



UNIVERSITY OF ALBERTA
FACULTY OF PHARMACY AND
PHARMACEUTICAL SCIENCES

PHARM 512 & 514

COURSE OUTLINE and SYLLABUS

Winter, Spring/Summer & Fall 2024

Pharm 512: PharmD Experiential Learning Part 2 – Acute Care
Pharm 514: PharmD Experiential Learning Part 4 – (when in an Acute Care Setting)

Course weight: *6

Course Coordinator: Candace Necyk
Office: Remote
E-mail: cnecyk@ualberta.ca

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

Office Hours: [by appointment]

Policy about course outlines can be found in
[Course Requirements, Evaluation Procedures and Grading](#)
of the University Calendar.

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Course Description

The student will be expected to demonstrate professional competencies in the provision of patient care. Direct patient care activities will include health assessment, therapeutic drug monitoring, provision of drug information, and contributing to patient care as part of an acute care setting. An acute care setting is defined as a service with acute care beds in a tertiary or secondary healthcare facility. The student is expected to fulfill the role of a pharmacist, accepting professional responsibility and accountability under the preceptor's guidance. The preceptor is expected to guide the student to enhance patient care skills, develop knowledge and navigate the practice setting.

Course Prerequisites

- Students must achieve satisfactory standing in PHARM 501 or 521, 502 or 522, 503 or 523 or 533, 504 or 524/534/544, or with Faculty consent.
- Students must be licensed by the Alberta College of Pharmacists (or by governing college from another Canadian jurisdiction for placements outside of Alberta) with authorization for injections.
- Placements may be cancelled or rescheduled if course prerequisites are not met by the deadlines specified in the [PharmD for Practicing Pharmacists Experiential Education Manual](#).
- Courses are restricted to PharmD for Practicing Pharmacists students

Other Course Requirements

For further information, refer to the [PharmD for Practicing Pharmacists Experiential Education Manual](#) or the University Calendar. Requirements must be uploaded into CORE ELMS or presented to the program administrator as outlined in the [Summary of Requirements](#) posted in eClass. Placements may be cancelled for those students who fail to provide the documentation outlined in the course requirements within 30 days of their placement start date. If this occurs, students will need to following usual course procedures when available to match to a new placement. *Note: link to online student CV can be posted to CORE ELMS after completion in Pharm 525.*

Required Textbooks

There are no required textbooks for this course.

Required Readings (Patient Care)

- [The Patient Care Process](#), Faculty of Pharmacy & Pharmaceutical Sciences and Pharmacy Services, Alberta Health Services, Version 2.0 June 2018
- Clinical Skills for Pharmacists (3rd edition) 2012, Chapter 6, [The Patient Case Presentation](#)
- Institute for Healthcare Improvement, [SBAR Toolkit](#)
- Jackson LD. Strategies pharmacy students can use to ensure success in an experiential placement. *CPJ* 2015; 148(6):308-13.

Required Readings (Learning Plan Development)

- [Writing Intended Learning Outcomes](#) Center for Teaching Excellence, University of Waterloo
- [Writing Measurable Learning Objectives](#). Teach Online, Arizona State University

Other Required Materials

Students are required to wear their Faculty identification at all times while they are in the practice environment. Students are required to have a lab coat and should be prepared to wear it while on

placement. Students may be requested to bring their personal laptops to the practice site for non-direct patient care activities. Additional requirements may be described in the Site Description in CORE.

Course Objectives

The course develops the following *knowledge, skills and attitudes*. Students will:

Knowledge

1. Integrate evidence with patient values, goals and data to address medication related issues and plan care.
2. Demonstrate development of knowledge required to practice as a pharmacist in the specific clinical context as described in the site description.

Skills

1. Effectively communicate non-verbally and verbally with health care providers, patients and caregivers/family.
2. Provide pharmaceutical care and manage patients' medication and health needs as part of an interprofessional team.
3. Exercise critical thinking, clinical judgment, and interprofessional collaboration to make informed decisions and solve problems.
4. Demonstrate the interprofessional competencies of communication, collaboration, role clarification and reflection to achieve common goals.
5. Participate in the education of patients and their caregivers/family, other healthcare workers, and pharmacy and other healthcare students, interns and residents.
6. Manage time and resources effectively.

Attitudes

1. Establish a collaborative, respectful, ethical relationship with the patient and the caregivers/family.
2. Demonstrate professional responsibility and accountability to the patient and interprofessional team.
3. Advocate for patients and the profession in the clinical context.
4. Engage in a reflective and self-directed practice.

Grading

Course is credit/no credit. Preceptors will recommend a grade on the Final Student Performance Assessment. To receive a grade of credit, students must satisfactorily complete all other course assignments. The course coordinator assigns the grade after reviewing the Final Student Performance Assessment and Assignment's.

Students who May Require Additional Support

Students should email the course coordinator following review of the Midpoint Student Performance Assessment if any outcomes are rated as **Not Meeting an Acceptable Level of Performance** or if performance concerns are identified and the student would like additional support to address these concerns.

Assessment Information

All assessments are completed using CORE. All assessments are posted prior to the start of the placement. Students are encouraged to review the assessment outcomes and criteria prior to the placement. It is

recommended that students and preceptors discuss these expectations at the end of week 1 and address any concerns at this time. Timelines for completion are outline in *Appendix 1*.

Course Schedule

These courses are offered in variable terms in the following blocks. Students must take this course once and it may be repeated as Pharm 514. Individual schedules are available in CORE. Students must register for the course in the term that the placement is scheduled to occur in accordance with University Policies outlined in the Calendar.

Winter	Block 1	January 8 to February 16
	Block 2	February 19 to March 29
Spring	Block 3	April 8 to May 17
	Block 4	May 20 to June 28
Summer	Block 5	July 1 to August 9
	Block 6	August 12 to September 20
Fall	Block 7	September 23 to November 1
	Block 8	November 4 to December 13

Please Note: students enrolled in PharmD seminar courses are expected to be away from the placement site to attend these sessions as applicable.

Activities

Patient Care

- Develop & maintain a professional, collaborative relationship with the patients and the caregivers/family
- Interview the patient or caregivers/family or other relevant healthcare providers to obtain necessary information
- Gather and organize the information required to determine the patient's medication related & other relevant health related needs
- Assess if the patient's medication needs are being met
- List and prioritize the patient's medical conditions and drug related problems
- Develop a care plan that prioritizes and addresses the patient's medication-therapy problems & wellness needs
- Advocate for the patient's health related needs
- Implement, evaluate and modify patient specific care plans
- Provide accurate and appropriate patient education, including patient self-management
- Communicate and document patient care activities
- Provide continuity of care

Interprofessional Collaboration

- Integrate into the patient care team and work collaboratively with the patient, family, care givers and other healthcare professionals to facilitate the management of the patient's health needs
 - Involve and refer to other interprofessional team members when outside of the scope of pharmacy.
 - Proactively communicate identified drug therapy issues, appropriate recommendations for care and monitoring plan to the multidisciplinary team members (and patient as appropriate)

Professional Practice and Education

- Prioritize patient care activities and other placement responsibilities
- Participate in the site's process for reporting and managing medication errors and adverse drug reactions
- Provide patient (and their caregivers/family) and team member education
- Respond to drug information requests
- Contribute to precepting junior pharmacy students in collaboration with the preceptor when applicable (see Near Peer Teaching Activities)

Near Peer Teaching Activities

Students are expected to temporarily assume the role of the coach or instructor different points throughout the placement when they are at the same site or on the same services as junior learners. Students will receive feedback and be evaluated on their precepting skills. The preceptor and student will collaborate to define the role based on the student's previous experience, stage in program and the clinical area. Please refer to the [Near Peer Teaching Guide](#) for additional information.

The student's role may include the following:

1. Assisting with orientation and clarifying expectations
2. Overseeing daily junior learner activities
3. Modeling, observing, coaching & debriefing patient care activities with junior learners
4. Reviewing & providing feedback on junior learner care plans, documentation and assignments
5. Providing feedback to junior learners on knowledge & skills
6. Developing and/or leading therapeutic or patient discussions, as determined with preceptor

Placement Assignments

1. Learning Plans – The student must complete a Learning Plan for each placement (Appendix 3). Through reflection and self-assessment, the student is expected to develop objectives that describe the skills and knowledge they plan develop during the placement. These learning objectives should be written using SMART format.
 - a. Post learning plan in CORE under Requirements, at least 1 week before the placement begins.
 - b. Ensure objective are well defined and linked to relevant placement activities and markers of progress by the end of week 1
 - c. Review and update the learning plan at the Mid Points assessment (submission not required).
 - d. Submitted to the course coordinator via e-Class at the end of each placement.
2. Clinical assignments – Students should complete 2 assignments per placement. The assignments may include presentations or writing assignments and should be of importance to the learner and/or the practice site. The preceptor and the student should negotiate the assignment details (Appendix 4). The student is responsible for completing the assignment to the expectations set with the preceptor.
 - a. Examples include: Presenting a case, developing an education session or tool (interdisciplinary or patient audience), delivering a journal club
3. Reflection in Clinical Practice – Each student must submit a written reflection based on the experience (300 word max) at the end of each placement via e-class.

Evaluation of Assignments

Rubrics to assess the students' presentation skills may be found in [eClass](#). The student must upload a copy of the preceptor's (or designate) assessment to eClass. *If there is no rubric available for an assignment negotiated between the preceptor and student (preceptor may reach out to course instructor for examples or help if needed), other evidence of assessment as deemed appropriate can be uploaded to eClass.*

Instructor Assumptions

Experiential education is most successful when learners and practice sites are engaged in learning with and from each other. In the placement environment, the students are expected to drive the learning process. They should take an active role in their learning by setting goals, seeking out learning opportunities and being self directed. Students should expect to spend time outside of the placement hours preparing for patient care activities and completing non direct patient care assignments. It is expected that students only take on extracurricular and employment commitments during placements if they are able to balance these without interfering with placement requirements and expectations. It is strongly recommended that students do not overcommit other responsibilities during placements. See Section 2 of the Experiential Education Manual for additional student responsibilities.

Preceptors

Preceptors in this program are selected based on their practice experience and enthusiasm for teaching. The majority of the preceptors are Clinical Preceptors or Clinical Academic Colleagues who demonstrate excellence in their practice. Students must be respectful of the preceptor and the work environment. ([Student Code of Behaviour](#)).

Course Policies and Procedures

All course policies and procedures are include in the [PharmD for Practicing Pharmacists Experiential Education Manual](#). Students must review this manual prior to the placement, as there are policies specific to this placement.

Additional Course Fees

Costs associated with the travel, accommodation and placement requirements are the responsibility of the student.

Technology Requirements

eClass

Students must routinely access eClass (powered by Moodle) to obtain additional course information. The Experiential Education Manual will be posted on eClass. **Failure to receive or read University communications sent via eClass announcements in a timely manner** does not absolve students and applicants from knowing, responding to, or complying with the content of that communication.

CORE ELMS

Placement schedules will posted in CORE. Students must also complete all placement and course evaluations in CORE. Contact phexed@ualberta.ca for assistance with CORE.

NetCare

Netcare access procedures will differ depending on the site. Non-AHS/Covenant sites will follow community practice procedures where the pharmacy student is responsible for initiating their NetCare access. Information on NetCare procedures is on the [website](#).

Personal Computers

Student may be asked to bring personal laptops to placement sites to use for non-patient care activities due to space limitations at the practice site.

Email Communications

Students are expected to frequently check their ualberta email accounts while enrolled in the program.

Failure to receive or read University communications sent to the University e-mail address in a timely manner does not absolve students and applicants from knowing, responding to or complying with the content of that communication.

Policy

University Policy

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 Code of Student Behaviour (online at www.governance.ualberta.ca) 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 [Course Requirements, Evaluation Procedures and Grading](#) of the University Calendar.

Faculty Policy

Technology Requirements and Information

It is required that students have access to a laptop or device equipped with a microphone and camera to participate in some class activities and/or take exams. Please ensure that you have access to reliable off-campus internet service or Wi-Fi and check that your computer meets our needs by comparing it to the information about system requirements [HERE](#). If exams are administered online, they will be proctored remotely using software called Secure Exam Monitor (SEM) that is available on eClass. Please read the guidelines and requirements for online exams with SEM [HERE](#).

Classroom technology will be used to record lectures. The classroom camera and mic are positioned to focus on the lecturer but may pick up the image and voice of those within close proximity or participating online.

In accordance with section 33(c) of the FOIP Act, the recording will be used to support teaching and learning and may be disclosed to those registered in the course. Any questions should be addressed with your instructor. Recordings should be available within 72 hours or sooner and posted for the duration of the term. If technology fails during an in-person delivery scenario and a recording is not captured, lectures will not be repeated.

While lectures will normally be delivered in person and recorded via Zoom or another recording platform, instructors may choose to deliver one or more specific sessions online; in this case, the chat functions and breakout rooms may be used as a part of teaching. When participating in any classroom Zoom activity, change your Zoom name to your full name. As with in-person learning, it is expected that everyone will participate in any online sessions in a respectful and professional manner. See the section on the Pharmacy Code of Professionalism below for more information about professionalism expectations.

Seminars and labs are opportunities to actively engage in learning and are not recorded. However, if circumstances result in a seminar being conducted online, you must have your camera on while participating in these sessions. If you have a reason that prohibits you from participating with your camera on, please contact your instructor to let them know via email. For your privacy, it is recommended that you remove identifiable and personal belongings from the space in which you are participating in video conferencing activities.

You are reminded to review the student code of professionalism below to understand basic expectations for participation in learning that also apply to online settings.

If you are unable to attend a seminar or lab in-person, you may be required to complete make-up work. Please contact your instructor to determine how missed sessions can be made up.

[Accessibility Resources and Accommodations](#)

Student accommodations are offered in accordance with the [Faculty of Pharmacy and Pharmaceutical Sciences \(FoPPS\) Essential Skills policy](#). Students requiring accommodations must seek to register with [Accessibility Resources](#) 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.

For students who write exams with accommodations at Accessibility Resources, please be cognizant of their deadlines and regulations. If you fail to meet these deadlines or follow the procedures, the result is most likely that Accessibility Resources will be unable to provide the necessary space and/or services you require. In these situations, the Faculty may not have the resources to provide some disability-related exam accommodations, and you will be invited to write your exams with peers during the allotted time in the assigned room.

[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.

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.

Appendix 1: Assessment Timelines

Assessment/Responsibility	Time Line
<p>Pre-Placement <i>Student responsibility:</i></p> <ul style="list-style-type: none"> • Upload learning plan into CORE ELMS under Requirements 	<p>1 week prior to placement</p>
<p>Midpoint Assessments <i>Preceptor responsibility:</i></p> <ul style="list-style-type: none"> • PHARM 511 or 512/513 Student Performance Assessment– Midpoint in CORE ELMS (complete and discuss with student) <p><i>Student responsibility:</i></p> <ul style="list-style-type: none"> • PHARM 511 or 512/513 Student Self-Assessment in CORE ELMS and discuss with preceptor • Student Evaluation of Preceptor and Site – Midpoint in CORE ELMS and discuss with preceptor • Update Learning Plan - complete the “Progress at Midpoint” column incorporate new goals or update/refine existing ones as appropriate and discuss with preceptor 	<p>End of 120 hours (week 3)</p>
<p>Final Assessment: <i>Preceptor Responsibility</i></p> <ul style="list-style-type: none"> • PHARM 511 or 512/513 Student Performance Assessment– Final in CORE ELMS and discuss with student <p><i>Student responsibility:</i></p> <ul style="list-style-type: none"> • Student Evaluation of Preceptor and Site – Final in CORE ELMS and discuss with the preceptor) • Post Course Evaluation of Preceptor and Practice Setting • Complete the “Progress at Final” column of the learning plan & upload learning plan into eClass • Upload copy of presentation evaluation into eClass • <i>(optional):</i> Nominate for Preceptor Recognition Program 	<p>End of 240 hours (week 6)</p>

Appendix 2: Assessment Outcomes

Outcome	Expected Behavior
Professional	
Displays professional behaviour.	<ul style="list-style-type: none"> • Demonstrates honesty, integrity, humility, commitment, altruism, compassion & respect towards others. • Does not engage in distracting behavior. • Maintains privacy and confidentiality • Maintains appropriate professional boundaries. • Is accessible, diligent, timely and reliable.
Demonstrates professional responsibility and accountability and practices to full scope.	<ul style="list-style-type: none"> • Takes responsibility and accountability for actions and inactions. • Manages time and prioritizes activities to balance patient care, workflow and course requirements. • Responds appropriately to ethical issues encountered in practice; preceptor support may be required initially. • Applies standards of practice, policies and codes that govern the profession.
Demonstrates initiative, self-directed learning and commitment to excellence in the practice of pharmacy.	<ul style="list-style-type: none"> • Takes initiative to learn, enhance skills and integrate knowledge. • Sets personal goals to develop professional skills knowledge and attitudes. • Accepts, incorporates and provides feedback in an effective and constructive manner.
Communicator	
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. • Listens, actively solicits and responds appropriately to ideas, opinions and feedback from others. • 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 placement.
Effectively communicates in writing.	<ul style="list-style-type: none"> • Provides appropriate level of detail and complexity, breadth and depth. • Uses appropriate tone for type of written communication and the intended audience. • Prepares timely, clear documentation that maximizes safety and understanding.
Care Provider	
Establishes and maintains professional relationships with patients/care givers.	<ul style="list-style-type: none"> • Engages patients independently. • Exhibits sensitivity, respect and empathy with patients and caregivers. • Responds to patient cues • Determines when it is ethically and professionally appropriate to involve or exclude caregivers and/or family members.
Gathers & interprets relevant, necessary information about a patient's health related needs	<ul style="list-style-type: none"> • Employs effective interviewing techniques and uses motivational interviewing when appropriate. • Employs a systematic process to gather data accurately based on the Patient care Process. • Gathers and interprets appropriate amount of information including relevant physical exam, lab test, point of care and diagnostic assessments • Clarifies and manages conflicting data

Outcome	Expected Behavior
Formulates an assessment of actual and potential issues in collaboration with the patient, caregivers and other health care team members; priorities issues to be addressed.	<ul style="list-style-type: none"> • Prioritizes medication-related needs based on urgency, patient preference and available resources. • Determines patient's medical condition(s) and determines those where medication needs are not currently being addressed. • Assess drug therapy for indication, efficacy, safety, and adherence.
Develops a care plan that addresses medication and health needs.	<ul style="list-style-type: none"> • Uses a systematic approach to develop care plans for patient with multiple comorbidities. • Addresses the breadth of issues in the case. • Establishes goals in collaboration with the patient that are relevant, realistic and timely. • Generates a realistic set of alternatives and thoroughly assesses the pros & cons. • Develops & defends a safe and effective plan, (recommendation, monitoring & follow-up). • Anticipates treatment failures and complications.
Implements the care plan.	<ul style="list-style-type: none"> • Implements specific actions for managing medication specific needs (e.g. dispense, adapt and prescribe). • Engages the patient or caregiver through education, empowerment & self-management.
Follow ups and evaluates the care plan.	<ul style="list-style-type: none"> • Evaluates data to assess safety, adherence as well as progress towards achieving goals of therapy. • Adjusts the care plan, if needed, in collaboration with the patient and healthcare team.
Scholar	
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(s) and knowledge gained in the placement to solve previously encounter problems.
Uses best available evidence to provide information and patient care.	<ul style="list-style-type: none"> • Uses a systematic approach to search for best available evidence • Analyzes and appraises health related research and literature • Provide an appropriate, accurate and practical answer or recommendation.
Integrates clinical judgment and critical thinking.	<ul style="list-style-type: none"> • 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 patient care decisions. • Anticipates the outcome of decisions and actions.
Collaborator	
Works effectively with members of the team including patients and their families, pharmacy colleagues and individuals from other professions	<ul style="list-style-type: none"> • Establishes and maintains positive relationships. • Negotiates overlapping & shared responsibilities with other team members. • Facilitates respectful, effective shared decision making • Provides care and services as agreed upon with the patient and team, and seeks new opportunity for collaboration. • Accepts leadership roles where appropriate.

Outcome	Expected Behavior
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"> • Proactively identifies when to complete patient handover and what information to communicate. • Demonstrates safe handover of all patient care issues or information using appropriate communication processes.
Advocate	
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 behaviors. • Provides patients with health and wellness strategies that include screening and educational services. • Promotes the impact of the pharmacist on patient outcomes and the healthcare team.
Near Peer Teaching (if Student in a Senior Learner Role)	
Demonstrates a commitment to precepting	<ul style="list-style-type: none"> • Engages in learning with and from junior learners • Applies effective precepting skills/techniques (i.e. modeling, coaching, clinical questioning) • Encourages the student to engage in self reflection
Provide feedback to enhance the junior student's learning & performance.	<ul style="list-style-type: none"> • Provides feedback that is specific and provides guidance on how to improve • Feedback is focused on the behavior and not the individual • Delivers feedback in a timely manner
Clearly sets expectations with the junior learner	<ul style="list-style-type: none"> • Acts a role model for clinical expectations • Define objectives or expectations for a teaching/learning activity • Adapts expectations of learners when required • Consistently accountable for meeting expectations

Appendix 3: Placement Learning Plans

Learning Plan – Pharm 511-14 PharmD for Practicing Pharmacists

Name:	Placement Site:	Block:	Course #
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Learning Goal <ul style="list-style-type: none"> indicate what knowledge or skill(s) you would like to obtain/develop in this practice setting. Use SMART format – objectives must be specific and measureable/observable by you and your preceptor. 	Resources & Strategies <ul style="list-style-type: none"> specify the activities, tasks, or deliverables you will do, participate in or complete in order to achieve your learning goal. 	Indicators of Progress <ul style="list-style-type: none"> how will you evaluate if you have achieved or are making progress towards the goal? examples include debriefing with preceptor, receiving feedback from team members, self-reflection or evaluation, etc 	Progress at MIDPOINT (Completed by student at 120 hr) Summary <ul style="list-style-type: none"> key accomplishments important next steps behaviours/skills/knowledge requiring further improvement 	Progress at FINAL (Completed by student at 240 hrs) Summary <ul style="list-style-type: none"> key accomplishments important next steps behaviours/skills/knowledge requiring further improvement
1.				
2.				
3.				
4.				
Previous Feedback: Strengths			Previous Feedback: Areas for improvement	

Learning Plan – Pharm 511-14
Post Professional Doctor of Pharmacy Program

Learning Objective	Related Activities	Indicators of Progress	Progress at MIDPOINT (Completed by student at 120 hr) Summary	Progress at FINAL (Completed by student at 240 hrs) Summary
<p>1. Demonstrate a consistent process for conducting and documenting a thorough initial assessment at patient admission by the midpoint of the rotation. Continue to refine these skills until the end of the rotation.</p>	<ul style="list-style-type: none"> • Timely medication reconciliation • Conducting physical assessment as appropriate • Developing/utilizing a care plan monitoring sheet or documentation system • Completing timely, specific, and concise documentation in patient chart 	<ul style="list-style-type: none"> • Self evaluate whether or not I have established a process and how comfortable I am with using this process • Review my assessment chart notes with my preceptor and seek feedback from them • Ask my preceptor to evaluation to evaluate my physical assessment techniques 	<ul style="list-style-type: none"> • With self-reflection, I feel I have established my process and time management to complete these tasks for each new admission. Improvements include more consistent use of the pharmacy monitoring sheets (sometimes I run out of time to update them at the end of the day, and rely on my memory the next day – this would be challenging with a full roster!) • I would like to further review some of my chart notes with my preceptor. My notes are quite comprehensive, but can lengthy. I would like to improve on efficiency & making my notes more succinct. 	<p>My preceptor and I reviewed some of my chart notes and I received feedback on my documentation style. In particular, my preceptor commented that she thinks that it is useful for me to include more detail in the “Data” portion of my notes, but that my “Assessment” and “Plan” portions can be briefer so that it is clear to other team members. I was also given the feedback to avoid using pharmacy jargon. I improved my efficiency in documenting and found that my process and workflow was well managed in the second half of the rotation.</p>

NOTE – This is an example of 1 goal only. Learning Plans will typically have several goals.

Appendix 4: Clinical Assignments

Journal Club (<http://ebm.bmj.com/content/12/3/66.2.full.pdf+html>)

1. Describe the patient case or problem that attracted you to this paper
2. Explain how you came across the study
3. Describe the study (i.e. methods, location, unique features)
4. Describe the research question (PICO)
5. Describe the importance/relevance/context of the study
6. Describe the methods by giving more detail on the question components
7. State your answers to the critical appraisal questions on validity
8. Summarize the results
9. Describe why the results can or cannot be applied to your patient, scenario or context
10. Conclude with your own decision about the utility of the study in your practice by resolving the case or question you began with
11. Prepare a 1 page summary of the outline as a handout

Case Presentation

(Adapted with permission from APPRC Education Manual, Pharmacy Services, Alberta Health Services)

The purpose of the case presentation is to demonstrate an integrated pharmaceutical care approach that reflects the student's evidence-based pharmacotherapy knowledge, literature evaluation skills and respect for unique patient factors that demand individualization of therapy. Students should select a patient case where their direct interaction allowed them to assess the patient's drug-related problems (DRPs) and where the intervention significantly affected, or potentially will affect, outcomes.

Every case presentation should include:

- a. Introduction/outline
- b. Presentation of patient case and data
- c. Listing of all DRPs and selection of main DRP
- d. Disease state background
- e. Goals of therapy
- f. Therapeutic alternatives
- g. Focused clinical question (PICO format) or Disease State Review
- h. Therapeutic recommendation
- i. Monitoring plan (efficacy/toxicity) and resolution of patient case

a. Introduction

Introduce the case briefly with remarks that explain 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 and learning objectives for the audience. If the case presentation components will be presented in a non-standard order, explain why that approach was chosen.

b. Patient Data

Present concise summary of the patient's history based on the Patient Care Process & How to Present a Patient (Suggested Readings). Summarizing and/or providing additional details where appropriate to establish the focus topic:

- summarize relevant medical and drug therapy history, prior to the events which are the focus of the case presentation
- summarize presenting symptoms, physical assessment, labs tests, diagnostic exams (e.g. chest x-ray) pertaining to the focus of the presentation
- describe the patient's drug therapy relating to the case presentation focus, including:
- indications for drug therapy

- specifics of the drug therapy regimen (e.g. dose, route, duration)
- describe the patient's progress related to the case presentation focus

c. Listing of all DRPs and Selection of Main DRP

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 your presentation. Please note that you should be familiar with all aspects of this patient's case and prepared to answer any questions related to any of the DRPs, regardless of whether it was the main focus of your presentation.

d. Disease State Background

Briefly review the disease state relevant to your main DRP. Your review should include pathophysiology, therapeutic alternatives and any therapeutic controversies relevant to your patient case.

e. Goals of Therapy

Describe the individualized goals of drug therapy for your 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 Or Syndrome/Disease state review

Focused Clinical question

- State the focused clinical question using the PICO format:

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 or exposure 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:

<u>P</u> atient	<u>I</u> ntervention	<u>C</u> omparator	<u>O</u> utcome
In a mechanically ventilated ICU patient...	...would administering IV ranitidine...	...compared to sucralfate given via NG tube...	...reduce clinically important bleeding?

- Describe the search strategy

Outline what search strategy was employed to answer your focused clinical question. You should include databases searched, key words used, any limits or mesh terminology applied and results of your search. The expectation is that a search of primary literature is performed.

- Review and summarize the evidence

Review each of the meta-analyses, studies or case reports you have selected as being relevant to answer your clinical question. Each review should include the patient population (number of patients, characteristics, inclusion/exclusion criteria), the intervention, results, and your interpretation of the validity of the study.

Summarize the evidence you have reviewed and explain the relevance to your patient where applicable.

Syndrome/Disease State Review

- Relate the patient case to the disease state by describing the following aspects of the disease:
 - Definition
 - Incidence
 - Prevalence
 - Etiology
 - Pathology
 - Major symptoms/Clinical presentation
 - Diagnostic laboratory tests
 - Prognosis: treated and untreated
- Describe recommended pharmacological and non-pharmacological management (Mechanism of action, pharmacokinetics, clinical indications, drug interactions, adverse drug reactions, dosing, monitoring parameters and patient information)

h. Therapeutic Recommendation

Outline the recommendation(s) you made for the patient to achieve the individualized therapeutic goals for the patient's main DRP. Explain why this was chosen as the best solution(s) for the patient incorporating best evidence principles and patient-specific factors.

i. Monitoring Plan and Resolution of Case

Describe monitoring parameters and activities that were/would be done to determine the outcome of any drug therapy recommendations made for the main DRP. Where possible, present the results of follow-up monitoring to illustrate the patient outcome.

Journal Club Rubric: PharmD Experiential Learning

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

Presentation Title: _____

Please circle the number that best describes the student's presentation in each of the following categories. This form is intended to support the overall assessment of the student's performance in the placement.

1 – Unacceptable Outcome measure clearly not achieved. Information substantially incomplete, missing, or at an inappropriate depth and/or breadth.	2 – Needs Improvement Outcome measure partially achieved. Some important information or skills incomplete, missing, or suboptimal depth and/or breadth.	3 – Acceptable Outcome measure generally achieved. Includes important information, but depth and/or breadth may be suboptimal for some aspects.	4 – Exceeds Expectations Outcome measure achieved in exemplary fashion. Exceptionally complete and succinct presentation at an appropriate depth & breadth	
Criterion (Ideal Exemplar)		Scale		
Background <ul style="list-style-type: none"> Clearly describes the case or problem in a focused clinical question & the reason for selecting the article (study hypothesis, gap in literature) Topic is relevant to pharmacy practice and the audience Defines relevant, action-orientated learning objectives 	1	2	3	4
Description of Article/Study <ul style="list-style-type: none"> States specific research question (PICO) Clearly describes the study's methodology (including type of study, relevant statistics & outstanding/limiting features) Summarizes the primary results & relevant secondary findings (includes relevant parameters, i.e. CI, p-values) 	1	2	3	4
Critical Appraisal <ul style="list-style-type: none"> Skillfully applies critical appraisal questions & appropriate tools Insightfully identifies the strengths & limitations of the study Correctly interprets impact of critical appraisal on the results 	1	2	3	4
Conclusion <ul style="list-style-type: none"> Presents the authors' conclusions Formulates & rationalizes individual conclusion based on appraisal Applies the study to the problem or patient case considering patient factors & values 	1	2	3	4
Presentation Skills <ul style="list-style-type: none"> Speaks clearly; uses appropriate pace & tone Uses language that is appropriate for the audience Consistently maintains eye contact with the audience Gestures & body language enhance the presentation Confident, poised & maintains focus throughout AV materials & handouts enhance the presentation Adheres to time limits (___ min) 	1	2	3	4
Questions <ul style="list-style-type: none"> Quickly grasps the intent of questions Answers are concise & complete 	1	2	3	4
Overall Impression	1	2	3	4

Case Presentation Rubric: PharmD Experiential Learning (Adapted from Pharm 505 Comprehensive Seminar Rubric)

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

Presentation Title: _____

Please circle the number that best describes the student's presentation in each of the following categories. This form is intended to support the overall assessment of the student's performance in the placement.

1 – Unable to rate Could not evaluate or missing.	2 – Needs Improvement Outcome measure partially achieved. Some important information or skills incomplete, missing, or suboptimal depth and/or breadth.	3 – Meets Expectations Outcome measure generally achieved. Includes important information, but depth and/or breadth may be suboptimal for some aspects.	4 –Exceeds Expectations Outcome measure achieved in exemplary fashion. Exceptionally complete and succinct information at an appropriate depth & breadth
Criterion (Ideal Exemplar)			Scale
Patient Data <ul style="list-style-type: none"> • Presents a concise summary of the patient's history • Presents only relevant data • Accurately interprets physical assessment, laboratory & diagnostic data 			1 2 3 4
Care Plan I <ul style="list-style-type: none"> • Accurately identifies primary drug related problems • Identifies and prioritizes other relevant DRPs/medical conditions with consideration to patient factors • Develops realistic, patient-centered goals of therapy 			1 2 3 4
Evidence Presentation (Focused Clinical Question Format) <ul style="list-style-type: none"> • States the focused clinical question • Review the most relevant supporting evidence & applies principles of EBM • Formulates an accurate summary based on a balance of the evidence & the context of the problem 			1 2 3 4
Disease State Presentation (Disease State Review Format) <ul style="list-style-type: none"> • Presents thorough summary of relevant facets of the disease • Summarizes the pharmacological & non pharmacological management • Adapts assessment and management strategies to the case 			
Care Plan II (for the primary DRP) <ul style="list-style-type: none"> • Weighs the risks and benefits of treatment choices • Recommends a course of action for the main drug related problem that is based on evidence & patient specific factors • Develops comprehensive monitoring plans 			1 2 3 4
Presentation Skills <ul style="list-style-type: none"> • Speaks clearly; uses appropriate pace & tone • Uses language that is appropriate for the audience • Gestures & body language enhance the presentation • Poised & maintains focus • AV materials & handouts enhance the presentation • Adheres to time limits (____ min) 			1 2 3 4
Development & Organization <ul style="list-style-type: none"> • Topic is relevant to the audience • Defines relevant, action-orientated learning objectives • Key points link to the objectives with minimal or no irrelevant information • Key points are presented in a logical, coherent way; uses transitions well • Content is appropriate for the audience 			1 2 3 4

Questions <ul style="list-style-type: none"> • Quickly grasps the intent of questions • Answers are concise & complete • Appropriately addresses questions beyond their scope of knowledge 	1	2	3	4
Overall Impression	1	2	3	4
Comments				

Presentation Evaluation Rubric

Adapted from Pharm 505: Long Seminar Assessment Rubric

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

Presentation Title: _____

Please circle the number that best describes the student's presentation in each of the following categories.

1 – Unacceptable Outcome measure clearly not achieved. Information substantially incomplete, missing, or at an inappropriate depth and/or breadth.	2 – Needs Improvement Outcome measure partially achieved. Some important information incomplete, missing, or suboptimal depth and/or breadth.	3 – Acceptable Outcome measure generally achieved. All important information included, but depth and/or breadth may be suboptimal for some aspects.	4 – Remarkable Outcome measure achieved in exemplary fashion. Exceptionally complete and succinct presentation at an appropriate depth & breadth.
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Criterion (Ideal Exemplar)	Scale			
Development & Organization				
<ul style="list-style-type: none"> • Topic is relevant to the audience • Defines relevant, action-orientated learning objectives • Selects the most relevant supporting evidence • Key points link to the objectives with minimal or no irrelevant information • Key points are presented in a logical, coherent way; uses transitions well • Content is appropriate for the audience 	1	2	3	4
Presentation Skills				
<ul style="list-style-type: none"> • Speaks clearly; uses appropriate pace & tone • Uses language that is appropriate for the audience • Consistently maintains eye contact with the audience • Gestures & body language enhance the presentation • Poised and maintains focus • AV materials & handouts enhance the presentation • Adheres to time limits 	1	2	3	4
Questions				
<ul style="list-style-type: none"> • Quickly grasps the intent of questions • Answers are concise & completes • Effectively answers questions to enhance presentation 	1	2	3	4
Total	/16			

Comments (constructive criticism of presentation content or skills with thoughtful suggestions of how to improve and/or exemplar(s) of content or skills that were particularly well done)

Teaching Session - Feedback Form

Presenter	Evaluator
Topic	
Content – was the subject matter relevant & appropriately tailored to the audience? Please comment if the learning objectives, scope, content and complexity were appropriate for the audience. How could the presenter improve?	
Style – was the information communicated effectively? Please describe how the format of the presentation facilitated audience learning? How could the presenter improve?	
Interaction- was effective interaction established with the members of the audience? Were learners adequately engaged? (either via the teaching methods, question/ answer portions, etc.) How could the presenter improve?	
Other Strengths & Weaknesses Please describe any highlights and/or areas of improvement for the student.	