

Faculty of Pharmacy & Pharmaceutical Sciences

PHARM 556

Experiential Education COURSE OUTLINE and SYLLABUS

Fall/Winter 2024-25

Advanced Pharmacy Practice Experience Part 3 - <u>Selective in Direct Patient Care</u>

Course weight: *8

Course Coordinator: Ann Thompson Office: ECHA 3-174 Phone (780) 492-5905 E-mail: athompson@ualberta.ca

Online course access: https://eclass.srv.ualberta.ca/portal/
Office Hours: Monday to Friday by appointment

Course Description

This 8-week (320 hour) structured practical learning experience will allow students to apply and integrate knowledge and skills in a patient care setting. Students will develop practical knowledge necessary for the professional role of pharmacists as care providers, communicators, scholars, educators, collaborators, advocates, leaders and managers. Students are expected to step into the role of a pharmacist under the guidance of a pharmacist preceptors.

It is important that students engage in reflective and self-directed practice. The student is expected to fulfill the role of a pharmacist, accepting professional responsibilities with preceptor guidance. The preceptor is expected to supervise and guide the student to enhance patient care skills, utilize knowledge and skills appropriately, and navigate the practice setting.

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 Reading

Here is the <u>Required Reading</u> list that pertain to all Advanced Pharmacy Practice Experiences (APPEs). There are 2 additional readings required for Pharm 556.

Recommended Resources

Prior to the placement, students should ask their preceptor about resources that should be brought to the site 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 <u>Undergraduate Experiential Education Policies and</u>

<u>Procedures Manual.</u> If there are religious holidays not included in stat holidays that students would like to observe, please notify me for guidance.

Course Objectives

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 care and manage patients' medication and health needs.
- 4. Exercise critical thinking and clinical judgment and inter-professional collaboration (when possible) 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. Advocates for patients within and beyond patient care environments.
- 8. Develop personal and professional leadership skills.
- 9. Adhere to ethical standards in the delivery of pharmacy care and demonstrate accountability and respect to patients.
- 10. Display professional behavior and attitude.
- 11. Demonstrate a commitment to learning by evaluating their practice and knowledge/skills to identify areas for development.

Grading

Title	Weight	Date	Туре
Assignment #1: Learning Plan	Pass/fail	See description	Assignment
Assignment #2: Patient Care Assignment	Pass/fail	See description	Assignment
Assignment #3 & 4: Determined between preceptor and student	Pass/fail	See description	Assignment
Student Self-Assessments (midpoint and final)		Prior to 160 hours and 320 hours	Self-Assessment
Preceptor Assessment of Student: Midpoint	Formative	After 160 hours	Assessment
Preceptor Assessment of Student: Final	Pass/Fail	After 320 hours	Assessment
Post-Course Evaluation of Preceptor and Site (in CORE ELMS)	required	within 48 hours of completion of placement	Evaluation

Pharm 556 is a Credit/No Credit course. At the end of the placement, preceptors recommend a grade on the final Student Performance Assessment. Formative feedback is provided by preceptors to guide and support achievement of course goals.

To pass the course, students must receive a "pass" on their final Student Performance Assessment (see Appendix 1) from their preceptor [see below], complete all required assignments including resubmissions requested by the course coordinator (or designate reviewer) in a satisfactory manner (see Course Assignments) and complete all required assessments (see information below). 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. <u>Consistently Meeting All Expectations</u>: 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. <u>Mostly Consistent in Meeting Expectations</u>: 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. <u>Inconsistently Meeting Expectations</u>: 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. <u>Unable to Rate at Midpoint:</u> 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. <u>Not Applicable</u>: 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 <u>any outcomes</u> 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 expected to add areas that are inconsistently meeting expectations to their Learning Plan at midpoint so that they can take ownership of how they plan to address any noted deficiencies.

Assessment Information

- All assessments are completed and submitted using CORE ELMS. All assessments are posted prior to the start of the placement. Students are encouraged to review so they know the assessment outcomes and criteria.
- Formative feedback is encouraged throughout the placement. It is recommended students and preceptors discuss how things are going after week 1. Items to be discussed at this time include any early concerns or clarifications regarding expectations or course related activities.
- Time points for completing assessments are outlined in Appendix 2.
- Further information and details regarding each assessment can be found in eClass.

Assessments/evaluations completed by the students for each placement are:

- 1. <u>Self-Assessments:</u> completed at least 1-2 days prior to midpoint, and final student performance discussions.
- 2. <u>Student Evaluation of Preceptor and Site</u>: completed and discussed with the preceptor during the midpoint and final student performance discussions.

3. <u>Student Post-Course Evaluation:</u> completed within 48 hours after placement completion in CORE ELMS and not discussed with the preceptor. This is not viewable by the preceptor.

Assignments

- Assignments are due as indicated in the table 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*.

	ignment #1: Skills Inventory & Learning Plan Assignment Learning Plan needs to be initiated <u>before the start of the placement</u> .	Posting Instructions (CORE ELMS)
Students are to develop 3 goals (these can be related to development of clinical skill(s), inter-professional practice, leadership, etc). The Learning Plan should be: 1. Discussed with the preceptor during first week of the placement; make adjustments if necessary based on preceptor feedback. 2. Finalized by the end of the first week. 3. Student to update at midpoint and final of placement to indicate progress made with the learning goals. Reviewed with your preceptor(s). 4. At midpoint, add learning goals and objectives as needed to address knowledge/skill deficiencies as identified by the midpoint Student Performance assessment. Learning Plan Activity and Assignment information and template: Appendix 4.		Post in CORE ELMS as a Requirement under Pharm 556 Learning Plan at least 1 week prior to the start of placement. The updated plans must be posted by the end of 1st week, midpoint and at the final following review with the preceptor. 4 TOTAL POSTINGS; 1 before the placement and 3 during placement. Title each upload to reflect the posting date.
Ass	ignment #2: Patient Care Assignment	Due Date (eClass)
	dents are expected to provide care for at least 20 patients. They need to provide the owing for 4 patients in a single document (start each patient on a new page): Provide your documentation note(s) that outlined the care provided for each patient (this can either be a screen shot, with patient identifiers removed, or a typed note). This could be an initial consult with the patient, or a patient receiving follow-up care. Please include a short narrative above the documentation to orient reader to nature of the patient encounter. Next, as a short narrative, include the monitoring and follow-up that occurred based on your interaction. In other words, what happened based on what was recommended? This could be based on a second interview with the patient, a phone call, checking pertinent lab work, speaking with a care giver, family member, or team member, etc. Finally, for each patient, briefly state what you did based on the follow-up/monitoring results – did your plan change? Did it stay the same? Were you surprised by the result, or was it what you expected to happen?	Due by 12pm on the last day of the placement
	ignments #3 and 4: Professional Practice and Education	Due Date (eClass)
	dents must complete a minimum of 2 assignments per placement based on 2 erent activities they completed during the placement. These may include: Case presentation Developing and presenting a live educational session or written educational materials	 Assignments are posted on eClass by the last day of the placement.

- Delivering a journal club or teaching session
- Presenting an in-service
- Professional practice activity or site-based project

Assignment postings should include a narrative that outlines the rationale for completing the assignment, as well as evidence or artifacts relating to the activity completed such as slides and/or handouts related to clinical activity, or outline and results of the project conducted. If completed, evaluation forms should be submitted as well. Various rubrics are posted in eClass for use (see *Appendix 3*).

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.

COURSE ACTIVITIES



1. Provide Patient Care

Under direct and indirect supervision, students will provide care for <u>a minimum of 20 patients</u>. 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>. 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).

For all patient care encounters students should provide patient care as deemed appropriate by the preceptor(s) and outlined in the <u>Patient Care Process Document</u>.

- <u>Gather information</u>: 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.
- <u>Assess patient's medication needs</u>: review for indication, effectiveness, safety and adherence.
- <u>Develop and implement a care plan</u>: List and prioritize the patient's medical conditions and drug related problems, develop goals, recommendations and a monitoring plan.
- Communicate and document 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. Students must only administer injections under the direct supervision of a pharmacist authorized by ACP to administer drugs by injection.

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.

Corresponding Assignment: Patient Care Assignment

2. Interprofessional Collaboration

Integrate into the patient care team where possible and work collaboratively with the other healthcare professionals to facilitate management of the patient's health needs.

- Involve and refer to other team members when outside the scope of pharmacist practice.
- Proactively communicate identified drug therapy issues, appropriate recommendations for care and monitoring plans to appropriate team members.

3. Professional Practice and Education (see Appendix 3 for more information)

Students must discuss with the preceptor and complete at least TWO Professional Practice Activities. These may be provided virtually/on-line or recorded as appropriate/possible at practice site.

- Examples include (but are not limited to):
 - providing an educational session on a therapeutic topic or controversy,
 - providing a patient case presentation or in-service for pharmacist colleagues and/or interdisciplinary audiences.
 - participation in a health promotion clinic (i.e. BP screening),
 - developing and implementing a patient care project (i.e. assessment tool or algorithm for disease management, practice site evaluation or improvement project).
- The chosen activities should be of importance to the team, and preceptor/student should negotiate the activity details.
- The student is responsible for completing the activity to the expectations set with the preceptor(s). If not completed in a satisfactory manner, the activity will need to be re-done to a satisfactory level.
- The activity may be assessed using exemplar evaluation form(s) posted in eClass.

4. Drug Information Requests

Respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients.

- Information may be required either verbally, written or both. (DI Inquiry Record posted in eClass).
- Students are expected to use appropriate resources and various levels of evidence as available and required to provide an acceptable response. Student should also use more than 1 resource for each question and discuss all answers with the preceptor.

5. Preceptor Library Resources

As a way to promote library resources to preceptors, provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s). Inform preceptors they are eligible for access as a benefit of precepting.

The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: http://tinyurl.com/lgppqay.
The link to the UofA pharmacy library home page is http://guides.library.ualberta.ca/pharmacy

COURSE DISCUSSIONS

The following are discussions to complete during the course to meet course objectives.

Please review the following <u>Discussion Topics document</u> to guide topics that should be discussed with your preceptor across the placement. This is also located in Appendix 5.

Instructor Assumptions (Tips for Success)

Pharm 556 students will be provided with an opportunity to provide patient and engage in the learning afforded at the practice setting. Students will be expected to prepare for the placement ensuring they have reviewed pre-readings provided by the preceptor so that they can be engaged in patient care immediately. Therefore, professionalism, and self-directed learning are crucial components to these placements. Although preceptors will guide the learning, students are ultimately responsible to ensure completion of all activities, assignments and assessments and to direct their learning.

This is considered to be an advanced placement, therefore preceptors expect motivation and patient accountability to be demonstrated by the students. Engagement and full participation is the first step to passing the placement. The course activities listed are minimums; maximizing learning opportunities is a professional responsibility. Students that succeed go beyond these minimums and participate as a pharmacy team member. Due to the variability of practice sites, experiences will differ and students are expected to take initiative and identify learning opportunities. Students are expected to identify knowledge gaps through self-assessment and seek feedback and information as needed. Students are also expected to improve with timeliness and efficiency over the course of the placement. Students can expect to spend 1-2 hours/day outside of placement time to work on assignments or prepare for upcoming activities/discussions.

Another important student responsibility is contacting the Faculty with concerns if they arise. There are assessments built into the course that provide checks and balances regarding 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. These are dealt with in an individual and confidential manner.

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

Policies and Procedures

Please refer to the <u>Undergraduate Experiential Education Policy and Procedure Manual</u> for experiential educations policies. <u>Students must review this manual prior to the placement.</u> These include:

- Attendance policies (illness, bereavement) and participation in professional opportunities such as conferences, PDW, Pharm D interviews, etc. In general, it is expected that students are at the placement site an average 40 hours per week, with schedule to be determined between student and preceptor(s). Any absence must be recorded in the CORE ELMS Absence Tracker.
- Human Blood and Bodily Fluid Exposure (HBBFE) Procedures (Needlestick Injury)
- · 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/Other Requirements

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 <u>website</u>. For AHS/Covenant placements, 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. Students are required to have a lab coat if deemed appropriate based on setting.

University/FoPPS Policies

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 provisions of the *Student Academic Integrity Policy* and the *Student Conduct Policy* (on the University of Alberta Policies and Procedures Online (UAPPOL) website) and avoid any behaviour which could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or

participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University.

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, digital or otherwise, 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 <u>Course Requirements, Evaluation Procedures and Grading</u> of the University Calendar.

Territorial Acknowledgement

The University of Alberta and Faculty of Pharmacy and Pharmaceutical Sciences respectfully acknowledges that we are located on Treaty 6 territory, a traditional gathering place for diverse Indigenous peoples including the Cree, Blackfoot, Métis, Nakota Sioux, Iroquois, Dene, Ojibway/ Saulteaux/Anishinaabe, Inuit, and many others whose histories, languages, and cultures continue to influence our vibrant community.

L'Université de l'Alberta reconnaît respectueusement qu'elle est située sur les terres du Traité 6, lieu de rassemblement traditionnel pour de nombreux peuples autochtones dont les Cris, les PiedsNoirs, les Métis, les Sioux des Nakotas, les Iroquois, les Dénés, les Ojibwés/Saulteaux/ Anichinabés, les Inuits et bien d'autres encore, dont les histoires, les langues et les cultures continuent d'influencer notre communauté si vivante.

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. Check out the resources to support an inclusive learning experience provided by the <u>University</u> and the <u>Faculty</u>. If you experience discrimination or harassment while in the program, please contact Student Services for support in how to navigate the situation. You can also report instances of discrimination and harassment through the <u>Office of Safe Disclosure and Human Rights</u>.

The faculty encourages staff and students to 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.

Accessibility Resources and Accommodations

The Faculty provides accommodations to support individual needs to access high quality learning. Students requiring accommodations to ensure access to learning that meets individual needs must register with Accommodation Services at the beginning of each academic term. Accessibility and Accommodation Services will provide students and Student Services with a "Letter of Accommodation". FoPPS Student Services will schedule meetings with students who have approved accommodations once letters are received to discuss individual requirements and how needs will be

met. Student services will share requirements with all primary and/or lab instructors that have contact with the student for the term. Assessment services will follow up with students and instructors to facilitate approved exam accommodations.

Student Code of Conduct

"The University acknowledges the values of academic engagement, respectful debate, peaceful assemblies and demonstrations, and participation in the many aspects of University life as ways to enhance intellectual growth, health and wellbeing, and a sense of belonging. The misconduct listed in this policy describes, in general terms, student behaviours which if left unchecked would, to an unacceptable degree, disrupt the learning environment, threaten the proper functioning of the University and/or negatively affect the property or reputation of the university, which benefit all members of the University community"

Additional information about pharmacy student code of conduct can be found in the student handbook.

Professionalism

Definition:

Professionalism encompasses core values (e.g., caring, compassion, altruism) and norms (e.g., accountability, teamwork, self-reflection, and continuous professional development) that define professional behaviour. It reflects professional identity, internalized through these characteristics, leading to a transformation in who one is as a professional. Professional identity development occurs throughout the program through diverse experiences, fostering a culture of empathy, support, and mutual respect. The development of student's individual professional identities will occur throughout the program, through experiences within and outside of the classroom. While professional identity is complex and difficult to assess, professional behaviours can and will be assessed.

Our Goal:

We aim to support your professional development by encouraging self-reflection, accountability, and a commitment to excellence in all aspects of your academic and professional life. If you need assistance, please reach out to Student Services for support and resources.

Expectations:

Students are expected to demonstrate professionalism through the following actions:

Engage in Preparatory Work: Complete required pre-session work (e.g. readings, activities, etc) to enhance class discussions and activities.

Participate Actively: Contribute meaningfully in sessions (seminars and labs) and fully engage in all learning opportunities.

Submit Assignments Promptly: Ensure timely submission of assignments and required activities. **Show Respect:** Demonstrate respect for instructors, staff and classmates (in written and spoken communications), being punctual, and engaged.

Be Accountable: Take responsibility for actions, reflecting on their impact on learning and the community.

Provide Constructive Feedback: Offer constructive feedback to classmates and through course and program evaluations.

Practice Self-Reflection: Regularly reflect on professional growth and identify areas for development.

Support Peers: Foster a supportive learning environment by assisting and encouraging classmates.

Addressing Concerns:

If professionalism expectations are not met, the course coordinator may request a "Professionalism Accountability Form" to facilitate reflection and improvement. The Form should be completed and returned to the course coordinator and will be included in the student's file. Completing this form is a course requirement. If the Form is not adequately filled out or submitted, the course will be graded as Incomplete (IN) until the completed Form is submitted. If the Form is not submitted within 30 calendar days from the date of the last scheduled course session, the student will receive an F (for graded courses) or NC (for credit/no credit courses).

APPENDIX 1: Student Performance Assessment

This table outlines the behaviours and outcomes that students will be assessed on by the preceptor at the midpoint and final points of the placement.

	OUTCOME	BEHAVIOURS
Pro	ofessional	
1.	Displays professional behaviour.	 Demonstrates honesty, integrity, humility, commitment, altruism, compassion, empathy, inclusivity and respect towards others. Does not engage in distracting or inappropriate behaviors. Maintains privacy and confidentiality. Dresses professionally and maintains appropriate personal hygiene. Maintains appropriate interpersonal boundaries. Is accessible, diligent, timely and reliable to others.
2.	Demonstrates professional responsibility and accountability and practices within the scope of a 4 th year student.	 Takes responsibility and accountability for actions and inactions; preceptor support may be required early in placement. Prioritizes activities and manages time to balance course requirements and practice site workflow. Responds appropriately to ethical issues encountered in practice; preceptor support may be required. Applies standards of practice, policies, and codes that govern the profession; practices within the scope of a 4th year student.
3.	Demonstrates initiative, self-directed learning, and commitment to excellence in practice of pharmacy.	 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.
Coı	mmunicator	
1.	Demonstrates effective non-verbal and verbal communication to instill trust and confidence.	 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 (patients, team members, preceptor(s), etc) Uses appropriate language, pace and tone 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; may require preceptor support early in the placement.
2.	Effectively communicates in writing.	 Provides appropriate level of detail and complexity, breadth and depth; preceptor support may be required early in placement. Uses appropriate language and tone for the type of written communication and intended audience. Prepares timely, clear documentation that maximizes safety and understanding.
Car	re Provider	
1.	Establishes and maintains professional relationships with patients/care givers	 Engages patient; may require some preceptor prompting and guidance. Exhibits sensitivity, respect and empathy with patients and care givers. Identifies/responds to patient cues with preceptor guidance. Determines when it is ethically and professionally appropriate to involve caregivers and/or family members.

	OUTCOME	BEHAVIOURS
2.	Gather and interpret relevant, necessary information about a patient's health-related needs.	 Utilizes multiple sources of patient information to synthesize data to complete a patient history; may require preceptor support initially. 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 amounts of information including relevant physical exam, lab tests, point-of-care and diagnostic assessments. Clarifies and manages conflicting data; may require preceptor support initially.
3.	Formulate assessment of actual and potential issues in collaboration with the patient & other healthcare team members; prioritize issues to be addressed.	 Prioritizes medication-related needs based on urgency and patient preferences. Determines patient's medical condition(s) and determines those where medication needs are not currently being addressed. Assesses drug therapy for indication, efficacy, adherence and safety.
4.	Develops a care plan that addresses medication and health needs	 Uses a systematic approach to develop care plans including for patients with multiple co-morbidities. Establishes goals in collaboration with the patient that are relevant, realistic and timely. 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	 Implements specific actions for managing medication-specific needs (dispense, adapt, prescribe, refer, etc) with preceptor supervision. Communicates the agreed-upon care plan and rationale to patients and/or other healthcare providers with preceptor support. Educates the patient on both non-pharmacological. (e.g. lifestyle) and pharmacological recommendations. Negotiates and adapts plan with team and/or patient/caregivers with preceptor support when necessary. Initiates and completes seamless care activities when appropriate.
6.	Follow-up and evaluate as appropriate	 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.
Col	laborator	
1.	Works effectively with members of the team including patients and their families, pharmacy colleagues and individuals from other professions.	 Establishes and maintains positive relationships Recognizes and can negotiate shared and overlapping responsibilities with other professionals. Participates in respectful and effective shared decision-making. Provides services and care as agreed upon with the patient and team. Manages disagreements or conflicts in a way that supports collaborative culture.
2.	Hand over the care of a patient to other pharmacy and non-pharmacy team members to facilitate continuity of safe patient care	 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.

	OUTCOME	BEHAVIOURS
Scholar		
1.	Demonstrates the fundamental knowledge required for pharmacists	 Has minimal gaps in therapeutic knowledge required to provide patient care. Uses experience(s) and knowledge gained in the placement to solve previously encountered problems.
2.	Uses best evidence available to provides medical information and patient care	 Uses systematic approach to search for best available evidence. Able to formulate a clinical question. Analyzes and appraises health-related research and literature to inform responses to questions and patient care decisions. Provides an appropriate, accurate and practical answer or recommendation. Documents and references recommendations where applicable.
3.	Applies clinical judgment to make decisions regarding patient care	 Apply knowledge and professional judgment to provide safe and effective patient care. Make decisions using an evidence-informed approach. Provide rationale and logically defend rationale related to decisions.
Adv	vocate	
1.	Advocates for patients within and beyond patient care environments.	 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. 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.

APPENDIX 2: Activity, Assignment and Assessment Schedule

Week	Student Activities	
1-4 weeks before placement starts	Review therapeutics as instructed by preceptor(s) or relevant to the practice area. Review syllabus: readings, objectives, assessments, activities and assignments. Correspond with preceptor regarding: start time, dress code, parking, etc. Provide preceptor(s) with Netcare form (if applicable) (4 weeks before start) Complete Skills Inventory and develop Learning Plan; post on CORE ELMS at least 1 week prior to placement.	
Week 1: Orientation	n, Create Placement Schedule, Learning Plans, Early Assessments	
Orientation	Review and discuss student-prepared Learning Plan and prior feedback received. Develop preliminary schedule: plan activities and assignments. Discuss student/preceptor expectations and responsibilities. NEWER 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. Discuss assessment processes including informal feedback and debriefing. Tour of pharmacy/facility.	
Log-in to ensure Netcare access, as well as access to other on-site system END of Week 1: Discuss and debrief with preceptor how things have go what adjustments, if any, need to be made. Contact Course Coordinator if concerns. Post revised Learning Plans (if revised) to reflect preceptor feedback.		
Weeks 2, 3 and 4		
Patient Care	Provide care to patients. Develop and discuss care plans and documentation Minimum 20 patients/8 weeks. Do not complete all at the end.	
Assignments	Discuss activities and plans for and progress on professional practice assignment	
Mid-Point Assessments (end of week 4)	MID-POINT Assessments (in CORE ELMS): Complete the midpoint Self-Assessment by Wednesday (wk 4) in preparation for the Student Performance Assessment discussion. Student Performance Assessment: midpoint (by preceptor); review together. Student Evaluation of Preceptor; midpoint; and Student Self-Assessment (midpoint); discuss both with preceptor.	
Learning Plan (end of week 4)	Update and post Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS). Outcomes and skills that are identified by the preceptor as needing improvement should be included.	
Weeks 5, 6 and 7		
Patient Care	Continue providing patient care. Review with preceptor. Continue planning/completion of activities and corresponding assignments.	
Week 8: Date:		
Finish assignments	Review activities and assignments to ensure all have been completed and posted. (Professional Practice and Education Assignments).	
FINAL Assessments	Review Final Student Performance Assessment and Placement Grade with preceptor. Student Self-Assessment (final): discuss with preceptor.	

	Discuss final Learning Plan and status of progress with preceptor.
Posting of Assignments	Post the finalized Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS).
Assignments	Submit Preceptor Recognition Award survey; survey emailed to students
Surveys	Post Placement Evaluation (in CORE ELMS); submit AFTER leaving site, due 48 hours after placement completion

APPENDIX 3: RESOURCES for PROFESSIONAL PRACTICE ASSIGNMENTS

3a. Presentation Evaluation Forms

Evaluation forms are available in eClass for:

- 1. Journal Club presentation
- 2. Patient Case presentation
- 3. General Education session
- 4. Teaching Session feedback form

Ask your preceptor(s) and/or audience members to evaluate your presentation using the rubric posted in eClass (you will need to provide copies).

3b. Site-Based Project Guidance Information

In collaboration with the preceptor, students can design and implement a project that can be used by the practice site to enhance or evaluate patient care or evaluate care at the site. Examples include processes to facilitate interprofessional collaboration, developing tools and resources to provide enhanced patient care such as assessments or algorithms for disease management or patient education information, improving practice skills and/or processes at the site (i.e. completing monitoring and follow-ups).

Project Criteria: The goal is focused on a professional or clinical area of practice and the outcomes can be integrated into practice. The project outline should be completed by the end of the second week to allow for discussion & implementation. Outline should include:

- Topic and goal/rationale for the project
- Methods for achieving goal (steps involved, resources needed, timelines)
- Outcomes (real or potential)
- Next steps

Suggested timeframe:

- Week 1/2: set project goals, develop project outline.
- Week 3/4: mid-point progress review. Discuss project outline with the preceptor. (see outline below). Provide summary of the project; timelines, resources needed & proposed outcomes.
- Final week: Review project outcomes.

3c. Journal Club Information

Recommended reading: Improving journal club presentations, or, "I can present that paper in under 10 minutes" (http://ebm.bmj.com/content/12/3/66.2.full.pdf+html)

Suggested format: Prepare a 1 page summary of the outline as a handout.

- 1. Describe the patient case or problem that attracted you to this paper.
- 2. Describe the study (i.e. methods, location, unique features) and the research question (PICO).
- **3.** Describe the importance/relevance/ of the study.
- **4.** State your answers to the critical appraisal questions on validity.

- 5. Summarize the results and describe why the results can or cannot be applied to your patient.
- **6.** Conclude with your decision by resolving the PICO questions and how this applied to your patient and practice.

APPENDIX 4: 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 1 2 3 4 5 6 7 Uncomfortable Comfortable	Comments: (to provide perspective on the rating)
Communicating with patients, team members, colleagues (both verbally and in writing)	 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 Uncomfortable/ Comfortable/ Lack Confidence Confident	
Gathering medical and medication history	 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 Uncomfortable/ Comfortable/ Lack Confidence Confident	
Conducting Patient Assessments	 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 Uncomfortable/ Lack Confidence Confident	

(Pharmacotherapy Work-up)	Assess drug therapy for indication, efficacy, safety, adherence		
Creating Patient Care Plans	 Use a systematic process Establishes goals in collaboration with patient that are relevant, realistic and timely Generate realistic alternatives with pros/cons Develop safe and effective plan (recommendations, monitoring and f/u) for managing patient needs 	1 2 3 4 5 6 7 Uncomfortable/ Lack Confidence Confident	
Implementing Patient Care Plans	 Implement specific actions to achieve plan Communicate plan to others Educate patient Initiate seamless care as needed 	1 2 3 4 5 6 7 Uncomfortable/ Lack Confidence Confident	
Conducting Patient Follow Up	 Provides follow up if possible. Interprets follow-up information and modifies plan if needed. 	1 2 3 4 5 6 7 Uncomfortable/ Lack Confidence Confident	
Responding to DI Requests	 Integrates best available evidence into clinical practice Critically analyzes information & demonstrates clinical judgment. 	1 2 3 4 5 6 7 Uncomfortable/ Lack Confidence Confident	
Interacting with Other Healthcare Professionals	 Establishes & maintains positive relationships Recognizes and can negotiate shared and overlapping responsibilities with others. Verbally present patient information to a team Demonstrate safe handover of care using oral, written, electronic communication 	1 2 3 4 5 6 7 Uncomfortable/ Lack Confidence Confident	

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 with your progress (documented) and review with your preceptor.
 - o 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)	Describe strategies for attaining the goal.		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 5: APPE Discussion Topics (also in this Google doc)

Practice Site Policy

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).

Maintaining Professional Competence and Lifelong Learning

- 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.

Patient Communication

- 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.

Medication Distribution Processes and Safety Practices (for sites with a dispensary)

- 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?

Health Promotion and Advocacy

- 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