CPhA Position Statement on a Doctor of Pharmacy Degree as an Entry-Level to Practice

The Canadian Pharmacists Association (CPhA):

- ▶ Endorses a Vision for Pharmacy of: Optimal drug therapy outcomes for Canadians through patient-centred care;
- ▶ Believes that models of pharmacy learning must continually be advanced for optimal patient care; and
- Recognizes that the pharmacy education system in Canada is evolving, and some faculties are implementing a doctor of pharmacy degree as the first professional degree in pharmacy, commonly referred to as a PharmD or an Entry-Level PharmD (ELPD).

The position of the Canadian Pharmacists Association on a doctor of pharmacy (PharmD) degree as an entry-level to practice in Canada is:

- ▶ That CPhA supports Canada's faculties of pharmacy in the transition of their professional pharmacy degree program from a bachelor of science in pharmacy degree to a doctor of pharmacy degree.
- ▶ That CPhA supports the February 2010 position statement and joint resolution of the Association of Faculties of Pharmacy of Canada (AFPC) and the Association of Deans of Pharmacy of Canada (ADPC) on the Doctor of Pharmacy (PharmD) for the First Professional Degree at Universities in Canada, committing faculties to replace current baccalaureate pharmacy curricula with a comprehensive doctor of pharmacy curricula, with a timeline to ensure that all pharmacy schools have a doctor of pharmacy curriculum in place by 2020.
- ▶ This transition to a PharmD must consider and address the following:
 - Business and economic considerations
 - Impact on supply of pharmacist graduates
 - Demand for, and funding for, clinical experiential training
 - Impact on the pharmacy profession of two forms of academic qualification
- Concurrent with a transition to PharmD programs, accessible programs for practising pharmacists must be available to upgrade knowledge and skills if required to support expanded roles and the implementation of new services, specialty practices or new practice models.

Background

The current minimum educational standard for pharmacy practice in Canada is a professional baccalaureate degree (Bachelor of Science) in pharmacy (BScPharm). The professional program itself is comprised of four years of undergraduate pharmacy education, plus a minimum prerequisite of one additional year of undergraduate prepharmacy education. The curricula for this professional baccalaureate degree must meet the accreditation standards of the Canadian Council for Accreditation of Pharmacy Programs (CCAPP). Since the early 1990's, the University of Toronto and the University of British Columbia have offered post-baccalaureate, second professional degree programs in pharmacy, often referred to as a post-graduate PharmD.

The PharmD, as the first professional degree, generally consists of two years of pre-pharmacy undergraduate education and four years of pharmacy education. This allows the PharmD program to provide greater emphasis on experiential learning in the clinical section than the current BScPharm program. The PharmD curriculum also requires more structured clinical experiences in the earlier years of the professional program. CCAPP released draft accreditation standards for the first professional degree in pharmacy program awarded as the doctor of pharmacy (FPDPD) degree in 2007.

To more closely align the care that pharmacists provide with the needs of the Canadian health system, the profession has committed pharmacists to an enhanced role with a greater focus on patient outcomes. The changes in the legislation and regulations governing pharmacy practice that are occurring in most jurisdictions illustrate the progression of this evolution. These changes include scope of practice changes granting pharmacists more authority to prescribe and monitor drug therapy, and regulation of pharmacy technicians who will assume some of the drug distribution tasks previously performed by pharmacists. Some provinces are reimbursing pharmacists for medication therapy management services, and pharmacists are being hired to work on family health teams.

This evolution of the pharmacist's role in the delivery of health care will require corresponding augmentations to the pharmacists' skills and knowledge. To ensure that pharmacists can practise competently and safely in enhanced roles, pharmacy program curricula will also need to evolve. Specifically, professional leaders and organizations have called for the education of pharmacy students to include: more interprofessional experiences; more training in communications, management, and leadership; more clinical practice in primary care and hospital settings; additional skills in the documentation of care (especially using electronic health records); greater development of skills relating to prescribing and monitoring of outcomes; and more training in chronic disease management through drug therapy. Increased practical exposure to expanded or innovative pharmacy roles, through a greater variety of quality experiential training opportunities, is seen as a key curriculum enhancement.

However, there is a limit to how much the four year professional undergraduate program can expand to accommodate additional skills and training development. The contemporary training of pharmacists still requires significant foundation studies in the biomedical and pharmaceutical sciences in the core curriculum. Many pharmacy schools in Canada are therefore developing strategic plans that will likely result in major changes to their pharmacy program, including more substantive admission requirements and enhancements to the professional program itself. Such an expanded program for pharmacy would qualify for the PharmD as the first professional degree.

The Canadian Pharmacists Association has a strategic goal to "advance the role of the pharmacist". CPhA has led two key research and consultative change management initiatives falling under this strategic goal; both have identified a need for curricular change in order to advance pharmacy practice to achieve the Vision for Pharmacy:

The Blueprint for Pharmacy is a collaborative pan-Canadian initiative for managing the changes required to strategically align pharmacy practice with the health care needs of Canadians. It is supported by all national and provincial pharmacy organizations, faculties of pharmacy and major pharmacy chains. The Blueprint is based on a common Vision for Pharmacy that describes a landscape where pharmacists and pharmacy technicians practise to the full extent of their skills and knowledge to achieve "optimal drug therapy outcomes for Canadians through patient-centred care". A detailed implementation plan outlines the strategy to achieve the Vision.

The Blueprint for Pharmacy: The Vision for Pharmacy¹ recognizes the importance of changes within education and Continuing Professional Development (CPD). It states that future education needs to emphasize foundational skills (such as communications, clinical decision-making, physical assessment, informatics, confidence building and research) and incorporate management, leadership, advocacy, and change management skills. Two of the specific key actions described in the Blueprint for Pharmacy Implementation Plan² are:

- Ensure that core pharmacy curricula address the knowledge, skills, and value required for future pharmacy practice to ensure new graduates are prepared to develop and practice in emerging roles.
- Increase the accessibility, quality, quantity and variety
 of experiential learning opportunities to prepare
 pharmacy professionals, including students, to practise
 in expanded and innovative roles.
- The Moving Forward: Pharmacy Human Resources for the Future³ initiative was launched in the fall of 2005, and was funded in part by the Government of Canada's Foreign Credential Recognition program. Its aim was to investigate the factors contributing to pharmacy human resources challenges in Canada, and to provide a foundation of research to support a series of specific recommendations and strategies to help ensure a strong pharmacy workforce prepared to meet the future health care needs of Canadians. The Moving Forward final report

contains 36 evidence-based recommendations, grouped into five separate themes. Two specific recommendations from the report are that curricula be revised to include greater experiential training, and that revised curricula with greater experiential training will qualify for the PharmD as the first professional degree designation:

- #14. Review the knowledge base, abilities, values, interprofessional skills and clinical experience that will be required of pharmacists to practise in expanded and innovative roles, and develop university pharmacy curricula to ensure that future graduates will be competent to practise in these emerging roles.
- #15. Ensure that pharmacy graduates of Canadian universities receive a credential that appropriately reflects the expected greater academic rigour of restructured curricula for the first professional degree in pharmacy.

PharmD degree programs, as the first professional degree, already exist in Canada. The Université de Montréal enrolled its first class of PharmD students in September 2007; this class graduated in the fall of 2011. In September 2011, Université Laval admitted its first class of students to its entry-level PharmD program and the University of Toronto introduced a Combined Bachelor of Science in Pharmacy-Doctor of Pharmacy Program for selected students entering their fourth year of the BSc Pharmacy program. Many of the other seven faculties of pharmacy are at varying stages of assessing and implementing PharmD programs.

In February 2010, the Association of Faculties of Pharmacy of Canada (AFPC) and the Association of Deans of Pharmacy of Canada (ADPC), released a *Position Statement and Joint Resolution on the Doctor of Pharmacy (PharmD) for the First Professional Degree at Universities in Canada*⁴. This document recognized that the current structure of the programs in place at most pharmacy schools in Canada can no longer effectively accommodate the proposed added depth and breadth to curricular content knowledge in the pharmaceutical sciences nor provide graduates with the enhanced skills that the profession and the health care system will expect from pharmacists.

Therefore AFPC and ADPC committed to replacing current baccalaureate pharmacy curricula with a comprehensive doctor of pharmacy curricula (of foundation knowledge in the biomedical and pharmaceutical sciences, practice skills training and extensive clinical experiences) for the first professional degree in pharmacy to ensure that graduates can enter practice to competently perform the enhanced patient care skills that will be expected of pharmacists. They resolved that the timeline for the transition from the baccalaureate to the doctor of pharmacy curriculum by pharmacy schools in Canada be determined by CCAPP in consultation with its member organizations and schools of pharmacy in Canada and that these parties should make significant effort to ensure that all pharmacy schools have a doctor of pharmacy curriculum in place by 2020.

The revised document, Educational Outcomes for First Professional Degree Programs in Pharmacy in Canada⁵, was approved by AFPC in June 2010. There is now one set of educational outcomes for all entry-to-practice pharmacy programs in Canada, regardless of the degree offered (Bachelor of Science in Pharmacy or PharmD). The revised educational outcomes are formatted with the overall goal of graduating Medication Therapy Experts. This requires graduates to integrate knowledge, skills and attitudes from seven educational outcomes which have been defined under the roles of: care provider, communicator, collaborator, manager, advocate, scholar, and professional. Emphasis is placed on the multiple roles of graduates through explicit statements within the appropriate educational outcomes.

To address the need for accessible programs for practising pharmacists to upgrade their knowledge and skills to support expanded roles, CPhA introduced the ADAPT patient care skills course (www.pharmacists.ca/adapt). ADAPT is an online, 76-hour, 19 CEU course to enhance skills in providing medication reviews, collaborating with health care providers, interviewing and assessing patients, making evidence-based clinical decisions, documenting care, and developing and implementing care plans. Development of ADAPT was funded in part by Health Canada, underwent extensive evaluation with a pilot course in 2010, and the first course was offered in August 2011.

In summary, the emergence of the PharmD, as the first professional degree, shows how universities are responding to recognized pharmacy education needs at the entry-to-practice level (in this case, increased experiential learning in a clinical setting). Such curricular change must reflect ongoing evolution in the delivery of health care and in entry-level practice requirements. CPhA supports the continuing review and modification of pharmacy curricula and continuing professional development programs to ensure that pharmacy students and practicing pharmacists continue to have the skills and knowledge they will need to practise at the level required by the health system.

References

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- 5. Educational Outcomes for First Professional Degree Programs in Pharmacy (Entry-to-Practice Pharmacy Programs) in Canada: Association of Faculties of Pharmacy of Canada; June 2010 (http://www.afpc.info/downloads/1/AFPC_Education_Outcomes_AGM_June_2010.pdf)

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