



# ACTIVITY DESCRIPTION FORM (ADF)

## Accreditation Council for Pharmacy Education

135 S. LaSalle Street, Suite 4100 Chicago, IL 60603-4810

Phone (312) 664-3575 Fax (312) 664-7008 <http://www.acpe-accredit.org>

**UNIVERSAL ACTIVITY NUMBER (UAN):** 0025-0000-24-093-L04-P  
0025-0000-24-093-L04-T

**Provider Name:** University of Maryland School of Pharmacy

**Cancel**

**Cosponsor(s):** 0000 No Joint Providership (L)

**Activity Type:** Application

**Activity Title:** Circle Up: Fostering an Inclusive Culture Using Restorative Approaches; Session 2 - Restorative Circles Workshop

**Learning Objectives:**  
(Pharmacists)  
At the completion of this activity, the participant will be able to:  
1. Explore using restorative circles and practices in your role and setting.  
2. Facilitate small group dialogue for listening, processing, and community-building.  
3. Practice facilitator skills in a restorative circle involving serious incidents of harm.  
4. Compare and contrast best practices and barriers to facilitating and listening effectively.  
5. Reflect on your experience facilitating and listening as part of a restorative circle.

**Learning Objectives:**  
(Pharmacy Technicians)  
At the completion of this activity, the participant will be able to:  
1. Explore using restorative circles and practices in your role and setting.  
2. Facilitate small group dialogue for listening, processing, and community-building.  
3. Practice facilitator skills in a restorative circle involving serious incidents of harm.  
4. Compare and contrast best practices and barriers to facilitating and listening effectively.  
5. Reflect on your experience facilitating and listening as part of a restorative circle.

**Activity Length:** 5 **Contact Hours**

**Target Audience:** Pharmacists  
Pharmacist Technicians

**Home Study Format(s):**

**Keyword(s):** Communication  
Diversity  
health+inequities  
Social Justice  
Workplace Issues

**Initial Release Date:** 12/05/2024

**Planned Expiration Date:** 12/05/2027

**Originally Submitted By:** Kathleen Dury

**Submission Date:** 09/19/2024

**Last Modified By:** Kathleen Dury

**Modification Date:** 05/16/2025

Date	Location	Date Entered	Format	Cosponsor	Listed in P.L.A.N. ®	Cancel
12/06/2024	Baltimore, <a href="https://umbforms.wufoo.com/forms/r1v45guu1ty2i1p/">https://umbforms.wufoo.com/forms/r1v45guu1ty2i1p/</a> , MD	09/19/2024	Seminar	No Joint Providership		
06/13/2025	Baltimore, <a href="https://umbforms.wufoo.com/forms/r1v45guu1ty2i1p/">https://umbforms.wufoo.com/forms/r1v45guu1ty2i1p/</a> , MD	05/12/2025	Seminar	No Joint Providership		



# **ACTIVITY DESCRIPTION FORM (ADF)**

## **Accreditation Council for Pharmacy Education**

135 S. LaSalle Street, Suite 4100 Chicago, IL 60603-4810

Phone (312) 664-3575 Fax (312) 664-7008 <http://www.acpe-accredit.org>