Professional Competencies for Canadian Pharmacists at Entry to Practice

Second revision
March 2007
Background

NAPRA was formed in February 1995 as an umbrella organization of Canada’s provincial pharmacy regulatory bodies. The mission of our association is to facilitate the activities of provincial pharmacy regulatory authorities in their service of public interest. This is accomplished by:

- representing the interests of the member organizations;
- serving as a national resource centre; and
- promoting the harmonization of legislation and standards

These national competencies were originally developed in 1997 in response to the federal government’s Agreement on Internal Trade (AIT) which came into effect in 1995. Chapter Seven of the AIT, the Labour Mobility Chapter, specifies that any worker qualified for an occupation in one province or territory should be granted access to employment in that occupation in any other province or territory in Canada. One mechanism to facilitate this is through the development of a mutual recognition agreement, especially if there is a high degree of commonality throughout the profession. These national competencies are reflective of that commonality, and form the basis of a National Model Licensing Program which describes entry to practice requirements for initial licensing of pharmacists in jurisdictions that are signatories to the mutual recognition agreement.

These competencies were revised by representatives of the pharmacy profession from all jurisdictions across Canada (except Yukon and Nunavut) during a workshop hosted by NAPRA in January 2007. In addition, they were reviewed by external stakeholders prior to being finalized and adopted by the NAPRA Board of Directors. NAPRA thanks both workshop participants and stakeholders for their time and efforts in the revision of these competencies. In addition, many thanks to Kelly Piasentin of Assessment Strategies Inc. of Ottawa for facilitating this process.
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Competencies of Entry Level Pharmacists

This document outlines the competencies\(^1\) required of pharmacists at the point of licensure in Canada, for the benefit of the Canadian public.

The competencies require as a minimum prerequisite the completion of an accredited\(^2\) baccalaureate in pharmacy degree program. It is recognized that the knowledge, skills and attitudes gained in the completion of an accredited program will provide the foundation for all competencies.

Through these competencies, pharmacists assist individuals and groups to achieve desired health outcomes by providing current, rational, safe and cost-effective pharmaceutical information, products and services.

In developing the list of competencies for pharmacists, the following assumptions were made:

**The Practice Environment:**
Pharmacists work in a wide variety of practice environments (e.g., community pharmacy, hospital/institutional pharmacy, education, research, consulting, family health centres, etc.)

**The Patient\(^3\):**
Refers to any person or authorized agent to whom a pharmacist provides a service that is within the practice of pharmacy. The agent refers to a family member, caregiver, or another person who has a close personal relationship with the patient.

**The Health Care Professional:**
Refers to professionals within the patient’s circle of care\(^4\).

**The Pharmacist:**
Is a registered/licensed pharmacist who:
- practices in accordance with professional registration and licensure, and professional standards within his/her jurisdiction.
- possesses both broad-based and pharmacy specific knowledge.
- uses critical-thinking, problem-solving and decision-making skills appropriate to the pharmacist role.
- mentors pharmacists, pharmacy students or interns, pharmacy technicians and others.
- takes responsibility for his/her own continuing professional development\(^5\) and commits to life-long learning.

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\(^1\) See glossary
\(^2\) See glossary
\(^3\) In this document, the terms ‘patient’ and ‘client’ are synonymous.
\(^4\) See glossary
\(^5\) See glossary
Competency Categories

**Patient Care**
Pharmacists, in partnership with patients and other health care professionals, use their unique knowledge and skills to meet patients’ drug and health related needs and to achieve optimal patient outcomes and patient safety.

**Professional Collaboration and Team Work**
Pharmacists work in collaboration with other health care professionals to optimize patient safety and improve health outcomes.

**Ethical, Legal and Professional Responsibilities**
Pharmacists practise within legal requirements, demonstrate professional integrity and act to uphold professional standards of practice and codes of ethics.

**Drug, Therapeutic and Practice Information**
Pharmacists assume responsibility for accessing, retrieving, evaluating and exchanging relevant information to ensure safe and effective patient care.

**Communication and Education**
Pharmacists communicate with and provide education to groups and individuals in order to promote and support optimal patient care and well-being.

**Drug Distribution**
Pharmacists manage the drug distribution system to ensure the safety, accuracy and quality of supplied products.

**Understanding Management Principles**
Pharmacists apply knowledge, principles and skills of management with the goal of optimizing patient care and inter-professional relationships.
Competency #1: Patient Care

Competency Unit\(^6\)

Pharmacists, in partnership with patients and other health care professionals, use their unique knowledge and skills to meet patients’ drug and health related needs and to achieve optimal patient outcomes and patient safety.

Competency Elements\(^7\):

1.1 Develop a trusting professional relationship with the patient where both parties are interacting in a way where the obligations, expected benefits, and consequences are clearly defined.
   i. establish and maintain rapport by using effective communication skills.
   ii. demonstrate a caring, empathetic, and professional attitude.
   iii. elicit the patient’s needs, values and desired level of care and desired outcomes regarding drug therapy.
   iv. assess the impact of factors that facilitate or impede the health of individual patients.
   v. define mutual obligations, expected benefits, and consequences.

1.2 Gather patient information.
   i. identify and use appropriate sources of information (e.g., patient, laboratory data, chart, electronic health record, profile, other health care professionals, etc.).
   ii. actively listen and interpret the information provided (e.g., medical and social history, adverse drug reactions, allergies, medication use, etc.).
   iii. assess the relevance of the information.

1.3 Assess the health status and concerns of the patient.
   i. use appropriate data, techniques and procedures to assess the patient’s health.
   ii. use knowledge base to comprehend the scope and breadth of the patient’s health problem.
   iii. identify factors (e.g., risk factors, financial, lifestyle, nutrition) that impact on the therapeutic outcome.

\(^6\) See glossary
\(^7\) See glossary
1.4 Identify the patient’s desired therapeutic outcomes.
   i. integrate knowledge of the patient’s health status with knowledge of drug and non-drug treatment options.
   ii. outline the benefits and/or consequences of the treatment options.
   iii. enable the patient to make choices.

1.5 Identify and prioritize actual and potential drug therapy problems to determine if:
   i. the patient requires drug therapy but is not receiving it,
   ii. the patient is taking or receiving the wrong drug,
   iii. the patient is taking or receiving too little of the right drug,
   iv. the patient is taking or receiving too much of the right drug,
   v. the patient is not taking or receiving the drug or is taking or receiving the drug inappropriately,
   vi. the patient is experiencing an adverse reaction to the drug,
   vii. the patient is experiencing a drug interaction (including drug-drug, drug-food, drug-laboratory test, drug-disease, or drug-blood product),
   viii. the patient is taking or receiving a drug for no medically valid indication or substance abuse.

1.6 Develop a therapeutic plan.
   i. identify and assess treatment strategies, including drug and non drug measures\(^8\) using an evidence-informed\(^9\) approach.
   ii. select therapeutic options.
   iii. recognize, solve and prevent actual and potential drug therapy problems.
   iv. consult with the patient and, if necessary, health care professionals.

1.7 Support the implementation of the therapeutic plan.
   i. explain the rationale for the proposed treatment.
   ii. provide patient education (e.g., counseling information and education on adherence issues, either verbal or written).
   iii. assess patient’s understanding of the therapeutic plan.

1.8 Monitor the patient’s progress and assess therapeutic outcomes.
   i. recognize the important clinical indicators (e.g., signs and symptoms, laboratory tests, adverse effects).
   ii. identify and apply monitoring/intervention techniques and timelines.
   iii. specify outcomes with measurable therapeutic end points.
   iv. discuss with the patient the ongoing responsibilities of the pharmacist, patient and other health care professionals.
   v. assess tolerance and safety of therapy.
   vi. assess adherence to therapy.
   vii. conduct follow-up consultation(s) to evaluate the therapeutic effectiveness.

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\(^8\) See glossary
\(^9\) See Glossary
1.9 Document and share within the circle of care appropriate findings of patient information assessment, recommendations made and actions taken.
   i. identify the purpose of the documentation.
   ii. maintain the patient’s health record.
   iii. document identified drug therapy problems.
   iv. prioritize and document the intervention, patient’s outcome, recommendations, and follow-up.
   v. document communication with patient and health care professionals.
Competency #2: Professional Collaboration and Team Work

Competency Unit

Pharmacists work in collaboration with other health care professionals to optimize patient safety and improve health outcomes.

Competency Elements:

2.1 Develop collaborative relationships\(^{10}\) with health care professionals such that the obligations and expected benefits are clearly defined.

2.2 Cooperate with and show respect for all members of the inter-professional team.
   i. make expertise available to others.
   ii. share relevant information.
   iii. contribute to defining objectives shared by all professions concerned.
   iv. support other professionals and accept their support to optimize health outcomes.

2.3 Refer patients to other health care providers when required.
   i. determine if a referral is necessary.
   ii. identify the most appropriate health care provider or agency for the referral (e.g., medical or social).
   iii. work with other health care providers to determine the desired therapeutic outcome.

2.4 Work with other health care professionals to promote health and wellness in the community.

2.5 Contribute to the discovery of new knowledge and skills (e.g., participating in collaborative health related research).

2.6 Understand, participate in and promote safety initiatives (e.g., medication safety, continuity of care).

\(^{10}\) See glossary
Competency #3: Ethical, Legal and Professional Responsibilities

Competency Unit:

Pharmacists practise within legal requirements, demonstrate professional integrity and act to uphold professional standards of practice and codes of ethics.

Competency Elements:

3.1 Apply legal and ethical requirements including federal and provincial/territorial legislation, policies, by-laws and standards.

3.2 Uphold and act on the ethical principle that a pharmacist’s primary accountability is to the patient.
   i. ensure patient confidentiality.
   ii. advocate on behalf of the patient.
   iii. involve the patient in decision-making.
   iv. respect the rights of patients to make their own choices.
   v. consider patient-specific circumstances.

3.3 Demonstrate personal and professional integrity.
   i. accept responsibility for actions and decisions.
   ii. show respect for the dignity of the patient.
   iii. maintain appropriate professional boundaries.
   iv. practise within personal limits of knowledge, skills and abilities.

3.4 Demonstrate an understanding of the Canadian health care system and the role of the pharmacist and other health care professionals within it.

3.5 Demonstrate an understanding of the importance of and the process of continuing professional development.
   i. assess own learning needs.
   ii. develop a plan to meet learning needs.
   iii. seek and evaluate learning opportunities to enhance practice.
   iv. incorporate learning into practice.

11 See glossary
Competency #4: Drug, Therapeutic and Practice Information

Competency Unit:

Pharmacists assume responsibility for accessing, retrieving, evaluating and exchanging relevant information to ensure safe and effective patient care.

Competency Elements:

4.1 Clearly define the question(s) to be researched.
   i. clarify requests for information.
   ii. identify key targets (audiences).

4.2 Identify appropriate sources of relevant information, using evidence-informed approaches where possible.
   i. name major sources of information.
   ii. determine the appropriateness of these sources.
   iii. assess the value of the sources.

4.3 Retrieve information from relevant sources.
   i. use a variety of retrieval techniques to access relevant information.
   ii. assess the suitability and reliability of these techniques.

4.4 Evaluate scientific information.
   i. assess the adequacy of research design (e.g., ethics, methodology, etc.).
   ii. assess the relevance, applicability, accuracy, reliability, validity and generalizability of information.

4.5 Organize information and develop a knowledge exchange\(^\text{12}\) strategy.
   i. determine key messages.
   ii. identify barriers to uptake.
   iii. identify target audience.
   iv. determine and apply methods for knowledge exchange.
   v. assess outcomes of the knowledge exchange.

4.6 Identify issues in pharmacy practice and drug utilization.
   i. interpret information in order to address issues in individual pharmacy practice.
   ii. use findings to improve practice.
   iii. communicate results to appropriate audiences.

\(^\text{12}\) See glossary
Competency #5: Communication and Education

Competency Unit:

Pharmacists communicate with and provide education to groups and individuals in order to promote and support optimal patient care and well-being.

Competency Elements:

5.1 Demonstrate effective communication skills.
   i. demonstrate comprehension and proficiency in written and verbal English or French.
   ii. demonstrate appropriate verbal, non-verbal and listening skills.
   iii. demonstrate effective interview techniques.
   iv. display clear, concise and effective writing skills.
   v. select appropriate communication techniques for use with patients and other health care professionals.

5.2 Demonstrate sensitivity, respect and empathy when communicating with diverse groups or individuals.
   i. demonstrate an understanding of the impact that individual differences have on communication.

5.3 Optimize individual and group health and wellness through education and health promotion.
   i. use knowledge base to discuss health care issues and public health priorities.
   ii. identify factors that are barriers to, or facilitators of, health and wellness in individuals and groups.
   iii. collaborate with patients and other health care professionals in the development and implementation of health promotion strategies and public health initiatives.

5.4 Design, implement and evaluate an education plan for individuals and groups.
   i. identify the learning needs of participants.
   ii. assess personal abilities to carry out a particular educational plan.
   iii. select educational methods that are appropriate for the learner(s).
   iv. implement an educational plan for individual or groups.
   v. assess outcomes.
Competency #6: **Drug Distribution**

Competency Unit:

| Pharmacists manage the drug distribution system\(^\text{13}\) to ensure the safety, accuracy and quality of supplied products. |

Competency Elements:

6.1 Apply relevant knowledge in the performance of tasks related to:
   i. interpretation of drug orders and/or prescriptions,
   ii. identification of bioequivalency and interchangeability of multi-source drugs,
   iii. performance of pharmaceutical calculations,
   iv. selection of quality products and ingredients,
   v. demonstration of compounding and dispensing, including labeling,
   vi. preparation of sterile products,
   vii. identification of storage and handling conditions to ensure stability,
   viii. acquiring and disposing of drugs,
   ix. administration of drugs,
   x. documentation.

6.2 Demonstrate ability to supervise drug distribution.
   i. maintain safe and effective systems of drug supply and distribution.
   ii. adhere to distribution policies and procedures.
   iii. supervise support staff.

6.3 Participate in continuous quality assurance.
   i. respond to actual or potential problems within the drug distribution system.
   ii. acknowledge the problem.
   iii. take steps to assess and resolve issues arising from the problem.
   iv. implement measures to prevent occurrences or reoccurrences.
   v. document and report the problem and resolution.

6.4 Monitor drug distribution patterns.
   i. recognize and respond to patterns of unusual drug distribution (e.g., diversion, drug misuse, fluctuations in utilization, etc.).

\(^\text{13}\) See glossary.
Competency #7: Understanding Management Principles

Competency Unit:

Pharmacists apply knowledge, principles and skills of management with the goal of optimizing patient care and inter-professional relationships.

Competency Elements:

7.1 Supervise personnel such that delegated functions are carried out to meet accepted standards.
   i. apply management principles and skills relevant to human and physical resources.
   ii. define accepted standards, policies and procedures.
   iii. demonstrate the principles of effective inter-professional and intra-professional working relationships.

7.2 Effectively manage workflow.
   i. demonstrate organizational skills.
   ii. prioritize and organize workflow.
   iii. demonstrate time management skills.

7.3 Understand management principles pertaining to pharmacy practice including:
   i. financial resources,
   ii. inventory,
   iii. information resources (e.g., reference library, information technology, legal documents, etc.),
   iv. human resources,
   v. quality assurance\(^\text{14}\).

7.4 Interpret and apply the drug utilization, reimbursement and pharmacoeconomic policies of health care facilities, agencies and third party payment plans (e.g., generic substitution, therapeutic interchange, use of formularies, co-payments, deductibles, prescription quantity limits, etc.).

\(^{14}\) See glossary.
Glossary of Terms

Accredited\(^2\)
Accredited by the Canadian Council for Accreditation of Pharmacy Programs (CCAPP), or
Accredited by a body recognized by CCAPP, or
Determined to be equivalent to a CCAPP accredited program by a Provincial Pharmacy Regulatory Authority, or
Determined to be equivalent to a CCAPP accredited program by the Pharmacy Examining Board of Canada (PEBC).

Circle of care\(^4\)
Term of reference used to describe all members of the health care team who have direct responsibilities of providing care to an individual.

Collaborative Relationship\(^10\)
A relationship between two or more health professionals that is developed to:
- facilitate communication
- determine mutual goals of therapy that are acceptable to the patient
- share relevant health information
- establish the expectations of each participant

Competencies\(^1\)
Significant job related knowledge, skills, abilities, attitudes, and/or judgments required for competent performance by members of the profession.

Competency Element\(^7\)
A sub-section of a competency unit providing a detailed description of the key indicators of the expected activity.

Competency Unit\(^6\)
A major segment of an overall competency that describes the key indicators of the expected activity.

Continuing Professional Development\(^5\)
The means by which individual pharmacists maintain and enhance their own competence.
**Drug distribution system**\(^{13}\)
A system designed to facilitate the safe transfer of a medication from the manufacturer to the patient in a manner that preserves both the integrity of the medication and the safety of the patient. Steps in the drug distribution system include manufacturing, storage, procurement, dispensing, administration, and returns.

**Evidence-informed**\(^{9}\)
The conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients.

**Knowledge Exchange**\(^{12}\)
Collaborative problem-solving between pharmacists and other individuals that happens through linkage and exchange. Effective knowledge exchange involves interaction between pharmacists and other individuals and results in mutual learning through the process of planning, producing, disseminating, and applying existing or new research in decision-making.

**Legislation**\(^{11}\)
Includes statutes and regulations made under those statutes.

**Non drug measures**\(^{9}\)
Measures (in addition to drugs) that can be used to assist in the treatment of health conditions.

**Quality Assurance**\(^{14}\)
The technical, operational and managerial activities aiming to ensure that all services reaching the patient are safe, effective and acceptable.
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