

Advanced Pharmacy Practice Experiences Preceptor Quick Reference Guide 2024-25

4th Year Placements Pharm 555

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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)
- Undergraduate Experiential Education Policy and Procedure Manual
- AHS Resources (accessible for AHS employees):
 - o <u>Psychological Safety</u>
 - o Diversity and Inclusion and Best Practice Guide: Microaggressions

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.

Student Requirements

Miscellaneous				
Requirements	Completed	Completed On	File	Expiration
Alcohol and Drugs Policy and Procedure (AHS/Covenant)				
Student Resume			FILE 1	
Carning Plans				
Requirements	Completed	Completed On	File	Expiration
Pharm 554 Learning Plan (+ Skills Inventory)				
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Pharm 555 Learning Plan (+ Skills Inventory)				
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- 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) <u>here</u> (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 (<u>Appendix 1</u>).
- 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 (<u>phexed@ualberta.ca</u>) 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</u> <u>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 <u>course syllabus</u>.
- 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 <u>HERE</u>. 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: <u>phexed@ualberta.ca</u>.

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 Faculty Models of Precepting Webpage for suggestions on completing assessments.

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

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</u> <u>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

(All assessments are completed and submitted through CORE ELMS)

Pharm 555 - Acute Care/Hospital - 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. Clarification that a minimum of 20 care plans to be completed of which 4 will be submitted, otherwise no changes have been made to the course activities or assignments.
- 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 20254 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.

Pharm 555 - Acute Care/Hospital - Course Activities Summary

COURSE ACTIVITIES The following are activities students must complete during the placement to meet course objectives.	\checkmark			
 1. Provide Patient Care Under direct and indirect supervision, students will complete care plans for <u>a minimum of 20 patients</u>. Based on pharmacy practice procedures at the time of the placement, <u>patient care may be provided over phone or using other virtual methods</u>. Ideally, students will be developing care plans for ALL patients. The number of patients may be adjusted by the preceptor depending on patient acuity and complexity. In general, students should be caring for four patients each day by week 3 of the placement. (add new patients if patients are discharged). 				
 For all patient care encounters students should provide patient care as deemed appropriate by the preceptor(s) and outlined in the Patient Care Process Document. <u>Gather information</u>: Review the patient profile/chart and interview the patient or agent or other relevant healthcare providers to obtain necessary information and organize information to determine patient's medication related and other health-related needs. <u>Assess patient's medication needs</u>: review for indication, effectiveness, safety and adherence. <u>Develop and implement a care plan</u>: List and prioritize the patient's medical conditions and drug related problems, develop goals, recommendations and a monitoring plan. <u>Communicate and document</u> patient care activities. Administration of Drugs by Injection: Students who successfully completed the training and also have completed CPR Level C + First Aid, should practice administering drugs by injection. <i>Students must only administer injections under the direct supervision of a pharmacist authorized by ACP to administer drugs by injection</i>. 				
ALL care plans must be reviewed by the preceptor. The care plan worksheet and checklist are posted in eClass for download and use as required. Care plans should be done across the placement and not completed all at the end.				

appropriate by the preceptor. This may include observing/assisting a nurse caring for your patient, shadowing a dietician, social worker, physiotherapist or occupational therapist, etc.

- It is suggested that students use Interprofessional (IP) Student Shadowing cards to support this activity. It helps to guide expectations and the discussion. Cards can be printed at: <u>http://issuu.com/hserc/docs/student_s_guid_to_interprofessional_shadowing/2</u>
- ii. <u>Prior to the activity</u>, students will prepare an expectation of what they want to learn from the activity and review it with the preceptor.
- iii. After the activity, students will debrief with their preceptor to include what they learned and how this may help the pharmacist with collaborative care, as well as approaches other professionals use that are helpful.
- c. Students can verbally present a patient to a doctor or nurse who they are both mutually providing care (if possible). They should provide a brief patient overview (5-7 mins). Include reason for admission, current status, relevant labs, medications currently ordered, assessment and suggested recommendations (if any), and monitoring plan. Debrief with the preceptor about the benefits of this type of patient review in practice and how it can be used to resolve patient issues.

4. Patient Care Presentation (with inclusion of a Clinical Question)

Presentation can be delivered virtually or in-person (or both, if presenting to other sites along with a local site). During week 6-7, students should present at least 1 patient care experience to pharmacy staff and pharmacy students +/- healthcare team at site.

- A PowerPoint or similar presentation format is recommended. Format used by the practice site can be used as deemed appropriate by the preceptor.
- The student may be asked to provide a copy to the site. It is suggested that the student pdf and reference any clinical data used in their presentation.

Suggested presentation format and rubric: Appendix 4.

5. 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.
- Encouraged to provide responses to questions using the drug information inquiry form. The format, usually written and debriefed verbally, can be determined by preceptor and site preference. . Site-specific forms should be used if available. Drug Information Inquiry Record form is posted in *eClass*.
- Students are expected to use appropriate resources and various levels of evidence (primary, secondary and tertiary references), use more than 1 resource for each question and discuss answers with preceptor(s).

6. In-service Presentation

- Students will provide a minimum of 1 in-service presentation (i.e. overview of a therapeutic topic, journal club, etc.) to pharmacy staff and/or allied health care team (including allied health students). The presentation can be delivered virtually or in-person. Any written materials or resources created should be shared.
- •

7. Medication Distribution

- Students will participate in the distribution of medications or have a guided tour of the dispensary including a review of how medications are delivered to the patient after they are ordered.
- Students should re-review Chapter 45: Hospital Pharmacy Management (Recommended Resources).

8. 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: <u>http://tinyurl.com/lgppqay.</u>
- The link to the UofA pharmacy library home page is http://guides.library.ualberta.ca/pharmacy

Course Discussions Summary

Торіс	\checkmark
 Practice Site Policy Review policies / procedures related to equity, diversity and inclusiveness in the practice site. Discuss how the student and preceptor are to manage situations if they arise (patient / staff / other health care professionals / etc). 	
 Maintaining Professional Competence and Lifelong Learning Discuss with the preceptor how they maintain professional competence and the ACP Continuing Competence Program. Review the preceptor's previous or current ACP learning / implementation records and compare it to the student's placement Learning Plan. 	
 Patient Communication Discuss when and how motivational interviewing and shared decision-making strategies should be used with patients. Discuss communication strategies used by your preceptor(s) to build rapport with patients; include patients with challenging situations such as those who are very ill, have dementia or mental health concerns. 	
 Medication Distribution Processes and Safety Practices (for sites with a dispensary) Discuss documentation and reporting of medication errors/incidents, quality assurance processes and how the pharmacy keeps current with regulatory requirements. Discuss with the preceptor and/or dispensary staff components of the distribution system (e.g. unit dose, ward stock) and the scopes of practice of staff involved (e.g. order entry, filling, checking). Discuss error prevention strategies used to promote safe and accurate dispensing (e.g. dose calculation and checks, double/triple checks, use of technology, technician checking, etc.). Review incidence, tracking of errors and near misses. What is the process for reporting of medication errors or incidents at the site? What are the policies and processes involved to address safe medication practices (e.g. high alert 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 c	of practice to contribute to patient care.	
Health	Care Tea	m	
•	 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). 		
Profess	ional Ide	ntity	
•	Discuss	how the preceptor engages in the following and how you envision yourself to do so:	
	0	Networking opportunities	
	0	Utilization of online platforms ex. LinkedIn	
	0	Contributions to the profession	
	0	Volunteer and Service Work	
	0	Professional memberships and involvement	

Pharm 555 - Acute Care/Hospital - Assignments

Assignment #1: Skills Inventory and Learning Plan

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

Assignment #1: Skills Inventory & Learning Plan Assignment <i>The Learning Plan needs to be initiated <u>before the start of the placement</u>.</i>	Posting Instructions (CORE ELMS)
 in Appendix 3) The Learning Plan Discussions: Discuss with the preceptor during the first week of the placement; make adjustments if necessary based on preceptor feedback. Finalize by the end of the first week. Student to update at midpoint and final of placement to indicate progress made with the learning goals. Reviewed with your preceptor(s). Students add the outcomes that are identified as Inconsistently Meeting Expectations or Not or Rarely Meeting Expectations in the Midpoint Student Performance Assessment to the Midpoint Learning Plan to ensure they are focused on during the second half of the placement. Students are responsible to add <i>Strategies</i> and <i>Indicators of Progress</i> as a mechanism to take ownership for their learning 	At least 1 week prior to start of placement: Post in CORE ELMS as a Requirement under Pharm 555 Learning Plan The <u>updated</u> plans must be posted by the end of 1 st week, midpoint and at the final following review with the preceptor. 4 TOTAL POSTINGS; 1 before the placement and 3 during placement. Title each upload to reflect the posting
Assignment #2: Patient Care Assignment	date. Due Date (eClass)
 Students are expected to complete a minimum of 20 care plans of which four will be submitted. The following need to be provided for <u>4 patients</u> in a single document (start each patient on a new page): <u>Please include a short narrative above the documentation to orient reader to nature of the patient encounter.</u> Students will be developing care plans for ALL patients. Students should choose 4 care plans that best demonstrate their patient care skills for assignment postings. These should be completed across the placement (and not left until the end of the placement). Patient care documents must have all identifiers removed to ensure patient confidentiality. Assignments should be reviewed with the preceptor and modify as needed prior to posting. Each assignment care plan should include: relevant background data: reason for admission, HPI, past medical and medication history, BPMH, ROS (if applicable), relevant labs/diagnostic 	• Due by 11:59 PM on the last day of the placement

	information (if applicable).	
-	care plan using the pharmacy care plan worksheet or site-specific format.	
-	corresponding documentation as entered on the patient's chart/medical record.	

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 Pharmacology		
Physiology & Anatomy Parts 1 and 2		
Behavioural, Administrative, Social and Evidence-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 communication skills and the patient care process - patient		
assessment, creating patient database, drug therapy workups, patient counselling)		
Foundations of Collaborative 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	APPE (Advanced Pharmacy Practice Experience) 3 and/or 4	
For assigned patients, students should: Building upon the skills practiced in APPE 1 and 2, studen		
Gather data completely and accurately.	Increase confidence and proficiency with patient care.	
Identify and prioritize DRPs/patient needs (may need support with prioritization),	Identify and prioritize commonly encountered DRPs.	
Recognize and integrate relevant patient-specific factors into pharmacotherapy work-up and	Prioritize patient needs appropriately	
care planning; support may be required, especially in weeks 1-4 of each placement.	Integrate patient specific factors into decision-making with minimal	
Develop an acceptable care plan (emphasis on process).	prompting	
• Justify recommendations/decisions; clinical judgment will require support, especially initially,	Develop acceptable care plans (emphasis on quality and	
but should improve with experience	appropriateness of patient care recommendations).	
o Consult literature/references to support rationale.	 Defend recommendations with confidence. 	
Implement care plan and undertake appropriate actions	• Demonstrate ability to make prescribing decisions, when appropriate.	
o Includes adapting, initiating, renewing/continuing, discontinuing, referral, etc.	 Provide accurate and complete patient education, identifying when 	
• Provide accurate and appropriate patient education for common conditions; may need support	additional information is required and proactively seeking this.	
tailoring and/or researching information for less common conditions/medications.	Document information in an appropriate manner, with minimal	
• Document using DAP or consult format; may require coaching to ensure consistent with the	assistance.	
practice; adapts appropriately to practice setting.	 Complete verbal patient presentations concisely and confidently. 	
Fulfill commitment for follow-up as appropriate.	 Readily identify knowledge gaps and seek to find answers, and review 	
Present patients verbally in an acceptable manner; may need coaching with format and	with a preceptor to verify understanding.	
content; confidence builds over placement.		
Increase knowledge of disease states relevant to practice setting, and develop confidence		
applying knowledge.		

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.

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.

<u>Consider</u> 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 pros and cons of each therapy as well as rationale for each being included.

<u>Consider</u>: Indication • Efficacy • Safety • Adherence • Cost/coverage

□ Is an assessment of each DRP provided (factors considered to influence/determine a plan)?

□ 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.

<u>Consider</u>: <u>Druas</u>: correct drug, formulation, route, dose, frequency, schedule, duration, medication management. <u>Non-drua</u>: non-drug measures, education, patient referral.

Plan/recommendations are outlined

Includes:

dosing considerations
 patient preferences

ACTIONS 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:
a safety
b efficacy
b frequency
b duration (if appropriate)

which healthcare provider will follow-up

FOLLOW-UP: Determine <u>who</u>, <u>how</u> and <u>when</u> follow-up will occur.

Follow-up plan present

Includes:

🗆 who 🗆 how 🗆 when

n 🛛 🗆 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 555 - Acute Care/Hospital): Assignment and Assessment Schedule/Checklist

Week	Student Activities
1-4 weeks before placement starts	 Students should: Posted updated CV/resume in CORE ELMS Review therapeutics/pre-readings as instructed by the preceptor. Review Syllabus: activities and assignments, patient care process tools; including Course Required Reading list. 4 weeks prior: Correspond with the preceptor regarding parking, dress code, start time, etc. 1 week prior: Complete the Skills Inventory and develop Learning Plan; posted on CORE ELMS as a requirement at least 1 week prior to placement (include posting date on title). Preceptors: Determine if IT access, and any other required accesses, is established for your student.
Daily throughout the placement	 Provide Patient Care, review documentation with the preceptor. Depending on pandemic status, reviews can be done in person, via telephone or other virtual ways of communicating with patients. Prepare care plans and document care provided according to preceptor's practice Minimum 20 patients across the placement (provide care for a minimum of 4 patients concurrently by week 3). Answer drug information questions. Collaborate with the pharmacy team as a student pharmacist. Ensure activities, discussions and assignments are being completed (student is responsible for ensuring completion of all course requirements).
Week 1: Orienta	tion, Create Placement Schedule Date:
Orientation	 Review and discuss Learning Plan, prior feedback, course objectives, and activities. Discuss: student/preceptor expectations and responsibilities. assessment processes and timelines (include informal feedback/debrief). Develop a schedule with: in-service, presentations, patient care, discussions, interprofessional activity Develop a preliminary schedule. RECENT UPDATE Discuss with your preceptor what you should do if faced with a difficult, abusive, racist patient or staff person, including microaggressions. Bring to the preceptors attention for appropriate action, debrief together, report and document, as well as contact faculty. Discuss the possibility of having a "safety signal" so that you (the student) can gesture to your preceptor if you need assistance. Tour of practice site Log in to ensure Netcare access as well as other on-site systems.
Daily Patient Care and Documentation	 Discuss care plans, clinical documentation format and process Set up a routine process for providing daily care for assigned patients: rounding, patient conferences, medication reconciliations, discharge counseling, etc.

Assessments and Learning Plan	 END of Week 1: Discuss and debrief with the preceptor how things have gone, and what adjustments, if any, need to be made. Contact Course Coordinator if any concerns. Post revised Learning Plans (if revised) to reflect preceptor feedback. 				
Week 2: Date Week 3: Date					
Patient care activities and documentation	 Develop and discuss at least one Clinical Judgment written summary with preceptor (total of 3 to be completed across placement Plan interprofessional collaboration activities. Week 3: Have topic for case presentation and inservice selected and start developing presentations 				
Week 4: Date					
Patient Care and other course requirements	 Continue care plans and documentation; should have approximately half done. Review progress regarding other 2 Clinical Judgment written summaries with preceptor (if not yet completed). Review progress regarding Patient Care Presentation and In-service. Ensure consideration to which care plans will be submitted is given 				
4th Wednesday of the placement	Complete and submit midpoint Student Self-Assessment (CORE ELMS) by Wednesday to allow preceptor review prior to Student Performance Assessment.				
Mid-Point (end of Week 4)	 MIDPOINT Assessments: Student Performance Assessment-midpoint; completed by preceptor; review with student. Student Evaluation of Preceptor and Site and Student Self-Assessment; discuss both with preceptor. Update Learning Plan with progress as well as grades of Inconsistently Meeting Expectations or Not or Rarely Meeting Expectations from Student Performance Assessment and post the midpoint Learning Plan on CORE ELMS. 				
Week 5: Date					
Week 6: Date					
Patient Care and other course requirements	 Complete in-service and continue to develop a patient care presentation. Continue to provide patient care to assigned patients. Assess completion of course <u>discussions</u>. 				
Week 7: Date Week 8: Date					
Assignment and Assignment Completion	 Review activity table to ensure all activities and discussions have been done. Ensure Inter-Professional activities have been completed and debriefed. Conduct Patient Care Presentation (week 7). Ensure completion of discussions Submit 4 Care Plans in e-Class 				
Patient Care	Ensure continuity of care documentation is entered and conveyed to the care team.				

End of Week 8: Final Assessments (CORE ELMS), Source	 Final Student Performance Assessment and Placement Grade; review with the student. FINAL Student Evaluation of Preceptor and FINAL Self-Assessment; discuss with preceptor. Post-Course Preceptor Evaluation (non-anonymous). Not to be discussed with the preceptor. This evaluation is not viewable by the preceptor. Update and post the final Learning Plan in CORE ELMS Preceptor Awards and Anonymous Student Course Survey (links emailed to student)
Preceptor to Complete Course Evaluation	Preceptor to complete Preceptor Course Evaluation (in CORE ELMS)

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.

	Orientation Activity	
1. 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.	
٠	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	
3. F	Pharmacy Practice	
•	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.	
5. Technology orientation		
•	Computer order entry systems	
•	Phone, fax, internet	
	~	
6. Other		