Faculty of Pharmacy & Pharmaceutical Sciences

PHARM 511, 512, 513 & 514
SYLLABUS

Winter, Spring/Summer 2015/16

Pharm 511: PharmD Experiential Learning Part 1
Pharm 512: PharmD Experiential Learning Part 2
Pharm 513: PharmD Experiential Learning Part 3
Pharm 514: PharmD Elective

Course weight: *6 each

Course Coordinator: Sheila Walter
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E-mail: swalter@ualberta.ca
Office Hours: Monday to Thursday by appointment

Online course access: https://eclass.srv.ualberta.ca/portal/
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Pharmacy 511, Pharmacy 512, Pharmacy 513, and Pharmacy 514

Course Prerequisites (§143.3.3(3) and §231.210)
- Students must achieve satisfactory standing in PHARM 501, PHARM 502, PHARM 503, and PHARM 504 or with Faculty consent.
- Prior to completing PHARM 514, students must have completed the corresponding course (PHARM 511, 512 or 513) or have approval from the PharmD Program Director or designate.
- Students must be licensed by the Alberta College of Pharmacists as a clinical pharmacist and authorized to give injections.
- Placements may be cancelled or rescheduled if course prerequisites are not met by the deadlines specified in the PharmD for Practicing Pharmacists Experiential Education Manual.
- Courses are restricted to PharmD students

Other Course Requirements – For further information refer to the PharmD for Practicing Pharmacists Experiential Education Manual or the University Calendar at (§143.4.1). Requirements are monitored by the Faculty & must be provided to Student Services (MSB 2-55). All requirements must be provided at least 30 days before the start of the first placement. Students who fail to provide the documentation outlined in the course requirements, will not be able to begin their placements as scheduled. The requirements include:
- Police Information Check with Vulnerable Sector Check (original must be provided & copy retained).
- Proof of licensure
- Proof of authorization to give injections
- Proof of minimum of $2 million in personal liability insurance.
- Up-to-date immunization record
- Up-to-date N95 certification
- Standard or Emergency First-Aid and Level C CPR
- AHS Information & Privacy and IT Security & Compliance Training Module Certificate
- AHS Informed Consent for Disclosure of Personal Information form
- AHS Student Orientation Modules
- AHS WorkTrax

Required Textbooks
There are no required textbooks for this course.

Suggested Readings
- The Patient Care Process, Faculty of Pharmacy & Pharmaceutical Sciences and Pharmacy Services, Alberta Health Services, Version 1.3, August 2013
- Clinical Skills for Pharmacists (3rd edition) 2012, Chapter 6, The Patient Case Presentation
  o http://www.sciencedirect.com/science/article/pii/B9780323077385100067
- Institute for Innovation and Improvement, Safer Care, SBAR
- Please refer to the Placement Outlines to obtain suggested readings for the placement sites.
- Schwartz m, et al. Improving journal club presentations, or, I can present that paper in under
10 minutes. EMB 2007; 12:66-68.

Suggested Readings for Learning Plan Development:
- Resources for Competence Assessment under Continuing Competence on the Alberta College of Pharmacist’s website (may require login)
  - https://pharmacists.ab.ca/ccp/
  - https://pharmacists.ab.ca/ccp-requirements
- ACPE Information for Pharmacists: Continuing Professional Development (CPD)
  https://www.acpe-accredit.org/pharmacists/CPD.asp
  - CPD 101
  - Inventory of Learning Styles
  - Using Reflection to Create a Learning Plan

Other Required Materials
Students are required to wear their Faculty identification at all times while they are in the practice environment. Students are required to have a lab coat and should be prepared to wear it while on placement. Students may be requested to bring their personal laptops to the practice site for non-direct patient care activities. Additional requirements will be described in the Placement Outline

Additional Course Fees
Costs associated with the travel, accommodation or additional placement site requirements are the responsibility of the student.

Course Schedule
These courses run throughout the Winter and Spring/Summer terms. Placement assignments will be provided to the students in the fall term. Students will be placed based on placement availability and course requirements with consideration of student preferences. Students enrolled in this program are expected to travel within the province to complete their experiential education course requirements. Travel and accommodation expenses are the responsibility of the student. Students must register for the course in the term that the placement is scheduled to occur in accordance with University Policies outlined in the Calendar.

The faculty utilizes RxPreceptor to match students with placements for PHARM 511-514. Students must be RxPreceptor users. For additional information on scheduling policies and procedures, please refer to the PharmD for Practicing Pharmacist Experiential Education Manual Section 4. The site selector will open on September 7, 2015 and close in mid to late September (see Important Dates below). Students’ placement schedules will be available on October 2, 2015. Students must register for their experiential courses in Bear Tracks based on registration deadlines for the term that corresponds with the start date of the placement block.

<table>
<thead>
<tr>
<th>Block 1</th>
<th>January 4-February 12, 2016</th>
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<tbody>
<tr>
<td>Block 2</td>
<td>February 15-March 25, 2016</td>
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<td>Block 3</td>
<td>April 4-May 13, 2016</td>
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<td>Block 4</td>
<td>May 16-June 24, 2016</td>
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<td>Block 5</td>
<td>June 27-August 5, 2016</td>
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<td>Block 6</td>
<td>August 8-September 16, 2016</td>
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<td>Block 7</td>
<td>September 19-October 28, 2016</td>
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<tr>
<td>Block 8</td>
<td>October 31-December 9, 2016</td>
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Please Note: students enrolled in PHARM 505 are expected to be away from the placement site to attend PHARM 505 Seminars. Please refer to PHARM 505 syllabus for exact dates.
Important Dates
September 7, 2015 – Site selector in RxPreceptor will open for Pharm 511, 512, 513 & 514
September 17, 2015 – Site selector in RxPreceptor will close for Pharm 511, 512, 513 & 514
September 22, 2015 – Site selector in RxPreceptor will re-open for Pharm 514
September 24, 2015 – Site selector in RxPreceptor will close for Pharm 514
October 2, 2015 – Student schedules will be available in RxPreceptor.

Note. The above schedule and procedures in this course are subject to change in the event of extenuating circumstances.

Conflict of Interest Disclosure
Students must have an awareness of possible conflicts of interest when participating in the experiential education RxPreceptor matching process. Major conflicts of interest include a relationship that could negatively impact an ability to learn, cause bias, or hinder meaningful and/or constructive feedback. In the event that a student identifies a placement opportunity in RxPreceptor to which a major conflict of interest exists, the student must notify the course coordinator of the conflict of interest prior to September 17. The Director of Experiential Education (or designate) will review the disclosures.
PHARM 511 Course Description:
By performing patient care activities in a structured environment, this enables students to develop skills and knowledge required to optimize patient care and deliver pharmacy services. The student is expected to fulfill the role of a pharmacist, accepting professional responsibility and accountability under the preceptor’s guidance. The preceptor is expected to guide the student to enhance patient care skills, develop knowledge and navigate the practice setting.

The PharmD student will be expected to demonstrate professional competencies in the provision of patient care. Direct patient care activities will include health assessment, therapeutic drug monitoring, provision of drug information, and contributing to patient care as part of an interprofessional team. An interprofessional team is described as a group of health care providers from 2 or more disciplines who routinely collaborate by fulfilling specific roles to jointly assess patients and plan care. They collaborate with patients and families or caregivers to improve patient health outcomes.

PHARM 511 Course Objectives
The PHARM 511 course objectives and activities focus on demonstrating professional competencies within the context of an interprofessional patient care team. As such, the PharmD student is expected to demonstrate proficiencies in professionalism and patient care objectives as well as the skill to integrate and utilize these competencies within an established team. The patient care setting is variable as emphasis is placed on outcomes within a multidisciplinary approach to care and not the location.

By the end of the placement the student will be able to:
1. Establish a collaborative, respectful, ethical relationship with the patient.
2. Provide pharmaceutical care and mange patients’ medication and health needs as part of an interprofessional team.
3. Exercise critical thinking, clinical judgment, and interprofessional collaboration to make informed decisions and solve problems.
4. Integrate evidence with patient values, goals and data to resolve medication related issues and plan care.
5. Demonstrate the interprofessional competencies of communication, collaboration, role clarification and reflection to achieve common goals.
6. Effectively communicate non-verbally & verbally with a variety of audiences.
7. Manage time and resources effectively.
8. Demonstrate professional responsibility and accountability to the patient and interprofessional team.
10. Participate in the education of patients, other healthcare workers, and pharmacy and allied health care students, interns and residents.
11. Advocate for patients and the profession in the clinical context.
12. Demonstrate development of competence, knowledge, and skills within the clinical activities described in the Placement Outline. Students should refer to the Placement Outline for further details about placement activities.
PHARM 511 Activities and Assignments

Placement Activities

1. Provide patient care
   a. Develop & maintain a professional, collaborative relationship with the patient
   b. Interview the patient or agent or other relevant healthcare providers to obtain necessary information
   c. Gather and organize the information required to determine the patient's medication related & other relevant health related needs
   d. Assess if the patient’s medication needs are being met
   e. List and prioritize the patient’s medical conditions and drug related problems
   f. Develop a care plan that prioritizes and addresses the patient's medication-therapy problems & wellness needs
   g. Advocate for the patient’s health related needs
   h. Implement, evaluate and modify patient specific care plans
   i. Communicate and document patient care activities
   j. Provide continuity of care

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

3. Provide patient and team member education
4. Participate in meetings or rounds as appropriate
5. Attend relevant educational opportunities at the site
6. Respond to drug information requests
7. Participate in the site’s process for reporting and managing medication errors and adverse drug reactions
8. Contribute to precepting junior pharmacy students in collaboration with the preceptor when applicable (see Near Peer Teaching Activities)
9. Prioritize patient care activities and other placement responsibilities
10. Debrief and discuss placement activities with the preceptor

Near Peer Teaching Activities
PharmD students are expected to temporarily assume the role of the coach or instructor different points throughout the placement when they are at the same site or on the same services as B.Sc. Pharmacy students. PharmD students will receive feedback and be evaluated on their precepting skills. The preceptor and student will collaborate to define the role based on the student’s previous experience, stage in program and the clinical area. Please refer to the Near Peer Teaching Guide for additional information. The role should include:
   1. Assist with orientation and clarifying expectations
   2. Oversee daily junior learner activities
   3. Model, observe, coach & de brief patient care activities with junior learners
   4. Review & provide feedback on junior learner care plans, documentation and assignments
   5. Provide feedback to junior learners on knowledge & skills
   6. Develop and/or lead therapeutic or patient discussions, as determined
Placement Assignments

1. Learning Plans – The student must complete a Learning Plan for each placement (Appendix 1). The Learning Plan helps prepare the student for learning and assists in reflection and self-assessment. Through the process, the student is expected to develop objectives that describe the skills and knowledge they plan to focus on. These learning objectives should be written using SMART format. The placement Learning Plan should be:
   a. Provided to the preceptor, in draft form, one week before the placement begins.
   b. Refined and finalized during the Early Placement Assessment discussion. By the end of this discussion, each objective should be well defined and linked to relevant placement activities. The student should also determine markers of achieving or making progress towards their objectives.
   c. Reviewed and updated at subsequent assessment points to indicate progress.
   d. Uploaded into RxPreceptor at the end of the placement as a field encounter. The PharmD Course Coordinator may ask to view the learning plan at time.

2. Clinical assignments – Students should complete 2 assignments per placement. The assignments may include presentations or writing assignments and should be of importance to the team. The preceptor and the student should negotiate the assignment details. The student is responsible for completing the assignment to the expectations set with the preceptor. The assignment may be assessed using a rubric provided by the Faculty. The assignment quality will be factored into the overall placement mark. Students may be required to repeat or redo assignments that are not satisfactorily completed. The assignment should be added to RxPortfolio under the Professional Activities tab.
   a. Examples include: Presenting a case, developing an education session or tool (interdisciplinary or patient audience), delivering a journal club. Suggested formats for presentations are found in Appendix 2. Rubrics may be found in the RXpreceptor Document library under PharmD Resources.

Evaluation of Assignments
Rubrics have been developed to assess the students’ presentation skills and may be found the RxPreceptor Document Library. The student must upload a copy of the preceptor’s (or designate) assessment to RxPreceptor as a field encounter.

PHARM 511 Assessment
Students will be assessed on their ability to demonstrate the PHARM 511 placement outcomes. Preceptors will complete the Pharm 511 student assessments in Rx Preceptor using the rubric developed by the Experiential Education team (Appendix 3). For each outcome, the preceptor will provide a rating from the following scale:
   o Exceeds an Acceptable Level of Performance
   o Meets an Acceptable Level of Performance
   o Needs Improvement to Reach an Acceptable Level of Performance
   o Not Meeting an Acceptable Level of Performance
Preceptors will base their assessments on observation of the student, discussion and debriefing with the student, feedback from patients and other healthcare professionals as well as quality of placement assignments. Student must complete the Self-Assessment in RxPreceptor at the midpoint assessment. If the student is involved in Near Peer Teaching, the preceptor and the student must complete the Near Peer Teaching Evaluation in the relevant assessments.
Objectives to address any areas rated below expected at the midpoint should be added to the learning plan for the second half of the placement. Any area rated below expected (either Needs Improvement or Not Meeting an Acceptable Level of Performance) on a final evaluation must be incorporated into the objectives of the learning plans for subsequent placements. It is recommended that students carry forward items where previous preceptors have given constructive feedback. This process allows the student to track growth across all placements and gives new preceptors information to better support continuity of skill development.

**Assessment Points:** 40 hours (early placement assessment), 120 hours (midpoint), 240 hours (final).

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<thead>
<tr>
<th>Activity/Assessment/Responsibility</th>
<th>Weight</th>
<th>Placement Point (Due Date)</th>
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<tbody>
<tr>
<td><strong>Learning Plans Assignment:</strong></td>
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<td>Student responsibility:</td>
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<tr>
<td>• Provide preceptor with finalized placement proposal</td>
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<td><strong>Early Assessment:</strong></td>
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<td>Preceptor responsibility:</td>
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<tr>
<td>• PharmD Early Assessment of Student in RxPreceptor (preceptor to complete and discuss with student)</td>
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<tr>
<td>Student responsibility:</td>
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<tr>
<td>• PharmD Early Assessment of Preceptor in RxPreceptor (student to complete and discuss with preceptor)</td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
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<td>• Finalize learning objectives, related activities &amp; evidence of progress sections (student to complete &amp; discuss with preceptor)</td>
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<td><strong>Midpoint Assessments</strong></td>
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<td>Preceptor responsibility:</td>
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<tr>
<td>• PHARM 511 Student Performance Assessment – Midpoint in RxPreceptor (preceptor to complete and discuss with student)</td>
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<tr>
<td>Student responsibility:</td>
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<tr>
<td>• PHARM 511 Student Self Assessment in RxPreceptor (student to complete and provide to preceptor)</td>
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<tr>
<td>• Student Evaluation of Preceptor and Site – Midpoint in RxPreceptor (student to complete and discuss with the preceptor)</td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
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<tr>
<td>Student responsibility:</td>
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<tr>
<td>• Update Learning Plan - complete the “Progress at Midpoint” column incorporate new goals or update/refine existing ones as appropriate. Share with preceptor.</td>
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<td><strong>Final Assessment:</strong></td>
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<tr>
<td>Preceptor Responsibility</td>
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<tr>
<td>• PHARM 511 Student Performance Assessment – Final in RxPreceptor (preceptor to complete and discuss with student)</td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
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<td>Student Responsibility</td>
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<tr>
<td>• Complete the “Progress at Final” column of the learning plan. Share with preceptor</td>
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<td>• Upload learning plan into RxPreceptor as a field encounter.</td>
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<td>Placement Point (Due Date)</td>
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<tr>
<td><strong>Final Assessment</strong></td>
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<td><em>Student Responsibility:</em></td>
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<tr>
<td>Post Course Evaluation of Preceptor and Practice Setting (student to complete; does not need to be shared with the preceptor)</td>
<td>Required for course credit</td>
<td>Within 5 calendar days of the end of the placement</td>
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<tr>
<td><strong>Final Assessment</strong></td>
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<td><em>Student Responsibility:</em></td>
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<tr>
<td>Post Course Evaluation of Preceptor and Practice Setting (student to complete; does not need to be shared with the preceptor)</td>
<td>Required for course credit</td>
<td>Within 5 calendar days of the end of the placement</td>
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<tr>
<td><strong>Preceptor Nomination</strong></td>
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<tr>
<td><em>Student Responsibility (optional):</em></td>
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<tr>
<td>Consider preceptor nomination for Preceptor of the Year award or Preceptor Recognition Program. If fitting, complete the appropriate survey in RxPreceptor.</td>
<td>optional</td>
<td>After the end of the placement</td>
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</table>

**Students at Risk**

If at any time, the preceptor or student has a concern about the student’s performance or ability to pass the course, they should contact the Course Coordinator. The Course Coordinator must be contacted if any outcomes are rated as **Not Meeting an Acceptable Level of Performance** or more than 3 outcomes are rated **Needs Improvement to Reach an Acceptable Level of Performance** on the Midpoint Assessment of Student Performance.

**PHARM 511 Grading**

Course is credit/no credit. Preceptors will assign a placement grade and the Course Coordinator will assign a final course grade based on the preceptor assessments and the completion of all other course requirements.
PHARM 512 PharmD Experiential Learning Part 2: Acute Care Practice

Course Description
By performing patient care activities in a structured environment, this enables students to develop skills and knowledge required to optimize patient care and deliver pharmacy services. The student is expected to fulfill the role of a pharmacist, accepting professional responsibility and accountability under the preceptor’s guidance. The preceptor is expected to guide the student to enhance patient care skills, develop knowledge and navigate the practice setting.

The PharmD student will be expected to demonstrate professional competencies in the provision of patient care. Direct patient care activities will include health assessment, therapeutic drug monitoring, provision of drug information, and contributing to patient care in an acute care setting. An acute care setting is defined as a service with acute care beds in a tertiary or secondary health care facility.

PHARM 512 Course Objectives:
The PHARM 512 course objectives and activities describe the competencies required for patient care. As such, the PharmD student is expected to demonstrate proficiencies in professionalism and patient care objectives as they apply to the student’s acute care placement.

By the end of the placement the student will be able to:
1. Establish a collaborative, respectful, ethical relationship with the patient.
2. Provide pharmaceutical care and manage patients’ medication and health needs collaboratively and independently as appropriate.
3. Exercise critical thinking and clinical judgment to make informed decisions and solve problems.
4. Integrate evidence, patient data and related information to resolve medication related issues or respond to drug information requests.
5. Work collaboratively with in a team to achieve common goals.
6. Effectively communicate non-verbally & verbally with a variety of audiences.
7. Manage time and resources effectively.
8. Demonstrate professional autonomy, responsibility, and accountability.
10. Participate in the education of patients, other healthcare workers, and pharmacy and allied health care students, interns and residents.
11. Advocate for patients and the profession in the clinical context.
12. Demonstrate development of competence, knowledge, and skills within the clinical activities described in the Placement Outline. Students should refer to the Placement Outline for further detail about placement activities.

PHARM 512 Activities and Assignment
Placement Activities
1. Provide patient care
   a. Develop & maintain a professional, collaborative relationship with the patient
   b. Interview the patient or agent or other relevant healthcare providers to obtain necessary information
   c. Gather and organize the information required to determine the patient's medication related & other relevant health related needs
d. Assess if the patient’s medication needs are being met  
e. List and prioritize the patient’s medical conditions and drug related problems  
f. Develop a care plan that prioritizes and addresses the patient's medication-therapy 
   problems & wellness needs  
g. Advocate for the patient’s health related needs  
h. Implement, evaluate and modify patient specific care plans  
i. Communicate and document patient care activities  
j. Provide continuity of care 

2. Work collaboratively with the patient, family, care givers and other healthcare professionals 
   to facilitate the management of the patient's health needs 

3. Provide patient education  
4. Participate in meetings or rounds as appropriate  
5. Attend relevant educational opportunities at the site  
6. Respond to drug information requests  
7. Participate in the site’s process for reporting and managing medication errors and adverse 
   drug reactions  
8. Contribute to experiential learning for junior pharmacy students in collaboration with the 
   preceptor when applicable (see Near Peer Teaching Activities)  
9. Prioritize patient care activities and other placement responsibilities  
10. Debrief and discuss placement activities with the preceptor

Near Peer Teaching Activities  
PharmD students are expected to temporarily assume the role of coach or instructor when they are 
at the same site or on the same services as junior Pharmacy students. PharmD students will 
receive feedback and be evaluated on their precepting skills from the preceptor. The preceptor and 
student will collaborate to define the role based on the student’s previous experience, stage in 
program and the clinical area. Please refer to the Near Peer Teaching Guide for additional 
information. The role should include:  
1. Assist with orientation and clarifying expectations  
2. Oversee daily junior learner activities  
3. Model, observe, coach & debrief patient care activities with junior learners  
4. Review & provide feedback on junior learner care plans, documentation and placement 
   assignments  
5. Provide feedback to junior learners on knowledge & skills  
6. Develop and/or lead therapeutic or patient discussions, as determined

Placement Assignments  
1. Learning Plans – The student must complete a Learning Plan for each placement (Appendix 
   1). The Learning Plan helps prepare the student for learning and assists in reflection and 
   self-assessment. Through the process, the student is expected to develop objectives that 
   describe the skills and knowledge they plan to focus on. These learning objectives should 
   be written using SMART format. The placement Learning Plan should be:  
   a. Provided to the preceptor, in draft form, one week before the placement begins.  
   b. Refined and finalized during the Early Placement Assessment discussion. By the end 
      of this discussion, each objective should be well defined and linked to relevant 
      placement activities. The student should also determine markers of achieving or 
      making progress towards their objectives.  
   c. Reviewed and updated at subsequent assessment points to indicate progress.  
   d. Uploaded into RxPreceptor at the end of the placement as a field encounter. The
PharmD Course Coordinator may ask to view the learning plan at time.

2. Clinical assignments – Students should complete 2 assignments per placement. The assignments may include presentations or writing assignments and should be of importance to the team. The preceptor and the student should negotiate the assignment details. The student is responsible for completing the assignment to the expectations set with the preceptor. The assignment may be assessed using a rubric provided by the Faculty. The assignment quality will be factored into the overall placement mark. Students may be required to repeat or redo assignments that are not satisfactorily completed. The assignment should be added to RxPortfolio under the Professional Activities tab.
   a. Examples include: Presenting a case, developing an education session or tool (interdisciplinary or patient audience), delivering a journal club. Suggested formats for presentations are found in Appendix 2

**Evaluation of Assignments**
Rubrics have been developed to assess the students’ presentation skills and may be found in the RxPreceptor Document Library. The student must upload a copy of the preceptor’s (or designate) assessment to RxPreceptor as a field encounter.

**PHARM 512 Assessment**
Students will be assessed on their ability to demonstrate the PHARM 512 placement outcomes. Preceptors will complete the Pharm 512 student assessments in Rx Preceptor using the rubric developed by the Experiential Education team (Appendix 3). For each outcome, the preceptor will provide a rating from the following scale:
   - Exceeds an Acceptable Level of Performance
   - Meets an Acceptable Level of Performance
   - Needs Improvement to Reach an Acceptable Level of Performance
   - Not Meeting an Acceptable Level of Performance

Preceptors will base their assessments on observation of the student, discussion and debriefing with the student, feedback from patients and other healthcare professionals as well as quality of placement assignments. Student must complete the Self-Assessment in RxPreceptor at the midpoint assessment. If the student is involved in Near Peer Teaching, the preceptor and the student must complete the Near Peer Teaching Evaluation in the relevant assessments.

Objectives to address any areas rated below expected at the midpoint should be added to the learning plan for the second half of the placement. Any area rated below expected (either Needs Improvement or Not Meeting an Acceptable Level of Performance) on a final evaluation must be incorporated into the objectives of the learning plans for subsequent placements. It is recommended that students carry forward items where previous preceptors have given constructive feedback. This process allows the student to track growth across all placements and gives new preceptors information to better support continuity of skill development.

**Assessment Points:** 40 hours (early placement assessment), 120 hours (midpoint), 240 hours (final).

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<td></td>
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<tr>
<td>Student responsibility:</td>
<td>Required for course credit</td>
<td>To Preceptor 1 week prior to placement</td>
</tr>
<tr>
<td>• Provide preceptor with finalized placement proposal</td>
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<tr>
<td><strong>Early Assessment:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preceptor responsibility:</td>
<td>Required for course credit</td>
<td>End of 40 hours (week 1) of the placement</td>
</tr>
<tr>
<td>• PharmD Early Assessment of Student in RxPreceptor (preceptor to complete and discuss with student)</td>
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<tr>
<td>Student responsibility:</td>
<td></td>
<td></td>
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<tr>
<td>• PharmD Early Assessment of Preceptor in RxPreceptor (student to complete and discuss with preceptor)</td>
<td></td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
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<tr>
<td>Student responsibility:</td>
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<tr>
<td>• Finalize learning objectives, related activities &amp; evidence of progress sections (student to complete &amp; discuss with preceptor)</td>
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<tr>
<td><strong>Midpoint Assessments</strong></td>
<td></td>
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<tr>
<td>Preceptor responsibility:</td>
<td>Required for course credit</td>
<td>End of 120 hours (week 3)</td>
</tr>
<tr>
<td>• PHARM 512/13 Student Performance Assessment– Midpoint in RxPreceptor (preceptor to complete and discuss with student)</td>
<td></td>
<td></td>
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<tr>
<td>Student responsibility:</td>
<td></td>
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<tr>
<td>• PHARM 512/13 Student Self Assessment in RxPreceptor (student to complete and provide to preceptor)</td>
<td></td>
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<tr>
<td>• Student Evaluation of Preceptor and Site – Midpoint in RxPreceptor (student to complete and discuss with the preceptor)</td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
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<tr>
<td>Student responsibility:</td>
<td></td>
<td></td>
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<tr>
<td>• Update Learning Plan - complete the “Progress at Midpoint” column incorporate new goals or update/refine existing ones as appropriate. Share with preceptor.</td>
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<tr>
<td><strong>Final Assessment:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preceptor Responsibility</td>
<td>Required for course credit</td>
<td>End of 240 hours (week 6)</td>
</tr>
<tr>
<td>• PHARM 511 Student Performance Assessment– Final in RxPreceptor (preceptor to complete and discuss with student)</td>
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<td></td>
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<tr>
<td><strong>Learning Plan Assignment</strong></td>
<td></td>
<td></td>
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<tr>
<td>Student Responsibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Complete the “Progress at Final” column of the learning plan. Share with preceptor</td>
<td></td>
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</tr>
<tr>
<td>• Upload learning plan into RxPreceptor as a field encounter.</td>
<td></td>
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<tr>
<td><strong>Final Assessment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Responsibility</td>
<td>Required for course credit</td>
<td>Within 5 calendar days of the end of the placement</td>
</tr>
<tr>
<td>Post Course Evaluation of Preceptor and Practice Setting (student to complete; does not need to be shared with the preceptor)</td>
<td></td>
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<tr>
<td><strong>Final Assessment</strong></td>
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</tr>
<tr>
<td>Student Responsibility</td>
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<tr>
<td>Post Course Evaluation of Preceptor and Practice Setting (student to complete; does not need to be shared with the preceptor)</td>
<td></td>
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</tbody>
</table>
### Preceptor Nomination

**Student Responsibility (optional):**
- Consider preceptor nomination for Preceptor of the Year award or Preceptor Recognition Program. If fitting, complete the appropriate survey in RxPreceptor.

### Students at Risk

If at any time, the preceptor or student has a concern about the student’s performance or ability to pass the course, they should contact the Course Coordinator. The Course Coordinator must be contacted if any outcomes are rated as **Not Meeting an Acceptable Level of Performance** or more than 3 outcomes are rated **Needs Improvement to Reach an Acceptable Level of Performance** on the Midpoint Assessment of Student Performance.

### PHARM 512 Grading

Course is credit/no credit. Preceptors will assign a placement grade and the Course Coordinator will assign a final course grade based on the preceptor assessments and the completion of all other course requirements.
Pharmacy 513 PharmD Experiential Learning Part 3: Community/Ambulatory Practice

PHARM 513 Course Description
By performing patient care activities in a structured environment, this enables students to develop skills and knowledge required to optimize patient care and deliver pharmacy services. The student is expected to fulfill the role of a pharmacist, accepting professional responsibility and accountability under the preceptor’s guidance. The preceptor is expected to guide the student to enhance patient care skills, develop knowledge and navigate the practice setting.

The PharmD student will be expected to demonstrate professional competencies in the provision of patient care. Direct patient care activities will include health assessment, therapeutic drug monitoring, provision of drug information, and contributing to patient care in an ambulatory or community setting. An ambulatory or community setting is defined as a practice setting where patients seek care while residing in their primary residence. Placement settings include a retail pharmacy, primary care network, ambulatory practice, home care or long-term care facility.

PHARM 513 Course Objectives:
The PHARM 513 course objectives and activities describe the competencies required for patient care. As such, the PharmD student is expected to demonstrate proficiencies in professionalism and patient care objectives as they apply to the student’s ambulatory or community placement setting.

By the end of the placement the student will be able to:
1. Establish a collaborative, respectful, ethical relationship with the patient.
2. Provide pharmaceutical care and manage patients' medication and health needs collaboratively and independently as appropriate.
3. Exercise critical thinking and clinical judgment to make informed decisions and solve problems.
4. Integrate evidence, patient data and related information to resolve medication related issues or respond to drug information requests.
5. Work collaboratively with a team to achieve common goals.
6. Effectively communicate non-verbally & verbally with a variety of audiences.
7. Manage time and resources effectively.
8. Demonstrate professional autonomy, responsibility, and accountability.
10. Participate in the education of patients, other healthcare workers, and pharmacy and allied health care students, interns and residents.
11. Advocate for patients and the profession in the clinical context.
12. Demonstrate development of competence, knowledge, and skills within the clinical activities described in the Placement Outline. Students should refer to the Placement Outline for further detail about placement activities.

PHARM 513 Activities and Assignments
Placement Activities
1. Provide patient care
   a. Develop & maintain a professional, collaborative relationship with the patient
b. Interview the patient or agent or other relevant healthcare providers to obtain necessary information

c. Gather and organize the information required to determine the patient's medication related & other relevant health related needs

d. Assess if the patient's medication needs are being met

e. List and prioritize the patient's medical conditions and drug related problems

f. Develop a care plan that prioritizes and addresses the patient's medication-therapy problems & wellness needs

g. Advocate for the patient's health related needs

h. Implement, evaluate and modify patient specific care plans

i. Communicate and document patient care activities

j. Provide continuity of care.

2. Work collaboratively with the patient, family, care givers and other healthcare professionals to facilitate the management of the patient's health needs

3. Provide patient education

4. Participate in meetings or rounds as appropriate

5. Attend relevant educational opportunities at the site

6. Respond to drug information requests

7. Participate in the site's process for reporting and managing medication errors and adverse drug reactions

8. Assist in precepting other learners when applicable

9. Prioritize patient care activities and other placement responsibilities

10. Debrief and discuss placement activities with the preceptor

Placement Assignments

1. Learning Plans – The student must complete a Learning Plan for each placement (Appendix 1). The Learning Plan helps prepare the student for learning and assists in reflection and self-assessment. Through the process, the student is expected to develop objectives that describe the skills and knowledge they plan to focus on. These learning objectives should be written using SMART format. The placement Learning Plan should be:

   a. Provided to the preceptor, in draft form, one week before the placement begins.

   b. Refined and finalized during the Early Placement Assessment discussion. By the end of this discussion, each objective should be well defined and linked to relevant placement activities. The student should also determine markers of achieving or making progress towards their objectives.

   c. Reviewed and updated at subsequent assessment points to indicate progress.

   d. Uploaded into RxPreceptor at the end of the placement as a field encounter. The PharmD Course Coordinator may ask to view the learning plan at time.

2. Clinical assignments – Students should complete 2 assignments per placement. The assignments may include presentations or writing assignments and should be of importance to the team. The preceptor and the student should negotiate the assignment details. The student is responsible for completing the assignment to the expectations set with the preceptor. The assignment may be assessed using a rubric provided by the Faculty. The assignment quality will be factored into the overall placement mark. Students may be required to repeat or redo assignments that are not satisfactorily completed. The assignment should be added to RxPortfolio under the Professional Activities tab.

   a. Examples include: Presenting a case, developing an education session or tool
Evaluation of Assignments
Rubrics have been developed to assess the students’ presentation/assignment skills and may be found in e-Class or in the RxPreceptor Document Library. The student must upload a copy of the preceptor’s (or designate) assessment to RxPreceptor as a field encounter within 2 days.

PHARM 513 Assessment
Students will be assessed on their ability to demonstrate the PHARM 513 placement outcomes. Preceptors will complete the Pharm 513 student assessments in Rx Preceptor using the rubric developed by the Experiential Education team (Appendix 3). For each outcome, the preceptor will provide a rating from the following scale:
- Exceeds an Acceptable Level of Performance
- Meets an Acceptable Level of Performance
- Needs Improvement to Reach an Acceptable Level of Performance
- Not Meeting an Acceptable Level of Performance

Preceptors will base their assessments on observation of the student, discussion and debriefing with the student, feedback from patients and other healthcare professionals as well as quality of placement assignments. Student must complete the Self-Assessment in RxPreceptor at the midpoint assessment.

Objectives to address any areas rated below expected at the midpoint should be added to the learning plan for the second half of the placement. Any area rated below expected (either Needs Improvement or Not Meeting an Acceptable Level of Performance) on a final evaluation must be incorporated into the objectives of the learning plans for subsequent placements. It is recommended that students carry forward items where previous preceptors have given constructive feedback. This process allows the student to track growth across all placements and gives new preceptors information to better support continuity of skill development.

Assessment Points: 40 hours (early placement assessment), 120 hours (midpoint), 240 hours (final).
<table>
<thead>
<tr>
<th>Activity/Assessment/Responsibility</th>
<th>Weight</th>
<th>Placement Point (Due Date)</th>
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</thead>
<tbody>
<tr>
<td><strong>Midpoint Assessments</strong></td>
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<tr>
<td><em>Preceptor responsibility:</em></td>
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<tr>
<td>• PHARM 512/513 Student Performance Assessment– Midpoint in RxPreceptor (preceptor to complete and discuss with student)</td>
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<tr>
<td>• Update Learning Plan - complete the “Progress at Midpoint” column incorporate new goals or update/refine existing ones as appropriate. Share with preceptor.</td>
<td></td>
<td>End of 120 hours (week 3)</td>
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<td><em>Student Responsibility</em></td>
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<td><strong>Final Assessment</strong></td>
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<tr>
<td><em>Student Responsibility:</em></td>
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<td></td>
</tr>
<tr>
<td>Post Course Evaluation of Preceptor and Practice Setting (student to complete; does not need to be shared with the preceptor)</td>
<td></td>
<td>Within 5 calendar days of the end of the placement</td>
</tr>
<tr>
<td><strong>Preceptor Nomination</strong></td>
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<tr>
<td><em>Student Responsibility (optional):</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Consider preceptor nomination for Preceptor of the Year award or Preceptor Recognition Program. If fitting, complete the appropriate survey in RxPreceptor.</td>
<td></td>
<td>After the end of the placement</td>
</tr>
</tbody>
</table>

**Students at Risk**
If at any time, the preceptor or student has a concern about the student’s performance or ability to pass the course, they should contact the Course Coordinator. The Course Coordinator must be contacted if any outcomes are rated as **Not Meeting an Acceptable Level of Performance** or more than 3 outcomes are rated **Needs Improvement to Reach an Acceptable Level of Performance** on the Midpoint Assessment of Student Performance.

**PHARM 513 Grading**
Course is credit/no credit. Preceptors will assign a placement grade and the Course Coordinator will assign a final course grade based on the preceptor assessments and the completion of all other course requirements.
PHARM 514 Course Description
Students will complete an experiential placement in a patient care practice setting as outlined in PHARM 511, 512 or 513.

PHARM 514 Assessment
Students will be assessed on their ability to demonstrate the placement outcomes of the originally assigned course number (PHARM 511-513). Preceptors will complete the appropriate course specific student assessments in Rx Preceptor using the rubrics developed by the Experiential Education team. Preceptors will base their assessments on observation of the student, discussion and debriefing with the student, feedback from patients and other healthcare professionals as well as quality of placement assignments.

Assessment Points:
- 40 hours (early placement assessment), 120 hours (midpoint), 240 hours (final).
- Refer to the assessment summary for the originally assigned course number (PHARM 511-513) for further details.

PHARM 514 Grading
Course is credit/no credit. Preceptors will assign a placement grade and the Course Coordinator will assign a final course grade based on the preceptor assessments and the completion of all other course requirements.
Pharmacy 511, 512, 513, and 514 Policies and Procedures

Instructor Assumptions
Experiential education is most successful when learners and practice sites are engaged in learning with and from each other. In the placement environment, the students are expected to drive the learning process. They should take an active role in their learning by setting goals, seeking out learning opportunities and being self-directed. Students should expect to spend time outside of the placement hours preparing for patient care activities and completing non-direct patient care assignments. See Section 2 of the Experiential Education Manual for additional student responsibilities.

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

Students are invited to participate in the nomination process for the Preceptor of the Year award and Preceptor Recognition Program. Information regarding these awards can be found in the Experiential Education Manual.

Experiential Education Policies
Please refer to the PharmD for Practicing Pharmacists Experiential Education Manual for experiential education policies.

Technology Requirements

eClass
Students must routinely access eClass (powered by Moodle) to obtain course information. The Experiential Education Manual will be posted on eClass. Supplementary material includes assignment descriptions, checklists or other resources.

RxPreceptor
Students must access RxPreceptor to view placement availability and placement descriptions. They must adhere to the matching deadlines in this document to ensure that their preferences are accounted for. Failure to adhere to these procedures and deadlines will impact the student’s selection of placements. Student must also complete all relevant placement and course evaluations in RxPreceptor.

RxPortfolio
Students should be contributing to and updating their e-portfolios as they complete their experiential education courses.

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

U of A Communications Policy
The University has approved an Electronic Communications Policy for Students and Applicants. When appropriate, the University, including course instructors, will send you important information.
through e-mail. As a result, you will receive this information in a timely way and can follow-up promptly. Please keep in mind these key points regarding electronic communications relating to this course:

- Check your e-mail at least once a week.
- All students and applicants are assigned a University of Alberta Campus Computing ID (CCID) with e-mail privileges. The ‘CCID@ualberta.ca’ e-mail address originally assigned by the University is the e-mail address to which communications will be sent relating to this course.
- You must advise Academic Information and Communication Technologies (AICT) immediately of any problems encountered with University e-mail accounts by contacting the Help Desk at www.ualberta.ca/HELP or by calling 780.492.9400.
- It is recommended that you do not forward your University directed e-mail to other non-University e-mail addresses such as those provided by Hotmail, Yahoo, Shaw, TELUS, etc. You could miss important communications that may affect your University career.
- When emailing a course instructor, include PHARM 511, 512, 513 or 514 in the subject line to ensure the screening process does not delete your email. Please use your U of A email address.

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

See the full policy at [http://www.registrar.ualberta.ca/ecommunications](http://www.registrar.ualberta.ca/ecommunications)

**Specialized Support and Disability Services (SSDS)**

Students registered with Specialized Support and Disability Services (SSDS) who will be requiring accommodations in the practice environment, are required to provide a "Letter of Introduction".

**Equality, Equity and Respect**

The Faculty of Pharmacy and Pharmaceutical Sciences is committed to providing an environment of equality and respect for all people within the university community, and to educating faculty, staff and students in developing teaching and learning contexts that are welcoming to all. The faculty recommends that staff and students use inclusive language to create classroom atmosphere in which students' experiences and views are treated with equal respect and value in relation to their gender, racial background, and sexual orientation and ethnic backgrounds. In order to create a thoughtful and respectful community, you are encouraged to use gender-neutral or gender-inclusive language and to become more sensitive to the impact of devaluing language.

**Failed Experiential Education Placements (§143.3.3(3e) & (4))**

Students receive a grade of no credit, placed on Academic Warning and considered to be in Conditional Standing. The student must retake the course involved the next time it is offered. The student must meet with the Course Coordinator to discuss the failed placement, and opportunities to retake the course. Failure of a placement will extend the duration of a student’s program and may result in changes to the student’s placement schedule and convocation date. Failure to pass the course on the second attempt will result in withdrawal of the student from the program.
# Appendix 1: Placement Learning Plan Template

## Learning Plan – Pharm 511-14
PharmD for Practicing Pharmacists

<table>
<thead>
<tr>
<th>Name:</th>
<th>Placement Site:</th>
<th>Block:</th>
<th>Course #</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Learning Goal</th>
<th>Related Activities</th>
<th>Indicators of Progress</th>
<th>Progress at MIDPOINT (Completed by student at 120 hr) Summary</th>
<th>Progress at FINAL (Completed by student at 240 hrs) Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• specify the activities you will do in order to practice and/or learn to achieve this goal</td>
<td>• describe the indicators that will inform you of your progress or achievement • examples include debriefing with preceptor, receiving feedback from team members, self reflection or evaluation, etc</td>
<td>• key accomplishments • important next steps behaviours/skills/knowledge requiring further improvement</td>
<td>• key accomplishments • important next steps behaviours/skills/knowledge requiring further improvement</td>
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<td>1.</td>
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</tbody>
</table>
### Learning Plan – Pharm 511-14
Post Professional Doctor of Pharmacy Program

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Related Activities</th>
<th>Indicators of Progress</th>
<th>Progress at MIDPOINT (Completed by student at 120 hr)</th>
<th>Progress at FINAL (Completed by student at 240 hrs)</th>
</tr>
</thead>
</table>
| 1. Demonstrate a consistent process for conducting and documenting a thorough initial assessment at patient admission by the midpoint of the rotation. Continue to refine these skills until the end of the rotation. | • Timely medication reconciliation  
• Conducting physical assessment as appropriate  
• Developing/utilizing a care plan monitoring sheet or documentation system  
Completing timely, specific, and concise documentation in patient chart | • Self evaluate whether or not I have established a process and how comfortable I am with using this process  
• Review my assessment chart notes with my preceptor and seek feedback from them  
Ask my preceptor to evaluation to evaluate my physical assessment techniques | • With self-reflection, I feel I have established my process and time management to complete these tasks for each new admission. Improvements include more consistent use of the pharmacy monitoring sheets (sometimes I run out of time to update them at the end of the day, and rely on my memory the next day – this would be challenging with a full roster!)  
• I would like to further review some of my chart notes with my preceptor. My notes are quite comprehensive, but can lengthy. I would like to improve on efficiency & making my notes more succinct. | My preceptor and I reviewed some of my chart notes and I received feedback on my documentation style. In particular, my preceptor commented that she thinks that it is useful for me to include more detail in the “Data” portion of my notes, but that my “Assessment” and “Plan” portions can be briefer so that it is clear to other team members. I was also given the feedback to avoid using pharmacy jargon. I improved my efficiency in documenting and found that my process and workflow was well managed in the second half of the rotation. |

**NOTE** – This is an example of 1 goal only. Learning Plans will typically have several goals.
Appendix 2: Suggest Format For Clinical Assignment's

Journal Club (http://ebm.bmj.com/content/12/3/66.2.full.pdf+html)
1. Describe the patient case or problem that attracted you to this paper
2. Explain how you came across the study
3. Describe the study (i.e. methods, location, unique features)
4. Describe the research question (PICO)
5. Describe the importance/relevance/context of the study
6. Describe the methods by giving more detail on the question components
7. State your answers to the critical appraisal questions on validity
8. Summarize the results
9. Describe why the results can or cannot be applied to your patient, scenario or context
10. Conclude with your own decision about the utility of the study in your practice by resolving the case or question you began with
11. Prepare a 1 page summary of the outline as a handout

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

Case Presentation Components
Every case presentation should include:

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

a. Introduction
Introduce the case briefly with remarks that explain why the case was chosen and what the main focus of the presentation will be. Provide a brief outline of the major components of the presentation and learning objectives for the audience. If the case presentation components will be presented in a non-standard order, explain why that approach was chosen.

b. Patient Data
Present concise summary of the patient’s history based on the Patient Care Process & How to Present a Patient (Suggested Readings) summarizing and/or providing additional details where appropriate to establish the focus topic:
- summarize relevant medical and drug therapy history, prior to the events which are the focus of the case presentation
- summarize presenting symptoms, physical assessment, labs tests, diagnostic exams (e.g. chest x-ray’s etc.) pertaining to the focus of the presentation
- describe the patient’s drug therapy relating to the case presentation focus, including:
  - indications for drug therapy
  - specifics of the drug therapy regimen (e.g. dose, route, duration)
• describe the patient’s progress related to the case presentation focus

c. Listing of all DRPs and Selection of Main DRP
List ALL DRPs related to that patient and highlight the DRP that will be the focus of the presentation. The DRP selected does not need to be the most important DRP; it will simply be the focus of your presentation. Please note that you should be familiar with all aspects of this patient’s case and prepared to answer any questions related to any of the DRPs, regardless of whether it was the main focus of your presentation.

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

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

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

g. Focused Clinical Question Or Disease state review

Focused Clinical question
• State the focused clinical question using the PICO format:

P – Patient, population or problem *(How would I describe a group of patients similar to mine?)
I – Intervention, prognostic factor or exposure *(Which main intervention, prognostic factor or exposure am I considering?)
C – Comparator or alternative intervention (if appropriate) *(What is the main alternative to compare with the intervention?)
O – Outcome you would like to measure or achieve *(What can I hope to accomplish, measure, improve or affect?)

Example:

<table>
<thead>
<tr>
<th>Patient</th>
<th>Intervention</th>
<th>Comparator</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>In a mechanically</td>
<td>…would administer IV</td>
<td>…compared to sucralfate</td>
<td>…reduce clinically important</td>
</tr>
<tr>
<td>ventilated ICU</td>
<td>ranitidine…</td>
<td>given via NG tube…</td>
<td>bleeding?</td>
</tr>
<tr>
<td>patient…</td>
<td></td>
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</tr>
</tbody>
</table>

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

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

Disease State Review
• Relate the patient case to the disease state by describing the following aspects of the disease:
- Define recommended pharmacological and non-pharmacological management (Mechanism of action, pharmacokinetics, clinical indications, drug interactions, adverse drug reactions, dosing, monitoring parameters and patient information)

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

**I. Monitoring Plan and Resolution of Case**
Describe monitoring parameters and activities that were/would be done to determine the outcome of any drug therapy recommendations made for the main DRP. Where possible, present the results of follow-up monitoring to illustrate the patient outcome.
## Appendix 3: Assessment Outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Expected Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Professional</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Practices in an ethical manner and displays professional behaviour. | • practices according to the Alberta College of Pharmacists Code of Ethics  
• practices with honesty and integrity  
• responds to and incorporates feedback on ways to improve.  
• respects patients/other team members and does not engage in distracting behavior  |
| Practices in manner demonstrating professional accountability. | • fulfills their professional commitments and assignments in a diligent and timely manner.  
• accepts responsibility for his/her recommendations.  
• prioritizes activities to fulfill all responsibilities in a timely manner.  
• is punctual.  |
| Demonstrates initiative within the practice setting. | • takes initiative to learn, enhance skills and integrate knowledge (i.e. maximizes learning opportunities).  
• evaluates their practice and knowledge to identify areas for continuing professional development.  
• Seeks and interprets multiple sources of feedback to identify limitations or strengths in competence / performance  |
| **Communicator** | |
| Demonstrates effective non-verbal and verbal communication skills. | • speaks clearly and effectively.  
• uses appropriate language.  
• uses appropriate non-verbal communication (i.e. open body language, use of facial expressions) and responds to non-verbal cues  
• listens and responds to verbal cues.  
• manages the flow of encounters.  
• demonstrates the appropriate level of confidence.  |
| Effectively communicates in writing. | • correctly applies the rules of syntax, grammar and punctuation.  
• adapts the content of their writing to suit target audience.  
• uses appropriate tone for intended audience (i.e. drug info questions, written assignments etc)  
• provides appropriate level of detail and complexity.  |
| **Care Provider** | |
| Develops and maintains professional relationships with patients/care givers. | • engages patients independently.  
• exhibits sensitivity, respect and empathy with patients and care givers.  
• establishes goals in collaboration with the patient  
• determines when it is ethically and professionally appropriate to involve (or not involve) caregivers and/or family members.  |
| Gathers relevant medical and medication history. *(Pharm 512 & Pharm 513)* | • employs effective interviewing techniques (i.e. appropriate open and closed ended questions, uses motivational interviewing where appropriate).  
• employs a systematic process to gather data accurately based on the Patient Care Process document.  
• gathers and interprets relevant lab tests and diagnostic assessments  
• completes a physical exam when applicable (e.g. blood pressure assessment) and interprets appropriately to assess need for or monitoring of drug therapy.  
• clarifies and manages conflicting data  
• synthesizes data to complete a history in a timely fashion  |
<table>
<thead>
<tr>
<th>Outcome</th>
<th>Expected Behaviour</th>
</tr>
</thead>
</table>
| Assesses if the patient’s medication-related needs are being met. *(Pharm 512 & Pharm 513)*                                                                                                          | • evaluates patient’s medications for indication, efficacy, safety, and adherence  
• determines whether a patient’s medications are achieving the desired goals  
• identifies medical conditions where medication related needs are not currently being addressed  
• Prioritizes medication related needs based on urgency, patient preference and available resources.                                                                                                                                                                                                                                                                                                                                                          |
| Assesses if the patient’s medication-related needs are being met in collaboration with the patient care team. *(Pharm 511)*                                                                             | • contributes to obtaining an accurate and comprehensive patient history  
• gathers and interprets appropriate patient information and investigations to identify drug related problems  
• evaluates patient’s medications for indication, efficacy, safety, and adherence  
• determines whether a patient’s medications are achieving the desired goals  
• identifies medical conditions where medication related needs are not currently being addressed  
• prioritizes medication-related needs based on urgency, patient preference and available resources.                                                                                                                                                                                                                                                                                                                                                   |
| Develops a care plan that addresses medication and health needs.                                                                                                                                                                                                     | • establishes relevant & realistic goals  
• addresses the breadth of issues in the case  
• considers a realistic set of alternatives and assesses the pros & cons before making a recommendation  
• develops safe and effective recommendations (recommendations, monitoring, follow-up), including specific actions for managing patients needs (i.e. dispense, adapt, prescribe, refer, order a laboratory test)  
• Anticipates treatment failures and complications  
• Identifies patient needs outside of pharmacist’s scope that require referral or further collaboration with the team.  
• Develop a care plan that considers the complexity, uncertainty and ambiguity in the scenario.                                                                                                                                                                                                                                                                                                                        |
| Implement the care plan when appropriate.                                                                                                                                                                                                                        | • implements and adapts plan (if needed) with team and patient/caregivers.  
• undertakes the specific actions specified in the care plan  
• educates patient about pharmacological and non-pharmacological recommendations and verifies understanding.  
• effectively transfers care to another healthcare professional (when applicable)                                                                                                                                                                                                                                                                                                                                                     |
| Documents patient information and patient care activities in an appropriate manner.                                                                                                                                                                                 | • is written clearly and with focus, using an organized processes in keeping with the guidelines of the clinical context (i.e. DAP)  
• content is of an appropriate depth and breth.  
• conveys clinical reasoning and rationale for decision making  
• is timely  
• facilitates continuity of care                                                                                                                                                                                                                                                                                                                                                      |
| Scholar                                                                                                                                                                                               | • has minimal gaps in therapeutic knowledge required to provide patient care.  
• uses experience(s) and knowledge gained in the placement to better manage patients.                                                                                                                                                                                                                                                                                                                                                                           |
<table>
<thead>
<tr>
<th>Outcome</th>
<th>Expected Behaviour</th>
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</table>
| Uses evidence based processes to provide drug information and recommendations. | • uses appropriate sources to gather information (e.g. guidelines, primary, secondary and tertiary sources).  
• documents and references recommendations where applicable.  
• critically analyzes information.  
• responds with an appropriate recommendation based on analysis of evidence/information. |
| Integrates clinical judgment and critical thinking. | • Identifies missing knowledge or information when approaching a scenario.  
• under conditions of uncertainty, weighs the pros and cons of alternatives to makes decisions.  
• Integrates previous knowledge and experience into decision-making.  
• logically defends recommendation(s).  
• anticipates the outcome of decisions and actions. |

### Collaborator

| Functions as a member of a team within the practice setting (Pharm 512 & 513) | • recognizes and respects the roles, responsibilities, and competence of other professionals.  
• contributes to optimize team functioning.  
• negotiates overlapping and shared responsibilities.  
• respectfully shares expertise and points of view.  
• listens to the opinions of others.  
• Manages disagreements or conflict in a way that supports collaborative culture. |
| Understands and respects the role of themselves, the team, and its members (Pharm 511) | • takes initiative to identify team members and recognizes the of the roles and responsibilities of others  
• respects the expertise and competence of others.  
• contributes to team discussion and performance.  
• negotiates overlapping & shared responsibilities.  
• accepts leadership roles where appropriate. |
| Supports and contributes to team based patient care (Pharm 511) | • plans and contributes to the provision of care with other health care team members appropriately and in a coordinated fashion.  
• provides services and care as agreed upon with the patient and team  
• participates in team initiatives such as educational or health promotional programs |
| Demonstrates relational competence required for interprofessional teams (Pharm 511) | • respectfully shares expertise and points of view using appropriate language  
• actively makes themselves available  
• listens to the opinions of others  
• utilizes self reflection as appropriate prior to action  
• manages disagreements or conflict in a way that supports collaborative culture  
• follows the rules established by the group |

### Advocate

| Advocates for patients within and beyond the clinical environment. (Pharm 512 & 513) | • Identify agencies or resources that address patient needs.  
• facilitates timely access to services or resources through advice, education and/or guidance.  
• promotes the impact of the pharmacist on patient outcomes and the healthcare team |
<table>
<thead>
<tr>
<th>Manager</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Participates in quality assurance and improvement programs.</td>
<td>- contributes to a culture that promotes patient safety.</td>
</tr>
<tr>
<td></td>
<td>- manages, reports and discloses ADRs and/or unsafe practices appropriately when applicable.</td>
</tr>
<tr>
<td></td>
<td>- identifies improvement opportunities arising from near misses, errors and/or ADRs</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Near Peer Teaching (Pharm 511 &amp; 512 if Student in a Senior Learner Role)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates a commitment to precepting</td>
<td>- Engages in learning with and from junior learners</td>
</tr>
<tr>
<td></td>
<td>- Applies effective precepting skills/techniques (i.e. modeling, coaching, clinical questioning)</td>
</tr>
<tr>
<td></td>
<td>- Encourages the student to engage in self reflection</td>
</tr>
<tr>
<td>Provide feedback to enhance the junior student’s learning &amp; performance.</td>
<td>- Provides feedback that is specific and provides guidance on how to improve</td>
</tr>
<tr>
<td></td>
<td>- Feedback is focused on the behaviour and not the individual</td>
</tr>
<tr>
<td></td>
<td>- Delivers feedback in a timely manner</td>
</tr>
<tr>
<td>Clearly sets expectations with the junior learner</td>
<td>- Acts a role model for clinical expectations</td>
</tr>
<tr>
<td></td>
<td>- Define objectives or expectations for a teaching/learning activity</td>
</tr>
<tr>
<td></td>
<td>- Adapts expectations of learners when required</td>
</tr>
<tr>
<td></td>
<td>- Consistently accountable for meeting expectations</td>
</tr>
</tbody>
</table>