

Introduction to the Ontario Pharmacy Patient Care Assessment Tool (OPPCAT)

A candidate's performance is measured using a 5-point rating scale.

Behavioural Descriptors

A behavioural descriptor summarizes the candidate's performance that has been observed. Every rating for every element on the OPPCAT has its own behavioural descriptor. Each descriptor has three components:

- 1) **Level of guidance or support required.**
- 2) **Effectiveness or quality.**
- 3) **Consistency.**

Level 1 – A level 1 rating indicates that a candidate is inconsistent and cannot complete tasks related to that competency element in an effective way, even when provided with a significant amount of guidance.

Level 2 – A level 2 rating indicates that a candidate is inconsistent however is beginning to complete tasks related to that competency element in an effective way, when provided with a significant amount of guidance (i.e., guidance required most of the time).

Level 3 – A level 3 rating indicates that a candidate is beginning to show some consistency and can complete tasks related to that competency element in an effective way, when provided with some guidance (i.e., guidance required some of the time).

Level 4 – A level 4 rating indicates that a candidate is consistently completing tasks related to that competency element in an effective way, when provided with minimal guidance (i.e., no guidance at all, or very little).

Level 5 – A level 5 rating indicates that a candidate is consistently completing tasks related to that competency element in an effective way when provided with no guidance at all. These candidates would also consistently surpass entry to practice expectations to implement system-wide changes beyond the care of individual patients (i.e., to the pharmacy's organizational policies, workflows, and processes). This rating level is rarely seen during the internship.

When assessing the level of guidance for a particular element, the assessor should consider the following factors:

The initiative taken: Does the candidate readily engage in practice, or do they require prompting to act?

The direction required: Does the candidate have a logical thought process and professional judgement, or are they uncertain on how to make decisions?

The assistance required: Does the candidate have the knowledge, skills, and abilities to complete the required tasks, or do they need help filling in the gaps?

View [PACE Assessment Criteria here](#)

A glossary of the activities is included at the end of this document.

1. Patient Care	1	2	3	4	5
1.1 Develops Patient Relationships	Unable to form a professional relationship with patients; OR Adopts paternalistic or uncaring roles with patients; OR Places personal values over patient's values.	With significant guidance, able to develop superficial professional, patient-centred relationships with patients.	With some guidance, effectively develops and maintains professional, patient-centred relationships with patients.	With minimal guidance, consistently and effectively develops and maintains professional, patient-centred relationships with patients.	Independently determines and develops the professional relationship appropriate for patients.
1.2 Conducts Patient Assessments	Conducts patient assessments in a minimally flexible or unstructured manner resulting in ineffective or incomplete assessments.	With significant guidance, conducts patient assessments effectively and in a thorough manner.	With some guidance, conducts patient assessments effectively and in a thorough manner.	With minimal guidance, consistently conducts patient assessments effectively in a thorough and concise manner.	Independently adapts patient assessment approaches according to patient needs.
1.3 Identifies Drug Therapy Problems (DTPs)	Demonstrates critical gaps in knowledge and skills required to identify DTPs.	With significant guidance, identifies primary DTPs .	With some guidance, identifies most DTPs . May not always prioritize DTPs appropriately.	With minimal guidance, effectively identifies most DTPs and appropriately prioritizes them.	Independently, effectively identifies and appropriately prioritizes all DTPs , even on matters of complexity .
1.4 Makes Clinical Decisions	Demonstrates gaps in knowledge and routinely relies on inappropriate literature resulting in an inability to make decisions; OR Regularly demonstrates poor judgment.	Effectively assesses and reviews appropriate literature. Inconsistently or with significant guidance demonstrates judgment in decision-making and provides recommendations.	Effectively assesses and reviews appropriate literature. With some guidance demonstrates judgment in decision-making and provides recommendations.	Effectively assesses and reviews appropriate literature. Consistently and with minimal guidance demonstrates judgment in decision-making and provides recommendations.	Independently demonstrates judgment in decision-making and provides recommendations that incorporate potential systems factors .

1.5 Implements Care Plans	Unable to develop a care plan; OR Develops care plans that are incomplete, non-specific, unrealistic, or do not foster patient autonomy.	With significant guidance, develops care plans that are safe, effective, and respectful of patient autonomy. Care plans are ineffectively and / or inconsistently implemented.	With some guidance, develops care plans that are safe, effective, and respectful of patient autonomy. Care plans are implemented effectively most of the time.	With minimal guidance, develops comprehensive care plans. Care plans are effectively and consistently implemented.	Independently develops comprehensive and concise care plans. Care plans are effectively and consistently implemented.
1.6 Refers Patients	Provides care or services beyond their scope of practice; OR Does not recognize patients who require referral; OR Refers patients to an inappropriate care provider.	With significant guidance, identifies patients who require referral and makes referrals to the appropriate care provider.	With some guidance, identifies patients who require referral, makes referrals to the appropriate care providers, and provides basic rationale for the referral.	With minimal guidance, consistently identifies patients who require referral, makes referrals to the appropriate care providers, and provides complete rationale for the referral.	Demonstrates a clear understanding of the roles and responsibilities of a wide range of health care providers by making appropriate and justified referrals.
1.7 Provides Follow-up and Evaluates Care	Does not provide follow-up care to patients.	With significant guidance, provides follow-up care to patients and occasionally evaluates the effectiveness and safety of the care provided.	With some guidance, provides comprehensive follow-up care to patients and evaluates the effectiveness and safety of the care provided most of the time.	With minimal guidance, provides comprehensive follow-up care to patients and consistently evaluates the effectiveness and safety of the care provided.	Independently provides comprehensive follow-up care to patients and evaluates the outcomes. Incorporates systems factors for improvement of patient follow-up processes.



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Comments:

2.Communication & Education	1	2	3	4	5
2.1 Demonstrates Communication Skills (Verbally and Non-verbally)	Uses their communication skills in a formulaic or unstructured manner, resulting in potentially ineffective interventions.	With significant guidance, utilizes appropriate communication skills to fulfill their professional responsibilities.	With some guidance, utilizes appropriate communication skills to fulfill their professional responsibilities. Unable to consistently adapt their communications skills to address difficult communication situations.	With minimal guidance, utilizes appropriate communication skills to fulfill their professional responsibilities and consistently address difficult communication situations.	Demonstrates an ease of communication and able to adapt to situations presented by specific patients.
2.2 Completes Documentation	Completes written documentation that is incomplete, unclear or inaccurate.	With significant guidance, completes documentation clearly, accurately and in an audience-appropriate format.	With some guidance, completes documentation clearly, accurately and in an audience-appropriate format.	With minimal guidance, completes documentation clearly, accurately, concisely and in an audience-appropriate format.	Independently completes documentation clearly, accurately, concisely and in an audience-appropriate format.
Comments:					

3. Professionalism	1	2	3	4	5
3.1 Applies Regulations & Ethical Principles in Practice	Lacks understanding of fundamental regulations and ethical principles.	Demonstrates understanding of regulations, standards of practice and ethical principles. With significant guidance, detects and resolves actual situations presenting ethical issues and accepts responsibility and accountability for own decisions and actions.	Demonstrates understanding of regulations, standards of practice and ethical principles. With some guidance effectively detects and resolves actual situations presenting ethical issues and accepts responsibility and accountability for own decisions and actions.	Demonstrates understanding of regulations, standards of practice, and ethical principles. With minimal guidance effectively detects and resolves actual situations presenting ethical issues and accepts responsibility and accountability for own decisions and actions.	Independently detects and resolves all actual and potential situations presenting ethical issues effectively and accepts responsibility and accountability for own decisions and actions.
3.2 Demonstrates an Awareness of One's Own Practice Limitations	Is not conscious of gaps in own knowledge or skills, practice limitations or need to seek assistance.	Occasionally able to identify when own knowledge and experience is insufficient to manage own practice. With significant guidance, seeks and implements strategies to practice effectively.	Consistently able to identify when own knowledge and experience is insufficient to manage own practice. With some guidance, seeks and implements strategies to practice effectively.	Consistently able to identify when own knowledge and experience is insufficient to manage own practice. With minimal guidance, seeks and implements strategies to practice effectively.	Routinely incorporates self-reflection and openly seeks opportunities and resources to enhance own practice.
3.3 Demonstrates Professional Behaviour	Demonstrates unprofessional behaviour and attitude; OR Lacks self-management/discipline behaviours.	Inconsistently demonstrates professional behaviour and attitude; OR With significant guidance, demonstrates self-management/discipline behaviours.	Consistently demonstrates professional behaviour and attitude. With some guidance, demonstrates self-management/discipline behaviours.	Consistently demonstrates professional behaviour and attitude. With minimal guidance, demonstrates self-management/discipline behaviours.	Consistently demonstrates professional behaviour and attitude. Independently demonstrates self-management



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4. Professional Collaboration	1	2	3	4	5
4.1 Develops & Promotes Inter-/ Intra-professional Relationships	Unable to form inter-/intra-professional relationships OR demonstrates behaviours or attitudes that negatively impact these relationships.	With significant guidance, demonstrates interpersonal skills required for inter-/intra-professional relationships.	With some guidance, demonstrates interpersonal skills required for inter-/intra-professional relationships.	With minimal guidance, consistently demonstrates interpersonal skills required for inter-/intra-professional relationships.	Independently promotes inter-/intra-professional collaboration to foster a team relationship.
4.2 Fulfills Professional Roles & Responsibilities within Healthcare Team	Is unclear of own professional roles and responsibilities or unable to perform them.	With significant guidance, accurately articulates and fulfills own professional roles and responsibilities.	With some guidance, accurately articulates and fulfills own professional roles and responsibilities.	With minimal guidance, accurately articulates and fulfills own professional roles and responsibilities.	Independently fulfills own professional roles and responsibilities and advocates for advancement of the profession through collaborative relationships.
Comments:					

5.Practice Management	1	2	3	4	5
5.1 Prioritizes Patient Care Responsibilities to Manage Patient Workload	Unable to prioritize patient care. Focuses on technical or distributive functions .	With significant guidance, prioritizes patient care and manages expected patient workload within reasonable time frames to ensure patients receive optimal care.	With some guidance, prioritizes patient care and manages expected patient workload within reasonable time frames to ensure patients receive optimal care.	With minimal guidance, prioritizes patient care and manages expected patient workload within reasonable time frames to ensure patients receive optimal care.	Independently prioritizes patient care and manages higher-than-expected patient workload within reasonable time frames to ensure patients receive optimal care.
5.2 Manages Drug Dispensing	Assumes roles that disrupt the effectiveness and safety of the drug dispensing system.	With significant guidance, takes responsibility to ensure that all medications are appropriate, accurate, effective, and safe and provided in a manner consistent with all legal requirements. Practice is limited to technical aspects of drug dispensing.	With some guidance, takes responsibility to ensure that all medications are appropriate, accurate, effective, and safe and provided in a manner consistent with all legal requirements.	With minimal guidance, takes responsibility to ensure that all medications are appropriate, accurate, effective, and safe and provided in a manner consistent with all legal requirements.	Independently takes responsibility for and incorporates systems factors to improve the safety and effectiveness of drug dispensing system.
5.3 Demonstrates Patient and Medication Safety	Engages in unsafe practices, which may result in near misses or medication incidents. Unable to recognize unsafe / sup-optimal practices or does not recognize own responsibility to manage unsafe practices.	Inconsistently recognizes unsafe practices. With significant guidance, accepts responsibility for addressing unsafe / sub-optimal practices and managing near misses or medication incidents.	Consistently evaluates own practice, recognizing unsafe or suboptimal practices. With some guidance, accepts responsibility for addressing unsafe / sub-optimal practices and managing near misses or medication incidents.	Consistently evaluates own practice, recognizing unsafe or suboptimal practices. With minimal guidance, accepts responsibility for addressing unsafe / suboptimal practices and effectively manages near misses or medication incidents.	Seeks out and leads formal practice analyses for the purposes of patient safety, continuous quality assurance, and practice improvement to prevent similar situations in the future.



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Glossary 2019

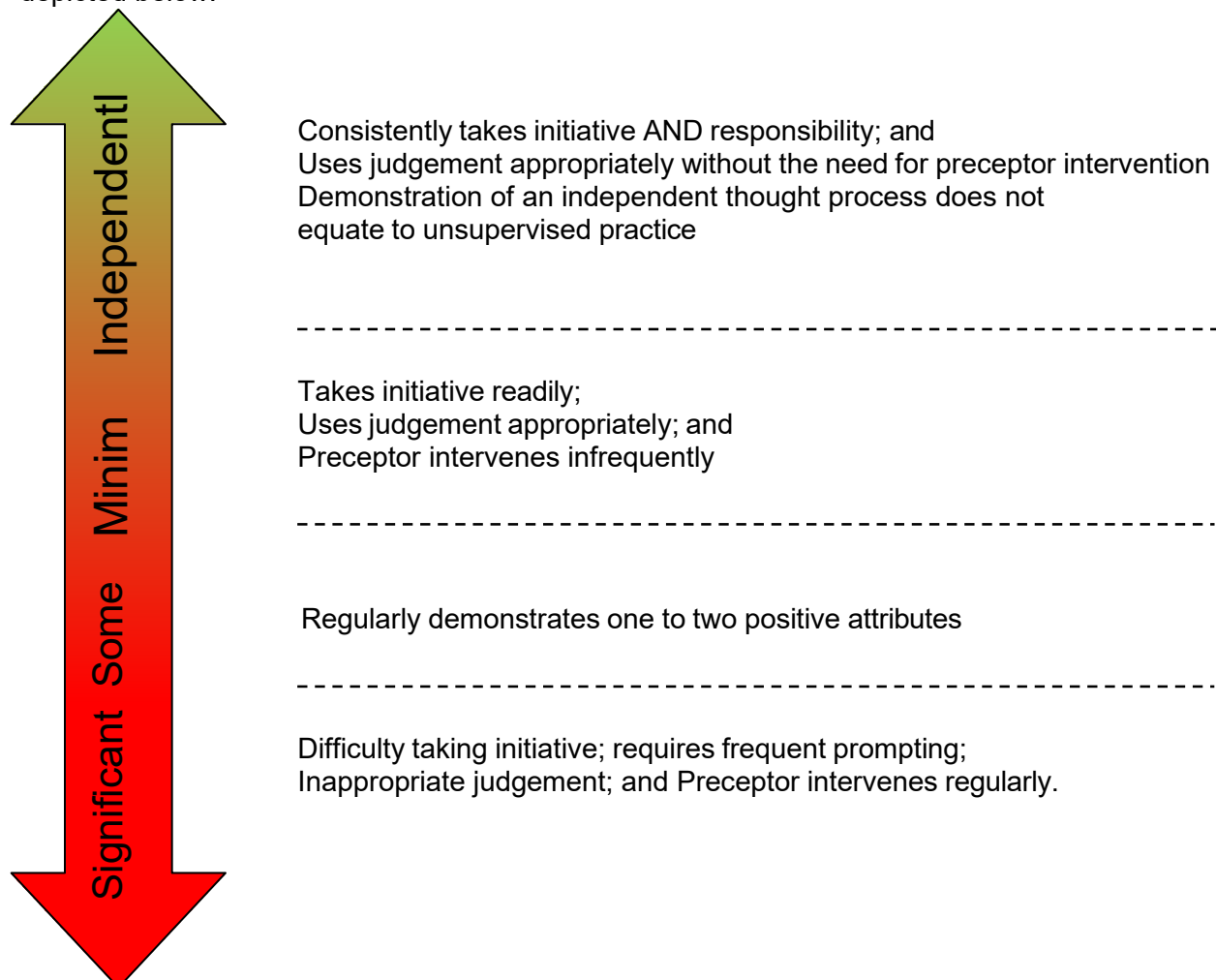
The following glossary has been developed by the Ontario Pharmacy Patient Care Assessment Tool (OPPCAT) Development and Oversight Team and is meant to be used in conjunction with OPPCAT during direct patient care rotations. OCP has granted permission to NBCP to adapt this tool.

Guidance

One of the critical indicators of performance utilized throughout the assessment tool is 'guidance'. It is broken down into three subparts which indicate the extent to which the learner:

- Takes Initiative
 - Do they readily engage in practice or require prompting by preceptor?
- Requires direction from preceptor in thought process and decision-making
 - Do they appear to have logical thought processes and use professional judgment appropriately or are they uncertain about how to make decisions?
- Requires assistance from preceptor to help fill in the gaps
 - Do they require help filling in the gaps or do have all of the necessary knowledge, skills and abilities to engage in practice?

Using these descriptors, the spectrum between significant guidance and independently is depicted below.





General Definitions

Independently

The term “independently” refers to a learner who consistently takes initiative AND responsibility; and, uses judgement appropriately without the need for preceptor intervention. This demonstration of an independent thought process, does not equate to unsupervised practice.

The New Brunswick College of Pharmacists have developed a helpful document for student and preceptors to understand their responsibilities: **Responsibilities of Preceptors and Students**. Preceptors and students must read this document. The student is responsible for submitting the required information to the New Brunswick College of Pharmacists. It is not the responsibility of the preceptor.

Systems

At the upper level of performance, the term ‘systems’ is used a number of times to reflect that the practice of the learner is moving or incorporating elements beyond the care of individual patients and is directed towards the structure and function of the practice environment as a whole (e.g., medication systems). This would include the organizational policies, workflows and processes that enable the provision of safe and effective patient care.

Patients = Clients

Any person or authorized agent of the person who is provided a product and/or service that is within the practice of pharmacy.

Patient-centered

Includes care that places the patient’s needs as the focus of the clinician’s work and care that maintains the patient as a ‘holistic’ being and does not fragment the patient into disease groups, organ systems or drug categories.

III. Domain Definitions

1.1 Develops Patient Relationships

Learner establishes a caring, professional relationship with patient, centered on patient’s needs, which are placed above personal needs.

Aspects of this relationship include proper introduction, establishing credibility and trust with the patient, fostering this relationship with attentive, prompt, courteous responses to the patient’s needs; discharges patient when needed appropriately.

The purpose of this relationship is ultimately to allow for proper patient assessment and care to occur.

1.2 Conducts Patient Assessments

Learner gathers appropriate/ needed information required to provide care to the patient. Data gathering may be done through chart review, clinical databases, patient interview, or physical examination. Includes making a quality assessment of the data gathered in terms of usefulness or that more data gathering is required.



Patient assessments – assessments of patient parameters including, but not limited to, best possible medication history, past medical history, laboratory and diagnostics testing, physical examination data, medical diagnosis, family history, social history and related factors.

1.3 Identifies Drug Therapy Problems

Learner is able to assess patient data/medications for the purpose of identifying drug therapy problems, including assessing the safety and efficacy of the patient medications. This includes prioritizing drug therapy problems according to patient's clinical needs. The learner already possesses a reasonable drug and therapeutics knowledge base (or is able to look up needed information effectively and efficiently).

1.4 Makes Clinical Decisions

Learner is able to apply literature evidence to patient care appropriately for the purposes of assisting clinical decision making. This would imply that the learner is already able to successfully search, retrieve, and appraise the literature evidence.

Learner is able to generate a list of therapeutic options appropriate to the patient's drug therapy problems. Learner compares and contrasts different options, weighing evidence for options and prioritizing options based on evidence. The learner already possesses a reasonable drug and therapeutics knowledge base (or is able to look up needed information effectively and efficiently).

Learner makes a decision weighing patient's values/ preferences/factors, appropriate evidence, and practicality issues in order to devise a recommendation to manage the patient's drug therapy problem(s).

Learner is able to decide on a course of action regarding this recommendation.

Patient factors – includes elements such as convenience, cost, coverage, etc., that affect clinical decisions.

1.5 Implements Care Plans

Care plans – a detailed schedule outlining the practitioner's and the patient's activities and responsibilities; designed to achieve goals of therapy and resolve and prevent drug therapy problems.

Learner weighs and decides on clinical outcomes suitable for patient (**patient-centred**).

Learner researches, weighs, and decides on safety and efficacy therapeutic outcomes regarding recommendations including timelines.

Learner incorporates self-care, patient/ family education, and patient wishes into these decisions.

Learner takes the specific actions to implement the care plan and clinical decision(s). Learner **recommends** a monitoring plan, the need for such care, the nature of such care, safety and efficacy assessments of the care, the timelines and frequency of contact required for such care, the learner's responsibilities in such care, and the termination of such care as appropriate.



1.6 Refers Patients (Informal or Formal)

Learner recognizes a patient has a health care need or when management strategies fall outside the scope of pharmacist care and the patient's interests would be better served by another health care professional. Learner makes appropriate informal or formal referrals to these other health care professionals (e.g., physicians, other health care professionals, Community Care Access Centres, etc.) including having an appropriate reason for the referral. For example, learner identifies the need for a patient to be referred to a dietitian and initiates a written referral (formal) to the health care provider or provides a verbal recommendation (informal) to a preceptor or other health care professional as appropriate. Learner also provides the patient's other health care professionals with information and the care he/she has provided to the patient in a timely manner.

1.7 Provides Follow-up and Evaluates Care

Learner **implements** monitoring of the patient determined in 1.5 including the need for such care, the nature of such care, safety and efficacy assessments of the care, the timelines and frequency of contact required for such care, the learner's responsibilities in such care, and the termination of such care as appropriate.

Learner **assesses for and manages any new drug therapy problems** and health care issues as part of follow-up care.

Comprehensive follow-up – assesses all pertinent effectiveness and safety endpoints as part of an ongoing monitoring plan. Reassess patient care in terms of any new information obtained and identifies any new drug therapy problems.

1.8 Promotes and Advocates for Patient Health and Wellness

Learner assesses the need, advocates (influences), and demonstrates care for individual patients and populations “by using pharmacy expertise to understand health needs and advance health and well-being of others.” (AFPC Educational Outcomes 2017).

Examples include, but are not limited to: assistance with patients' activities of daily living, disease prevention, aspects of health that fall into the scope of other health care practitioners, helping the patient navigate the health care system and access to health care services, assistance with patient's transition back to the community, and facilitating drug coverage.

2.1 Demonstrates Communication Skills Effectively (Verbally and Non-verbally)

Learner when speaking uses organized and articulate language with precise expressions and vocabulary in order to be able to carry out care to the patient, facilitating effective care delivery. This takes into account verbal (e.g., tone, volume, intonation) and non-verbal (e.g., eye contact, stance, and facial expressions) aspects used in communicating with patients and other health care professionals. Communication skills include active listening skills, responding with empathy and tact, respect for inter-cultural and inter-professional situations.



Learner is able to tailor their communication to specific contexts and patient care situations.

Difficult communication situations would include such things as patient does not speak French or English (interpreter or family member used), patient has low literacy levels, considerable barriers to communication exist and cannot be modified (privacy not available, etc.), and patient is resistant to communication, evasive or not forth-coming with needed details when responding to questions.

2.2 Completes Documentation

Learner writes in a clear, organized manner, with appropriate vocabulary, syntax and grammar. Learner's writings and documentation are useful for patient care, fulfills professional responsibilities, and where appropriate, follows the locally accepted documentation template in the patient's legal record.

Learner can adapt their writings and documentation to specific contexts and target audiences.
Note: documentation does not equal non-verbal communication

2.3 Demonstrates Presentation Skills

The learner assesses the audience needs and formulates appropriate learning objectives. Learner writes educational aids in a well organized and appropriate manner that clearly conveys information. Learner presents material in an organized, well delivered, and articulate manner, using appropriate vocabulary, expressions, tone of voice, pace of presentation, and engages audience with presentation.

Learner responds to questions and audience interactions in a thoughtful, clear, and concise manner.

3.1 Applies Regulations and Ethical Principles in Practice

Learner practices in accordance with legal requirements and standards of practice, as required for specific patient care situations, accepting responsibility for the patient's care needs and avoiding abandonment. Learner does not practice outside scope of practice.

Learner is able to weigh issues involved with an ethical situation, consider the ethical principles (Beneficence, Non-maleficence, Respect for Persons/Justice, and Accountability (Fidelity)), and decide on ethical course of action for the patient context. The patient's wishes are considered in decision-making, consent is obtained where necessary, and the patient's needs are prioritized over one's personal needs and conveniences. Refer to the [NBCP Code of Ethics](#) and the Codes of Conduct that apply to specific institutions.

Examples include: patient confidentiality and privacy (circle of care), concerns regarding opioid prescribing practices (quantity, duration), conflict of interest (accepting gifts from patients), professional boundaries (social media).

3.2 Demonstrates An Awareness of One's Own Practice Limitations

Learner identifies where their own knowledge and skills are insufficient to appropriately manage their practice (e.g., with patients or practitioners, etc). Learner utilizes strategies or seeks solutions to manage such situations requiring additional knowledge and skills.



Learner is able to self-reflect regarding practice, one's knowledge, skills, attitudes, and one's limitations. Learner is able to self-reflect regarding potential solutions to one's limitations.

3.3. Demonstrates Professional Behaviour

Learner demonstrates professional behaviour in accordance to the New Brunswick College of Pharmacists and any applicable institution's professional policies and standards.

Learner adopts professional identity characteristics that include, but is not limited to, commitment to patients, society, profession and self.

Self - management/discipline is defined as commitment to oneself where the learner takes responsibility for own behaviour and well-being.

Examples include: (*AFPC Professionalism User Guide 2018*)

Commitment to patients (e.g. compassion, caring, empathy, respect for diversity)

Commitment to self (e.g. academic integrity, work ethic (timeliness, dress code), awareness of email/phone/social media use in professional and personal activities, personal learning plan, self-awareness, personal care, feedback, life-long learning, etc.)

4.1 Develops and Promotes Inter-/ Intra-professional Relationships

Learner is able to negotiate the care, duties, and responsibilities of the pharmacist and other health care team members and pharmacists. Learner actively makes his/ her expertise available to and willingly shares with other team members and actively contributes to the care of the patient.

4.2 Fulfills Roles and Responsibilities with Healthcare Team

Learner understands and clarifies their professional roles and responsibilities with other health care team members. For example, learner practises collaboratively with other team members respecting, while not impinging on, their scope of practice. In addition, the learner appreciates how different professions practice together to ensure provision and follow up of care to the patient.

4.3 Demonstrates Leadership

Learner demonstrates initiative in managing assigned patients within the healthcare team consistent with the pharmacist's role and team's objective. Learner understands and adapts their role as a pharmacist and medication therapy management expert within the healthcare team to the circumstances in order to provide patient care. .

Learner articulates or helps manage patients from a systems based context – e.g., if certain DTP's are recurrent in a group of patients, are there considerations in the system and team of care that can be used to help those patients.

Where applicable according to the program, the learner accepts opportunities for leadership within the healthcare team,



5.1 Prioritizes Patient Care Responsibilities to Manage Patient Workload

Learner prioritizes patient care responsibilities according to patient care needs and urgencies. Learner completes these responsibilities within reasonable time periods (e.g., end of day or as negotiated with preceptor).

Expected patient workload – the agreed upon patient care expectations (e.g., number of patients to be followed, number of activities to be completed, etc) between the learner and the preceptor or as defined by a program’s benchmarking documents.

5.2 Manages Drug Dispensing

The learner has an understanding of the technical elements of dispensing (labelling, counting, etc.) at a higher level, in that the learner is able to take responsibility for ensuring medications are "appropriate, accurate, effective, and safe and provided in a manner consistent with all legal requirements". Depending on the practice site, this may or may not result in the learner directly contributing to the dispensing functions. (Note: learners are not being trained to be pharmacy managers)

Examples:

- In the hospital inpatient or LTC setting, this would involve assessing how well the learner understands how drug A gets to patient X and how effective the learner is at intervening when he or she recognizes that there is a challenge in this workflow that has the potential to compromise the care for patients.
- With FHT practice, this would be an assessment of how effectively the learner collaborates with a patient’s prescriber and community pharmacy (sometimes multiple of each) in ensuring the patient receives appropriate medication treatment in a timely manner. Hospital discharges and patients rostered to Health Links are great examples of where a learner may be involved in coordinating access to medications (in an “appropriate, accurate, effective, and safe manner”), without physically handling the drug products themselves.

5.3 Demonstrates Patient and Medication Safety

Learner recognizes when a near miss or medication incident occurs. Learner manages that situation for their patient including steps to disclose, apologize, and report.

Learner understands the steps to prevent medication errors and recognizes unsafe or suboptimal practices. Learner addresses any potential for medication errors to occur in one’s own practice and/ or within the system.

Near miss – an event that could have resulted in unwanted consequences, but did not because either by chance or through timely intervention the event did not reach the patient. (ISMP <https://www.ismp-canada.org/definitions.htm>)

Medication incident - any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the healthcare professional, patient, or consumer. Medication incidents may be related to professional practice, drug products, procedures, and systems, and include prescribing, order communication, product labelling/ packaging/ nomenclature, compounding, dispensing, distribution, administration, education, monitoring, and use. (ISMP <https://www.ismp-canada.org/definitions.htm>)



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REFERENCES

Association of Faculties of Pharmacy of Canada (AFPC) Educational Outcomes for First Professional Degree Programs in Pharmacy in Canada 2017.

https://www.afpc.info/system/files/public/AFPC-Educational%20Outcomes%202017_final%20Jun2017.pdf

AFPC User Guide for the Professional Role 2017

http://www.afpc.info/system/files/public/AFPC%20Educational%20Outcomes%202017_User%20Manual%20Section%20E_User%20Guide%20for%20PROFESSIONAL%20ROLE_final%20Jun2018.pdf

National Association of Pharmacy Regulatory Authorities (2014). Professional Competencies for Canadian Pharmacists at Entry to Practice. pp. 8-23.

http://napra.ca/Content_Files/Files/Comp_for_Cdn_PHARMACISTS_at_EntrytoPractice_March2014_b.pdf

Canadian Hospital Pharmacy Residency Board (2010). Accreditation Standards Canadian Society of Hospital Pharmacists pp.15 -17.

[https://www.cshp.ca/sites/default/files/residency/CPRB%20Pharmacy%20\(Year%201\)%20Residency%20Standards%20-%20FINAL%20\(06May2018\).pdf](https://www.cshp.ca/sites/default/files/residency/CPRB%20Pharmacy%20(Year%201)%20Residency%20Standards%20-%20FINAL%20(06May2018).pdf)

Cipolle RJ, Strand LM, Morley PC. (2004). Pharmaceutical Care Practice: The Clinician's Guide. McGraw-Hill: New York.

Institute for Safe Medication Practices.

<https://www.ismp-canada.org/definitions.htm>

New Brunswick College of Pharmacists Code of Ethics

<https://nbpharmacists.ca/legislation/code-of-ethics/>