



National Association of Pharmacy Regulatory Authorities<sup>®</sup>  
Association nationale des organismes de réglementation de la pharmacie

# The Culture of Professionalism in Pharmacy

White Paper

NAPRA Working Group

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## Introduction

Pharmacy is a profession spanning many roles and practice settings, including direct patient care, management, academia, research, regulation, and many others. NAPRA's members, the pharmacy regulatory authorities across Canada, have been hearing concerns and receiving indicators about a potential weakening in the culture of professionalism in pharmacy for some time now, and there are concerns that it is impacting the ability of the profession to best meet the needs of patients and the health care system. These indicators include lack of a clear professional identity, lack of engagement in the full scope of patient care activities, erosion of professional autonomy, and lack of strong leadership. They are explored in detail later in this white paper. Preliminary investigations and observations to date suggest that the reasons for this change in the culture of professionalism in pharmacy are complex and multi-faceted and that they span the entire profession, touching on the work of pharmacy professionals, employers, regulators, educators, professional associations, and others. This paper seeks to explore the factors that shape the culture of professionalism in pharmacy practice and the indicators of concern in this area, to ensure that the public and the health care system receive the fullest potential of the profession of pharmacy moving forward.

As regulated health professionals, pharmacy professionals have been granted professional autonomy and self-regulation by governments representing the general public. Professional autonomy is defined as the ability to exercise independent, expert judgment within a legally defined scope of practice, (and) to provide services in the best interests of the client.<sup>1</sup> It does not mean absolute independence; rather, it comes with expectations and responsibilities. Self-regulation is a privilege and is built on trust and a societal belief that professionals are able to put aside self-interests in favour of serving and protecting the public interests.

During the last decade, pharmacy professionals have been granted an expanded scope of practice to meet the health needs of the public, through legislative and regulatory changes across Canada. These changes, often aligned with advancements in education, have shifted the practice for pharmacists from primarily drug distribution to patient-centred care, and they have granted pharmacy technicians regulated status to independently complete designated technical tasks within the practice of pharmacy. Despite these regulatory and legislative changes, there are concerns that patients are not receiving the full benefit of these practice advancements. It has been suggested that one of the main barriers to optimizing pharmacy practice in Canada may be issues related to the culture of professionalism within pharmacy. The factors that shape the culture of a profession (as will be explained later in this white paper) may be contributing to pharmacists and pharmacy technicians not being fully enabled to *be* the health professionals that they want to be — practising to the fullest scope of practice available to them. As noted by Rosenthal and colleagues in a 2010 Canadian article exploring pharmacy culture, “culture is a dominant force in shaping any profession” and “if professional culture and the approach to change do not align, practice change will remain elusive.”<sup>2</sup> To address this issue, with the objective of ensuring that patients receive the fullest potential of the profession, a coordinated, profession-wide initiative will likely be required to better define, instill, assess, and demonstrate pharmacy's unique culture of

professionalism. While it is acknowledged that most of the literature addressing professionalism in pharmacy practice is focused on community-based practice, there is no evidence to suggest that similar concerns are not occurring in other areas of pharmacy practice, including hospital, primary care, long-term care, and other practice sites. The information in this white paper applies to the entire profession of pharmacy and all who contribute to the profession, regardless of their title or role.

The question of how the culture of professionalism is affecting pharmacy practice is complex, although a waning in the culture of professionalism has been suggested as one of the “wicked problems” facing pharmacy today.<sup>3</sup> Wicked problems are those that are seemingly impossible to solve because they are interconnected, complex, and unpredictable, and the effort to solve one aspect of a wicked problem may create or reveal other problems.<sup>4</sup> Enhancing the culture of professionalism in pharmacy is expected to have far-reaching benefits that will have a positive impact on patient care and the profession as a whole.

NAPRA’s Strategic Plan 2019–2023 addresses this issue, with 1 of its key activities defined as restoring the culture of professionalism in pharmacy practice. As a first step, a working group was established to assist NAPRA with defining and implementing a set of principles of professionalism specific to the profession of pharmacy in Canada. The discussion of professionalism presented in this white paper is intended to assist the working group to develop and finalize a draft set of principles of professionalism to clearly define the aspects that must be addressed when enhancing the culture of professionalism in pharmacy practice.

Enhancing pharmacy’s culture of professionalism is not a simple undertaking, as the factors that shape the culture of a profession are complex and multi-faceted. However, it is an important component in enabling the profession of pharmacy to best meet the needs of patients and the health care system. As such, NAPRA is committed to leading this work and engaging with stakeholders from across the profession on this important project.

## **Professionalism — What does it mean to be a professional?**

Professionals are individuals who have unique knowledge, skills, and abilities and use them to contribute to society, typically in ways in which members of the society cannot provide for themselves. Health professionals enter into a social contract with society (through professional statutes and profession-specific codes of ethics), committing to their fiduciary duty to place the patient’s best interests above all else. In exchange, society grants the professional the right to practise restricted acts and the privilege of self-regulation.<sup>5</sup> The unique knowledge, skills, and abilities held by health professionals, and their priority focus on the public interest, is one of the primary characteristics that distinguishes professions from occupations.<sup>6</sup>

Even though professionalism is a widely used term, there is no agreed-upon definition. It has been defined as “a set of attitudes, skills and behaviours, attributes and values which are expected from those to whom society has extended the privilege of being considered a professional.”<sup>7</sup> However, this definition does not acknowledge that professionalism is multi-dimensional and extends well beyond the attributes of an individual person. Professionalism can be viewed as a continuum: it operates at the personal level, encompassing the individual professional’s attributes and behaviours, at the interpersonal level, encompassing their interactions with other individuals, and at the societal level, where social responsibility and compliance with legal and professional standards come into play. There are also collective issues within professions that influence both the behaviours and attitudes of the individual professionals and the public’s perception of the profession as a whole. It is the combination of all of these factors that define the culture of professionalism. As such, NAPRA will not be using any one definition, nor will it attempt to define professionalism in a couple of short sentences, as this would not do justice to this complex concept. Rather, NAPRA will outline what professionalism means for the profession of pharmacy by defining a set of principles of professionalism.

The different elements of professionalism have been described by Van de Camp and colleagues,<sup>8</sup> Burford and colleagues<sup>9</sup> and Hodges and colleagues<sup>10</sup> and can be summarized as follows:

**Societal professionalism:**

Professionalism at the societal level is a collective responsibility of the profession that arises from its social contract with society. It includes elements such as accountability, excellence, self-regulation, autonomy, and expertise. It also highlights how organizations, management structures, and practice environments can influence professionalism.

**Interpersonal professionalism:**

Professionalism at the interpersonal level is associated with meeting the demands for adequate contact with patients and other health professionals. It includes elements such as altruism, respect, integrity, compassion, collaboration, and trust. In this context, the importance of role modelling and the ways in which others may reinforce or elicit “professional” or “unprofessional” behaviours are highlighted.

**Individual professionalism:**

Professionalism at this level encompasses the ways in which the individual professional meets the demands of their profession. It is seen as the individual’s personal characteristics or behaviours. It includes elements such as morality, clinical judgment, and lifelong learning.

Irby and Hamstra have provided insight into the challenges of defining professionalism. They describe three dominant frameworks of professionalism: virtues, behaviours, and identity formation.<sup>11</sup> The virtues framework focuses on the development of moral character and reasoning along with qualities of caring and compassion. The behaviours framework focuses on milestones, competencies, and measurement of observable behaviours. The identity formation framework focuses on identity formation and socialization into a community of practice. Irby and Hamstra highlight that no one framework is adequate for describing professionalism and that “professionalism involves attributes of the individual, such as behaviours, skills, or attitudes that lead to decisions that reflect distinguishing features of the profession.<sup>11</sup> Professionalization, on the other hand, is concerned with the process of becoming a member of a profession. This includes the process of taking on professional values, which might then result in a demonstration of professionalism.”<sup>11</sup>

### **Professional identity**

Professional identity has been defined as “the relatively stable and enduring constellation of attributes, values, motives, and experiences in terms of which people define themselves in a professional role.”<sup>12</sup> It is important to recognize that professional identity can be held by an individual, a team, an organization, or across an entire profession.<sup>13</sup> It can be the identifying features of a profession (e.g., the “brand” or image) that are based on stated core values, or it can be the personal values of an individual as a professional.<sup>14</sup> Professional identity is important because it is much more likely to lead to predictable, professional behaviour.<sup>14</sup> For example, if a professional has lifelong learning as a core value and identifies as a lifelong learner, they are much more likely to keep clinically current than when they receive the behavioural direction from a regulator to “take courses every year to renew your registration.” Recent research by the Professional Standards Authority for Health and Social Care in the United Kingdom identified that i) the work environment, ii) the views of wider society, and iii) professionals’ interaction with their peers have a strong influence on professional identity.<sup>13</sup>

As noted by Irby and Hamstra,<sup>11</sup> identity formation and socialization into a community of practice are important for the development of individual professionalism. Boyczuk and colleagues<sup>15</sup> completed a scoping review of professional values and note that “the process of developing a professional identity and adopting professional values is a conscious process that begins as one enters a profession. Role models, mentors, and individual professional experiences influence the process of professional socialization, in which one’s personal identity integrates with a professional one. Professional socialization is important for individuals to develop their own personal values in the context of their new professional culture, and, thus, it can best occur when the core values of a profession are explicit instead of implied.” The concept of professional identity is therefore important when considering the factors that shape the culture of professionalism in pharmacy practice.

Gregory and colleagues<sup>16</sup> identify one of the factors that can help support pharmacists through the complexity of practice change as having a professional identity that is supportive of a truly clinical (i.e., patient oriented, rather than product oriented) role. Kellar and colleagues<sup>17</sup> also highlight the importance of professional identity in pharmacy and stress the point that if pharmacists do not identify

with the roles that the profession or society expects, then no amount of legislative changes, education, or alterations to remuneration models will result in significant change.

Burford and colleagues<sup>9</sup> analyzed views of professionalism within various health professions. They conclude, “The findings of the question, ‘What is professionalism?’, indicate a complex answer. There are elements of identity, status, attitudes, behaviour, patient expectations, clinical context, organizational context and workplace culture that variously influence what will be considered to be ‘professional’ and how it may be demonstrated.” This suggests that professionalism and the formation of professional identity in the profession of pharmacy are highly influenced and shaped by many different perspectives within the profession.

## Factors that shape the culture of professionalism

As noted above, there are many factors that shape the culture of a profession. Therefore, many different stakeholders will influence that culture. In the profession of pharmacy, this will include virtually every stakeholder associated with the profession, including employers, managers, pharmacy leaders, professional organizations, educational institutions, regulatory authorities, other health professionals, the public, and pharmacy professionals themselves. It is critical that all stakeholders recognize their contribution to the culture of professionalism in pharmacy and become engaged in supporting professionalism in practice. As noted by our colleagues in laboratory technology, no single initiative from any one stakeholder will be able to change the culture of the profession.<sup>18</sup> It is clear that a collaborative approach is essential to effecting cultural change in pharmacy practice.

### **Societal professionalism**

#### ➤ **Wider society**

How society views a profession can impact the culture of professionalism. Society’s views of pharmacy professionals have been fairly well documented in Canada. The public across Canada consistently rank pharmacists among the most trusted professionals.<sup>19</sup> However, studies have also shown that the public may not be fully aware of the scope of practice for pharmacists and the services that pharmacists can offer.<sup>20,21</sup> Considering that pharmacy technicians are relatively new to the pharmacy profession, the public may also not be fully aware of their regulated role and how they collaborate with pharmacists to provide patient care. Patients may also be unclear about the role of unregulated non-professionals (e.g., pharmacy assistants) working in a pharmacy setting. In addition, the public may be confused about the meaning of the word professionalism because of the multitude of understandings of professionalism

and, in some cases, may view professionalism in a negative context, as a set of guild-like privileges and entitlements.<sup>22</sup>

### ➤ Educators

Educators and educational institutions play an important role in establishing the foundations of professionalism in pharmacy students. The formation of professionalism and professional identity begins when students internalize the norms and values that characterize the collective identity of the profession.

The teaching and assessment of professionalism, professional ethics, and professional identity formation are embedded in the pharmacy curriculum in Canadian schools and faculties of pharmacy.<sup>23</sup> Professionalism is taught and developed through a number of approaches, including role modelling, mentoring, use of assessment tools, code of conduct, and pledge of professionalism.

### ➤ Regulators

Regulators play a critical role by setting the framework that establishes the foundations of professionalism. As part of their mandate to serve and protect the public interest, regulators establish codes of ethics, standards of practice, and entry-to-practice competencies that establish the foundations of professionalism.<sup>24</sup> These foundations contribute to the culture of professionalism and are demonstrated by the behaviours and character traits that professionals exhibit when interacting with patients and other professionals.<sup>24</sup>

As noted in a recent publication reviewing the challenges faced by pharmacy professionals in Ontario, “the ‘protection’ mandate has historically been interpreted as the application of regulations to control the risk of pharmacy practice to the public. Regulation can also be a tool for practice change.”<sup>25</sup> All pharmacy professionals, regardless of their workplace, their workplace affiliations, or their educational background, connect through their regulatory body.<sup>26</sup> This places regulators in a unique position to affect the behaviours and attitudes that collectively form the profession’s culture.

The Professional Standards Authority in the UK introduced a regulatory approach known as right-touch regulation. This approach aims to find the balance between establishing and enforcing rules and allowing for professionalism to be applied. A 2007 white paper from the UK government titled *Trust, Assurance, and Safety — The Regulation of Health Professionals in the 21<sup>st</sup> Century* sets out a number of key principles that should underpin statutory professional regulation.<sup>27</sup> It states, “professional regulation should be as much about sustaining, improving, and assuring the professional standards of the overwhelming majority of health professionals as it is about identifying and addressing poor practice or bad behaviour.”

In terms of the impact that regulators and educators have on the formation of professional identity, a literature review on the professional identity of health professionals in the UK found that education is key in shaping professional identity, whereas regulation has a more indirect influence and its effect is

more likely to be seen in a crisis or in disciplinary or fitness to practice situations and has less of an impact on day-to-day practice.<sup>28</sup>

In essence, regulators and educators set the frameworks that establish the foundations of professionalism and contribute to the culture of professionalism. However, other factors, including how others view the profession of pharmacy and how pharmacy professionals interact with other health professionals, also influence the culture of professionalism.

#### ➤ **Hidden curriculum**

Another key influencer of professionalism is the hidden curriculum. The hidden curriculum refers to the influences that function at the level of organizational structures and cultures, conveying behavioural expectations, values, and norms.<sup>29</sup> It can be central to fostering or undermining the development of professionalism and professional identity. The realities of practice can sometimes be at odds with the structured learning curriculum in undergraduate programs. The process by which students, novices, and experienced health professionals navigate this hidden curriculum — and the inconsistencies between stated and aspirational professional goals and the unstated norms of day-to-day practice — can have a significant influence on the learner, the health professional, and the profession's culture of professionalism.

#### ➤ **Practice environment**

Given the importance of the practice environment, pharmacy employers and professional organizations have a critical role to play in enhancing the culture of professionalism in pharmacy practice. There may be codes of behaviour specific to each workplace that health professionals need to be able to balance with the expectations of regulators, their peers, other health professionals, and patients. Professional behaviours are influenced by a multitude of factors, including the organizational environment, and they require organizations to provide ongoing support for professionalism.<sup>22</sup> Organizations have a responsibility to provide a practice environment that enables professional behaviour and professional autonomy. As noted earlier in this white paper, professional autonomy is a key aspect of a regulated health profession. It is defined as the ability to exercise independent, expert judgment within a legally defined scope of practice (and) to provide services in the best interests of the client.<sup>1</sup> It is important that the practice environment enables professional autonomy and that practice environment expectations align with regulatory and cultural expectations of professionals. There are indications that there may currently be a misalignment in these expectations in the pharmacy profession. This potential misalignment is explored more fully later in this white paper.

### **Interpersonal professionalism**

The culture of a profession is profoundly influenced by a number of factors beyond the regulator and the regulatory framework, including the interactions that a professional has with their colleagues and with individuals from other professions.

### ➤ **Interprofessional interactions**

The culture within the profession of pharmacy will impact the way in which pharmacy professionals interact with other health professionals. Other health professionals may be unclear about the role of pharmacy professionals, which may affect the interaction between the two professionals and may subtly influence the pharmacy professional's professional identity. Although this topic has not been widely studied, Austin and colleagues examined the experiences of pharmacists who became physicians as a way to look at the cultural differences between pharmacy and medicine. They note that the culture of one's profession has a profound effect on the way one relates to other professions.<sup>30</sup>

### ➤ **Intraprofessional interactions**

Role modelling can have a significant impact on the development of professionalism and professional identity. Some pharmacy professionals will be positively influenced by a role model or mentor while others will have a negative experience. A mentor, role model, manager, or colleague who is not engaged with their profession or is not supportive of advancing practices can have a negative influence on a pharmacy professional willingness to embrace new or expanding roles or on their professional identity.<sup>31</sup> It has been noted that if learners are exposed to significant role modelling and hidden curriculum influences during their professional socialization, these forces will probably have a stronger effect than the academic curriculum or regulatory practice standards on the development of their professional identity.<sup>14</sup>

### **Individual professionalism**

As an individual characteristic, attribute, or trait, individual professionalism is identifiable within individuals. The assumption is that it is relatively stable and can be assessed by tools that are valid and reliable.<sup>10</sup> It represents personal and professional values but is also influenced by professional training and professional socialization. It is the merging of the personal and professional values that will define an individual's professionalism. Role modelling also affects individual professionalism, most notably through the development of professional behaviours, the development of professional identity, and the shaping of career aspiration.<sup>32</sup>

### **General**

Given all the factors that shape the culture of professionalism, different individuals and stakeholders, such as employers, educators, and regulators, may have developed different concepts of professionalism. Thus, the culture of professionalism in pharmacy practice may have become misaligned, with different parties striving toward different goals. This leaves pharmacy professionals in a difficult position, as it is challenging for them to develop a strong professional identity and a clear understanding of the expectations for professional behaviour when they receive different messages from the regulator, their peers, their employers, other health professionals, and the public. To move

forward, it is important that all parties come to a common understanding of professionalism in pharmacy practice in order to strengthen the culture of professionalism within pharmacy. It is only when all parties are embracing the same concept of professionalism that pharmacy professionals can be supported to move forward to share the full benefit of their expertise with patients.

## **The importance of professionalism to patient care**

The professional attitudes and behaviours of health professionals affect the quality of care that patients receive and are central to a safe and ethical health care system. The Professional Standards Authority in the UK found that “patient care benefits from a strong professional identity,” and a lack of professional autonomy has been linked to negative impacts on patient care in the literature.<sup>13</sup> The Professional Standards Authority states, “We believe that it is primarily the professionalism of individuals that keeps the public safe, and in the case of health and social care also ensures the delivery of good care.”<sup>33</sup> From this there appears to be general agreement that patient care benefits from strong professionalism and professional identity.

There is growing recognition that an environment in which professionalism is not embraced, or where expectations of acceptable behaviours are not clear and enforced, results in errors, adverse events, and unsafe work conditions.<sup>34</sup> Lamb and Tsuyuki suggest that when pharmacists’ professional autonomy is eroded through employer-imposed quotas or inadequate staffing, they are more likely to report negative feelings about their practice environment and report that their practice environment is not conducive to safe and effective patient care.<sup>35</sup> This was supported by an analysis of the results of the annual National Health Service (NHS) staff survey, presented at a 2018 seminar on professionalism hosted by the UK General Pharmaceutical Council. The analysis indicated that when staff report high levels of stress, the outcomes include poorer care quality.<sup>36</sup> More than 50% of the respondents to the NHS survey reported being unable to manage the competing demands of their time at work.<sup>36</sup> In a similar survey of pharmacy technicians in Canada, 83.9% of respondents reported a high level of job stress in their practice environment, and only 58% of respondents reported having control over decisions affecting their practice environment.<sup>37</sup> Furthermore, a professional identity that is supportive of a truly clinical role has been identified as one of the factors that may influence the ability of pharmacists to embrace practice changes, such as additional scope of practice activities.<sup>16</sup> Ensuring that practice environments support and embrace a high level of professionalism and professional autonomy is an important component of ensuring that patients receive optimal pharmacy care.

## What has changed?

It has been suggested that one of the reasons pharmacy professionals are reporting challenges in practising in a manner consistent with their professional standards (and to their fullest scope of practice) is a weakening of the culture of professionalism in pharmacy practice. Although we may not be able to clearly define why the culture of professionalism may have weakened, it is important to acknowledge that the past decade has seen a multitude of changes within the profession in both the business and professional environments, including an increased focus on clinical care, interprofessional collaboration, and patient safety, as well as the regulation of pharmacy technicians and changes to business and remuneration structures. There are indicators, described below, that these practice changes have not been fully embraced by the profession and that this may be linked to the practice environment, lack of a strong professional identity, lack of strong leadership in the profession, and lack of professional autonomy for pharmacy professionals, all of which are factors that influence the culture of professionalism in pharmacy practice.

Literature and reports from front-line pharmacy professionals suggest that pharmacy professionals may be lacking a clear professional identity.<sup>12,38</sup> A strong professional identity can have positive impacts on a health professional's practice, including fostering a sense of worth, belonging, and purpose, all of which may lead to professional autonomy. A lack of professional autonomy has been linked to negative impacts on practice, patient care, and professional motivation, leading to poor job retention.<sup>22,38</sup>

A recent study by Gregory and Austin indicated that regulated pharmacy technicians in Ontario may have incomplete professional identity and that further work is required to support the development of professional identity in this group, which, in turn, will help to optimize patient care.<sup>39</sup>

Other recent Canadian publications have highlighted some of the concerns facing pharmacy professionals, including the fact that some pharmacists are not engaging in full-scope patient care activities such as prescription renewal, patient assessment, and prescribing, a behaviour the authors labelled as "professional abstinence."<sup>31</sup> In some cases, some pharmacists seem reluctant to take responsibility for their decisions.<sup>40</sup>

In response to concerns that pharmacists are slow to adopt new regulated practice changes, Gregory and colleagues conducted research to determine the influences and mechanisms that drive practice change in Canadian pharmacy.<sup>16</sup> On the basis of their research, they identified the 9Ps of Practice Change as a model for understanding the components, beyond regulation, that are necessary for pharmacists to feel comfortable and confident in assuming new roles and responsibilities in practice.

The 9Ps are as follows:

- Permission
- Process points

- Proactive
- Positive reinforcement
- Personalized attention
- Peer referencing
- Physician acceptance
- Patients' expectations
- Professional identity

The authors concluded that “the complexity of practice change in pharmacy and the multiple factors highlighted in this study point to a more deliberate and concerted effort being needed by diverse pharmacy organizations (educators, regulators, employers, professional associations, etc.) to support pharmacists through the change management process.”<sup>16</sup>

Concerns about the erosion of professional autonomy in pharmacy practice were summarized in a research study published in the *Canadian Pharmacists Journal*: “Workplace stress that may compromise patient safety is a growing concern in community pharmacies ... Reasons for this increase in stress include the changing pattern of pharmacy ownership, with more corporate entities enforcing business-related demands on pharmacists, leading to reduced professional autonomy, provision of expanded scope and enhanced services without relaxation or delegations of traditional roles and insufficient or inefficient use of pharmacist extenders such as technicians. In addition, higher prescription volumes, lack of breaks, workflow interruptions, and staffing levels were other issues identified as potentially contributing to dispensing errors.”<sup>41</sup>

In an editorial published in January 2019, Tsuyuki discusses the leadership crisis in pharmacy.<sup>42</sup> He notes that “leadership is necessary in order to be able to serve our communities with a full scope of pharmacy practice” and “lack of strong leadership causes disengagement of members, making change even more difficult. We have a societal responsibility to deliver care to our patients. ... We need to hold our leaders accountable to the principles above [principles of good leadership: vision, character, inspiration, exemplary, humility, decisiveness, communication, courage]. And each one of us needs to step up and lead, from within.”

In a Canadian research article exploring community pharmacists' attitudes about leadership in the profession Shikaze and colleagues identified a key finding of their research to be the corporatization of the pharmacy profession and whether a tension exists between corporate and professional modes of leadership.<sup>43</sup> Separating commercial and corporate interests was identified by pharmacists as a challenge, suggesting that these roles may be incompatible from a trustworthiness perspective. The conflict between commercial interests and patient safety is not unique to pharmacists. It has been suggested that in other professions, leaders have challenged the pressures and acted as patient advocates to keep corporate interests at bay. Shikaze and colleagues conclude their paper with a powerful quote: “A profession without leaders from within that profession is simply not sustainable.”

Studies from other countries show that work-related stress is not unique to pharmacy professionals in Canada.<sup>44</sup> A recent survey by *Chemist & Druggist* in the UK reported that 80% of pharmacists feel

stressed at work, a 6% increase from the previous year.<sup>45</sup> Pharmacists blamed pressure from management, intimidation, and an increase in paperwork. An Australian Psychological Society survey found that workplace issues made up 32% of stressors among the general population but 60% among pharmacists.<sup>46</sup>

With all of the changes to the profession over the past several years, it is not surprising that different concepts of professionalism may have emerged, which may have negatively affected the culture of professionalism in pharmacy practice and acted as a barrier to pharmacy professionals practising to the full scope of their abilities. While there are indications that the practice environment, lack of leadership, professional identity, and professional autonomy are affecting pharmacy professionals, there may be other determinants of the culture of professionalism that have not yet been documented. As such, NAPRA is committed to examining all of the factors that affect the culture of professionalism in pharmacy practice, with the goal of enhancing the culture of professionalism so that the entire profession has a common understanding of professionalism and promotes that concept in all of their day-to-day practices.

## Impact of a global pandemic

In early 2020, the COVID-19 pandemic disrupted the delivery of health care services across Canada and throughout the world. The entire profession of pharmacy was affected as pharmacy was, and continues to be, at the forefront of the pandemic response. Pharmacy professionals shifted roles and responsibilities as, more than ever, patients reached out to their pharmacy for care and information. Pharmacy professionals were one of the few types of health professionals to remain accessible to the public, and they were required to step up to provide more services to meet the needs of their patients. Pharmacy professionals also managed unprecedented drug shortages, educators adapted to new ways of delivering education, researchers adjusted research priorities to support the profession and the health care system, regulators implemented a myriad of new regulations and supports to rapidly deal with shifting public health priorities while protecting patients and care providers, pharmacy leaders made changes to practice, and advocacy associations supported the profession by focusing on the development of educational tools and resources. On an individual level, many within the profession were dealing with stress and burnout as they managed a wide range of risks, including exposure to the virus that causes COVID-19, staffing challenges, difficulties in providing child and elder care in their families, and separation from family and social supports.

The impact of the pandemic on professionalism remains to be seen. On the negative side, in the early days of the pandemic, pharmacy professionals were not immediately acknowledged as essential workers, which created challenges in accessing personal protective equipment and other supports. This showed that challenges remain in terms of how governments and other societal stakeholders perceive

the profession, which could have negative impacts at the level of societal professionalism. On a positive note, the pandemic has brought opportunities for pharmacists to become more comfortable with full scope of practice activities and for engagement among multiple sectors of the profession. In a recent editorial highlighting the efforts of pharmacists in Canada during the COVID-19 pandemic, Farrell and Tsuyuki wrote that the stories of pharmacists' experiences "demonstrate approaches to cooperation and communication from the practice level to the organizational level and across the communities, provinces and nationally."<sup>47</sup> They also noted, "from these stories and others, we sense the dedication and responsibility that pharmacists feel in service to their communities — to the public, to their staff, and to their colleagues." This increased collaboration and sense of professionalism among members of the profession could have positive influences at the interpersonal and individual professionalism levels.

Austin and Gregory identified workplace factors that influenced the resilience of community pharmacy teams in Ontario in the early months of the COVID-19 pandemic; they suggested that resilience should be viewed as a shared responsibility, not an individual trait.<sup>48</sup> The workplace factors that contributed to resilience included use of technology, easy access to corporate and professional guidance, workplaces that emphasized task-focused responsibilities, scheduling practices that supported breaks and a team approach, dedicated staff to manage non-pharmacist roles, and the availability of personal protective equipment. As this study recognizes the impact of "individual" and "system" factors on resilience, we should approach professionalism in a similar manner and consider both the "individual" and "system" factors that shape the culture of professionalism in pharmacy.

In a multinational study investigating pharmacists' personal experiences providing clinical pharmacy services in Europe during the COVID-19 pandemic,<sup>49</sup> the study participants identified professional pride, being able to help others, service to humanity, and being able to look after each other in the health care team as factors that enabled them to cope and that motivated them to provide care.

As we continue to deal with the challenges of the pandemic, the pharmacy profession must establish its readiness to manage future public health crises. The profession has an opportunity to reflect on the ways in which, during the COVID-19 health crisis, it has made positive steps toward enhancing professionalism and build on those learnings to further enhance the culture of professionalism in pharmacy.

## **Inclusion, diversity, and equity within the profession of pharmacy and across society**

The COVID-19 pandemic has shed a light on major health disparities that continue to exist within our society and the health care system, while also magnifying the impact that racism and discrimination has on a person's ability to access equitable care. Pharmacy as a profession, as well as all individuals who

contribute to the profession, are starting important conversations about these issues and are recognizing the responsibility we have, as individuals and as a profession, to acknowledge that racism and discrimination exist within our society, our workplaces, and our profession and the importance of working towards a profession that embraces inclusion, diversity, and equity.

In Canada, a person's colour, religion, culture, or ethnic origin are determinants of health that results in inequalities in social inclusion, economic outcomes, personal health, and access to quality of health and social services.<sup>50</sup> In a recent review of pharmacists' role and responsibility in addressing systemic racism, Arya and colleagues called on pharmacists to recognize racism as a root cause of social determinants of health and to use their privilege to educate themselves and their colleagues about dismantling structural racism.<sup>51</sup>

A recent report<sup>52</sup> released by the government of British Columbia reviewed Indigenous-specific racism in the provincial health care system<sup>53</sup> and noted that racism is "widespread and insidious." The report, titled "In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care," provides insights on issues of racism that can likely be considered applicable to all regions in Canada. In surveys conducted in 2020 for the report, 84% of Indigenous patients said they had experienced racism in health care and 50% of Indigenous health care workers said they had experienced racism in their profession. The authors note that "anti-racism is the practice of identifying, challenging, preventing, eliminating and changing the values, structures, policies, programs, practices and behaviours that perpetuate racism. ... To be antiracist involves eliminating racism from our policies and institutions, understanding how the present exists upon colonial and racist foundations, and committing to educate oneself and take action to create conditions of greater inclusion, equality and justice."

The paper by Arya and colleagues also highlights that pharmacists who identify as Black, Indigenous or Persons of Colour (BIPOC) are often left responsible for carrying out the work of diversity initiatives, committees and task forces at their organization (a workload that their non-BIPOC colleagues should be expected to share) even as they continue to face racism and discrimination within their practice environments.<sup>51</sup> Our workplaces and practice environments must work to examine racism and discrimination and must educate and engage everyone in initiatives to acknowledge and address racism and discrimination at all levels.

While this white paper does not fully explore racism and discrimination in pharmacy practice, it is important that we acknowledge that the ability to recognize individual bias, systemic racism, and discrimination, to understand their impact on access to equitable care, and to recognize the importance of continually working to improve inclusion, diversity, and equity are key components of professionalism. They affect all three levels of professionalism: societal, interpersonal, and individual. As such, NAPRA is committed to including this topic as an important part of its work to address professionalism.

## What work has already been done?

Across Canada and internationally, the recognition of the importance of professionalism and concerns about the culture of profession in pharmacy practice have prompted some organizations to take action.

### *Alberta College of Pharmacy (ACP):*

In 2018, the ACP developed a framework for professionalism for pharmacists and pharmacy technicians.<sup>54</sup> A culture of professionalism is being established to encourage ACP's registrants to embrace the full scope of their practice and to think of themselves as professionals. The intention of the project is to establish a common understanding of professionalism and what it means to be a pharmacy professional. Based on research and consultation, the professionalism framework identified six tenets of professionalism:

- An engaged pharmacy professional is
  - o person-centred,
  - o a collaborator,
  - o a leader, and
  - o an active learner.
- An engaged pharmacy professional has
  - o good judgment, and
  - o values.

ACP notes that the framework extends well beyond identifying the tenets and that it provides descriptors and discourse as to the meaning of the tenets and provides depth to understanding what it means to be a pharmacy professional. The framework will be an underlying premise in all of the College's programs and communications.

### *Saskatchewan College of Pharmacy Professionals (SCPP):*

The SCPP has completed the consultation process on the first of eight strategies identified in its Professional Autonomy Framework.<sup>55</sup> The framework proposes strategies to increase the professional autonomy of pharmacy professionals, enhance control by pharmacy professionals, and enhance new and current manager competencies.<sup>56</sup> The SCPP noted that "the balance between pharmacists, pharmacy technicians, and their employers (pharmacy owners, proprietors) has shifted to a state where pharmacists and/or pharmacy technicians are progressively losing control over their practice. This trend compromises public safety, as pharmacists and pharmacy technicians are responsible for providing quality services to the public and are the most knowledgeable and optimally skilled professionals to

operate the professional aspects of pharmacies. The SCPP is proposing regulatory bylaws amendments to correct the imbalance with these relationships.”

### *College of Pharmacists of British Columbia (CPBC):*

In April 2018, the CPBC implemented new requirements to “permit the College to know the identity of all pharmacy owners, determine their suitability for pharmacy ownership and hold them accountable for providing safe and effective care by ensuring their pharmacies are compliant with the legislative requirements for pharmacies in BC.”<sup>57</sup>

### *Association of Faculties of Pharmacies of Canada (AFPC):*

The AFPC established a Professionalism Committee to better understand professionalism and how to restore this with the curriculum. AFPC establishes educational outcomes that focus on what graduates are able to do at the end of a Baccalaureate or Doctorate program that is the first professional degree in pharmacy (i.e., entry-to-practice pharmacy degree programs). The 2017 Educational Outcomes comprise multiple Role Statements: Care Provider, Communicator, Collaborator, Leader-manager, Health-Advocate, Scholar, and Professional.<sup>23</sup> The AFPC 2017 Educational Outcomes present the Professional role as the “overarching ethos of the discipline of pharmacy” to reflect the view that professionalism and a professional identity underpin all aspects of pharmacy practice. The Professionalism Committee developed a supporting document to operationalize the educational outcome of the Professional role.<sup>23</sup> The guiding principles for operationalizing the Professional role suggest that educational programs should develop an agreed-upon, in-house, operational definition of professionalism and/or professional behaviour or a list of key attributes or tenets that could serve as a springboard for curricular efforts related to the role.

### *Faculties of pharmacy in Canada:*

Faculties of pharmacy at universities across Canada, including the University of British Columbia Faculty of Pharmaceutical Sciences,<sup>58</sup> University of Alberta Faculty of Pharmacy and Pharmaceutical Sciences,<sup>59</sup> and Memorial University of Newfoundland School of Pharmacy<sup>60</sup> have established a Pledge of Professionalism for pharmacy students. With the recognition that professionalism is important for all pharmacy professionals, a similar professionalism pledge is also being implemented in some pharmacy technician programs across the country.

Faculties of pharmacy and pharmacy technician programs across Canada introduce their students into their professional role by holding a white coat ceremony. Putting on the white coat is a symbol of the professionalism, knowledge, and trust that pharmacists embody in their communities.<sup>61</sup> During the ceremony, the students also recite a pledge to a code of ethics and to a code of conduct to respect

principles of professionalism throughout their education and their practice. Other aspects of pharmacy education, such as the skills labs and structured and unstructured work experiences, also contribute to inculcating professionalism and professional identity in students.

The Canadian Council for Accreditation of Pharmacy Programs (CCAPP)<sup>62</sup> has established accreditation standards for Canadian pharmacy and pharmacy technician programs. As noted in the standards, “The curriculum of a Pharmacy Technician Program is expected to embrace the current scope of practice as well as emerging roles.” The 2019 standards set out a number of requirements associated with professionalism, including the following:

Standard 2: The College provides an environment and culture that promotes professional behaviour and harmonious relationships among students, and between students and administrators, staff, and instructional staff.

Standard 4: The curriculum addresses the CPTEA [Canadian Pharmacy Technician Educators Association] Educational Outcomes for Pharmacy Technicians in Canada and enables students to achieve the competencies described in the NAPRA Professional Competencies for Canadian Pharmacy Technicians at Entry to Practice.

### *Oregon Board of Pharmacy:*

In response to a survey of its pharmacists in 2012, the Oregon Board of Pharmacy introduced conduct rules for the operation of pharmacies in an effort to ensure patient safety.<sup>63</sup> These conduct rules include the following:

- requires the outlet to provide sufficient personnel to prevent fatigue, distractions, or conditions that interfere with a pharmacist’s ability to practise safely;
- requires the outlet to provide opportunities for uninterrupted rest periods and meal breaks;
- requires the outlet to provide adequate time for a pharmacist to complete professional duties and responsibilities; and
- prohibits introduction of external factors such as productivity quotas or programs such as time limits that interfere with the pharmacist’s ability to provide appropriate professional services.

### *College of Medical Laboratory Technologists of Ontario (CMLTO):*

The CMLTO is the regulatory body for Ontario’s medical laboratory technologists (MLTs). In 2012, the CMLTO published a position paper titled “Enhanced Professionalism: Responding to the Evolving Needs of the Public and the Health Care System.” The goal of the paper was to define the components of enhanced professionalism, highlight its importance in support of the evolution of the health care

system, and present a case for the collaborative efforts of stakeholders in the profession to assist in this transformation. It noted that enhanced professionalism is demonstrated by the individual behaviours of MLTs, which the public and other members of the health care team experience as the culture of the profession, and that behavioural and cultural socialization within a profession occurs through initial education, the modelling of professional behaviours, and the integration of these behaviours into professional practice, as well as through ongoing professional growth and development. Through its consultations the CMLTO learned that the profession as a whole and individual MLTs require support to develop the behaviours and culture that define an enhanced professionalism. It also reviewed the role of stakeholders and noted that all stakeholders, including educational institutions, professional organizations, employers, and, most importantly, the MLTs themselves, must actively contribute to the development of an enhanced professionalism. It noted that the regulatory college can champion the aspects of professionalism that relate directly to its mandate and share MLTs' opinions with stakeholders and partners who play their own unique role in advancing an enhanced professionalism. As noted by the CMLTO, no single initiative from any one stakeholder will be able to change the culture of the profession.<sup>18</sup>

### *Professional Standards Authority (UK):*

As noted earlier in this white paper, the Professional Standards Authority (PSA) in the UK has developed the concept of right-touch regulation. Harry Cayton, an advisor on professional regulation and governance, described right-touch regulation as “an approach based on a proper evaluation of risk, is proportionate and outcome focussed; it creates a framework in which professionalism can flourish and organisations can be excellent. Excellence is the consistent performance of good practice combined with continuous improvement.”<sup>64</sup> The six core principles of right-touch regulation are as follows:

- Proportionate
  - o Regulation should be used as a tool only when necessary and should be appropriate to the risks posed.
- Consistent
  - o Regulation should be fair and apply equally to all.
- Targeted
  - o Regulations should be focused on specific real problems, and conscious efforts should be undertaken to minimize inadvertent side effects of regulation.
- Transparent
  - o Regulations should be clearly articulated, simple to understand, user friendly, and readily accessible to all.
- Accountable
  - o All regulations should be fully justified, and subject to scrutiny by the general public and the professionals being regulated.
- Agile

- Regulation should look forward and be adaptable to anticipated changes in the environment, the practice context, and the profession.

## Considerations for the development of the principles of professionalism

Distilling the extant academic and grey literature and current initiatives undertaken by educators, regulators, professional associations, and employers in pharmacy and in other professions in Canada and worldwide provides NAPRA with an opportunity to consider how it can engage the profession of pharmacy in discussions around professionalism. As highlighted in this white paper, several important findings have emerged:

- a. There is a need for pharmacy to enhance its “culture of professionalism” as a vehicle for supporting pharmacists and pharmacy technicians to more fully practise to scope and to better meet the health and medication needs of Canadians.
- b. The concept of culture of professionalism is inherently complex and multi-faceted, involving all arms of the profession, ranging from individual pharmacy professionals to educators, employers (across all pharmacy sectors), professional associations, accreditors, and regulators. It also connects to diverse external stakeholders including other health professions and professionals, governments, policy-makers, insurers, patients, and the general public.
- c. Given the complexity and multi-faceted nature of this concept, the regulator has a unique opportunity and responsibility to provide leadership and a steering effect across all arms of the profession. The regulator is the only common point of contact for every employer, pharmacist, and pharmacy technician in a province or territory; while some individuals and organizations may or may not belong to certain associations, or educational institutions, all parts of the profession must connect to the regulator, and this common connection provides the regulator with important leverage in steering profession-wide discussions related to pharmacy’s culture of professionalism.
- d. Without some common understanding and consensus across the profession regarding core features of pharmacy’s culture of professionalism, it will not be possible to fully unleash the potential of pharmacy. Regulators have unique opportunities to lead in building this understanding and consensus.
- e. A culture of professionalism is not simply a list of directives aimed at individual professionals. It is broader and requires dialogue across all sectors of the profession, including educators, employers, and professional associations. The social and workplace context within which individuals practise is as important as the individual characteristics they demonstrate in defining a culture of professionalism.
- f. Framing the culture of professionalism as a promise to the public of what pharmacy collectively (and not only individual pharmacists or pharmacy technicians) can do to enhance the health of Canadians provides opportunities to integrate all arms of the profession.
- g. From the experiences of other professions and across jurisdictions in Canada, several common culture of professionalism themes have emerged that warrant further discussion, debate, and consensus building, with the objective of ultimately finding common ground, gaining agreement, and securing profession-wide acceptance and uptake of principles.

## Conclusion

As discussed throughout this white paper, enhancing pharmacy's culture of professionalism is not a simple undertaking, as the factors that shape the culture of a profession are complex and multi-faceted. There is a need to consider societal, interpersonal, and individual factors, professional identity and professional autonomy, and recent changes in the profession before and following the global pandemic, all while considering the overarching effects of individual and systemic biases on inclusion, diversity, and equity within the profession and the health care system as a whole. Given the complex matrix of factors that affect pharmacy's culture of professionalism, different individuals and stakeholders seem to have developed different concepts of professionalism. There is a need to realign these divergent understandings to enhance the culture of professionalism in pharmacy practice, so that the profession can best meet the needs of patients and the health care system.

To this end, NAPRA will work with stakeholders across the profession to define the principles of professionalism for the profession. The information presented in this white paper will be instrumental in informing the development of the principles of professionalism. Further, the white paper makes it clear that regulators will not be able to sufficiently influence the culture of professionalism on their own and that no single initiative from any one stakeholder will be able to change the culture of the profession. A collaborative approach will be essential. However, given the unique position of regulators to be able to connect with all aspects of the profession, NAPRA is committed to leading this work, while recognizing that this project will require the input and collaboration of stakeholders across the profession.

Once the principles have been established, NAPRA will engage on a second phase of the project, which will include drawing on change management principles to determine how best to ensure that the principles are implemented in pharmacy practice, so that the entire profession has a common understanding of professionalism and all stakeholders promote that concept of professionalism in all of their day-to-day activities. NAPRA looks forward to continuing this important work and engaging with pharmacy professionals and all stakeholders involved in the profession of pharmacy to achieve a strong culture of professionalism that will enhance the profession's ability to best serve the Canadian public.

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