

Advanced Pharmacy Practice Experiences Preceptor Quick Reference Guide 2024-25

4th Year Placements Pharm 554

Pharm 554 (Community Pharmacy)

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This guide is designed to provide you with links and quick information that will be helpful when precepting your student in an Advanced Pharmacy Practice Experience (4th year) course.

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Quick Links

- <u>Pharm 554/555/556/557 course information</u> (syllabus, modifiable calendar template, preceptor podcasts, preceptor quick reference guide)
- <u>Undergraduate Experiential Education Policy and Procedure Manual</u>
- AHS Resources (accessible for AHS employees):

Student Requirements

- Psychological Safety
- o <u>Diversity and Inclusion and Best Practice Guide: Microaggressions</u>

Reminders

1. Instructions on how to view the documents posted for student requirements. Students post their Resume and Learning Plan on CORE ELMS as a "Student Requirement". Login to CORE ELMS. Click on the drop-down menu to select your student. Scroll to "Student Requirement" Section. Click on the file button.

Miscellaneous Completed Completed File Requirements Expiration Alcohol and Drugs Policy and Procedure (AHS/Covenant) Student Resume **Learning Plans** Completed Requirements Completed File Expiration Pharm 554 Learning Plan (+ Skills Inventory) Pharm 555 Learning Plan (+ Skills Inventory) Pharm 556 Learning Plan (+ Skills Inventory) Pharm 557 Learning Plan

- 2. **Student Schedule:** Please try to provide your student with their planned placement schedule and hours of work as early as possible, ideally before their rotation starts. This will help the student plan appropriately and avoid conflicts with rotation schedules.
- 3. **Lab Facilitation by Students:** Students may participate in one Patient Care Skills Lab at the faculty across the placement. This provides them with an opportunity for teaching and providing feedback. If students sign up for a lab, they are to advise the preceptor which date they will be participating in this activity.

4. **Seminar Course**: The PharmD program requires students to be co-enrolled in a Seminar Course when they are in experiential courses. Students will be working in groups and are to select meeting times that will have no to minimal disruption to placement schedules. If students do plan to meet during placement time, it should only be with advanced planning and permission.

Planning for the Placement

- Review the applicable course syllabus and this quick reference guide.
- Watch the course overview podcast(s) here (scroll down to the correct course number and click on the appropriate links).
- Utilize the modifiable calendar available on the website for customization and organization of schedule/activities. This is in Word for customized use.
- Review the on-campus courses the students have taken in years 1-3 (Appendix 1).
- ONE week before the placement starts, review the student's first draft of their Learning Plan (posted in CORE ELMS under Student Requirements, located on your dashboard once you select your student) and provide feedback about their goals during orientation.
- Review <u>Appendix 2</u> which outlines clinical expectations for students providing care as they progress through their placements.

Placement Policies and Procedures

The following are policies that preceptors often have questions about. Further information regarding other policies can be found in the <u>Policy and Procedure Manual</u>. Preceptors are encouraged to contact the Faculty if they are unsure. **In general, time away from each placement that exceeds one day needs to be made up.**

- Absence Tracker: Students are required to use the Absence Tracking feature in CORE ELMS. Students must record any absence in CORE ELMS and the preceptor will receive an email noting the absence and be required to confirm or deny the request on-line.
- Statutory Holidays and Religious Observances: Should a statutory holiday fall within the timeframe of the placement, it is at the discretion of the preceptor to determine how to proceed. Students may be granted the stat day off, a day off in lieu of the stat, or include that day as a placement day. Students may also request time off for religious observances. Students and preceptors should contact the Course Coordinator in advance to determine the most appropriate course of action. Students will be expected to make up time missed if more than 1 day is missed during the rotation.
- Illness: In the case of illness, students are expected to notify the preceptor as soon as possible. Absences due to illness of 2 days or more may require an explanation and/or evidence such as a physician's note. Either the student or preceptor should contact the Faculty if the absence exceeds 2 days. Routine medical appointments are expected to occur on personal time. Time missed from the placement site due to illness that exceeds 1 day needs to be made up.
- Covid-Related Symptoms: Follow site policies regarding policies attending work while symptomatic or ill.
- Bereavement: In the case of death of a family member, students should notify their preceptor and the course coordinator to determine a course of action.
- Faculty Endorsed Activities: The Faculty supports student participation in activities such as lab facilitation (for one day per placement block), conferences and PDW if feasible with the placement schedule. Preceptors should be informed of these occurring, and the total time away from the placement should be reasonable. Time missed from the placement for approved professional developments activities that exceeds 1 day needs to be made up. The preceptor may speak to the course coordinator about an activity if they feel the standard of care to patients will be negatively affected by the absence of the student or it's anticipated that the time missed will impact the student's ability to complete the placement successfully. Some students may need to attend interviews for employment, residency programs, and admission to other programs. Any missed time will need to be made up if these activities occur on placement time. Where possible, students should schedule these during non-placement time.

- *Non-Endorsed Activities*: Activities ineligible for absence approval include: mock OSCE's, jurisprudence exams, travel and vacation. Changes to course dates to accommodate personal holidays are not permitted.
- *Placement Time Frame*: Modification to the placement schedule outside of the stated course timelines must be approved by the course coordinator in advance of the change.
- Workplace Injuries (including Needle Stick Injuries): If a student experiences an injury while on rotation, they must report the incident immediately to the preceptor and follow the placement site protocol. The Faculty must be advised immediately. There is further information in the <u>Policies and Procedures Manual</u>.
- Home Visits: Students are NOT permitted to conduct patient home visits without the direct supervision of a preceptor.
- Inappropriate Behaviours by Others: Discuss with students what they should do if faced with a difficult, abusive, discriminatory patient, staff person, or other health care professional including microaggressions. Bring to the preceptor's attention for appropriate action, debrief together, report and document, as well as contact faculty. Discuss with students the possibility of having a "safety signal" so that the student can gesture to their preceptor if they need assistance. For preceptors at AHS, there are AHS resources noted in Quick Links (page 2).

Resources for Students

Student Wellness is important. Students Services at the Faculty is readily available to support all students across their placements. If you feel your student is experiencing difficulty, please contact the Faculty (phexed@ualberta.ca) or the course coordinator.

Assessment Procedures and Information

- All assessments are completed and submitted through CORE ELMS.
- After logging in, the evaluation tab is in the green column on the left side of the screen.
- To allow for preparation by preceptors, assessments can be viewed in CORE ELMS at least 1 week prior to the start of the placement. Instructions are outlined in the Student Performance Assessment. At the end of the placement, you will assign a placement grade of Pass or Fail. At midpoint, a pass / fall grade is not assigned.
- Based on ratings assigned at the midpoint assessment, if a student has 4 or more "<u>Inconsistently Meeting Expectations</u>" or any ratings of "<u>Not or Rarely Meeting Expectations</u>", the course coordinator will reach out to offer support to both the student and the preceptor(s).
 - One strategy to support learning and feedback is to conduct a "supplemental" assessment after 6 weeks. This is intended to provide more diagnostic feedback to help the student work towards achieving the learning outcomes. The decision on whether this is needed would be determined in collaboration between the student, preceptor(s) and Course Coordinator.
- The criteria for each outcome is in CORE ELMS (on-line) and is also in the course syllabus.
- To support preceptors in best practice in assessment, the foundational preceptor skills online training includes a module on Student Performance Assessment (module 4), which can be accessed HERE. This takes 30-40 minutes to review, and we recommend this for all new preceptors, and it is a good refresher for more experienced preceptors.
- If you have difficulties accessing or submitting assessments, contact: phexed@ualberta.ca.

Grading Criteria

In order for the preceptor to provide a recommendation of "PASS" for the placement, for the skills and behaviours associated with each outcome for this placement, the student 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"

If a preceptor is concerned that a student is at risk of failing or if they intend to fail the student, they must contact the course coordinator as soon as possible so that they can be present during the final assessment session to support both the preceptor and the student.

Assessment Tips and Suggestions

- Periodically click on the "save" tab at the bottom of the form, to avoid a "time-out" and losing information entered.
- Assessments can be completed in 'real time' and saved as a draft to complete later; "save" before exiting or information will be lost.
- Once the completed assessment is submitted, it is visible to the student being assessed.
- Disregard the "section weight" and "minimum AVS score required" sections.
- All assessments must be discussed with the student. There is an acknowledgment at the end of each form that indicates the assessment has been discussed by the student and preceptor.
- Comment boxes should be used to provide evidence to support the grade given. While the rating score for each area of assessment is important, providing written commentary that supports your decision This is especially important when the student is not meeting expectations, or is inconsistently meeting expectations and requires improvement, as it provides specific details about concerns.
- Completion reminders are emailed by the Faculty.
- Faculty reviews all assessments at midpoint and final for completion and content.
- If you are co-precepting or using another precepting model such as peer-assisted learning, refer to the <u>Faculty</u> <u>Models of Precepting Webpage</u> for suggestions on completing assessments.

Summary of Assessments / Evaluations to Be Discussed between Preceptor and Student

(All assessments are completed and submitted through CORE ELMS)

Assessment/ Evaluation	Submission Timeframe	Submitted by	Comments
Student Self-Assessments (SSA) (completed twice)	Midpoint and end of placement	Student	 Midpoint should be submitted 2-days prior to the Midpoint Assessment discussions to allow time for preceptor review. For Final SSA, students should complete and be prepared to discuss at final assessment.
Student Performance Assessment MIDPOINT	End of week 4	Preceptor	 It takes about 30-60 minutes to complete. Includes identification and discussion of areas and skills that will be focussed on for balance of the placement.
Student Evaluation of Preceptor and Site – MIDPOINT	End of week 4	Student	Students must discuss with preceptor after discussion of the Student Performance Assessment
Student Performance Assessments – FINAL Recommend Final Placement Mark	End of placement	Preceptor	 It takes about 30-60 minutes to complete. Assessment of all learning outcomes. (same as midpoint) At the end of the assessment preceptors provide a <u>Placement Mark: PASS or FAIL</u> based on the overall grades assigned to each learning outcome.
Student Evaluation of Preceptor and Site – FINAL	End of week 8	Student	Students must discuss with preceptor after discussion of the Student Performance Assessment
Preceptor Evaluation of Course	After student has left placement site	Preceptor	Anonymous – option provided to have Faculty contact the preceptor

Pharm 554 - Community Practice - Updates for 2024/2025

- 1. Minor changes have been made to the course outcomes to provide an increased emphasis on interprofessional collaboration, advocacy for individuals outside of the healthcare environment and to broaden the student's demonstration of professional behaviours and attitudes.
- 2. No changes have been made to the course activities or assignments.

- 3. Continued request to have preceptors review organizational processes related to discrimination within the practice site with students (microaggressions and overt discrimination). To better prepare students for EDI-related practice issues, the Class of 2025 has been encouraged to listen to the ACP Spotify podcasts titled "Pharmacy Perspectives Creating Saf(er) Spaces.
- 4. The assessment rating scale has been updated based on feedback received from preceptors. Information on the rating scale is outlined in CORE ELMS, and the grading criteria to make the pass/fail decision on the placement portion of the course has been updated with the new rating scale language.

Pharm 554 - Community Practice - Course Activities Summary

COURSE ACTIVITIES

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The following are activities that students must complete during the placement to meet course objectives.

Provide Patient Care

During the placement, students will provide care to patients under the supervision of the preceptor(s). For all patient care encounters, students should provide patient care as deemed appropriate by the preceptor(s) and as outlined in the <u>Patient Care Process</u>.

All documentation of patient care activities must be written by the student and reviewed by the preceptor.

- Interview the patient or agent and / or other relevant healthcare providers to obtain necessary information to obtain necessary information and organize the information to determine medication and health related needs.
- Assess if the patient's medication and other health related needs are being met. (complete best possible medication history and / or review a medication reconciliation; review for indication, effectiveness, safety and adherence)
- List and prioritize the patient's medical conditions and drug related problems.
- Develop and implement a care plan that is based on best evidence and prioritizes and addresses the patient's drug therapy problems and wellness needs. Integrate assessment of patient readiness into the care plan (i.e. engage patients in shared decision-making, as appropriate).
- Take appropriate actions as required (i.e. prescribe under pharmacist supervision, order appropriate labs under pharmacist supervision, etc).
- Provide patient education (e.g. medication teaching, discharge counselling, etc.). Include education pertaining to patient self-management.
- Assist in patients' self-care (e.g. use of diagnostics, point-of-care testing and self-monitoring) as required
- Provide follow-up/continuity of care and modify care plans as needed; conduct follow-up (e.g. seamless care activities, modify plans as needed)
- Communicate and document patient care activities
 - The Pharmacy Care Plan Worksheet (posted in eClass) can be used or site-specific patient care plan formats may be used. At the start of the placement, it is suggested that preceptors and students discuss which format

is appropriate and comfortable for the student to use.

 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. Some sites may not be providing injections.

Designated Patient Care Activities

- Dispensing related
 - Students assess patients and their drug therapy for indication, safety, adherence and efficacy and document care for a minimum of 4 patients each day.
 - Across the placement, students should develop proficiency assessing all prescriptions as part of a systematic patient care process (including documentation).
- Acute care (includes Self-care)
 - Students provide patient care for a minimum of 20 patients with acute conditions and / or self-care needs such as infection, pain, allergic reaction, heartburn, etc.
 - The assessment by the student should be discussed with the preceptor and then documented on the patient's profile.
- Chronic disease management (CDM)
 - Students provide patient care for a minimum of 20 patients with chronic conditions (minimum of 4 different chronic diseases). To gain a greater understanding of an illness, it is suggested that students care for more than 1 patient with the same / similar condition to allow for a greater understanding of how conditions present in different patients and also see various stages or severity of diseases. As the placement progresses, students should care for patients with co-morbidities and increasing complexity.

Clinical Judgment: Review and Reflection

• For 3 patients, students will write a summary of the factors considered (i.e. specific variables, evidence) to formulate one of the recommendations made. The written summary should include the clinical issue, the patient assessment (including questions asked), clinical data retrieved and considered to make a decision. The student should review each written summary with the preceptor and discuss their rationale for the decision made and the outcome.

Medication Distribution

- Students participate in all stages of the distribution process and apply the standards of practice, laws, and regulations governing pharmacy practice. Includes prescription intake, review, processing, checking (under preceptor supervision) and counselling.
- By the end of the placement students should be able to fill and check at least 25 sequential prescriptions without errors.
- Students are expected to demonstrate competency in each stage of the distribution

process as well as with the laws and regulations associated with pharmacy practice.

Drug Information Requests

- Students will 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. (Drug Information Inquiry Record form is posted on eClass if a site specific form is not available).
- Students are expected to use appropriate resources and various levels of evidence; primary, secondary and tertiary references and should also use more than one resource for each question. All answers to be discussed with the preceptor.

Interprofessional Collaboration

- It is suggested that students use Inter-professional Student Shadowing cards developed by the Health Sciences Council (UofA) to guide expectations and discussion. Cards can be printed by going to:

 http://issuu.com/hserc/docs/student s guid to interprofessional shadowing/2
- It is important that the student thanks the health care professional for their time spent with the student. This can be in the method of choice by the student; verbal, email, card, etc.
- Prior to the IP visits, students will prepare an expectation of what they want to learn from the experience and review with the preceptor.
- During the IP visits, students will work collaboratively and demonstrate respect for the practice and knowledge of other health care professionals.
- After the IP visits, students will debrief their experience with their preceptor. Include strategies the preceptor uses to improve/promote collaboration and what barriers may affect professional collaboration.
- IP collaboration opportunities with a physician are preferred. If a physician opportunity is not available, alternatives include a PCN or homecare nurse, optometrists, physiotherapists, etc.
- Four 1/2-day visits or 2 full days are recommended. We ask that preceptors attempt to maximize the inter-professional opportunities for the student.

Health Promotion Presentation or Health Awareness Clinic

- Provide a minimum of one health promotion presentation for the public. (e.g. school; teachers or student classes, senior groups, disease advocacy groups, etc).
 - If an in person presentation is not possible, the student should prepare a recorded presentation that can be used by the pharmacy.

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• Provide a health promotion, screening or education clinic for the public on a disease state or focus for the pharmacy. (e.g. women's health, hypertension). This can be done in the community or the pharmacy.

Pharmacist for the Day

 Students, with supervision, should assume patient care and dispensing responsibilities as the sole pharmacist at the practice site. Minimum of a ½ day during week 7 of the placement is suggested and can be increased as deemed appropriate by the preceptor. The experience should be debriefed so the student can reflect on their strengths and challenges. The activity may be repeated if needed to better assess if the student is capable and confident regarding these responsibilities.

Preceptor Library Resources

- Students provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) now accessible to preceptors.
 - 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 <u>https://guides.library.ualberta.ca/pharmacy</u>

OPTIONAL: Practice Based Research

• Students may be involved with practice-based research during their placement. Information will be provided prior to the start of the placement. Student participation in research activities is voluntary.

Course Discussions Summary

The following are discussions that students must complete during the placement to meet course objectives.

Topic	✓
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 car 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 and how motivational interviewing and shared decision-making strategies should be use 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. 	ed .
 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 calculatio 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 meds, 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 Community Practice 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
 - o Utilization of online platforms ex. LinkedIn
 - Contributions to the profession
 - Volunteer and Service Work
 - o Professional memberships and involvement

Pharm 554 - Community Practice - Assignments

Assignment #1: Skills Inventory and Learning Plan

There is a short video (7 minutes) labeled "Podcast Part 2", posted HERE to help preceptors in their role guiding students.

Students are required to complete a Skills Inventory, reflect upon feedback they have received to-date, and develop a Learning Plan using the template provided in the syllabus. Once developed, the student will post it to Student Requirements in CORE ELMS for his/her preceptor (or co-preceptor team) for review 1-week prior to start of placement. In consultation with the preceptor(s), the student will refine and finalize the components of the Learning Plan by the end of week 1 of the placement. The revised plan should be posted in CORE ELMS. At midpoint and final, progress updates must be added (by student), and the newest version re-ported to CORE ELMS. This is a living document that should inform the student's personal learning goals. It can be updated to include new goals as needed (including areas that may require improvement after receiving feedback). The student should be taking ownership, and preceptors can support their students to ensure that goals are SMART and achievable in the practice setting.

<u>Preceptor feedback is important</u> to ensure that student's learning goals and objectives are appropriate and feasible. Also preceptors can reinforce the importance of self-directed learning and the expectation that students update their progress at midpoint and final in their learning plan is encouraged.

Key Student Responsibilities

- → Students develop 3 goals in areas that they feel require development. The Skills Inventory and feedback received to date should inform their creation.
 - ◆ Students determine strategies to achieve each, as well as indicators of progress that will inform if they are achieving their goals.
 - Students must post a *revised Learning* Plan when progress updates are added (at midpoint and final). The Skills Inventory does not need to be updated at midpoint and final, just the learning plan.
 - ◆ Areas indicated by the preceptor as "Inconsistently Meeting Expectations" or "Not or Rarely Meeting Expectations" on the midpoint Student Performance Assessment should be added by the student to their midpoint Learning Plan as learning goals. This is to ensure these areas will be addressed in the second half of the placement

Key Preceptor Responsibilities

- → Review the Skills Inventory, prior feedback and Learning Plan before the placement starts.
 - Provide feedback on the feasibility and appropriateness of the goals. Suggest modifications as needed.
 Goals need to align with what is feasible within the practice setting.
 - Review progress that student presents at midpoint and final; support and/or suggest strategies for enabling the student to achieve their goals.
 - ◆ Provide feedback on the student's self-assessment ratings for their goals.

Assignment #2: Medical Condition Diary

When providing care for patients with acute care, self-care and chronic diseases, students are to use the <u>Medical</u> <u>Condition Diary</u> Google form over the course of their rotation.

- As students provide care for patients (i.e. minimum of 20 acute care / self care cases and 20 chronic disease
 management cases), they are to complete the Google form to document the various conditions encountered when
 providing care to patients. This diary should help the student broaden their exposure to various medical conditions
 they encounter.
- Students are to review their Medical Condition Diary with their preceptor during their rotation so that the preceptor can help identify patients with conditions that the student has not been exposed to
 - Students will receive a copy of this form, via email, when they submit it.

NOTE: Students are not expected to provide care for ALL of the conditions listed in the "Medical Condition Diary". This is only a guide to assist students and preceptors when determining which patients are selected for care plans.

Assignment #3: Patient Care Assignment

Students need to provide the following for <u>4 patients</u> on the last day of the placement:

- The Pharmacy Care Plan Worksheet (posted in *eClass*) can be used or site specific Comprehensive Annual Care Plans (CACP) or Standard Medication Management Assessments (SMMA) can be submitted. It is suggested that preceptors and students discuss which format is appropriate and most comfortable for the student to use.
- ALL chronic medical conditions should be included in chronic disease management care plans as students should be
 caring for the patient holistically. If there is no DRP associated with a condition it should be stated in the care plan
 that the assessment resulted in no DRP for that specific condition but monitoring will be ongoing.
- Each assignment consists of:
 - o relevant background data as applicable (reason for consult, past medical history, BPMH, pertinent ROS, relevant labs/diagnostic information)
 - o care plan using the pharmacy care plan worksheet or site-specific format

- o corresponding clinical documentation as entered on the patient computer profile if applicable
- o written communication sent to another healthcare professional (if completed)

Assignment #4: Interprofessional Assignment

Students are to participate in four 1/2-day visits or 2 full days visits within a medical practice in collaboration with the physician or healthcare professional team. The student is expected to demonstrate their professional competencies with the focus on providing effective patient care. This includes development of clinical decision-making and judgment skills as well as gaining an understanding of the opportunities for inter-professional collaboration.

After completion of their visits with a healthcare professional, the student completes the Inter-Professional Survey Assignment on *eClass*. This assignment is due on the last day of the placement.

Assignment #5: Enhancement of Community Pharmacy Practice Assignment

In collaboration with the preceptor, the student will design and complete a project that will benefit the practice site. Examples include creating a resource or tool for practice, developing a patient brochure, and/or enhancing patient care processes and clinical services. Following completion of the project, the student completes the Enhancement Project Survey questions on *eClass* at the end of the placement. Questions include title/topic, stimulus/trigger, activities completed, potential and real outcomes and what was learned through the completion of the project.

Assignment #6: Continuous Quality Improvement Initiative

In collaboration with the preceptor, the student will use the ACP's "The Systems Approach to Quality Assurance for Pharmacy Practice: A Framework for Mitigating Risk" to complete a Failure Mode and Effects Analysis (FMEA) on one aspect of the patient care process within the practice site. This process does not need to be limited to dispensing activities within the practice site - it can be used to prospectively identify and correct processes within the pharmacy that could lead to patient safety incidents. Following completion of the initiative, the student completes the Continuous Quality Improvement Initiative Summary questions on eClass at the end of the placement. Questions include description of the activity being analyzed, identification of potential failure modes associated with the activity chosen, and a description of the redesigned process that could be implemented to address the potential failure modes. While the pharmacy may not implement the recommendations during the student's placement, it is expected that the student will create a well constructed plan that will address the failure modes identified.

APPENDIX 1: PharmD Courses

Below is a snapshot of courses within each year. For the calendar description for each course, please click <u>HERE</u>.

YEAR 1:

Fall Term	Winter Term
	Pharmaceutics Part 1
Principles of Medicinal Chemistry	Pharmacotherapy Part 1
	(Self-care/pulmonary)
Introduction to P	harmacology
Physiology & Anator	my Parts 1 and 2
Behavioural, Administrative, Social and Evidence	ce-Based Pharmacy Parts 1 and 2 (focus on
pharmacist's role, jurisprudence, drug use	control, using evidence in patient care)
Patient Care Skills Parts 1 and 2 (focus on communic	ation skills and the patient care process - patient
assessment, creating patient database, drug	g therapy workups, patient counselling)
Foundations of Colla	borative Practice

YEAR 2:

Fall	Winter
Pharmaceutics 2	Pharmacotherapy 3
	(Cardiovascular/Hematology)
Essentials of Pharmacokinetics	Pharmacotherapy 4
	(GI/Nutrition/Derm/Ophth)
Pharmacotherapy 2	Pharmacotherapy 5 (ID 1 - bacterial)
(Endocrine/Nephrology/Urology)	
Patient Care Skills 3 (focus on hospital	Patient Care Skills 4 (focus on hospital
scenarios, BPMH, patient interviewing)	scenarios, admission/discharge education,
	integrating therapeutics)
Behavioural, Administrative, Social and	Behavioural, Administrative, Social and
Evidence-Based Pharmacy 3 (focus on	Evidence-Based Pharmacy 4 (focus on
ethics/legal, appraising RCTs, health system)	appraising pharmacoepidemiological studies
	and practice management)

YEAR 3:

Fall	Winter
Pharmacotherapy 6 (Sexual/Reproductive	Pharmacotherapy 9 (Viral/Fungal/Protozoal
Health & MSK/Joint)	Infections, Immunization and Transplant)
Pharmacotherapy 7 (Neurology & Oncology)	Pharmacotherapy 10 (Various populations,
	integrated approach to patient care issues)
Pharmacotherapy 8 (Pain and Mental Health)	Toxicology: Drugs of Abuse and Related
	Pharmacology
Patient Care Skills 5 (focus on prescribing and	Patient Care Skills 6 (focus on critical thinking
complex patients)	and decision making to address complex drug
	therapy problems)
Behavioural, Administrative, Social and	Behavioural, Administrative, Social and
Evidence-Based Pharmacy 5 (focus on societal	Evidence-Based Pharmacy 6 (focus on
impacts of a pharmacist)	business planning, social theory and pharmacy
	practice research)

APPENDIX 2: Clinical Expectations for Care Provider Role for PharmD Students Across Y4 Experiential Courses: Guidance for Preceptors and Students

During 4th year, students in the PharmD program complete **three 8-week patient care experiences**, and **one 8-week mandatory elective/professional practice experience** that may or may not be in a patient care setting. The order these are completed will vary for each student. This table is to guide expectations from initial to final placement **for the Care Provider role**. Students are expected to improve across their final year placements and:

- Integrate/apply their knowledge using a systematic patient care process
- Increase proficiency, clinical judgment, confidence and complexity of care by the final placement.

GUIDING PRINCIPLES:

- 1. As each placement progresses, and similar patient scenarios are encountered, students are expected to incorporate knowledge/skills and provide care with more confidence. Initially, complex patients may require more preceptor support.
- 2. By the end of APPE 3/4, students should demonstrate competence to apply foundational knowledge and skills to effectively manage patients with common medication therapy problems.
- 3. Students are expected to embody and demonstrate the attitude and behaviours of a pharmacist, and integrate required skills to enable them to achieve the expectations of their care provider role (such as effective communication, demonstrating professionalism, etc).
- 4. Students are expected to identify areas for development across placements and incorporate this into their Learning Plans. Furthermore, they should come prepared and ready to learn (for example: read recommended materials, demonstrate initiative).

APPE (Advanced Pharmacy Practice Experience) 1 and 2

For assigned patients, students should:

- Gather data completely and accurately.
- Identify and prioritize DRPs/patient needs (may need support with prioritization),
- Recognize and integrate relevant patient-specific factors into pharmacotherapy work-up and care planning; support may be required, especially in weeks 1-4 of each placement.
- Develop an acceptable care plan (emphasis on process).
- Justify recommendations/decisions; clinical judgment will require support, especially initially, but should improve with experience
 - o Consult literature/references to support rationale.
- Implement care plan and undertake appropriate actions
 - o Includes adapting, initiating, renewing/continuing, discontinuing, referral, etc.
- Provide accurate and appropriate patient education for common conditions; may need support tailoring and/or researching information for less common conditions/medications.
- Document using DAP or consult format; may require coaching to ensure consistent with the practice; adapts appropriately to practice setting.
- Fulfill commitment for follow-up as appropriate.
- Present patients verbally in an acceptable manner; may need coaching with format and content; confidence builds over placement.
- Increase knowledge of disease states relevant to practice setting, and develop confidence applying knowledge.

APPE (Advanced Pharmacy Practice Experience) 3 and/or 4

Building upon the skills practiced in APPE 1 and 2, students should:

- Increase confidence and proficiency with patient care.
- Identify and prioritize commonly encountered DRPs.
- Prioritize patient needs appropriately
- Integrate patient specific factors into decision-making with minimal prompting
- Develop acceptable care plans (emphasis on quality and appropriateness of patient care recommendations).
- Defend recommendations with confidence.
- Demonstrate ability to make prescribing decisions, when appropriate.
- Provide accurate and complete patient education, identifying when additional information is required and proactively seeking this.
- Document information in an appropriate manner, with minimal assistance.
- Complete verbal patient presentations concisely and confidently.
- Readily identify knowledge gaps and seek to find answers, and review with a preceptor to verify understanding.

APPENDIX 3: Pharmacy Care Plan Worksheet with Checklist for Assessment

When using, think about the level of the student, where they are in APPE sequence and topics/skills covered in the curriculum-to-date. Students will likely require assistance for new/emerging therapeutics areas.

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Pharmacy Care Plan Worksheet with Checklist
MEDICAL CONDITIONS & MED- RELATED NEEDS: List and prioritize each medical condition first, followed by any DRPs identified for a given condition. Although some medical conditions may not have a DRP, a care plan is still necessary for ongoing patient monitoring. DRP Categories: unnecessary drug● drug therapy required● ineffective drug● dose too low● adverse drug reaction/interaction ●dose too high ●nonadherence
☐ Are all DRPs identified (based on 4 prime areas of indication, efficacy, safety , adherence)?
☐ If no, discuss with the student; probe to see if those missing can be determined.
□ Is rationale provided or discussed for DRPs (based on either patient or provider data)?
GOALS OF THERAPY: For each medical condition and/or DRP state desired goals of therapy/time frame.
Goals: cure, prevent, slow/stop progression, reduce/eliminate symptoms, normalize a lab value.
Consider realistic goals determined through patient discussion. Goals of therapy are measurable or observable parameters that are used to evaluate the efficacy
and safety of therapy.
□ Therapeutic goal/outcome(s) stated?
□ Patient goal incorporated (if appropriate)
ALTERNATIVES: Compare relevant drug and non-drug therapies that will produce desired goals. List the <u>pros</u> and <u>cons</u> of each therapy as well as rationale for
each being included.
Consider: Indication • Efficacy • Safety • Adherence • Cost/coverage
☐ Is an assessment of each DRP provided (factors considered to influence/determine a plan)? ☐ Are alternatives (with retionals for each) provided that would be considered assentable for the current level of student/s)?
☐ Are alternatives (with rationale for each) provided that would be considered acceptable for the current level of student(s)?
RECOMMENDATIONS/ PLAN: In collaboration with the patient and other health care providers, select the best alternative and implement the plan. Provide
a rationale for the chosen plan relative to the other alternatives considered.
Consider: Drugs: correct drug, formulation, route, dose, frequency, schedule, duration, medication management. Non-drug: non-drug measures, education,
patient referral.
□ Plan/recommendations are outlined
Includes:
□ dosing considerations
□ patient preferences
ACTIONS TAVEN
ACTIONS TAKEN Appropriate (acceptable action has been taken
□ Appropriate/acceptable action has been taken
MONITORING PLAN
MONITORING PARAMETERS: Determine the parameters for monitoring <u>efficacy</u> and <u>safety</u> for each therapy. Provide rationale for including this and how
you expect the parameter to change.
<u>Consider</u> : Clinical & laboratory parameters ● The degree of change ● The time frame
□ Monitoring plan present
Includes: □ safety □ efficacy □ frequency □ duration (if appropriate)
□ which healthcare provider will follow-up
FOLLOWING SECTION AND ADMINISTRATION OF THE SECTION
FOLLOW-UP: Determine who, how and when follow-up will occur.
□ Follow-up plan present
Includes:
□ who □ how □ when □ includes outcome (if possible)

Adapted with permission from the Division of Pharmacy Practice, Leslie Dan Faculty of Pharmacy, University of Toronto, 2011. Excerpt from Patient Care Process, Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta, 2018

APPENDIX 4 (Pharm 554 - Community Practice): Assignment and Assessment Schedule/Checklist

WEEK	STUDENT ACTIVITIES
1-4 weeks before placement starts	Students should ensure they have: Posted updated CV/resume in CORE ELMS Reviewed therapeutics as instructed by the preceptor or relevant to the practice area. Reviewed syllabus and required readings (in syllabus and eClass): be aware of course expectations, activities and assignments. Corresponding with the preceptor; start time, dress code, parking, pre-readings, etc. Provided their preceptor with their Netcare registration form. Started to develop a Learning Plan: post on CORE ELMS at least 1 week prior to placement. (include posting date on title)
Daily throughout the placement	 □ Provide Patient Care, review with preceptor. Patient Assessments: ○ Acute condition patients (e.g. pain, infection, GERD, etc). Minimum: 20 patients in 8 weeks. ○ Chronic medical condition patients. Minimum: 20 care plans in 8 weeks. ○ Complete Medical Condition Diary for all patient interactions. □ Prepare care plans for ALL patients using pharmacy care plan worksheet or practice specific forms; document care provided according to site processes. □ Complete medical and drug information requests. □ Participate in Patient Education; Rx and OTC counselling and follow -ups. □ Participate in Pharmacy Services; injections, Rx adaptations and renewals, emergency prescribing, prescribing (if pharmacist has authority) under direct supervision.
WEEK 1: Orientatio	n, Create Placement Schedule Dates:
Orientation	Review and discuss the Skills Inventory and Learning Plan. Review course objectives and activities Discuss preliminary schedule: Inter-Professional visits, clinics, presentations Discuss student/preceptor expectations and responsibilities. Discuss assessment processes and timelines (including informal/daily feedback) Tour of site Review site specific procedures (including emergency procedures in event of disturbances, fire, forgery, needle stick injury, robbery, etc.) 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 the possibility of having a "safety signal" so that you (the student) can gesture to your preceptor if you need assistance. Verify Netcare access

Daily Patient Care	 Discuss care plans, clinical documentation; format and process. Discuss and complete assessments related to new and refill Rxs. Discuss and establish expectations for the student around the dispensing processes within the pharmacy. Provide care for at least 1 Acute Condition patient (review indication, effectiveness, safety and adherence) each day. Discuss with the preceptor and document on the patient's profile. Schedule first Chronic Condition Patient Management review for week 2. Plan patient assessment; review profile, Netcare, discuss plan with preceptor.
Additional Activities to be incorporated and scheduled across the placement	 □ Discuss Continuous Quality Improvement activity - plan for the FMEA □ Schedule and arrange visits with MD or HCP (Inter-professional activity) □ Discuss/schedule the health promotion presentation or clinic day in the pharmacy. □ Discuss topic and scope of Community Pharmacy Practice Enhancement Project. □ Ensure APPE discussions are scheduled and completed during the rotation.
WEEK 2: Dates:	
Daily Patient Care	 □ Continue to complete assessments related to new and refill Rxs. □ Continue to participate in dispensing related activities. □ Continue Acute Condition assessments. □ Conduct a Chronic Condition Patient Management session for the first patient and schedule additional reviews. □ Consider a scenario for clinical judgment activity; review written summary.
WEEK 3: Dates:	
Daily Dationt Core	
Daily Patient Care	 Continue to complete assessments related to new and refill Rxs. Continue to participate in dispensing related activities. Continue Acute Condition assessments. Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews. Consider a scenario for clinical judgment assignment; review written summary.
Quality Improvement	 Continue to participate in dispensing related activities. Continue Acute Condition assessments. Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews.
Quality	 Continue to participate in dispensing related activities. Continue Acute Condition assessments. Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews. Consider a scenario for clinical judgment assignment; review written summary.
Quality Improvement	 Continue to participate in dispensing related activities. Continue Acute Condition assessments. Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews. Consider a scenario for clinical judgment assignment; review written summary.

	☐ If not completed, review the written Clinical Judgment Summary with the preceptor. At least 3 conversations involving clinical judgment must occur over the 8 week rotation.
Mid-Point Evaluations and Learning Plan	 □ Submit MID-POINT Student Self-Assessment 2 days prior to the Performance Assessment session to allow time for preceptor review. Discuss with the preceptor at the review session. □ Submit MID-POINT Student Performance Assessment (Completed by preceptor and reviewed with the student) □ Submit MID-POINT Student Evaluation of Preceptor and Site (Completed by student and reviewed with the preceptor) □ Update Learning Plan with progress. If any outcomes from the MID-POINT Student Performance Assessment are identified with a rating of "Needs Improvement," the student MUST update their Learning Plan on CORE ELMS with goals, strategies and plans related to these elements.
WEEK 5: Dates:	
Daily Patient Care	Continue to complete assessments related to new and refill Rxs. Continue to participate in dispensing related activities. Continue Acute Condition assessments (should have 10-12 completed by now). Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews (should have 10-12 completed by now). If applicable, provide follow up to care plans completed earlier in the rotation. Check-in Assess completion of course activities and APPE discussions (review schedule / adapt as needed
WEEK 6: Dates:	
Daily Patient Care	 Continue to complete assessments related to new and refill Rxs. Continue to participate in dispensing related activities. Continue Acute Condition assessments (should have 14-16 completed by now). Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews (should have 14-16 completed by now). If applicable, provide follow up to care plans completed earlier in the rotation.
Additional Course Activities	Complete Physician/Healthcare Inter-professional visits.
WEEK 7: Dates:	
Daily Patient Care	 Continue to complete assessments related to new and refill Rxs. Continue to participate in dispensing related activities. Continue Acute Condition assessments (should have 16-18 completed by now). Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews (should have 16-18 completed by now). If applicable, provide follow up to care plans completed earlier in the rotation.

Additional Course Activities	 Conduct "Pharmacist for the Day" activity early in the week. Debrief with the preceptor afterwards. Repeat later in the week as needed. Complete discussions with the preceptor: professionalism, communication, health promotion. Inter-professional practice, dispensing practices, medication safety, etc. Ensure minimum 3 Clinical Judgment summaries/discussions have been completed. Complete HCP inter-professional visit debrief with preceptor(s).
WEEK 8: Dates:	
Daily Patient Care	 Continue to complete assessments related to new and refill Rxs. Continue to participate in dispensing related activities. Continue Acute Condition assessments (minimum of 20). Conduct additional Chronic Condition Patient Management sessions and schedule additional reviews (minimum of 20). If applicable, provide follow up to care plans completed earlier in the rotation.
Ensure continuity of care and finalize activities and assignments	 Ensure continuity of care documentation is entered into patient profiles and conveyed to patients and/or pharmacy team members. Finalize FMEA review. Review activities, discussions and assignments to ensure all have been completed. Ensure completion of: minimum of 1 community presentation OR 1 health promotion activity/clinic in the pharmacy. Finalize Enhancement of Community Pharmacy Practice Project.
FINAL Assessments	Final Assessments (CORE ELMS) Submit FINAL Student Self-Assessment 2 days prior to the Performance Assessment session to allow time for preceptor review. Discuss with the preceptor at the review session. Submit FINAL Student Performance Assessment (Completed by preceptor and reviewed with the student) Submit FINAL Student Evaluation of Preceptor and Site (Completed by student and reviewed with the preceptor)
Posting of Assignments, Evaluations and Surveys	Assignments are to be posted by last day of placement Google Form: ensure Medical Condition Diary is complete / updated eClass: post FOUR care plans for the Chronic Disease Care Plan Assignment eClass: complete Enhancement of Community Pharmacy Practice Project Summary eClass: complete Continuous Quality Improvement Initiative Project Summary (i.e. FMEA project) eClass: complete Interprofessional Assignment survey CORE ELMS: Updated Learning Plan CORE ELMS: Post-Course Evaluation of Preceptor and Practice Setting (Note: Submit AFTER leaving site; due 48 hours after placement completion. This survey is NOT visible to the preceptor.) Submit Preceptor Recognition form (link emailed to student)

Preceptor to Complete Course Evaluation Preceptor to com	plete Preceptor Course Evaluation (in CORE ELMS)
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APPENDIX 5: Orientation Checklist for Student and Preceptor

This orientation checklist is to be used by both the student and preceptor to cover important topics at the beginning of the placement. Site specific items can be added to the list at the bottom.

LITE	the placement. Site specific items can be added to the list at the bottom.		
	Orientation Activity	٧	
1. F	Professional Discussions		
•	Preceptor's practice experience and interests		
•	Feedback and communication including preceptors preferred method of contact		
•	Student/preceptor responsibilities and expectations including preceptor review of		
	assignments, provision of feedback and student's submission of assignments or		
	documentation for review		
•	Practice expectations, patient confidentiality, dress and appearance policies		
•	Practice setting information regarding policies and procedures, including patient and staff		
	safety		
•	·		
	Information regarding professional and pharmacy activities		
•	Discuss student-prepared Skills Inventory, prior feedback and Learning Plan		
•	Discuss with students what they 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 with		
	students the possibility of having a "safety signal" so that the student can gesture to their		
	preceptor if they need assistance.		
•	Preceptor to review worksite specific occupational health and safety requirements and		
	responsibilities as it relates to workplace safety (refer to the Policy and Procedures Manual		
	for additional details).		
2. (Course Discussions; review course syllabus		
•	Objectives		
•	Activities: patient care, presentations, in-services, projects, etc.		
•	Assignments		
•	Assessment process: review forms (Student Performance Assessment in syllabus) and timing		
•	Discuss student/preceptor responsibilities and expectations		
•	Review preliminary student schedule; modifiable calendar available on website		
	Pharmacy Practice		
3. r			
	Practice specialties and characteristics		
•	Site resources and learning opportunities		
•	How will the student be involved in patient care?		
•	Provide samples of forms used, documentation policies and procedures		
4. F	Practice Environment		
•	Guided tour of practice environment		
•	Introduction to staff; include roles and how they will be involved with student experience		
•	Library, drug information and other resources		
	Student workspace		
•	Eating area, lockers, washrooms, etc.		
•	Lating area, lockers, washi ooms, etc.		
5.	Technology orientation		
•	Computer order entry systems		
•	Phone, fax, internet		
6. (6. Other		