations, contractual agreements, collaborations, relationships, and partnerships (internal and external to the University) necessary to advance the education, research, and service missions of the Faculty.	20
B. Faculty Organization and Leadership		
Standard 10:	The professional degree in pharmacy program is housed in a unit that is equivalent to a Faculty, College, or School.	21
Standard 11:	The Faculty is organized in a manner that facilitates the accomplishment of its mission and progress towards its vision.	22
Standard 12:	The Dean/Director and the leadership team within the Faculty effectively support the achievement of the Faculty's mission.	22
Standard 13:	The Faculty engages with regulatory, certification, and licensing/registration authorities such as the provincial/territorial regulatory authority (PRA), professional associations, CCAPP, PEBC, and other stakeholders with respect to certification and licensing processes and requirements, practice requirements, practice standards, and health human resource planning. This relationship facilitates meeting professional, educational, and societal needs.	23
C. Planning, Evaluation and Continuous Quality Assurance		
Standard 14:	The Faculty has a current strategic plan with priorities, goals, and objectives that are aligned to the Faculty's mission, vision, and values. The plan and planning processes have the support and cooperation of the University administration. The plan is systematically monitored and updated to facilitate achievement of its stated goals and objectives.	23
Standard 15:	A governance structure and system of resources within the Faculty are in place to direct and support the design, development, implementation, and evaluation of a program that satisfies the educational outcomes required for the professional program in pharmacy.	25
D. Admissions		
Standard 16:	A recruitment program is transparent in its intention to attract a diverse pool of well-qualified applicants.	25
Standard 17:	The Faculty uses and communicates to applicants the published criteria, policy, and procedures to admit students to the professional program in pharmacy.	26
Part III: Resources		
A. Student Services		
Standard 18:	The Faculty and the University provide sufficient resources including appropriately trained staff to ensure that students are supported and have a respectful, safe, inclusive, non-discriminatory experience while enrolled in the professional program of pharmacy.	28
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.	29



Standard 20:	The Faculty and University provide essential training for faculty members and staff and support professional development opportunities consistent with staff and faculty responsibilities.	30
C. Practice Site Resources		
Standard 21:	The Faculty selects appropriate preceptors and practice sites so that student learning and skills development are adequately managed, supported, and supervised. Practice sites and preceptors meet relevant regulatory requirements.	31
D. Financial Resources		
Standard 22:	The Faculty has adequate financial resources to ensure the continuing operation of the professional program and the fulfillment of other elements of the Faculty mission.	32
Standard 23:	The Faculty, with the support of the University, has access to diverse financial support to improve its program, including development and advancement activities to facilitate enrichment of the program.	33
E. Physical Facilities and Infrastructure		
Standard 24:	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.	33
F. Information Resources		
Standard 25:	The Faculty ensures access and training for all faculty members, preceptors, and students related to educational technology as well as library and information resources sufficient in quantity and quality to support all educational and scholarly activities in accordance with the Faculty's mission and goals.	34
Part IV: Appendices		
Appendix 1: Foundational Content		36
Appendix 2: Required Practice Skills		38
Appendix 3: Required Program Components for Evaluation		39




PREFACE

Accreditation is the public recognition accorded to a professional program that meets established professional qualifications and educational standards through initial and periodic evaluation. Accreditation concerns itself with both quality assurance and program enhancement from a health equity and cultural safety perspective. It applies to programs and is to be distinguished from certification, registration, or licensure which applies to individuals. Graduating from a program accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) is a requirement to be eligible for direct entry into Part I and Part II of the Qualifying Examination offered by the Pharmacy Examining Board of Canada (PEBC). CCAPP sets standards for pharmacy and pharmacy technician education programs, grants accreditation awards to programs that meet the standards, and promotes continued quality improvement of accredited programs.

These accreditation standards are intended for Canadian educational programs leading to the entry-to-practice Doctor of Pharmacy (PharmD) degree. The standards reflect professional and educational attributes identified by CCAPP and stakeholders as essential for Canadian programs that intend to develop practicing, 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 degrees granted in countries other than Canada. The standards embrace the philosophy that graduates of accredited programs have achieved the outcomes and possess the competencies necessary for entry into the profession of pharmacy in Canada. These are based, at a minimum, on the latest versions of the “Educational Outcomes for First Professional Degree Programs in Pharmacy” developed by the Association of Faculties of Pharmacy of Canada (AFPC) and the “Professional Competencies for Canadian Pharmacists at Entry to Practice” specified by the National Association of Pharmacy Regulatory Authorities (NAPRA).

The standards recognize that quality pharmacy education encompasses multiple components including fundamental, biomedical, pharmaceutical, behavioral, social, and administrative sciences. Pharmacy practice experiences are critically important in preparing graduates to embrace the scope of contemporary pharmacy practice as well as emerging practice roles. CCAPP believes in the preparation of competent graduates who identify as medication therapy experts. They are able to work with other healthcare providers to make decisions that improve the safety and effectiveness of medications and the health of the patients in their community while providing culturally safe care. Pharmacy graduates must have a broad understanding of health, the factors that contribute to a healthy community including the social determinants of health, and the structure and role of the healthcare and public health systems. Graduates must also be able to manage, evaluate, and communicate information, and possess the skills needed to advocate on behalf of individuals and the community. An understanding of the ethical requirements and standards of professionalism (as articulated by NAPRA in the document “Principles of Professionalism for the Profession of Pharmacy”) is expected from graduates of CCAPP-accredited programs.



Pharmacists must be able to work with and care for people of different cultures with diverse values, beliefs, and customs. They must practice with compassion, empathy, and integrity in providing care to all patients. They must recognize the impact of colonialism and the interests of Indigenous Peoples (First Nations, Métis and Inuit) as well as other equity-deserving groups such as Black people, people of colour, racialized persons, members of the 2SLGBTQIA+ community, persons with disabilities, and other traditionally made-marginalized populations. Pharmacists are expected to be trusted and respected members of the communities in which they work, and possess the knowledge, skills, and judgment to support the continuing education of students, recent graduates, and other health providers. The ability to work collaboratively with registered pharmacy technicians, other pharmacy professionals, and interprofessional healthcare teams is essential and graduates must be sufficiently adaptable to work in a variety of healthcare settings.

CCAPP believes that the educational outcomes established for a Doctor of Pharmacy program must encompass the entry-to-practice competencies specified by the appropriate regulatory authority. The public is entitled to demand that the graduates of a professional degree program can demonstrate they have mastered competencies for that profession as evidenced by the national certification and/or provincial licensure process. It is important that all educational programs are supportive of, and have an effective working relationship with, the organizations responsible for national certification as well as the applicable provincial or territorial regulatory authority to ensure that graduates have achieved the educational outcomes required for licensure/registration and practice.

Detailed information about the accreditation process, accreditation awards (including definitions), timelines and planning for accreditation survey visits can be found on the CCAPP website (www.ccapp.ca).



ACKNOWLEDGEMENTS

The Canadian Council for the Accreditation of Pharmacy Programs (CCAPP) gratefully acknowledges the contributions of the individuals who served on the CCAPP Standards Review Working Group: Nick Busing, Ken Cor, Natalie Crown, David Edwards (Chair), Beverly Fitzpatrick, Curtis Harder, Julee Joseph, Iris Krawchenko, Nathalie Letarte, Sarah Moroz, Cynthia Richard, Yvonne Shevchuk, Ann Thompson, Lavern Vercaigne, Kerry Wilbur, and Kyle Wilby. Jackie Gruber served as a consultant related to the equity, diversity, and inclusion content; Larry Leung and Lalitha Raman-Wilms provided valuable input to this section of the standards. In addition to the work of these individuals, this document benefitted from the review of early drafts of the standards by members of the following groups and organizations: Association of Faculties of Pharmacy of Canada (AFPC) and its member universities, AFPC Truth and Reconciliation Special Interest Group, Canadian Association of Pharmacy Students and Interns (CAPSI), Canadian Pharmacists Association (CPhA), Canadian Pharmacy Technician Educators Association (CPTEA), Canadian Society of Healthcare-System Pharmacy (CSHP), National Association of Pharmacy Regulatory Authorities (NAPRA) and its provincial members, and Pharmacy Examining Board of Canada (PEBC). The support of CCAPP CEO Wayne Hindmarsh was much appreciated.

In addition, CCAPP would like to thank members of the Evaluation Working Group that assisted in revision of evidence required for self-study submission. This Group was comprised of Marie-France Beauchesne, Ken Cor, Charity Evans, Julee Joseph, Andrea Outram, Chantal Pharand, Cathy Schuster, Kendra Townsend, Kyle Wilby, Tana Yoon. Don McKay and Julie Méthot were instrumental in final edits.

How to cite this document:

Canadian Council for the Accreditation of Pharmacy Programs (CCAPP).
Accreditation Standards for Canadian First Professional Degree in Pharmacy Programs.
Toronto: Ibid; 2023 June Revised.



GENERAL INSTRUCTIONS TO COMPLETE THE SELF-STUDY

1. Provide an executive summary (overview and reflection) of the Program's strengths and areas of opportunity for improvement related to the Standards. Make this executive summary the first "chapter" of your self-study report.
2. For each Standard and Criterion, provide evidence (facts, findings), your analysis of that evidence relative to the Criterion, and your assessment of areas of strength and areas requiring improvement.
 - Limit your responses to a maximum of 250 words per Criterion (maximum of 3-4 pages for most Standards).
 - Where possible and appropriate to the data being presented, use tables or charts. Use appropriate referencing to support information (data, procedures, policy, quality improvement indicator trends) described in the response.
 - **It is not necessary to provide ALL suggested examples of support documents** in your self-study that are listed under the various Standards. Remember that the onsite survey will provide opportunity for further evidence to be provided to determine if the Standards are being met.
3. The self-study responses for each standard and criteria should reference any appendices (simply using the name of the document rather than using numbers). All appendices should be **hyperlinked** within the self-study.
4. Your final submission should be one complete document with all appendices hyperlinked.
5. Once your self-study is submitted no further documentation will be accepted unless requested by CCAPP.
6. Submission of the self-study should be made electronically in one file and submitted to the CCAPP CEO, or be made available electronically via a secure server to the CCAPP CEO and all surveyors assigned to the accreditation survey visit.
7. A report that consists solely of appendices does not meet the requirements for a self-study. Ensure that you provide your analysis of the evidence in the body of the report and explain your assessment of areas of strength and areas requiring improvement.
8. While you might wish to informally judge your compliance to the Standards (e.g., 'met', 'not met', 'partially met'), the final documents submitted to CCAPP site visit evaluation team members should not include your judgment regarding compliance with the Standards.
9. An example of formatting that may be used to complete the self-study follows on the next page.



Part I: Academic Program	A: Educational Outcomes
Standard 1: Graduates from the professional program in pharmacy meet the program’s educational outcomes and are prepared for entry-level scope of practice.	
Criterion 1.1: Intended outcomes are based on the current Association of Faculties of Pharmacy of Canada (AFPC) “Educational Outcomes for First Professional Degree Programs in Pharmacy,” the current National Association of Pharmacy Regulatory Authorities (NAPRA) “Professional Competencies for Canadian Pharmacists at Entry to Practice,” and other relevant sources of educational outcomes (e.g., provincial standards of practice, Truth and Reconciliation Calls to Action)	
<i>List of Evidence</i> <ul style="list-style-type: none">• To be completed by schools• Embed all appendices via hyperlink or via clearly labeled Appendix at the end of the Self-Study Document	
Comment of Strengths: (word limit of 250 words)	
Comment on Areas for Improvement: (word limit of 250 words)	

Part I: Academic Program

A. Educational Outcomes

Standard 1: Graduates from the professional program in pharmacy meet the program’s educational outcomes and are prepared for entry-level scope of practice.

Criterion 1.1: Intended outcomes are based on the current Association of Faculties of Pharmacy of Canada (AFPC) “Educational Outcomes for First Professional Degree Programs in Pharmacy,” the current National Association of Pharmacy Regulatory Authorities (NAPRA) “Professional Competencies for Canadian Pharmacists at Entry to Practice,” and other relevant sources of educational outcomes (e.g., provincial standards of practice, Truth and Reconciliation Calls to Action)

Evidence to be submitted:

- Description of the program’s intended educational outcomes and their alignment to (at a minimum) AFPC educational outcomes and NAPRA competencies as well as other relevant sources of educational outcomes.

Criterion 1.2: Graduates demonstrate practice-readiness through knowledge of, and an ability to perform, the pharmacist patient care process (collect, assess, plan, implement, follow up, evaluate, collaborate, document, communicate) that enables them to provide patient care as a collaborative member of a care team.

Evidence to be submitted:

- Description of the assessment methods utilized to confirm student readiness for practice at the completion of the program (e.g., experiential evaluations, portfolios, capstone courses, high-stakes exams)
- Results/data from the assessment methods

Other examples that might be considered:

- Student success rates from advanced pharmacy practice experiences

B. Curriculum

Standard 2: The professional degree program in pharmacy includes a series of core courses, practice experiences, and interprofessional experiences that are designed to support students’ growth toward meeting the program’s educational outcomes.

Criterion 2.1: The curriculum is based on intended educational outcomes and reflects an organized progression in the level of expected performance to support students' growth.

Evidence to be submitted:

- Description of the general educational framework (e.g., high level principles used to guide program design, overview of how the program is organized with a general description and any supporting rationale)
- Intended educational outcomes mapped to courses or course objectives

Other examples that might be considered:

- Description of how all program courses, including practice experiences, and interprofessional educational experiences integrate and build on one another to address achievement of educational outcomes and program goals
- Metrics of student performance (e.g., course pass rates, milestone assessment results) that reflect achievement of educational outcomes throughout the curriculum

Criterion 2.2: The professional degree program is a minimum of 4 academic years, or the equivalent number of hours or credits, and includes required and elective courses, practice experiences, and intra- and inter-professional educational experiences.

Evidence to be submitted:

- Details of program design including courses and credit hours
- Description of elective courses and practice experiences within the curriculum

Standard 3: The required curriculum includes content in biomedical, pharmaceutical, behavioural, social, and administrative pharmacy sciences; clinical sciences including practice skills; practice experiences; intra- and inter-professional collaborative practice; cultural safety, humility, and responsiveness; and Indigenous history, values, and healthcare needs.

Criterion 3.1: The curriculum has content of sufficient depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation for the full scope of contemporary pharmacy practice responsibilities. Course content includes topics listed in Appendix 1.

Evidence to be submitted:

- Description of where core content is provided within the curriculum

Other examples that might be considered:

- Methods utilized to determine needs for core content
- Feedback from graduating students and/or those of other interested parties (i.e., preceptors, employers), about how well the curriculum developed core knowledge and skills as listed in Appendix 1
- *May provide map of this content within the curriculum*



Criterion 3.2: Practice skills listed in Appendix 2 are developed through laboratory, simulation, and practice-based experiences.

Evidence to be submitted:

- Description of where practice skills are developed within the curriculum

Other examples that might be considered:

- Methods utilized to determine needs for the practice skills curriculum
- Graduating student feedback, and/or those of other interested parties (i.e., preceptors, employers), about how well the curriculum developed core knowledge and skills as listed in Appendix 2
- *May provide map of this content within the curriculum*

Criterion 3.3: The curriculum supports development of student leadership, professionalism, and professional identity.

Evidence to be submitted:

- Description of professionalism expectations and processes used during on-campus and experiential activities
- Description of how the curriculum supports development of leadership, professionalism, and professional identity

Other examples that might be considered:

- Documentation of the ways student leadership groups work with faculty to support curricular and programmatic activities
- Description of activities that facilitate the development of the principles outlined in NAPRA's "Principles of Professionalism for the Profession of Pharmacy"


Criterion 3.4. The curriculum has Indigenous led, co-led, or co-created content of sufficient depth, scope, timeliness, quality, sequence, and emphasis on Indigenous health and cultural safety, including Canada's history and legacy of residential schools, past and present practices of colonialism, Indigenous rights to self-determination, anti-Indigenous racism, and Indigenous teachings and practices.

Evidence to be submitted:

- Description of the Indigenous content within the curriculum (including interprofessional and co-curricular activities) and evidence of integration throughout years of study and streams of learning
- Description of the process, involvement, and reciprocity/compensation for Indigenous Peoples in creating or revising the Indigenous content of the curriculum

Other examples that might be considered:

- Examples of changes in this area of the curriculum since the last accreditation cycle (e.g., additions, modifications, removal)



Criterion 3.5. The curriculum has sufficient depth, scope, timeliness, quality, sequence, and emphasis to develop appropriate understanding and attitudes related to anti-racism, anti-oppression, cultural safety, and health equity.

Evidence to be submitted:

- Description of content related to anti-racism, cultural safety, and health equity that exists within the curriculum and evidence of integration throughout the years of study and streams of learning

Other examples that might be considered:

- Examples of topics and content covered including but not limited to racism and discrimination based on religion, ethnicity, or disability. Other related topics may include 2SLGBTQIA+, ethnic diversity, the impact of lower socio-economic status, trauma-informed care, and the role of intersectionality
- Examples of instruction in self-awareness of bias
- Examples of curricular changes in this area of the curriculum since the last accreditation cycle (e.g., additions, modifications, removal)

Criterion 3.6. There is a regular process for program leaders to consider new developments relevant to pharmacy practice for curriculum integration.

Evidence to be submitted:


- Description of how existing curriculum is evaluated and changed in response to pharmacy practice environment

Other examples that might be considered:

- Description of processes for integrating new content into the curriculum including any collaborators involvement
- Examples of curricular changes since the last accreditation visit (e.g., additions, modifications, removal)

Standard 4: Practice experiences are of adequate breadth, duration, structure, and variety to achieve the educational outcomes. Practice experiences are acquired in 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, including collaboration and teamwork.

Criterion 4.1: The academic program leading to the PharmD degree includes a total of forty weeks (minimum) (1600 hours) of practice experiences. The total hours of practice experiences provide the opportunity to develop proficiency in all competencies required for entry to pharmacy practice.



Criterion 4.1a: Introductory practice experiences involve at least 320 hours (8 weeks) of student placement in direct patient care practice. Those experiences may be supplemented with additional volunteer activities, service learning, or other forms of experiential learning.

Evidence to be Submitted:

- Course outline specifying hours required for introductory practice experiences or reference given to previous evidence submitted containing this information

Criterion 4.1b: The sustained period of required concluding practice experiences (advanced pharmacy practice experiences) near the end of the program involve a minimum of thirty-two weeks (1280 hours) of which at least twenty-four weeks (960 hours) comprises full-time direct patient care practice in both primary care and acute care which includes care delivered in a hospital, long term care unit* or ambulatory care clinic. Programs can allocate 8 weeks (320 hours) or more in non-patient care or combinations of non-patient care/patient care experiences if the requirement for 24 weeks (960 hours) of direct patient care practice has been met.

**Note that a placement in a long-term care facility does not fulfill Criterion 4.1b if no acute care activities are taking place. Acute care must include when a pharmacist proactively contributes to decision-making on a team that is providing active care to a patient for a disease, injury, or severe episode illness for a short period of time.*

Evidence to be Submitted:

- Course outline specifying hours required for advanced practice experiences or reference given to previous evidence submitted containing this information

Criterion 4.2: Practice experiences allow students to develop clinical skills necessary to provide care for a variety of patients with acute illnesses and/or chronic conditions. Each student acquires practice experience in primary care (i.e., community, ambulatory clinics) and acute care over the course of their program, with opportunities for other practice settings (home care, long-term care, supportive living, research/academia, leadership, drug information, professional organizations, as examples) as an asset to expand student learning.


Evidence to be submitted:

- Overview of practice sites, for example: practice sites providing primary care, acute care, long-term care; rural, urban practice sites as well as opportunities to develop skills in non-patient care practice settings in the final year
- Description of how students are assigned to practice sites

Other examples that might be considered:

- Feedback from students about preceptors/practice experiences regarding development of clinical skills and other knowledge/skills/attitudes as outlined in course syllabi

Criterion 4.3: Student tasks at all stages of experiential learning allow the student to actively practice and learn in supportive learning environments that foster growth in patient



care and professional roles. Learning activities are designed to enable the student to practice at a level appropriate to their level of preparedness and year of study.

Evidence to be submitted:

- Description of student practice activities by year of study
- Description of how students demonstrate active participation versus observing others

Other examples that might be considered:

- Description of how student practice activities align with current scope of practice
- Feedback from students and preceptors on student tasks and preparedness for and ability to assume responsibility for patient care and other professional duties within the practice setting
- Description of processes utilized to confirm student readiness at the end of practice experiences (i.e., assessment methods, professional activities completed, limits on activities based on federal or provincial laws, regulations and/or practice standards)

Standard 5: The curriculum includes required learning experiences throughout the professional program that enable a graduate to collaborate effectively with other pharmacists, pharmacy technicians, other healthcare professionals, patients, and families to provide team-based patient-centred care. Intra- and interprofessional learning and collaborative practice are included in the policies and strategic plan of the Faculty and supported by the Faculty and the University.

Criterion 5.1: Experiences and activities develop the required competencies for intra- and interprofessional care and collaborative practice and are integrated throughout the professional program.

Evidence to be submitted:

- Description of activities in which pharmacy students interact with and collaborate with pharmacists, pharmacy technicians, pharmacy technician students, and students and practitioners from other health professions including medicine and nursing

Other examples that might be considered:

- Outline of the content areas included in the intra- and interprofessional framework or strategy. Examples include communication with patients and other healthcare professionals, teamwork, group dynamics, problem solving, negotiation, collaborative leadership, role clarification, conflict resolution skills and collaboration.
- Evidence that the intra- and interprofessional curriculum is integrated throughout the program including experiential training
- Feedback from students, faculty members, and preceptors on intra- and inter-professional educational activities as they relate to expected competencies, outcomes, and key performance indicators



Criterion 5.2: The Faculty and the University enable and support intra- and interprofessional learning.

Evidence to be submitted:

- Evidence that organizational structures, resources and processes are in place to support intra- and interprofessional learning

Other examples that might be considered:

- Support for intra-and interprofessional education with recognition that it is a valued teaching activity
- Effectiveness of structures, resources, and processes in place

C. Teaching, Learning, and Assessment

Standard 6: The Faculty uses a variety of teaching, learning, and assessment methods that support the needs of diverse learners to produce graduates who meet the educational outcomes.

Criterion 6.1: 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.

Evidence to be submitted:

- Description of teaching and learning strategies used in the program, for example: large group, small group, simulation, laboratory experience, case discussion, practice experience

Other examples that might be considered:

- Processes used to provide accommodation(s) for learners related to learning and assessment
- Descriptions of how patients and caregivers are incorporated into various teaching and learning opportunities
- Feedback from students, faculty members, and preceptors about the effectiveness of teaching strategies to support training

Criterion 6.2: A variety of assessment methods are systematically applied throughout the program to provide formative and summative feedback to students, and to confirm students' achievement of educational outcomes.

Evidence to be submitted:

- Description of assessment methods used (e.g. formative, summative, self, or peer)

Other examples that might be considered:

- Mapping of assessment strategies to educational outcomes and learning outcomes

- Descriptions of resources, supports, and processes that are in place to help faculty members develop assessments that reliably and validly assess learning outcomes
- Feedback from students, faculty members, and preceptors about assessment methods and feedback processes used in the program

Criterion 6.3: The Faculty uses criteria, policy, and procedures for academic progression, academic probation, dismissal, and readmission in accordance with University policy. Student responsibilities, rights to due process including appeal mechanisms, student supports and resources, are published and made available.

Evidence to be submitted:

- Description of procedures (or policy, when available) used to guide students' progression throughout the program

Other examples that might be considered:

- Process used to monitor student performance for early detection of difficulties in academic and non-academic settings
- Evidence of expeditious intervention and access to student services, such as tutorial support or faculty advising
- Examples of remediation programs and outcomes

Standard 7: The Faculty provides an environment and culture that promotes professional behaviour that includes respectful relationships among students, faculty members, administrators, preceptors, and staff.


Criterion 7.1: The Faculty has a student code of conduct and/or a policy for fitness to practice or professionalism that describes expected behaviours and remedial actions relating to professional behaviour in the program. Policies are consistent with University guidance. Students are aware of the policies and the process for appeals.

Evidence to be submitted:

- Description of the Code of Conduct and/or professionalism procedures (or policy, when available), including how it is communicated to students

Other examples that might be considered:

- Evidence of application of the Code through specific examples
- Incorporation of the Code in student assessments (e.g., academic integrity, plagiarism)
- Feedback from faculty members and students about their understanding of the student code of conduct and their ability to apply it
- Terms of reference from professionalism committee (or equivalent) and/or examples of its activities
- Description of professionalism expectations of students during on-campus and experiential activities



Criterion 7.2: The Faculty supports fair and equitable student participation in provincial, regional, and national pharmacy, scientific, and other professional organizations, and activities.

Evidence to be submitted:

- Description of the process for attendance at meetings, conferences, and professional development activities (or policy, when available)

Other examples that might be considered:

- Financial support with evidence of equitable distribution
- Student feedback regarding Faculty support for participation in professional events and activities
- Documentation of student attendance at such events

Criterion 7.3: The Faculty implements strategies and activities to strengthen the professional culture of the student experience.

Evidence to be submitted:

- Description of professional curricular and extracurricular activities

Other examples that might be considered:

- Description of service learning, volunteer experiences, community-engaged scholarship, social accountability, or similar initiatives
- Description of student-led interprofessional activities

Part II: Governance and Program Management

A. University Structure and Commitment

Standard 8: The Faculty is located in a University that is committed to supporting education and research related to pharmacy and other health sciences. The University and Faculty have a relationship with a network of healthcare facilities and institutions that enables the Faculty to fulfil its academic mission. The University and Faculty are committed to anti-racism and anti-oppression in all forms and to creating an environment that promotes equity, diversity, and inclusion.

Criterion 8.1: The Faculty is a valued partner in university affairs and has effective collaborations with medicine, nursing, and other health science programs within the university or at other universities in proximity if the university does not have such programs.

Evidence to be submitted:

- Representation and decision-influencing participation (e.g., voting privileges) by faculty, staff, and administrators of the Faculty in university governance, committees, task forces, and other activities that contribute to the mission of the University

Other examples that might be considered:

- Description of projects and other activities demonstrating effective engagement and collaboration in education and research between pharmacy and other health sciences or relevant programs including medicine and nursing

Criterion 8.2: The University demonstrates a commitment to health-related research, scholarship of teaching and learning, and other research activities through appropriate infrastructure that supports an environment for scholarship by faculty members and students.

Evidence to be submitted:

- Description of support and services available within the University to facilitate research and scholarship within the Faculty

Other examples that might be considered:

- Undergraduate student research opportunities and evidence of student participation in such activities
- Research and other scholarly activities involving collaborations with other health sciences programs or healthcare facilities affiliated with the University


Criterion 8.3: The Faculty and University recognize and commit to the Truth and Reconciliation Commission (TRC) of Canada's Calls to Action, and/or celebrate local Indigenous cultures, and engage in respectful and reciprocal relationship building.

Evidence to be submitted:

- Description of how the Faculty and institution incorporates the TRC Calls to Action, specifically Calls to Action 18 through 24 (institutional strategic planning with regard to this criterion, when available)

Other examples that might be considered:

- Faculty or institutional processes, supports, and/or initiatives to support community and partner relationships between the Faculty and the Indigenous community. This may include specific policies related to Indigenous engagement and financial guidelines for adequate compensation and honoraria for Indigenous partners.
- Faculty or institutional events featuring local Indigenous experts, Knowledge Keepers and community members
- Commitment to making meaningful territorial acknowledgements
- Partnerships with University-level offices of Indigenous initiatives



Criterion 8.4: The Faculty and University recognize and commit to anti-racism and anti-oppression of equity-deserving groups, celebrate a diversity of cultures, and engage in respectful and reciprocal relationship building.

Evidence to be submitted:

- Description of Faculty or institutional processes or leadership activities that promote equity, diversity, and inclusion (or policy, when available)

Other examples that might be considered:

- Commitment to learning opportunities on topics such as health equity and the impact on equity-deserving groups
- Participation in cultural celebrations and activities within the institution or community

Standard 9: The University and Faculty develop policies, affiliations, contractual agreements, collaborations, relationships, and partnerships (internal and external to the University) necessary to advance the education, research, 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 to provide an appropriate environment for education, research, and service. These relationships 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.

Evidence to be submitted:

- Description of the support the University offers to facilitate the development of appropriate collaborations and partnerships required by the Faculty

Other examples that might be considered:

- University policies that guide the development of internal and external partnerships and agreements
- Agreements that specify the nature and intent of the relationship, collaboration, or partnership between the Faculty and other units within the University
- Formal relationships (e.g., memorandum of understanding) with other universities, pharmacy technician programs, and other external organizations including resolution of potential issues between partners
- Data sharing agreements for research collaborations

Criterion 9.2: The University and the Faculty have policies, procedures, and documentation in place to address actual, potential, or perceived conflicts of interest, unethical behaviour, and professional misconduct related to teaching, research, and service activities.

Evidence to be submitted:

- Description of Faculty and University procedures for governing conflict of interest and breach of ethics by faculty, staff, and students (or policy, when available)

Other examples that might be considered:

- Policies related to development activities and sponsorship of Faculty activities and events by the pharmaceutical industry, donors, and other external parties
- Policies governing acceptance of gifts and benefits by individual faculty members, staff, students, and student organizations

Criterion 9.3: Formalized affiliation or contractual agreements between the University and practice sites outline the authority, privileges, obligations and responsibilities of the Faculty, faculty members, and students at the practice site and addresses obligations to provide a safe practice environment for students. Such agreements address student-related matters such as access to health services at the practice site, liability, insurance coverage, criminal records and abuse registry checks, student disclosures, immunization policy, patient confidentiality and privacy of records, and professional conduct expectations. Agreements provide for sufficient advance notice of termination by either party to permit the development of alternative arrangements where necessary.

Evidence to be submitted:

- Formalized affiliation or contractual agreements between the Faculty and the practice site

Other examples that might be considered:

- Evidence of contingency procedures if practice sites withdraw from placement commitments (e.g., job action, public health emergency, business closure, etc.)

B. Faculty Organization and Leadership

Standard 10: The professional program in pharmacy is housed in a unit equivalent to a Faculty, College, or School.

Criterion 10.1: A Dean/Director heads the Faculty, College, or School that offers the pharmacy program.

Evidence to be submitted:

- Description of the overall organizational structure

Criterion 10.2: The unit's degree of autonomy is the same as other Faculties, Colleges, or Schools at the University.

Evidence to be submitted:

- Reporting structure for the Dean/Director relative to individuals leading other health sciences Faculties, Colleges, or Schools

Other examples that might be considered:

- Description of the University's budgeting process for pharmacy relative to other health science Faculties, Colleges, or Schools

Standard 11: The Faculty is organized in a manner that facilitates the accomplishment of its mission and progress towards its vision.

Criterion 11.1: An effective Faculty governance structure is in place that facilitates the achievement of its mission and vision

Evidence to be submitted:

- Documentation of the Faculty governance structure (organizational chart)
- Standing Committees organizational structure and responsibilities

Other examples that might be considered:

- Examples of other governance structures (constitution, bylaws, University and Faculty policies, etc.)

Criterion 11.2: The governance structure ensures that relevant Faculty committees include students, other appropriate stakeholders, and representation from equity-deserving groups as defined by University policies.

Evidence to be submitted:

- Committee terms of reference and membership

Other examples that might be considered:

- Feedback from students and other stakeholders on their participation and engagement on Faculty committees

Standard 12: The Dean/Director and the leadership team within the Faculty effectively support the achievement of the Faculty's mission.

Evidence to be submitted:

- Description of the roles and responsibilities of the Dean/Director
- Description of the roles and responsibilities of the individuals on the Dean/Director's leadership team
- Description of how the Dean/Director and the pharmacy leadership provide support for change, innovation, and quality improvement

Other examples that might be considered:

- Policies and procedures for recruiting and selecting members of the pharmacy leadership team (other than the Dean/Director)

Standard 13: The Faculty engages with regulatory, certification, and licensing authorities such as the provincial/territorial regulatory authority (PRA), professional associations, CCAPP, PEBC and other stakeholders with respect to certification and licensing/registration processes and requirements, practice requirements, practice standards and health human resource planning. This relationship facilitates meeting professional, educational, and societal needs.

Evidence to be submitted:

- Description of engagement with the relevant PRA(s) and other professional bodies and stakeholders on specific issues

Other examples that might be considered:

- Faculty participation in the activities of the PRA(s) and healthcare planning and health services delivery bodies
- Participation of the PRA(s) and other health planning and health services delivery bodies in Faculty activities or on Faculty committees
- Documentation of opportunities for student interaction with professional associations, PRA(s), and other stakeholders

C. Planning, Evaluation and Continuous Quality Assurance

Standard 14: The Faculty has a current strategic plan with priorities, goals, and objectives that are aligned to the Faculty's mission, vision, and values. The plan and planning processes have the support and cooperation of the University administration. The plan is systematically monitored and updated to facilitate achievement of its stated goals and objectives.

Criterion 14.1: The Faculty has a vision, mission, and values statement informed by the needs of society and aligned with that of the University.

Evidence to be submitted:

- Description of how the Faculty's vision, mission, and values align with that of the University
- Description of the process for developing the Faculty's vision, mission, and values

Other examples that might be considered:

- Description of education, practice, research, and other scholarly activities that demonstrate alignment with the Faculty's vision, mission, and values

Criterion 14.2: The Faculty's strategic plan is current and has the support of senior University administration. The strategic planning process provides for broad-based input from faculty members, students, practitioners, federal, territorial, and provincial (FPT) regulatory authorities, alumni, and other key stakeholders or constituent groups. The process considers financial, programmatic, and academic planning within the context of institutional and professional changes occurring and anticipated.

Evidence to be submitted:

- The Faculty's strategic plan
- Description of the planning process for the current strategic plan demonstrating broad stakeholder input, alignment to the Faculty's vision, mission, and values, and alignment to the University's strategic plan

Other examples that might be considered:

- Description of the planning cycle
- University support for the strategic plan


Criterion 14.3: The Faculty establishes and maintains systems to evaluate progress toward strategic goals, gather information to inform necessary changes, and communicate performance and achievements to relevant stakeholders.

Evidence to be submitted:

- Description of resources (human, infrastructure, and systems) used to guide and support monitoring progress toward achieving strategic goals and objectives
- Description of the plan used to monitor and document progress toward achieving strategic goals and objectives including descriptions of process, timelines, indicators/data, and reporting

Other examples that might be considered:

- Implementation of decisions made in response to data
- Description of communication processes used to inform stakeholders (e.g., faculty members, students, preceptors, practicing members of the profession, and other interested parties) of Faculty performance or achievements



Standard 15: A governance structure and system of resources within the Faculty are in place to direct and support the design, development, implementation, and evaluation of a program that satisfies the educational outcomes required for the professional program in pharmacy.

Criterion 15.1: The governance structure responsible for program evaluation comprises faculty members, students, and representatives from the profession or membership as permitted by University policy. The system of resources has dedicated administrative leadership, support staff, and evaluation tools dedicated to continuous quality improvement.

Evidence to be submitted:

- Description of the human resources and tools in place to support ongoing program evaluation

Criterion 15.2: The Faculty has a formal process in place to systematically review program content, structure, support, and outcomes. Regular evaluations are conducted, resulting information is disseminated in a timely manner, and action plans are developed and implemented to improve results in a cycle of continuous quality improvement. This process includes, at a minimum, evaluation and action related to the program components listed in Appendix 3.

Evidence to be submitted:

- Description of evaluation plan and details of implementation
- Description of reporting processes used to disseminate and track program evaluation results

Other examples that might be considered:

- Action plans developed to address challenges identified from ongoing program evaluation activities
- Table summarizing major changes made to the program, including practice experiences, admissions requirements, etc., since the last accreditation visit and evaluation data that triggered the changes

D. Admissions

Standard 16: A recruitment program is transparent in its intention to attract a diverse pool of well-qualified applicants.

Criterion 16.1: The program has a process for recruiting applicants suitable to the profession of pharmacy.

Evidence to be submitted:

- Description of the recruitment process

Other examples that might be considered:

- Recruitment materials, events or communication

Criterion 16.2: The recruitment program has a process for recruiting individuals from equity-deserving groups.

Evidence to be submitted:

- Description of the recruitment process to facilitate diversity in the applicant pool

Other examples that might be considered:

- Recruitment strategies specific to recruiting applicants from equity-deserving groups

Criterion 16.3: The recruitment program has a process for recruiting Indigenous students consistent with the TRC Call to Action 23.

Evidence to be submitted:

- Description of the recruitment process to enhance Indigenous representation in the applicant pool
- Evidence that Indigenous recruitment is Indigenous-led or co-led (students, faculty, Indigenous offices, community groups) in collaboration with the Faculty

Other examples that might be considered:

- Recruitment strategies specific to recruiting Indigenous applicants
- Examples of early intervention outreach (high school or elementary school collaborations or visits)

Standard 17: The Faculty uses and communicates to applicants the published criteria, policy, and procedures to admit students to the professional program in pharmacy.


Criterion 17.1: Admissions processes include attention to equity, diversity, inclusion, anti-racism, and anti-oppression in its selection of candidates, with a specific focus on Indigenous applicants consistent with TRC Calls to Action 23.

Evidence to be submitted:

- Admission policies or procedures pertaining to equity, diversity, inclusion, anti-racism, and anti-oppression, including those specific to Indigenous applicants

Other examples that might be considered:

- Diversity of the admissions committee and those making admissions decisions
- Training requirements for the admissions committee and those making admissions decisions related to systemic and individual manifestations of bias(es)

- 
- Description of how systemic bias is considered in the admissions requirements and processes
 - Quality assurance procedures to ensure that admissions processes are non-discriminatory (e.g., for an applicant with a speech impediment that affects oral communication)
 - Allowance for support persons to accompany applicants throughout the process where applicable
 - Evidence that admissions processes are specific for ensuring equity for Indigenous applicants. This may include a separate admissions process or pathway for Indigenous applicants and Indigenous representation on interview panels and candidate scoring.

Criterion 17.2: Admissions criteria include the satisfactory completion of post-secondary, pre-professional course requirements in general education, and basic and biomedical sciences.

Evidence to be submitted:

- Pre-professional courses and requirements

Other examples that might be considered:

- Established levels of expected academic achievement in the pre-professional requirements

Criterion 17.3: Admissions criteria include an equitable assessment of the suitability of candidates to enter a pharmacy degree program.

Evidence to be submitted:

- Assessment methods such as standardized interviews of applicants; evaluation of oral and/or written communication skills, a general understanding of the pharmacy profession and the importance of patient-focused care

Criterion 17.4: The criteria used to determine offers of admission are made public.

Evidence to be submitted:

- Public location(s) for admission information



Part III: Resources

A. Student Services

Standard 18: The Faculty and the University provide sufficient resources including appropriately trained staff to ensure that students are supported and have a respectful, safe, inclusive environment free of harassment and discrimination while enrolled in the professional program of pharmacy.

Criterion 18.1: Students at all stages of the program have access to financial aid and health services, orientation programs, academic advising, and career-pathway counselling. Housing assistance and services to support the requirements of students participating in experiential education are provided. Requests for accommodation of student needs are met in a manner consistent with applicable legislation. Supports are provided in an anti-oppressive manner and appropriate resources are in place to support equitable learning.

Evidence to be submitted:

- Description of the types of student services and resources available at the Faculty and centrally (University)
- Description of procedures (policy, when available) to provide accommodation(s) for learners

Other examples that might be considered:

- Communication of the available student services and resources
- Student and faculty member feedback (formal or informal) on available services and resources

Criterion 18.2: The Faculty has an administrative office led by an individual or individuals with appropriate qualifications, training, and expertise to provide information about and referral to student services.

Evidence to be submitted:

- Description of the Faculty personnel who support student services

Criterion 18.3: Students are aware of conditions under which they may file a grievance, appeal, or complaint. Students are informed about resources to help them navigate university policy and procedures, such as Faculty advisors, University ombudspersons, conflict mediators, or student advocates.

Evidence to be submitted:

- Faculty and University policies and procedures related to student grievances, appeals and complaints

- Description of process used to ensure students are informed on how to file a grievance, appeal, or complaint

Criterion 18.4: The Faculty has an ordered, accurate, and secure system of student records that is maintained in accordance with University policy and privacy legislation.

Evidence to be submitted:

- Policy and procedures regarding student records

B. Human Resources

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

Criterion 19.1: Within each discipline and curricular area, there is an appropriate breadth and depth of skills and experience among faculty members with academic title. Full-time faculty members may be supplemented by an appropriate number of part-time, cross-appointed, or jointly funded faculty members, and voluntary faculty members with adjunct status or other appropriate academic title.

Evidence to be submitted:

- List of faculty members including credentials, areas of expertise, and roles and responsibilities within the professional program
- Evaluation of net change in faculty complement since the last accreditation visit

Other examples that might be considered:


- Involvement of faculty members in provision of direct patient care and professional services to patients

Criterion 19.2: There is an adequate amount of appropriately skilled staff resources including but not limited to administrative assistants, student services personnel, teaching assistants, laboratory instructors, and information and communication technology personnel.

Evidence to be submitted:

- List of staff including roles and responsibilities within the professional program
- Evaluation of net change in staff complement since the last accreditation visit

Criterion 19.3: Selection and promotion of staff and faculty is regulated by a defined process within the Faculty consistent with University policy. This process includes careful definition



of needs associated with the role, selection methods designed to reduce bias toward candidates, and a formal strategy to attract and hire a diverse workforce.

Evidence to be submitted:

- Description of hiring procedures, selection criteria, and promotion process for staff and faculty

Other examples that might be considered:

- Description of strategy/plan to encourage hiring and promotion of a diverse workforce

Criterion 19.4: Preceptors are offered or are eligible for an appropriate academic appointment or affiliation consistent with University policy to recognize their critical role in the education of students.

Evidence to be submitted:

- Description of academic appointment or affiliation policy and procedures for preceptors

Other examples that might be considered

- Other ways preceptors are recognized

Criterion 19.5: Faculty members and staff 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.

Evidence to be submitted:

- Description of evaluation procedures such as teaching evaluations, peer-evaluations, or annual reviews

Other examples that might be considered:

- Faculty and staff feedback (formal and informal) about the performance evaluation process and criteria

Standard 20: The Faculty and University provide essential training for faculty members and staff and support professional development opportunities consistent with staff and faculty responsibilities.

Criterion 20.1: There is evidence of University and Faculty support for professional development opportunities for faculty members and staff, consistent with their respective responsibilities as it relates to teaching and assessment of students. Major changes in educational offerings (e.g., a shift from in-person to remote teaching) are met with corresponding training for instructors to ensure continued quality of instruction.

Evidence to be submitted:

- Opportunities for professional development and training by faculty members and staff over the last two years

Other examples that might be considered:

- Documentation of formal peer mentoring or support programs offered by the Faculty
- Faculty and staff feedback (formal and informal) on professional development opportunities and training

Criterion 20.2: Faculty members and staff participate in training on systemic oppression and anti-racism, including but not limited to information on Indigenous health and wellness and the historical and current policies, practices, and effects of colonialism.

Evidence to be submitted:

- Description of training offered

Other examples that might be considered:

- Documentation of faculty members and staff participation in training sessions
- Feedback from faculty and staff (formal and informal) on professional development opportunities and training in this domain

C. Practice Site Resources

Standard 21: The Faculty selects appropriate preceptors and practice sites so that student learning and skills development are adequately managed, supported, and supervised. Practice sites and preceptors meet relevant regulatory requirements.

Criterion 21.1: The Faculty utilizes established criteria for selection of preceptors and practice sites that meet or exceed the Standards of Practice for the jurisdiction. There are processes for orientation, initial training, and ongoing training and development for preceptors. Preceptors are committed to supporting the teaching and student assessment processes. Qualified preceptors oversee all practice experiences, with most being pharmacists.

Evidence to be submitted:

- Processes for selection of preceptors and practice sites that meets or exceed Standards of Practice for the jurisdiction
- Initial orientation and education offered to preceptors
- Ongoing preceptor development

Other examples that might be considered:

- Feedback from preceptors on opportunities for professional development and training
- Process to ensure consistent and standardized assessment of students

Criterion 21.2: Preceptors and practice sites are evaluated using multiple sources of information with reference to clearly outlined criteria.

Evidence to be submitted:

- Evaluation criteria and process for site evaluation
- Evaluation criteria and process for preceptor evaluation

Other examples that might be considered:

- Process for dealing with preceptors who no longer adhere to or meet preceptor criteria

Criterion 21.3: 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.

Evidence to be submitted:

- Staffing, responsibilities and organizational overview for this office or system
- Description of qualifications/expertise of faculty/staff leading this office or system

Criterion 21.4: The Faculty provides evidence of working collaboratively with practice sites and other health sciences programs of the University to ensure that students are provided access to practice environments with appropriate amenities to support student learning which allows them to achieve the intended educational outcomes. 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.

Evidence to be submitted:

- Description of practice environments, including amenities and collaborative initiatives required to achieve outcomes (e.g. patient interactions and facilities to allow student contribution, appropriate information technology access, adequate space for students)
- Description of models of supervision and preceptorship used

Other examples that might be considered:

- Evaluation of models of preceptorship by students and preceptors

D. Financial Resources

Standard 22: The Faculty has adequate financial resources to ensure the continuing operation of the professional program and the fulfillment of other elements of the Faculty mission.

Criterion 22.1: University and Faculty consultation informs decisions about the required financial resources to deliver the professional program.

Evidence to be submitted:

- Current program budget (including details of revenues and expenditures, when available)

- Evaluation of the adequacy of the financial resources to support the current and anticipated future needs of the program. This includes faculty and staff member salaries, materials and equipment, faculty and staff development, curricular development, physical facilities and infrastructure needs, and the support of scholarly activities of the faculty members and students.

Other examples that might be considered:

- Description of the process utilized in determining the program budget
- Description of open positions, ongoing searches and new faculty and staff positions needed to meet current and future strategic goals
- Significant changes in operational funding since the last accreditation visit
- Benchmark funding data from other pharmacy programs in Canada and, where relevant, comparative per student funding for other health profession programs at the University

Standard 23: The Faculty, with the support of the University, has access to diverse financial support to improve its program, including development and advancement activities to facilitate enrichment of the program.

Evidence to be submitted:

- Staffing within the Faculty and/or University to support development and advancement activities of the Faculty
- Description of strategies or initiatives planned to access financial support and develop advancement activities

Other examples that might be considered:

- Documentation of funds obtained

E. Physical Facilities and Infrastructure

Standard 24: Physical facilities and infrastructure of the Faculty and those at other University sites where students, staff and faculty members are located are adequate and appropriately equipped to achieve the stated mission.

Criterion 24.1: The physical facilities and infrastructure are well-maintained and provide a safe, healthy, and contemporary environment for the achievement of the Faculty's mission related to teaching and learning, research, and service. The facilities must meet legal standards for individuals with disabilities. Teaching facilities are sufficient in number, size, and quality to accommodate the student body.

Evidence to be submitted:

- Description of physical facilities and infrastructure such as classrooms, laboratories, simulation teaching/learning environments, and office space, and the infrastructure that supports those environments
- Evaluation of physical facilities and infrastructure including feedback from students, faculty members and staff on quality and quantity of those resources

Other examples that might be considered:

- Examples of how physical facilities are welcoming to Indigenous and other equity-deserving groups as described by individuals who belong to the particular groups or communities of interest

Criterion 24.2: The Faculty provides space for student activities and organizations.

Evidence to be submitted:

- Description of the facilities available to students

Other examples that might be considered:

- Feedback from students regarding the quality and quantity of space available for student activities and organizations

F. Information and Technology Resources

Standard 25: The Faculty ensures access and training for all faculty members, preceptors, and students related to educational technology as well as library and information resources sufficient in quantity and quality to support all educational and scholarly activities in accordance with the Faculty's mission and goals.

Criterion 25.1: On- and off-campus access to library resources is available to students, faculty members, and preceptors.

Evidence to be submitted:

- Description of resources available to students, faculty members and preceptors (information technology, journals, databases, and other learning resources)

Other examples that might be considered:

- Feedback (formal and informal) from students, faculty members and preceptors on the adequacy and reliability of access to library and information resources

Criterion 25.2: Access and training related to information technology and systems essential for pharmacy practice is available to students and faculty members in simulated practice environments and in practice sites to ensure that graduates are digitally competent practitioners.

Evidence to be submitted:

- Description 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
- Learning programs and training for ensuring that students and faculty members are competent with information systems utilized in simulated practice environments and in practice sites

Other examples that might be considered:

- Description of technology and systems to support intra- and interprofessional pharmacy practice in simulated practice environments and practice sites, such as electronic charting, simulated laboratory viewers, provincial drug information systems and electronic health records
- Training programs to ensure students are competent in protecting patient privacy as per ethical and legal requirements in their jurisdiction
- Feedback from students regarding access to information technology

Criterion 25.3: Digital infrastructure is available to support online learning and assessment.

Evidence to be submitted:

- Description of the range and type of educational software platforms used within the program for instruction and assessment
- Access to support related to the use of educational technology (e.g., staff, help desk support)

Other examples that might be considered:

- Description of physical equipment available to instructors to support online instruction
- Training for acquainting students and instructors with educational technology platforms
- Feedback on the quality of educational software and other resources for remote learning and assessment by instructors and students



Appendix 1 – Foundational Content

It is expected that the curriculum has content of sufficient depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation at an entry level for the full scope of contemporary pharmacy practice responsibilities. The curriculum (or courses in the pre-professional curriculum that are requirements for admission) is expected to include sufficient content in biomedical sciences; pharmaceutical sciences; behavioural, social, and administrative pharmacy sciences; pharmacy practice; and treatment and prevention of conditions involving major organ systems. Suggested content areas include:

Biomedical Sciences

- Anatomy
- Biochemistry
- Immunology
- Microbiology
- Physiology
- Pathophysiology

Pharmaceutical Sciences

- Pharmacology
- Pharmaceutics
- Biopharmaceutics
- Pharmacokinetics
- Pharmacogenomics
- Toxicology
- Medicinal chemistry
- Pharmaceutical biotechnology

Behavioural, social, administrative pharmacy sciences

- Indigenous history (residential schools, colonialism), anti-Indigenous racism, right to self-determination, values, teachings, practices, and healthcare needs
- Pharmacoepidemiology
- Healthcare systems and health economics
- Health systems planning
- Digital health
- Pharmacoeconomics
- Cultural diversity
- Cultural safety, humility, and responsiveness
- Global citizenship
- Management and leadership
- Quality improvement
- Research methods
- Biostatistics
- Professional identity formation
- Climate change and its effects on health
- Health equity and social determinants of health



Pharmacy practice

- Pharmacist patient care process
- Ethical and professional standards of practice
- Pharmacotherapeutics
- Compounding
- Impact of pharmacy practice on environmental sustainability
- Collaboration
- Communication
- Leadership
- Pharmacy law and regulatory issues
- Pharmacy informatics
- Professional wellbeing
- Patient self-care and management of minor ailments
- Patient safety
- Healthcare education
- Health advocacy
- Professional learning and development
- Traditional, complementary, and alternative medicine
- Public health
- Indigenous health policy

Treatment and prevention of conditions involving major organ systems in adults, pediatrics, and older adults as appropriate

- Psychiatry and mental health
- Neurology
- Cardiology
- Respiriology
- Gastroenterology
- Endocrinology
- Nephrology
- Dermatology
- Hematology
- Rheumatology
- Oncology
- Infectious diseases
- Drugs in pregnancy and lactation
- Pain
- Nutrition
- Substance use disorders, dependency, and addiction
- Sexual, reproductive, and gender-related health
- Urology
- Conditions affecting head, eyes, ears, nose, throat (EENT)



Appendix 2 – Required practice skills

It is expected that the following practice skills are developed through laboratory, simulation, and practice-based experiences to enable students to care for patients and their medication-related needs and to continually develop as a professional:

- Collection of patient data
 - Information gathering
 - Accessing patient health information
 - Physical assessment
 - Diagnostic and point-of-care testing
 - Best possible medication history and medication reconciliation
- Patient assessment/pharmacotherapy work-up
- Care plan development
- Care plan implementation
 - Patient education
 - Dispensing and prescription processing
 - Compounding
 - Prescriptive decision-making (i.e., prescribing, deprescribing, adapting a prescription, refusing to fill, referring, substituting)
 - Administration of drugs by injection
- Monitoring & follow-up
- Documentation of care
- Patient and professional communications
- Collaborative care and shared decision-making
- Virtual care provision
- Drug information provision
- Critical appraisal of medical literature
- Evidence-based decision making
- Compounding



Appendix 3 – Required Program Components for Evaluation

The program should have processes in place for evaluating and improving the following, at a minimum:

- a. The overall curriculum, including course sequencing, coverage of foundational and new content as required by professional changes, and opportunities for practising clinical and professional skills
- b. Teaching, student assessment, and learning environments (e.g., classroom, online, simulation lab, experiential placements, etc.)
- c. Outcomes of the education program, including results from national board exams; feedback from students, alumni, employers, and local pharmacy regulators; and measurement of student performance across education experiences
- d. Resources and infrastructure supporting the education of students, including human resources, financial resources, facilities, and liaison relationships with partners supporting delivery of the curriculum
- e. Recruitment and admissions processes and outcomes including those related to increasing representation of Indigenous pharmacists and other equity-deserving groups
- f. Student support services and resources, including academic support and health services
- g. Program evaluation and continuous quality improvement processes within the Faculty

In responding to this standard, the Faculty is encouraged to describe their processes for evaluating these areas and disseminating and using the information gathered from evaluations, rather than presenting all the data discussed here.