



**UNIVERSITY
OF ALBERTA**

**Faculty of Pharmacy &
Pharmaceutical Sciences**

**PHARM 555 – ADVANCED PHARMACY PRACTICE EXPERIENCE
PART 2**

Acute Care/Inpatient Hospital Placement

Fall 2024/Winter 2025

Course Weight: 8

Online course access: <https://eclass.srv.ualberta.ca/portal/>

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COURSE DESCRIPTION

This 8 week (320 hour) structured practical learning experience will allow students to apply and integrate knowledge and skills in acute care/inpatient hospital practice settings. Students will develop practical knowledge necessary for the professional role of pharmacists as care providers, communicators, scholars, advocates, managers and collaborators. Students are expected to step into the role of a pharmacist under the guidance of a pharmacist preceptor.

This advanced clinical placement provides opportunities for students to accept professional responsibilities and further develop evidence based clinical judgment and decision-making skills. As students are within months of graduating, at completion of the placement, they should be “entry to practice” competent.

Prerequisite: PHARM 454. Meet all experiential education pre-placement requirements outlined on the FoPPS website under Current Students > [Experiential Education Requirements](#).

OTHER COURSE FEES

Students are expected to travel within the province to complete their experiential education course requirements. Costs associated with travel, accommodation or additional requirements are student responsibilities. Students are encouraged to contact student services regarding funding opportunities.

REQUIRED and RECOMMENDED READINGS

Here is the [Required Reading](#) list that pertain to all Advanced Pharmacy Practice Experiences (APPEs).

RECOMMENDED RESOURCES

Prior to the placement students should ask their preceptor about resources that should be brought to the placement or pre-readings that should be completed prior to the placement.

COURSE SCHEDULE

Individual student schedules are listed in CORE ELMS. Students must register for the course in the term that the placement is scheduled.

Fall Term

- Block 1: August 26 - October 18, 2024
- Block 2: October 21 - December 13, 2024

Winter Term

- Block 3: January 6 – February 28, 2025
- Block 4: March 3 - April 25, 2025

Attendance and stat holiday information: see [Undergraduate Experiential Education Policies and Procedures Manual](#). If there are religious holidays not included in stat holidays that students would like to observe, please notify me for guidance.

COURSE OBJECTIVES/OUTCOMES

The course is designed to develop the following knowledge, skills, and attitudes:

1. Apply fundamental knowledge in daily practice.
2. Use best evidence to provide patient care and respond to drug information requests.
3. Provide patient centered care and manage patients' medication and health needs.
4. Exercise critical thinking and clinical judgment to make informed decisions and solve problems.
5. Communicate both orally and in writing in an effective, responsible and responsive manner that encourages trust and confidence.
6. Work collaboratively with the patient, family, caregivers and other healthcare professionals to facilitate the management of the patient's health needs.
7. Demonstrate the inter-professional competencies of communication, collaboration, role clarification and reflection to optimize patient outcomes.
8. Advocated for patients within and beyond patient care environments.
9. Review the steps involved in the drug distribution process including management of medication errors.
10. Develop personal and professional leadership skills.
11. Adhere to ethical standards in the delivery of pharmacy care and demonstrate accountability and respect for patients.
12. Display professional behavior and attitude.
13. Demonstrate a commitment to learning by evaluating their practice and knowledge/skills to identify areas for development.

GRADING

Title	Weight	Date	Type
Assignment #1: Pharm 555 Skills Inventory and Learning Plan	Pass/fail	See description	Assignment
Assignment #2: Care Plans for 4 patients	Pass/fail	See description	Assignment
Student Self - Assessments (midpoint and final)	Formative	Prior to end of week 4 and end of week 8	Self Assessment
Preceptor Assessment of Student: Midpoint	Formative	After 160 hours	Assessment
Preceptor Assessment of Student: Final	Pass/Fail	After 320 hours	Assessment
Student Evaluation of Course	Completion required	After 160 and 320 hours and post-course	Evaluation

Post Course Student Evaluation of Course (Non-Anonymous)	Completion required in CORE ELMS	Submitted within 48 hours of completing placement	Evaluation
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- Pharm 555 is a Credit/No Credit course. At the end of the placement, preceptors recommend a grade on the final Student Performance Assessment. *(see Appendix 1)*
- To receive course credit, students must receive a “pass” on their final Student Performance Assessment from their preceptor [see below], complete all required assignments in a satisfactory manner, this includes any resubmissions requested by the course coordinator, and submit all required assessments. The Faculty course coordinator provides a final course grade (Pass: Credit or Fail: No Credit) following review of the submitted assessments and assignments. For students who do not submit all assignments and requirements by the deadlines in the syllabus, they will receive No Credit (NC).

Grading Criteria and Rating Scale

The following rating scale is used by preceptors to assess student performance, and also by students to complete their self-assessment:

1. Consistently Meeting Expectations All Expectations: The student has independently and consistently demonstrated ALL behaviours and/or skills associated with the outcome. *Hint: Typically this student rarely needs preceptor support and intervention.*
2. Mostly Consistent in Meeting Expectations: The student has independently and consistently demonstrated MOST behaviours and/or skills associated with the outcome. *Hint: Typically this student needs minimal preceptor support and intervention.*
3. Inconsistently Meeting Expectations: The student has independently and consistently demonstrated SOME behaviours and/or skills associated with the outcome. *Hint: Typically this student needs regular preceptor support and intervention.*
4. Not or Rarely Meeting Expectations: The student has independently and consistently demonstrated FEW behaviours and/or skills associated with the outcome. *Hint: Typically this student needs regular preceptor support and intervention most of the time.*
5. Unable to Rate at Midpoint: Apply this rating if the student has not had the opportunity to perform most of the listed behaviours and/or skills AT MIDPOINT and opportunities will be created by the end of placement. Selecting this rating will serve as a signal to pay special attention to these skills and behaviours between the midpoint and the final assessment.
6. Not Applicable: This rating should be awarded when the outcome cannot be assessed within the practice setting.

Placement Grade Determination by Preceptor

To pass the placement the student on the final student performance assessment must:

1. Achieve a rating of at least "**Mostly Consistent in Meeting Expectations**" on all professionalism outcomes and
2. Have no more than 3 (maximum of 2 for care provider) outcomes achieve a rating of "**Inconsistently Meeting Expectations**" and
3. Have zero ratings of "**Not or Rarely Meeting Expectations**"

Students Who May Require Support

The student should email the Course Coordinator following review of the Midpoint Student Performance assessment if any outcomes are rated as **Not or Rarely Meeting Expectations** or if performance concerns are identified and students would like additional support to address these. Students are encouraged to add areas requiring improvement to their Learning Plan at midpoint so that they can take ownership of how they plan to address any noted deficiencies.

ASSESSMENT INFORMATION

- Assessments are completed and submitted using CORE ELMS. Students are encouraged to review them prior to the start of the placement.
- It is important that students understand the purpose and timelines of each assessment. It is the student's responsibility to submit all assessments in accordance with the stated deadlines.
- Submission timelines for completing assessments are outlined in the Activities, Assignments and Assessments Schedule; *Appendix 2*.
- Preceptors are encouraged to provide formative feedback throughout the placement. It is recommended students and preceptors discuss how things are going after week 1. This discussion should include any early concerns or clarifications regarding expectations or course activities.

Assessments completed by the students for each placement are:

1. Self-Assessments: completed at least 1-2 days prior to midpoint, and final student performance discussions.
2. Student Evaluation of Preceptor and Site: completed and discussed with the preceptor during the midpoint and final student performance discussions.
3. Student Post-Course Evaluation: completed within 48 hours after placement completion in CORE ELMS and not discussed with the preceptor. This is not viewable by the preceptor.

ASSIGNMENT INFORMATION AND POLICIES


- Assignments are due as indicated below. For students who do not submit all assignments and requirements by the deadlines in the syllabus, they will receive No Credit (NC).
- The Skills Inventory and Learning Plan is posted before the placement begins. All other assignments are due by the last day of the placement. Assignments are reviewed for completion to ensure course requirements are met. Individual feedback may be provided if the assignment does not meet course requirements.
- **All posted documents must have all identifiers removed to ensure patient confidentiality.**
- To assist students and preceptors with planning across the 8 weeks, an "Activities, Assignments and Assessments Schedule" has been provided in *Appendix 2*.

Assignment #1: Skills Inventory & Learning Plan Assignment <i>The Learning Plan needs to be initiated <u>before the start of the placement</u>.</i>	Posting Instructions (CORE ELMS)
Students to develop 2- 3 goals to focus on during their placement (see example template in Appendix 3) The Learning Plan Discussions: 1. Discuss with the preceptor during the first week of the placement; make adjustments if necessary based on preceptor feedback. 2. Finalize by the end of the first week.	At least 1 week prior to start of placement: Post in CORE ELMS as a Requirement under Pharm 555 Learning Plan The <u>updated</u> plans must be posted by the end of 1 st

<p>3. Student to update at midpoint and final of placement to indicate progress made with the learning goals. Reviewed with your preceptor(s).</p> <p>4. Students add the outcomes that are identified as Inconsistently Meeting Expectations or Not or Rarely Meeting Expectations in the Midpoint Student Performance Assessment to the Midpoint Learning Plan to ensure they are focused on during the second half of the placement. Students are responsible to add Strategies and Indicators of Progress as a mechanism to take ownership for their learning.</p>	<p>week, midpoint and at the final following review with the preceptor.</p> <p>4 TOTAL POSTINGS; 1 before the placement and 3 during placement. Title each upload to reflect the posting date.</p>
<p>Assignment #2: Patient Care Assignment</p>	<p>Due Date (eClass)</p>
<p>Students are expected to complete a minimum of 20 care plans of which four will be submitted. The following need to be provided for 4 patients in a single document (start each patient on a new page):</p> <ul style="list-style-type: none"> ● <u>Please include a short narrative above the documentation to orient reader to nature of the patient encounter.</u> ● Students will be developing care plans for ALL patients. Students should choose 4 care plans that best demonstrate their patient care skills for assignment postings. These should be completed across the placement (and not left until the end of the placement). ● Patient care documents must have all identifiers removed to ensure patient confidentiality. ● Assignments should be reviewed with the preceptor and modify as needed prior to posting. ● Each assignment care plan should include: <ul style="list-style-type: none"> - relevant background data: reason for admission, HPI, past medical and medication history, BPMH, ROS (if applicable), relevant labs/diagnostic information (if applicable). - care plan using the pharmacy care plan worksheet or site-specific format. - corresponding documentation as entered on the patient’s chart/medical record. 	<ul style="list-style-type: none"> ● Due by 11:59 PM on the last day of the placement

COURSE ACTIVITIES

Preceptor supervision is important, especially early in the placement, with graduated independence for various activities such as gathering a medication history, patient education, as competence is demonstrated. ***Throughout the placement, restricted activities such as final checking of prescriptions and injections, must be supervised.***

<p style="text-align: center;">COURSE ACTIVITIES</p> <p>The following are activities students must complete during the placement to meet course objectives.</p>	
<p>1. Provide Patient Care</p> <p>Under direct and indirect supervision, students will complete care plans for a minimum of 20 patients. Based on pharmacy practice procedures at the time of the placement, <u>patient care may be provided over phone or using other virtual methods</u>. Ideally, students will be developing care plans for ALL patients. The number of patients may be adjusted by the preceptor depending on patient acuity and complexity. In general, students should be caring for four patients each day by week 3 of the placement. (add new patients if patients are discharged).</p>	

<p>For all patient care encounters students should provide patient care as deemed appropriate by the preceptor(s) and outlined in the Patient Care Process Document.</p> <ul style="list-style-type: none"> • <i>Gather information:</i> Review the patient profile/chart and interview the patient or agent or other relevant healthcare providers to obtain necessary information and organize information to determine patient's medication related and other health-related needs. • <i>Assess patient's medication needs:</i> review for indication, effectiveness, safety and adherence. • <i>Develop and implement a care plan:</i> List and prioritize the patient's medical conditions and drug related problems, develop goals, recommendations and a monitoring plan. • <i>Communicate and document</i> patient care activities. • Administration of Drugs by Injection: Students who successfully completed the training and also have completed CPR Level C + First Aid, should practice administering drugs by injection. <i>Students must only administer injections under the direct supervision of a pharmacist authorized by ACP to administer drugs by injection.</i> <p>ALL care plans must be reviewed by the preceptor. The care plan worksheet and checklist are posted in eClass for download and use as required. Care plans should be done across the placement and not completed all at the end.</p> <p><u>Corresponding Assignment:</u> <i>Care Plan Assignment (posted on eClass)</i></p>	
<p>2. Clinical Judgment: Review and Reflection</p> <p>For 3 patients, students will write a summary of the factors considered (i.e. patient specific variables, evidence) to formulate one of the recommendations made. The written summary should include the clinical issue, the patient assessment (including questions asked), clinical data retrieved and considered to make a decision. The student should review each written summary with the preceptor and discuss their rationale for the decision made and the outcome.</p>	
<p>3. Interprofessional Collaboration:</p> <ol style="list-style-type: none"> Students can collaborate with other healthcare professionals to care for patients. This includes attending patient rounds or patient care conferences (as deemed appropriate by preceptors). Students can spend time with other health care professional(s) that are caring for their patient(s) as deemed appropriate by the preceptor. This may include observing/assisting a nurse caring for your patient, shadowing a dietician, social worker, physiotherapist or occupational therapist, etc. <ol style="list-style-type: none"> It is suggested that students use Interprofessional (IP) Student Shadowing cards to support this activity. It helps to guide expectations and the discussion. Cards can be printed at: http://issuu.com/hserc/docs/student_s_guid_to_interprofessional_shadowing/2 Prior to the activity, students will prepare an expectation of what they want to learn from the activity and review it with the preceptor. After the activity, students will debrief with their preceptor to include what they learned and how this may help the pharmacist with collaborative care, as well as approaches other professionals use that are helpful. Students can verbally present a patient to a doctor or nurse who they are both mutually providing care (if possible). They should provide a brief patient overview (5-7 mins). Include reason for admission, current status, relevant labs, medications currently ordered, assessment and suggested recommendations (if any), and monitoring plan. Debrief with the preceptor about the benefits of this type of patient review in practice and how it can be used to resolve patient issues. 	
<p>4. Patient Care Presentation (with inclusion of a Clinical Question)</p> <p>Presentation can be delivered virtually or in-person (or both, if presenting to other sites along with a local site).</p>	

<p>During week 6-7, students should present at least 1 patient care experience to pharmacy staff and pharmacy students +/- healthcare team at site.</p> <ul style="list-style-type: none"> • A PowerPoint or similar presentation format is recommended. Format used by the practice site can be used as deemed appropriate by the preceptor. • The student may be asked to provide a copy to the site. It is suggested that the student pdf and reference any clinical data used in their presentation. <p>Suggested presentation format and rubric: <i>Appendix 4</i>.</p>	
<p>5. Drug Information Requests</p> <ul style="list-style-type: none"> • Students will respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients. • Encouraged to provide responses to questions using the drug information inquiry form. The format, usually written and debriefed verbally, can be determined by preceptor and site preference. . Site-specific forms should be used if available. Drug Information Inquiry Record form is posted in <i>eClass</i>. • Students are expected to use appropriate resources and various levels of evidence (primary, secondary and tertiary references), use more than 1 resource for each question and discuss answers with preceptor(s). 	
<p>6. In-service Presentation</p> <p>Students will provide a minimum of 1 in-service presentation (i.e. overview of a therapeutic topic, journal club, etc.) to pharmacy staff and/or allied health care team (including allied health students). The presentation can be delivered virtually or in-person. Any written materials or resources created should be shared.</p>	
<p>7. Medication Distribution</p> <ul style="list-style-type: none"> • Students will participate in the distribution of medications or have a guided tour of the dispensary including a review of how medications are delivered to the patient after they are ordered. • Students should re-review Chapter 45: Hospital Pharmacy Management (Recommended Resources). 	
<p>9. Preceptor Library Resources</p> <p>Students provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) now accessible to preceptors.</p> <p>The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: http://tinyurl.com/lgppqay.</p> <p>The link to the UofA pharmacy library home page is http://guides.library.ualberta.ca/pharmacy</p>	
<p>COURSE DISCUSSIONS</p> <p>The following are discussions students complete during the placement to meet course objectives.</p>	
<p>Please review the following Discussion Topics document to guide topics that should be discussed with your preceptor across the placement. This is also located in Appendix 4.</p>	

SUGGESTIONS and TIPS FOR SUCCESS

Full participation *is the first step to being successful in the placement*. This includes preparing for the placement by completing pre-readings and reviewing therapeutics. Professionalism and communication skills are important elements to placements.

This is considered to be an advanced placement; therefore, preceptors expect students to demonstrate patient accountability, initiative and self-directed learning. The listed course activities are minimums; maximizing learning is a professional responsibility. Students that succeed go beyond the course minimums and participate as a pharmacy team member. Most students can expect to spend 1-2 hours/day outside of placement time.

Although preceptors will guide learning, students are ultimately responsible to ensure completion of all activities, assignments and assessments.

An important student responsibility is contacting the Faculty with concerns if they arise. There are course assessments that provide checks and balances about learning and the overall experience, however it is important that students contact the Faculty prior to or during the placement to discuss concerns or questions. This includes if they are struggling or feeling overwhelmed. All concerns are dealt with in an individual and confidential manner.

The article "Strategies Pharmacy Students Can Use to Ensure Success in an Experiential Placement" (*see Recommended Resources in eClass*) provides helpful information including "obvious" and "not-so-obvious" strategies to ensure success in a placement.

POLICIES AND PROCEDURES

Experiential placement policies and procedures are included in the [Undergraduate Policies and Procedures Manual](#); required reading prior to the placement. Policies specific to this placement are:

- Attendance policies, students are expected to:
 - be at the placement site for an average of 40 hours/week. Placement schedule is determined with the preceptor(s). May include evenings and weekends.
 - know policies regarding completion of Absence Tracker for illness, bereavement, etc.
 - know policies regarding Faculty endorsed (e.g. job fair, PDW) and non-endorsed activities (e.g. job interviews)
 - **Any absence must be recorded in the CORE ELMS Absence Tracker.**
- Human Blood and Bodily Fluid Exposure (HBBFE) Procedures (Needlestick Injury) Procedure.
- Communication Policy
- Protection of Privacy Policy
- Preceptor recognition procedures
- Late Assignment Submission Policy: It is the student's responsibility to submit all assignments in accordance with the stated deadlines. Failure to do so will result in no-credit. Assignments that are posted late on eClass will require completion and submission of a Professional Accountability Form. This form is placed on the student's file.

TECHNOLOGY AND OTHER REQUIRED MATERIALS

Personal Laptop Computers: Students may be asked to bring personal laptops to placement sites to use for non-patient care activities.

eClass: Students must access eClass to obtain course information and resources.

CORE ELMS: Students must complete placement and course evaluations in CORE ELMS. Additionally, students are required to post their Learning Plan and CV/Resume under My Requirements within CORE ELMS. If technical assistance is required, contact phexed@ualberta.ca

Netcare Access: For information on Netcare (if required), see [website](#). Netcare access is requested by the site managers prior to placement start dates.

Connect Care training: Arranged for students completing placements at AHS/Covenant. Instructions will be communicated via email.

Attire: Students are required to wear their Faculty name tag or one provided to them when they are at the placement site. Expectation is that attire would be in alignment with business casual. Students are required to have a lab coat if deemed appropriate based on setting.

UNIVERSITY POLICIES

Plagiarism and Cheating: The University of Alberta is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the Code of Student Behaviour; www.governance.ualberta.ca Audio or video recording, digital or otherwise, of lectures, labs, seminars or any other teaching environment by students is allowed only with the prior written consent of the instructor or as a part of an approved accommodation plan. Student or instructor content, created and/or used within the context of the course is to be used solely for personal study and is not to be used or distributed for any other purpose without prior written consent from the content author(s). Policy about course outlines can be found in [Course Requirements, Evaluation Procedures and Grading](#) of the University Calendar.

Territorial Acknowledgement: The University of Alberta acknowledges that we are located on Treaty 6 territory, and respects the histories, languages, and cultures of First Nations, Metis, Inuit, and all First Peoples of Canada, whose presence continues to enrich our vibrant community.
L'Université de l'Alberta reconnaît qu'elle est située sur les terres du Traité 6 et respecte les histoires, les langues et les cultures des Premières Nations, des Métis, des Inuits et de tous les peuples autochtones du Canada, dont la présence continue d'enrichir notre communauté si vivante.

Pharmacy Code of Professionalism: Students are expected to abide by the Faculty's Pharmacy Code of Professionalism at all times. Lapses in professional conduct may result in the issuing of a Professional Accountability Form. If issued, these forms will be kept on student records for 2 years.

[Accessibility Resources and Accommodations](#)

Students requiring accommodations must seek to register with [Academic Success Center](#) at the beginning of each academic term. Accessibility Resources will work with the FoPPS (Office of Student Services) to determine the nature of any accommodation that will be granted. Once approved, Accessibility Resources will provide students and the Faculty with a "Letter of Accommodation". FoPPS Assessment Services will schedule meetings with students who have approved accommodations within the first month of the term to discuss individual requirements and will share these requirements with primary and/or lab instructors.

Equity, Diversity and Inclusivity

The Faculty of Pharmacy and Pharmaceutical Sciences is committed to providing an environment of equity and respect for all people within the university community, and to educating faculty, staff, and students in developing teaching and learning contexts that are welcoming to all. The faculty recommends that staff and students use inclusive language to create a classroom atmosphere in which students' experiences and views are treated with equal respect and value in relation to their gender,

racial background, sexual orientation, and ethnic backgrounds. In order to create a thoughtful and respectful community, you are encouraged to use gender-neutral or gender-inclusive language and to become more sensitive to the impact of devaluing language. We are working to build a community in which human rights are respected, and equity and inclusion are embedded in all areas of academic, work and campus life.

APPENDICES

APPENDIX 1: Student Performance Assessment: outlines the behaviours and outcomes students will be assessed on by the preceptor at the midpoint and final points of the placement.

OUTCOME	BEHAVIOURS
Professional	
1. Displays professional behaviour.	<ul style="list-style-type: none"> • Displays honesty, integrity, humility, commitment, altruism, compassion, empathy, inclusivity, and respect towards others. • Engages in the rotation. Does not engage in distracting or inappropriate behavior. • Maintains privacy and confidentiality. • Dresses professionally and maintains appropriate personal hygiene. • Maintains appropriate interpersonal boundaries. • Is punctual, accessible, diligent, timely and reliable to others
2. Demonstrates professional responsibility and accountability and practices within the scope of a 4th year student.	<ul style="list-style-type: none"> • Takes responsibility and accountability for their actions and inactions; <i>preceptor support may be required early in placement.</i> • Prioritizes activities and manages time to balance course requirements and practice site workflow. • Responds appropriately to ethical issues encountered in practice; <i>preceptor support may be required.</i> • Applies standards of practice, policies and codes that govern the profession; practices within the scope of fourth year student.
3. Demonstrates initiative, self-directed learning and commitment to excellence in pharmacy practice.	<ul style="list-style-type: none"> • Takes initiative to learn, enhance skills and integrate knowledge (i.e. maximizes learning opportunities). • Accepts, incorporates and provides feedback in an effective and constructive manner. • Sets personal goals to support development of professional skills, knowledge and attitudes.
Communicator	
1. Demonstrates effective non-verbal and verbal communication to instill trust and confidence.	<ul style="list-style-type: none"> • Speaks clearly, effectively and respectfully; tailoring responses to the context and audience. • Uses appropriate non-verbal communication. (e.g. open body language, use of facial expressions) • Listens, actively solicits and responds appropriately to ideas, opinions and feedback from others (e.g. patients, team members, preceptors) • Uses appropriate language, tone and pace that is suitable for the complexity, ambiguity, urgency of the situation. • Expresses recommendations, facts, evidence, opinions and positions accurately and effectively, with clarity and confidence; <i>may require preceptor support early in the placement.</i>
2. Effectively communicates in writing.	<ul style="list-style-type: none"> • Provides appropriate level of detail and complexity, breadth and depth; <i>preceptor support may be required early in placement.</i> • Uses appropriate language and tone for the type of written communication

	<p>and intended audience</p> <ul style="list-style-type: none"> • Prepares timely, clear documentation that maximizes safety and understanding.
Scholar	
1. Demonstrates the fundamental knowledge required for pharmacists	<ul style="list-style-type: none"> • Has minimal gaps in therapeutic knowledge required to provide patient care. • Uses experience and knowledge gained in the placement to solve previously encountered problems.
2. Uses best evidence available to provide medical information and patient care.	<ul style="list-style-type: none"> • Uses systematic approach to search for best available evidence and uses multiple and appropriate sources to gather information. • Able to formulate a clinical question. • Analyzes and appraises health related research and literature to inform responses to questions and patient care decisions.
3. Applies clinical judgment to make patient care decisions.	<ul style="list-style-type: none"> • Apply knowledge and professional judgment to provide safe, effective patient care. • Make decisions using an evidence-informed approach. • Provide rationale and logically defend rationale related to decisions.
Care Provider	
1. Establishes and maintains positive and professional relationships.	<ul style="list-style-type: none"> • Engages patient; <i>may require some preceptor prompting and guidance</i> • Exhibits sensitivity, respect and empathy with patients and caregivers. • Identifies and responds to patient cues <i>with preceptor guidance</i>. • Determines when it is ethically and professionally appropriate to involve caregivers and/or family members.
2. Gathers and interprets relevant, necessary information about a patient's health related needs.	<ul style="list-style-type: none"> • Utilizes multiple sources of patient information (e.g. Netcare, patient/caregiver, patient chart, other HCP) to synthesize data to complete a patient history; <i>may require preceptor support early in the placement</i>. • Employs effective interviewing techniques. (e.g. appropriate open and closed ended questions, uses motivational interviewing when appropriate). • Employs a systematic process to gather data accurately based on the Patient Care Process document. • Gathers and interprets appropriate amount of information including relevant physical exams, lab tests, point of care and diagnostic assessments. • Clarifies and manages conflicting data; <i>may seek support when initially</i>.
3. Formulate assessment of actual and potential issues in collaboration with the patient & other healthcare team members; prioritize issues to be addressed.	<ul style="list-style-type: none"> • Assesses drug therapy for indication, efficacy, adherence and safety. • Prioritizes medications related needs based on urgency and patient perspective/priorities. • Determines patient's medical condition(s) and determines those where medication needs are not currently being addressed.
4. Develops a care plan that addresses medication and health needs.	<ul style="list-style-type: none"> • Uses a systematic approach to develop care plans including for patients with multiple comorbidities. • Establishes goals in collaboration with the patient that are relevant, realistic and timely.

	<ul style="list-style-type: none"> Generates a realistic set of alternatives and assesses the pros and cons. Develops a safe and effective plan (recommendations, monitoring and follow-up) for managing patient needs.
5. Implements the care plan when appropriate.	<ul style="list-style-type: none"> Implements specific actions for managing medication specific needs (dispense, adapt, prescribe, refer, etc) <i>with preceptor supervision.</i> Educates the patient on pharmacological and non-pharmacological recommendations. Communicates the agreed upon care plan and rationale to patients and/or other healthcare providers with <i>preceptor support when necessary.</i> Negotiates and adapts plan with team and/or patient/caregivers; with <i>preceptor support when necessary.</i> Initiates and completes seamless care activities when appropriate.
6. Follow-up and evaluate as appropriate.	<ul style="list-style-type: none"> Evaluates data to assess efficacy/safety/adherence as well as progress towards achieving goals of therapy. Adjusts care plan, if needed, in collaboration with the patient and relevant team members.
Collaborator	
1. Works effectively with team members including patients and families, pharmacy colleagues and individuals from other professions.	<ul style="list-style-type: none"> Establishes and maintains positive relationships. Recognizes and can negotiate shared and overlapping responsibilities with other professionals. Participates in respectful, effective shared decision-making. Provides services and care as agreed upon with the patient and team. Manages disagreements or conflict in a way that supports collaborative culture.
2. Able to hand over the care of a patient to other pharmacy and non-pharmacy team members to facilitate continuity of safe patient care.	<ul style="list-style-type: none"> Identifies when patient handover should occur and what information should be communicated. Demonstrates safe handover of patient care issues and information using appropriate communication processes.
Advocate	
1. Advocates for patients within and beyond patient care environments.	<ul style="list-style-type: none"> Facilitates timely access to services or resources through advice, education and/or guidance to address determinants of health. Integrates health promotion into patient care and works with patients to adopt healthy behaviours (e.g. encourages vaccinations, smoking cessation). Provides patients with health and wellness strategies which include screening and educational services. Promotes impact of the pharmacist on patient outcomes and healthcare team. Advocate for equity, diversity, and inclusivity when providing care, both individually and when working with communities.
Leader Manager	

1. Participate in quality assurance and practice improvement strategies.	<ul style="list-style-type: none"> • Participates in practice change initiatives to improve quality of care and/or pharmacy practice <i>with preceptor support</i>. • Work with others to optimize provision of pharmacist care. • Contribute to a culture of patient safety. • Use health informatics to improve the quality of care.
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APPENDIX 2: ACTIVITY, ASSIGNMENT and ASSESSMENT SCHEDULE

Week	Student Activities
1-4 weeks before placement starts	<p>Students should:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Posted updated CV/resume in CORE ELMS <input type="checkbox"/> Review therapeutics/pre-readings as instructed by the preceptor. <input type="checkbox"/> Review Syllabus: activities and assignments, patient care process tools; including Course Required Reading list. <input type="checkbox"/> 4 weeks prior: Correspond with the preceptor regarding parking, dress code, start time, etc. <input type="checkbox"/> 1 week prior: Complete the Skills Inventory and develop Learning Plan; posted on CORE ELMS as a requirement at least 1 week prior to placement (include posting date on title). <p>Preceptors:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Determine if IT access, and any other required accesses, is established for your student.
Daily throughout the placement	<ul style="list-style-type: none"> <input type="checkbox"/> Provide Patient Care, review documentation with the preceptor. Depending on pandemic status, reviews can be done in person, via telephone or other virtual ways of communicating with patients. <ul style="list-style-type: none"> • Prepare care plans and document care provided according to preceptor's practice • Minimum 20 patients across the placement (provide care for a minimum of 4 patients concurrently by week 3). <input type="checkbox"/> Answer drug information questions. <input type="checkbox"/> Collaborate with the pharmacy team as a student pharmacist. <input type="checkbox"/> Ensure activities, discussions and assignments are being completed (student is

	responsible for ensuring completion of all course requirements).
Week 1: Orientation, Create Placement Schedule Date: _____	
Orientation	<input type="checkbox"/> Review and discuss Learning Plan, prior feedback, course objectives, and activities. <input type="checkbox"/> Discuss: <input type="checkbox"/> student/preceptor expectations and responsibilities. <input type="checkbox"/> assessment processes and timelines (include informal feedback/debrief). <input type="checkbox"/> Develop a schedule with: in-service, presentations, patient care, discussions, interprofessional activity <input type="checkbox"/> Develop a preliminary schedule. <input type="checkbox"/> RECENT UPDATE Discuss with your preceptor what you should do if faced with a difficult, abusive, racist patient or staff person, including microaggressions. Bring to the preceptors attention for appropriate action, debrief together, report and document, as well as contact faculty. <input type="checkbox"/> Discuss the possibility of having a “safety signal” so that you (the student) can gesture to your preceptor if you need assistance. <input type="checkbox"/> Tour of practice site <input type="checkbox"/> Log in to ensure Netcare access as well as other on-site systems.
Daily Patient Care and Documentation	<input type="checkbox"/> Discuss care plans, clinical documentation format and process <input type="checkbox"/> Set up a routine process for providing daily care for assigned patients: rounding, patient conferences, medication reconciliations, discharge counseling, etc.
Assessments and Learning Plan	<input type="checkbox"/> END of Week 1: Discuss and debrief with the preceptor how things have gone, and what adjustments, if any, need to be made. Contact Course Coordinator if any concerns. <input type="checkbox"/> Post revised Learning Plans (if revised) to reflect preceptor feedback.
Week 2: Date _____	
Week 3: Date _____	
Patient care activities and documentation	<input type="checkbox"/> Develop and discuss at least one Clinical Judgment written summary with preceptor (total of 3 to be completed across placement) <input type="checkbox"/> Plan interprofessional collaboration activities. <input type="checkbox"/> Week 3: Have topic for case presentation and inservice selected and start developing presentations
Week 4: Date _____	
Patient Care and other course requirements	<input type="checkbox"/> Continue care plans and documentation; should have approximately half done. <input type="checkbox"/> Review progress regarding other 2 Clinical Judgment written summaries with preceptor (if not yet completed). <input type="checkbox"/> Review progress regarding Patient Care Presentation and In-service. <input type="checkbox"/> Ensure consideration to which care plans will be submitted is given
4th Wednesday of the placement	<input type="checkbox"/> Complete and submit midpoint Student Self-Assessment (CORE ELMS) by Wednesday to allow preceptor review prior to Student Performance Assessment.

Mid-Point (end of Week 4)	<input type="checkbox"/> MIDPOINT Assessments: Student Performance Assessment-midpoint; completed by preceptor; review with student. <input type="checkbox"/> Student Evaluation of Preceptor and Site and Student Self-Assessment; discuss both with preceptor. <input type="checkbox"/> Update Learning Plan with progress as well as grades of Inconsistently Meeting Expectations or Not or Rarely Meeting Expectations from Student Performance Assessment and post the midpoint Learning Plan on CORE ELMS.
Week 5: Date _____ Week 6: Date _____	
Patient Care and other course requirements	<input type="checkbox"/> Complete in-service and continue to develop a patient care presentation. <input type="checkbox"/> Continue to provide patient care to assigned patients. <input type="checkbox"/> Assess completion of course discussions .
Week 7: Date _____ Week 8: Date _____	
Assignment and Assignment Completion	<input type="checkbox"/> Review activity table to ensure all activities and discussions have been done. <input type="checkbox"/> Ensure Inter-Professional activities have been completed and debriefed. <input type="checkbox"/> Conduct Patient Care Presentation (week 7). <input type="checkbox"/> Ensure completion of discussions <input type="checkbox"/> Submit 4 Care Plans in e-Class
Patient Care	<input type="checkbox"/> Ensure continuity of care documentation is entered and conveyed to the care team.
End of Week 8: Final Assessments (CORE ELMS), Source	<input type="checkbox"/> Final Student Performance Assessment and Placement Grade; review with the student. <input type="checkbox"/> FINAL Student Evaluation of Preceptor and FINAL Self-Assessment; discuss with preceptor. <input type="checkbox"/> Post-Course Preceptor Evaluation (non-anonymous). Not to be discussed with the preceptor. This evaluation is not viewable by the preceptor. <input type="checkbox"/> Update and post the final Learning Plan in CORE ELMS <input type="checkbox"/> Preceptor Awards and Anonymous Student Course Survey (links emailed to student)
Preceptor to Complete Course Evaluation	<input type="checkbox"/> Preceptor to complete Preceptor Course Evaluation (in CORE ELMS)

APPENDIX 3: Skills Inventory and Learning Plan Activity and Assignment

Your learning plan allows you to prepare for the placement by identifying goals in areas or skills where you would like to build more confidence or comfort. Then, during the placement you will work with your preceptor to create opportunities to achieve the goals. This activity also requires you to report on your progress, a skill required for future practice. This activity has 3 steps as outlined below (1. Skills Inventory, 2. Feedback Summary and 3. Learning Plan). **This must be posted at least 1 WEEK PRIOR to the start of the placement to allow time for preceptor(s) review.**

Templates are posted in eClass (in Word). Posting in CORE ELMS allows your preceptor to view this assignment.

STEP ONE: SKILLS INVENTORY

Complete the Skills Inventory below to assess skills that may be a focus for your Learning Plan. Below are some of the primary skills you will be using during your placement. Indicate your comfort and practice scale with each skill/activity.

Activity/Skill	Students should consider the following factors when assessing their abilities:	Comfort/Confidence Scale							Comments: (to provide perspective on the rating)
		1	2	3	4	5	6	7	
Communicating with patients, team members, colleagues (both verbally and in writing)	<ul style="list-style-type: none"> • Speak clearly, effectively and respectfully, tailoring responses to context and audience • Use appropriate non-verbal communication. (e.g. open body language, use of facial expressions) • Listen effectively (conversations are 2-way) • Employ effective interviewing strategies • Use appropriate language, pace and tone • Demonstrate appropriate confidence • Document information appropriately and accurately 	1	2	3	4	5	6	7	
Gathering medical and medication history	<ul style="list-style-type: none"> • Use systematic process to gather data • Use multiple sources to synthesize data • Employs effective interviewing techniques • Gather and interpret appropriate amount of information including relevant physical exam, lab tests, point-of-care and diagnostic assessments 	1	2	3	4	5	6	7	
Conducting Patient Assessments (Pharmacotherapy Work-up)	<ul style="list-style-type: none"> • Prioritize medication-related needs based on urgency and patient preference • Assess medical conditions & DRPs, and determine if there are needs not addressed 	1	2	3	4	5	6	7	

STEP TWO: FEEDBACK RECEIVED

To inform potential areas of learning for your Learning Plan, and to provide helpful information to your preceptor(s), complete the feedback table.

Areas of Strength Feedback: Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists.

Insert response here

Areas for Improvement Feedback: Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists.

Insert response here

STEP THREE: DEVELOP YOUR LEARNING PLAN

- Review Steps 1 and 2. Develop 2-3 SMART goals. These may be guided by skills rated lower in comfort and practice and that you would like to develop during the placement. Also state strategies you will use and the indicators of progress associated with each goal.
- Review it with your preceptor during the first week of your placement. If changes are made, post the updated learning plan. If no changes are made, the initial learning plan can remain posted.
- **AT MIDPOINT:** Update your learning plan and review with your preceptor.
 - **If you receive grades of Inconsistently Meeting Expectations or Not/Rarely Meeting Expectations on your Midpoint Student Performance Assessment, these must be added at midpoint to your learning plan to enable increased development.**
 - Students should post their learning plan 2 days prior to midpoint, and verbally discuss their progress with their preceptor.
- **AT FINAL:** Review your learning plan with your preceptor to see where you are at the end of the placement. Did you reach your goals? Do you have plan for continuing your goals into the next placement?

TIP: Progress updates, documented by students at midpoint and final, should be authentic and representative of what was achieved. It is OK if not all goals are achieved - this can be a work-in-progress.

LEARNING PLAN				
Goal (Stated in SMART format)	Strategies ● Describe strategies for attaining the goal.	Indicators of Progress (how will you know if achieving goal? (ie: feedback from preceptor, reflection)	Progress at MIDPOINT Include: ● Key accomplishments ● Next steps	Progress at FINAL Include: ● Key accomplishments ● Next steps
Learning Goal 1:				
Learning Goal 2:				

Learning Goal 3:				

APPENDIX 4: PATIENT CARE PLAN PRESENTATION (with inclusion of a Clinical Question) Information and Rubric

Goals of this activity are to allow students to:

- Share patient care experiences and understanding of clinical issues.
 - Provide a verbal presentation of their patient, DRP(s) and recommendation in a systematic manner (as practiced in the skills lab). This can be done virtually using on-line technology.
 - Practice presentation skills (use of PowerPoint slides is encouraged, presentation format should be discussed with the preceptor)
 - Provide brief evidence-based review of literature to support their recommendations(s) (this has been practiced in BASE courses.)
 - The presentation should be approximately 20 minutes in duration, with up to 5 minutes of questions.
 - It is suggested that a patient case be chosen in which interaction with the patient helped the student to assess the patient's DRPs and where their intervention affected or may affect patient outcomes.
 - Student and preceptor(s) should discuss the patient care plan they want to present by the midpoint of the placement. Students should provide the preceptor with a first draft soon thereafter to allow time for preceptor review. Students should then revise the presentation based on the feedback given.

Suggested Presentation Outline and Content (Adapted from: FMC Clinical Presentation Guidelines and Rural Journal Club Case Presentation Format)

- preceptors are welcome to modify outline, content and rubric to model the formats and documentation used at their practice site.

a. Introduction/outline: Introduce the case briefly; include why the case was chosen and what the main focus of the presentation will be. Provide a brief outline of the major components of the presentation.

Include learning objectives for the audience

b. Patient case and data: Present the following information about the patient;

- Summarize reason for admission/consult, history of present illness and relevant medical and drug therapy history.
- Summarize presenting symptoms, physical assessment, labs tests, diagnostic exams pertaining to the focus of the presentation.
- Describe the patient's drug therapy relating to the case presentation focus, including indications for all drug therapy as well as specific drug therapy information; dose, route, duration, etc.
- Describe the patient's progress related to the case presentation focus.

c. Listing of all DRPs and main DRP selected for review:

- List ALL DRPs related to that patient and highlight the DRP that will be the focus of the presentation. The DRP selected does not need to be the most important DRP; it will simply be the focus of the presentation.
- Student should be familiar with all aspects of the patient's case and prepared to answer questions related to any of the DRPs, regardless of whether it was the main focus of the presentation.

d. Disease state background: Briefly review the disease state relevant to the main DRP. Review should include pathophysiology, therapeutic alternatives and any relevant therapeutic controversies.

e. Goals of therapy: Describe the individualized goals of drug therapy for the main DRP. Include the patient perspective where possible.

f. Therapeutic alternatives: Discuss alternative ways (both drug and non-drug) to resolve the main DRP and achieve the individualized goals of therapy for this patient.

g. Focused clinical question (PICO format- to be researched by student using primary literature)

P: Patient, population or problem (*How would I describe a group of patients similar to mine?*)

I: Intervention, prognostic factor or exposure (*Which main intervention, prognostic factor am I considering?*)

C: Comparator or alternative intervention (if appropriate) (*What is the main alternative to compare with the intervention?*)

O: Outcome you would like to measure or achieve (*What can I hope to accomplish, measure, improve or affect?*)

Example:

Patient	Intervention	Comparator	Outcome
In a mechanically ventilated ICU patient...	...would administering IV ranitidine...	...compared to sucralfate given via NG tube...	...reduce clinically important bleeding?

h. Evidence Review and Summary

Please list the resources you consulted in the order that you consulted them. If your search requires use of databases like PubMed to identify original studies, please specify the search terms.

If using a clinical practice guideline recommendation, please discuss the strength of recommendation & quality of evidence and provide a brief summary of the evidence to support the recommendation. If relying on a meta-analysis, study or other lower forms of original evidence, (e.g., case reports) provide a brief synopsis of the BEST evidence you found that was relevant to answer the clinical question. Students have practiced searching, summarizing and critically appraising literature in the BASE courses. Synopses and appraisals may be presented using the ACP Journal Club format. One other option is to use the BEARS (Brief Evidence-based Assessment of Research) worksheet if students choose. The form can be found at:

<https://www.med.ualberta.ca/departments/family-medicine/research/resident-research/bears>

i. Summary of evidence: Summarize the evidence that has been reviewed (i.e. identify strengths and weaknesses of each paper reviewed) and explain the relevance to the patient where applicable.

j. Therapeutic recommendation and monitoring plan: Outline the recommendation(s) made for the patient to achieve the therapeutic goals for the patient. Explain why this was chosen as the best solution(s) for the patient incorporating best evidence principles and patient-specific factors. Describe monitoring parameters and activities that were/would be done to determine the outcome of the drug therapy recommendations (if applicable).

k. Resolution of case: Where possible, present the results of follow-up monitoring to illustrate the patient outcome.

Patient Care Presentation Rubric

To be used by the preceptor, and other observers. Student to bring copies to the presentation.

Student's Name: _____ **Assessor's Name:** _____

Presentation Title: _____

Circle the number that best describes the student's presentation in each of the following categories

1: Unable to rate Could not evaluate or missing.	2: Needs Improvement Outcome measure partially achieved.	3: Meets Expectations Outcome measure generally achieved.	4: Exceeds Expectations Outcome measure achieved in exemplary manner.			
Introduction and Overview of Patient Data <ul style="list-style-type: none"> Includes information that explains why the case was chosen. Identifies the main focus of the presentation. Provides a brief outline of major presentation components and learning objectives. 			1	2	3	4
Patient Data <ul style="list-style-type: none"> Presents concise summary of patient's history; presenting symptoms, progress-to-date. Accurately interprets physical assessment, laboratory and diagnostic data. Describes patient's drug therapy in relation to the presentation focus. Presents only relevant data in a logical manner 			1	2	3	4
DRPs <ul style="list-style-type: none"> Identifies and prioritizes all DRPs accurately. Identifies the primary DRP that is the focus of the presentation. 			1	2	3	4
Care Planning Part 1 <ul style="list-style-type: none"> Describe individualized <u>goals of drug therapy</u> for the focus DRP; include patient perspective where appropriate. Identifies <u>drug and non-drug alternatives</u> for the main DRP and to achieve goals of therapy; considers the pros and cons of each. 			1	2	3	4
Focused Clinical Question <ul style="list-style-type: none"> States the question using the PICO format. Outlines search strategy used; reviews evidence selected to answer the question. Summarizes the evidence and includes relevance to the patient. 			1	2	3	4
Care Planning Part 2 <ul style="list-style-type: none"> Outlines <u>recommendations</u> made to achieve therapeutic goals for the focus DRP; includes rationale. Describe <u>monitoring parameters and interventions</u> that were/would be done to achieve the outcome of any recommendations make for the focus DRP If possible, include follow-up monitoring 			1	2	3	4
Presentation and Organization Skills <ul style="list-style-type: none"> Speaks clearly; uses appropriate pace and tone. Poised and maintained focus. Adheres to time limits (20 min + up to 5 min for questions). Key points are presented in a logical, coherent way; uses transitions well. 			1	2	3	4
Questions: Understands question(s); provides (or attempts to) provide reasonable response			1	2	3	4
Overall Impression and Comments:						

APPENDIX 5: APPE Discussion Topics (see [Google.doc](#)) APPE Discussions

<p>Practice Site Policy</p> <ul style="list-style-type: none">● Review policies / procedures related to equity, diversity and inclusiveness in the practice site. Discuss how the student and preceptor are to manage situations if they arise (patient / staff / other health care professionals / etc).
<p>Maintaining Professional Competence and Lifelong Learning</p> <ul style="list-style-type: none">● Discuss with the preceptor how they maintain professional competence and the ACP Continuing Competence Program.● Review the preceptor's previous or current ACP learning / implementation records and compare it to the student's placement Learning Plan.
<p>Patient Communication</p> <ul style="list-style-type: none">● Discuss when motivational interviewing and shared decision-making strategies should be used with patients.● Discuss communication strategies used by your preceptor(s) to build rapport with patients; include patients with challenging situations such as those who are very ill, have dementia or mental health concerns.
<p>Medication Distribution Processes and Safety Practices (for sites with a dispensary)</p> <ul style="list-style-type: none">● Discuss documentation and reporting of medication errors/incidents, quality assurance processes and how the pharmacy keeps current with regulatory requirements.● Discuss with the preceptor and/or dispensary staff components of the distribution system (e.g. unit dose, ward stock) and the scopes of practice of staff involved (e.g. order entry, filling, checking).● Discuss error prevention strategies used to promote safe and accurate dispensing (e.g. dose calculation and checks, double/triple checks, use of technology, technician checking, etc.). Review incidence, tracking of errors and near misses.● What is the process for reporting of medication errors or incidents at the site?● What are the policies and processes involved to address safe medication practices (e.g. high alert medications, injectables, narcotics)? How are pharmacy personnel involved with the development and/or promotion of these processes and policies?
<p>Health Promotion and Advocacy</p> <ul style="list-style-type: none">● Discuss the health promotion or disease prevention programs that the preceptor is involved with and/or are available at the practice site (e.g. immunizations, smoking cessation, travel advice, blood pressure screening, etc.).● Review the health advocacy activities provided by the pharmacy team and the

practice site.

- Discuss and where possible demonstrate the advocacy and leadership roles of pharmacists such as research involvement, acquisition of compassionate/special access drugs, advocacy for drug coverage, committee involvement, development of patient care protocols.

Pharmacy Services and Scope of Practice

- (*PHARM 554 only*) Discuss the impact of funding policies on the provision of professional services and how the expanded scope of practice contributes to patient care. Include the impact of funding policies on the provision of professional services with the pharmacy team.
- Discuss obtaining additional prescribing authorization (APA)? What is their professional experience with APA both in obtaining & using it? If they don't have APA, are they planning to obtain it?
- If applicable, discuss with the preceptor how they (or other pharmacists with APA) use the expanded scope of practice to contribute to patient care.

Health Care Team

- Review how the preceptor communicates patient care responsibilities to ensure continuity of care (e.g. patient care hand off)
- Discuss communication strategies used to optimize team functioning, including how conflicts are managed (this should include within the pharmacy team and the broader healthcare team).

Professional Identity

Discuss how the preceptor engages in the following and how you envision yourself to do so:

- Networking opportunities
- Utilization of online platforms ex. LinkedIn
- Contributions to the profession
- Volunteer and Service Work
- Professional memberships and involvement