PHARM 556

Experiential Education

COURSE OUTLINE and SYLLABUS

Fall/Winter 2021/22

Advanced Pharmacy Practice Experience Part 3 - *Selective in Direct Patient Care*

Course weight: *8

Course Coordinator: Ann Thompson
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E-mail: athompson@ualberta.ca

Online course access: [https://eclass.srv.ualberta.ca/portal/](https://eclass.srv.ualberta.ca/portal/)
Office Hours: Monday to Friday by appointment
**Course Description**
This 8-week (320 hour) structured practical learning experience will allow students to apply and integrate knowledge and skills in a patient care setting. Students will develop practical knowledge necessary for the professional role of pharmacists as care providers, communicators, scholars, educators, collaborators, advocates, leaders and managers. Students are expected to step into the role of a pharmacist under the guidance of a pharmacist preceptors.

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

Prerequisite: PHARM 454. Meet all experiential education pre-placement requirements outlined on the FoPPS website under Current Students > Experiential Education Requirements.

**Other Course Fees**
Students are expected to travel within the province to complete their experiential education course requirements. Costs associated with travel, accommodation or additional requirements are student responsibilities. Students are encouraged to contact student services regarding funding opportunities.

**Required and Recommended Reading**
Here is the Required Reading list that pertain to all Advanced Pharmacy Practice Experiences (APPEs). This includes Resources for Covid-19 – there is some required information for your review prior to placement. There are 2 additional readings required for Pharm 556.

**Recommended Resources**
Prior to the placement, students should ask their preceptor about resources that should be brought to the site or pre-readings that should be completed prior to the placement.

**Course Schedule**
Due to the COVID-19 pandemic, the 8-week blocks may need to be adjusted, and students will be notified accordingly. Individual student schedules are listed in CORE ELMS. Students must register for the course in the term that the placement is scheduled.

**Fall Term**
- Block 1: August 30 - October 22, 2021
- Block 2: October 25 - December 17, 2021

**Winter Term**
- Block 3: January 3 – February 25, 2022
- Block 4: February 28 - April 22, 2022

Attendance and stat holiday information: see Undergraduate Experiential Education Policies and Procedures Manual.

Students are co-enrolled in PHARM 543/546 Integrating Seminars and are expected to be away from the placement site to attend course seminars. Please refer to PHARM 543/546 syllabi for exact dates.
Course Objectives
As this course runs for a full year, the pandemic may have differing influences on practice. Some outcomes may be emphasized more than others depending on pandemic situation at time course is taken. Flexibility regarding the activities completed to achieve the outcomes is acceptable and encouraged.

The course is designed to develop the following **knowledge, skills and attitudes**.

1. Apply fundamental knowledge in daily practice.
2. Use best evidence to provide patient care and respond to drug information requests.
3. Provide patient care and manage patients’ medication and health needs.
4. Exercise critical thinking and clinical judgment and inter-professional collaboration (when possible) to make informed decisions and solve problems.
5. Communicate both orally and in writing in an effective, responsible and responsive manner that encourages trust and confidence.
6. Work collaboratively with the patient, family, caregivers and other healthcare professionals to facilitate the management of the patient’s health needs.
7. Promote the health of communities and populations (e.g. cultural groups, the vulnerable, disease awareness and prevention) and integrates health promotion into patient care (e.g. encourage vaccinations, lifestyle changes, etc.)
8. Develop personal and professional leadership skills.
9. Adhere to ethical standards in the delivery of pharmacy care and demonstrate accountability and respect to patients.
10. Display professional behavior and attitude, e.g. initiative, maximizing learning opportunities.
11. Demonstrate a commitment to learning by evaluating their practice and knowledge/skills to identify areas for development.

Grading

<table>
<thead>
<tr>
<th>Title</th>
<th>Weight</th>
<th>Date</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment #1: Learning Plan</td>
<td>Pass/fail</td>
<td>See description</td>
<td>Assignment</td>
</tr>
<tr>
<td>Assignment #2: Patient Care Assignment</td>
<td>Pass/fail</td>
<td>See description</td>
<td>Assignment</td>
</tr>
<tr>
<td>Assignment #3 &amp; 4: Determined between preceptor and student</td>
<td>Pass/fail</td>
<td>See description</td>
<td>Assignment</td>
</tr>
<tr>
<td>Student Self-Assessments (midpoint and final)</td>
<td>Formative</td>
<td>Prior to 160 hours and 320 hours</td>
<td>Self-Assessment</td>
</tr>
<tr>
<td>Preceptor Assessment of Student: Midpoint</td>
<td>Formative</td>
<td>After 160 hours</td>
<td>Assessment</td>
</tr>
<tr>
<td>Preceptor Assessment of Student: Final</td>
<td>Pass/Fail</td>
<td>After 320 hours</td>
<td>Assessment</td>
</tr>
<tr>
<td>Student Evaluation of Course</td>
<td>Completion required</td>
<td>After 160 and 320 hours and post-course</td>
<td>Evaluation</td>
</tr>
</tbody>
</table>

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

To pass the course, students must receive a “pass” on their final Student Performance Assessment (see Appendix 1) from their preceptor [grading criteria in CORE ELMS], complete all required assignments including resubmissions requested by the course coordinator (or designate reviewer) in a satisfactory manner (see Course Assignments) and complete all required assessments (see information below). The Faculty course coordinator provides a final course grade (Pass: Credit or Fail: No Credit) following review of the submitted assessments and assignments.
**Students Who May Require Support**
The student should email the Course Coordinator following review of the Midpoint Student Performance assessment if *any outcomes* are rated as *Not Meeting an Acceptable Level of Performance* or if performance concerns are identified and students would like additional support to address these. Students are encouraged to add areas requiring improvement to their Learning Plan at midpoint so that they can take ownership of how they plan to address any noted deficiencies.

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

**Assessments/evaluations completed by the students for each placement are:**
1. **Self-Assessments**: completed at least 1-2 days prior to midpoint, and final student performance discussions.
2. **Student Evaluation of Preceptor and Site**: completed and discussed with the preceptor during the midpoint and final student performance discussions.
3. **Student Post-Course Evaluation**: completed within 48 hours after placement completion. Anonymous and not discussed with the preceptor.

**Assignments**
- Assignments are due as indicated in the table below. Late assignments including assignment clarifications requested by the course coordinator may result in a delay of course grade posting. Students will receive a grade of “incomplete” until all course requirements are met.
- **All posted documents must have all identifiers removed to ensure patient confidentiality**.
- Assignments posted during the placement will be reviewed for completion to ensure course requirements are being met. Students will be notified if further information/clarification is required.
- To assist students and preceptors with planning across the 8 weeks, an "Activities, Assignments and Assessments Schedule” has been provided in *Appendix 2*.

<table>
<thead>
<tr>
<th>Assignment #1: Skills Inventory &amp; Learning Plan Assignment</th>
<th>Posting Instructions (CORE ELMS)</th>
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<tbody>
<tr>
<td><em>The Learning Plan needs to be initiated before the start of the placement.</em></td>
<td>Post in CORE ELMS as a Requirement under Pharm 556 Learning Plan <em>at least 1 week prior to the start of placement.</em></td>
</tr>
<tr>
<td>Students are to develop 3 goals (these can be related to development of clinical skill(s), inter-professional practice, leadership, etc.). The Learning Plan should be:</td>
<td>The updated plans must be posted by the end of 1st week, midpoint and at the final following review with the preceptor. 4 TOTAL POSTINGS; 1 before the placement and 3 during</td>
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<tr>
<td>1. Discussed with the preceptor during first week of the placement; make adjustments if necessary based on preceptor feedback.</td>
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<td>2. Finalized by the end of the first week.</td>
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<tr>
<td>3. Reviewed with the preceptor and updated at the midpoint and final points of the placement to indicate progress made with the learning goals.</td>
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<tr>
<td>4. At midpoint, add learning goals and objectives as needed to address knowledge/skill deficiencies as identified by the midpoint Student Performance assessment.</td>
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<tr>
<td>Learning Plan Activity and Assignment information and template: <em>Appendix 4.</em></td>
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</table>
### Assignment #2: Patient Care Assignment

Students need to provide the following for **4 patients** in a single document (start each patient on a new page):

- Provide your documentation note(s) that outlined the care provided for each patient (this can either be a screen shot, with patient identifiers removed, or a typed note). This could be an initial consult with the patient, or a patient receiving follow-up care. **Please include a short narrative above the documentation to orient reader to nature of the patient encounter.**
- Next, as a short narrative, include the monitoring and follow-up that occurred based on your interaction. In other words, what happened based on what was recommended? This could be based on a second interview with the patient, a phone call, checking pertinent lab work, speaking with a care giver, family member, or team member, etc.
- Finally, for each patient, briefly state what you did based on the follow-up/monitoring results – did your plan change? Did it stay the same? Were you surprised by the result, or was it what you expected to happen?

### Assignment #3 and 4: Professional Practice and Education

Students must complete a minimum of 2 assignments per placement based on 2 different activities they completed during the placement. These may include:

- Case presentation
- Developing and presenting a live educational session or written educational materials
- Delivering a journal club or teaching session
- Presenting an in-service
- Professional practice activity or site-based project

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

### Activities

Preceptor supervision is important, especially early in the placement, with graduated independence for various activities (such as gathering a medication history, patient education) as competence is demonstrated. Throughout the placement, restricted activities such as final checking of prescriptions and injections, must be supervised. **Given the Covid-19 pandemic, these activities may be modified to account for various practice circumstances (some suggestions also provided.) Students may also be required to work remotely as determined to be appropriate between student and preceptor(s).**

### COURSE ACTIVITIES

<table>
<thead>
<tr>
<th>1. Provide Patient Care</th>
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<td>Under direct and indirect supervision, students will provide care for a <strong>minimum of 20 patients</strong>. Based on pharmacy practice procedures at the time of the placement, <strong>patient care may be provided over phone or using other virtual methods</strong>. 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 <strong>Patient Care Process Document</strong>.</td>
</tr>
<tr>
<td><strong>Gather information</strong>: Review the patient profile/chart and interview the patient or agent or other</td>
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</tbody>
</table>
relevant healthcare providers to obtain necessary information and organize information to determine patient’s medication related and other health-related needs.

- **Assess patient’s medication needs**: review for indication, effectiveness, safety and adherence.
- **Develop and implement a care plan**: List and prioritize the patient’s medical conditions and drug related problems, develop goals, recommendations and a monitoring plan.
- **Communicate and document** patient care activities.
- **Administration of Drugs by injection**: Students who successfully completed the training and also have completed CPR Level C + First Aid, should practice administering drugs by injection. **Students must only administer injections under the direct supervision of a pharmacist authorized by ACP to administer drugs by injection.**

**ALL** care plans must be reviewed by the preceptor. The care plan worksheet and checklist are posted in eClass for download and use as required. Care plans should be done across the placement and not completed all at the end.

**Corresponding Assignment: Patient Care Assignment**

**2. Inter-Professional Collaboration** (In-person collaboration not required. This activity may be a discussion on current IP practices including how to support public health.)

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

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

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

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

- **Examples include** (but are not limited to):
  - providing an educational session on a therapeutic topic or controversy,
  - providing a patient case presentation or in-service for pharmacist colleagues and/or interdisciplinary audiences.
  - participation in a health promotion clinic (i.e. BP screening),
  - developing and implementing a patient care project (i.e. assessment tool or algorithm for disease management, practice site evaluation or improvement project).

- The chosen activities should be of importance to the team, and preceptor/student should negotiate the activity details.
- The student is responsible for completing the activity to the expectations set with the preceptor(s). If not completed in a satisfactory manner, the activity will need to be re-done to a satisfactory level.
- The activity may be assessed using exemplar evaluation form(s) posted in eClass.

**4. Drug Information Requests**

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

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

**5. Preceptor Library Resources**

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

The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: [http://tinyurl.com/lgppqay](http://tinyurl.com/lgppqay).

The link to the UofA pharmacy library home page is [http://guides.library.ualberta.ca/pharmacy](http://guides.library.ualberta.ca/pharmacy).
Instructor Assumptions (Tips for Success)

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

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

Another important student responsibility is contacting the Faculty with concerns if they arise. There are assessments built into the course that provide checks and balances regarding learning and the overall experience, however it is important that students contact the Faculty prior to or during the placement to discuss concerns or questions. These are dealt with in an individual and confidential manner.

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

Policies and Procedures

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

- Attendance policies (illness, bereavement) and participation in professional opportunities such as conferences, PDW, Pharm D interviews, etc. In general, it is expected that students are at the placement site 40 hours per week, with schedule to be determined between student and preceptor.

- Human Blood and Bodily Fluid Exposure (HBBFE) Procedures (Needlestick Injury)
- Communication Policy
- Protection of Privacy Policy
- Preceptor recognition procedures

- Late Assignment Submission Policy: It is the student’s responsibility to submit all assignments in accordance with the stated deadlines. UofA email accounts must be monitored daily during the placement and every 3 days after the placement is completed for at least 2 weeks to ensure all assignments and assessments have been submitted satisfactorily. All assignments must be completed to the satisfaction of the preceptor during the placement. Assignments that are posted late on eClass will require completion and submission of a Professional Accountability Form. This form is placed on the student’s file.
• If students experience Covid-19 like symptoms or have concerns due to a COVID-19 exposure, they should complete the AHS On-line Self-Assessment and follow instructions to be tested and/or self-isolate. If self-isolation is recommended, students are required to contact the Course Coordinator and Student Services, and record their absence in the CORE ELMS Absence Tracker.

Technology/Other Requirements

**Personal Laptop Computers**: Students may be asked to bring personal lap tops to placement sites to use for non-patient care activities.

**eClass**: Students must access eClass to obtain course information and resources.

**CORE ELMS**: Students must complete placement and course evaluations in CORE ELMS. Additionally, students are required to post their Learning Plan and CV/Resume under My Requirements within CORE ELMS. If technical assistance is required, contact phexed@ualberta.ca

**Netcare Access**: For information on Netcare (if required), see [website](https://www.ualberta.ca).

**Attire**: Students are required to wear their Faculty name tag or one provided to them when they are at the placement site. Students are required to have a lab coat if deemed appropriate based on setting.

University/FoPPS Policies

**Plagiarism and Cheating**: The University of Alberta is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the Code of Student Behaviour; [www.governance.ualberta.ca](http://www.governance.ualberta.ca)

Audio or video recording, digital or otherwise, of lectures, labs, seminars or any other teaching environment by students is allowed only with the prior written consent of the instructor or as a part of an approved accommodation plan. Student or instructor content, created and/or used within the context of the course is to be used solely for personal study and is not to be used or distributed for any other purpose without prior written consent from the content author(s). Policy about course outlines can be found in [Course Requirements, Evaluation Procedures and Grading](https://www.ualberta.ca) of the University Calendar.

**Territorial Acknowledgement**: The University of Alberta acknowledges that we are located on Treaty 6 territory, and respects the histories, languages, and cultures of First Nations, Metis, Inuit, and all First Peoples of Canada, whose presence continues to enrich our vibrant community.

**Pharmacy Code of Professionalism**: Students are expected to abide by the Faculty's Pharmacy Code of Professionalism at all times. Lapses in professional conduct may result in the issuing of a Professional Accountability Form. If issued, these forms will be kept on student records for 2 years.

**Accessibility Resources (Formerly: Student Accessibility Services (SAS))**
Student accommodations are offered in accordance with the [Faculty of Pharmacy and Pharmaceutical Sciences (FoPPS) Essential Skills policy](https://www.ualberta.ca). Accessibility Resources will work with the FoPPS (Office of Student Services) to determine the nature of any accommodation that will be granted. Once approved, Accessibility Resources will provide students and the Faculty with a "Letter of Accommodation". The Faculty will share accommodation requirements with course instructors.

**Equality, Equity and Respect**

The Faculty of Pharmacy and Pharmaceutical Sciences is committed to providing an environment of equality and respect for all people and to developing teaching and learning contexts that are welcoming to all. The faculty recommends that staff and students use inclusive language to create an atmosphere in which students’ experiences and views are treated with equal respect and value in relation to their
gender, racial background, sexual orientation and ethnic backgrounds. In order to create a thoughtful and respectful community, it is encouraged to use gender-neutral or gender-inclusive language and to become more sensitive to the impact of devaluing language.
APPENDIX 1: Student Performance Assessment

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

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
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</thead>
<tbody>
<tr>
<td>Professional</td>
<td></td>
</tr>
</tbody>
</table>
| 1. Displays professional behaviour. | • Demonstrates honesty, integrity, humility, commitment, altruism, compassion, and respect towards others.  
• Does not engage in distracting behavior.  
• Maintains privacy and confidentiality.  
• Dresses professionally and maintains appropriate personal hygiene.  
• Maintains appropriate interpersonal boundaries.  
• Is accessible, diligent, timely and reliable to others. |
| 2. Demonstrates professional responsibility and accountability and practices within the scope of a 4th year student. | • Takes responsibility and accountability for actions and inactions; preceptor support may be required early in placement.  
• Prioritizes activities and manages time to balance course requirements and practice site workflow.  
• Responds appropriately to ethical issues encountered in practice; preceptor support may be required.  
• Applies standards of practice, policies, and codes that govern the profession; practices within the scope of a 4th year student. |
| 3. Demonstrates initiative, self-directed learning, and commitment to excellence in practice of pharmacy. | • Takes initiative to learn, enhance skills and integrate knowledge (i.e. maximizes learning opportunities).  
• Accepts, incorporates and provides feedback in an effective and constructive manner.  
• Sets personal goals to support development of professional skills, knowledge and attitudes. |
| Communicator | |
| 1. Demonstrates effective non-verbal and verbal communication to instill trust and confidence. | • Speaks clearly, effectively and respectfully, tailoring responses to the context and audience.  
• Uses appropriate non-verbal communication. (e.g. open body language, use of facial expressions)  
• Listens, actively solicits and responds appropriately to ideas, opinions, and feedback from others (patients, team members, preceptor(s), etc)  
• Uses appropriate language, pace and tone that is suitable for the complexity, ambiguity, urgency of the situation.  
• Expresses recommendations, facts, evidence, opinions and positions accurately and effectively, with clarity and confidence; may require preceptor support early in the placement. |
| 2. Effectively communicates in writing. | • Provides appropriate level of detail and complexity, breadth and depth; preceptor support may be required early in placement.  
• Uses appropriate language and tone for the type of written communication and intended audience.  
• Prepares timely, clear documentation that maximizes safety and understanding. |
| Care Provider | |
| 1. Establishes and maintains professional relationships with patients/care givers | • Engages patient; may require some preceptor prompting and guidance.  
• Exhibits sensitivity, respect and empathy with patients and care givers.  
• Identifies/responds to patient cues with preceptor guidance. |
<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
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</thead>
<tbody>
<tr>
<td>• Determines when it is ethically and professionally appropriate to involve caregivers and/or family members.</td>
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</tbody>
</table>
| **2. Gather and interpret relevant, necessary information about a patient’s health-related needs.** | • Utilizes multiple sources of patient information to synthesize data to complete a patient history; may require preceptor support initially.  
• Employs effective interviewing techniques (e.g. appropriate open and closed ended questions, uses motivational interviewing when appropriate).  
• Employs a systematic process to gather data accurately based on the Patient Care Process document.  
• Gathers and interprets appropriate amounts of information including relevant physical exam, lab tests, point-of-care and diagnostic assessments.  
• Clarifies and manages conflicting data; may require preceptor support initially. |
| **3. Formulate assessment of actual and potential issues in collaboration with the patient & other healthcare team members; prioritize issues to be addressed.** | • Prioritizes medication-related needs based on urgency and patient preferences.  
• Determines patient’s medical condition(s) and determines those where medication needs are not currently being addressed.  
• Assesses drug therapy for indication, efficacy, adherence and safety. |
| **4. Develops a care plan that addresses medication and health needs** | • Uses a systematic approach to develop care plans including for patients with multiple co-morbidities.  
• Establishes goals in collaboration with the patient that are relevant, realistic and timely.  
• Generates a realistic set of alternatives and assesses the pros and cons.  
• Develops a safe and effective plan (recommendations, monitoring and follow-up), for managing patient needs. |
| **5. Implements the care plan when appropriate** | • Implements specific actions for managing medication-specific needs (dispense, adapt, prescribe, refer, etc) with preceptor supervision.  
• Communicates the agreed-upon care plan and rationale to patients and/or other healthcare providers with preceptor support.  
• Educates the patient on both non-pharmacological. (e.g. lifestyle) and pharmacological recommendations.  
• Negotiates and adapts plan with team and/or patient/caregivers with preceptor support when necessary.  
• Initiates and completes seamless care activities when appropriate. |
| **6. Follow-up and evaluate as appropriate** | • Evaluates data to assess efficacy/safety/adherence as well as progress towards achieving goals of therapy.  
• Adjusts care plan, if needed, in collaboration with the patient and relevant team members. |

**Collaborator**

| **1. Works effectively with members of the team including patients and their families, pharmacy colleagues and individuals from other professions.** | • Establishes and maintains positive relationships  
• Recognizes and can negotiate shared and overlapping responsibilities with other professionals.  
• Participates in respectful and effective shared decision-making.  
• Provides services and care as agreed upon with the patient and team.  
• Manages disagreements or conflicts in a way that supports collaborative culture. |
| **2. Hand over the care of a patient to other pharmacy and non-pharmacy team** | • Identifies when patient handover should occur and what information should be communicated  
• Demonstrates safe handover of patient care issues and information using appropriate communication processes. |
<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
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<tr>
<td>members to facilitate continuity of safe patient care</td>
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**Scholar**

1. Demonstrates the fundamental knowledge required for pharmacists
   - Has minimal gaps in therapeutic knowledge required to provide patient care.
   - Uses experience(s) and knowledge gained in the placement to solve previously encountered problems.

2. Uses best evidence available to provide medical information and patient care
   - Uses systematic approach to search for best available evidence.
   - Able to formulate a clinical question.
   - Analyzes and appraises health-related research and literature to inform responses to questions and patient care decisions.
   - Provides an appropriate, accurate and practical answer or recommendation.
   - Documents and references recommendations where applicable.

3. Applies clinical judgment to make decisions regarding patient care
   - Apply knowledge and professional judgment to provide safe and effective patient care.
   - Make decisions using an evidence-informed approach.
   - Provide rationale and logically defend rationale related to decisions.

**Advocate**

1. Advocates for patients within and beyond patient care environments.
   - Facilitates timely access to services or resources through advice, education and/or guidance to address determinants of health.
   - Integrates health promotion into patient care and works with patients to adopt healthy behaviours.
   - Provides patients with health and wellness strategies which include screening and educational services.
## APPENDIX 2: Activity, Assignment and Assessment Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Student Activities</th>
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| 1-4 weeks before placement starts | - Review therapeutics as instructed by preceptor(s) or relevant to the practice area.  
- Review syllabus: readings, objectives, assessments, activities and assignments.  
- Correspond with preceptor regarding: start time, dress code, parking, etc.  
- Provide preceptor(s) with Netcare form (if applicable) (4 weeks before start)  
- Complete Skills Inventory and develop Learning Plan; post on CORE ELMS at least 1 week prior to placement. |

### Week 1: Orientation, Create Placement Schedule, Learning Plans, Early Assessments

- **Orientation**
  - *Modify activities as needed due to pandemic.*
  - Review and discuss student-prepared Learning Plan and prior feedback received.
  - Develop preliminary schedule: plan activities and assignments.
  - Discuss student/preceptor expectations and responsibilities.
  - Discuss assessment processes including informal feedback and debriefing.
  - Tour of pharmacy/facility.
  - Log-in to ensure Netcare access, as well as access to other on-site systems.

- **Assessments and Learning Plan**
  - **END of Week 1:** Discuss and debrief with 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.

### Weeks 2, 3 and 4

- **Patient Care Assignments**
  - Provide care to patients. Develop and discuss care plans and documentation Minimum 20 patients/8 weeks. Do not complete all at the end.
  - Discuss activities and plans for and progress on professional practice assignments.

- **Mid-Point Assessments (end of week 4)**
  - MID-POINT Assessments (in CORE ELMS): Complete the midpoint Self-Assessment in preparation for the Student Performance Assessment discussion.
  - Student Performance Assessment: midpoint (by preceptor); review together.
  - Student Evaluation of Preceptor; midpoint; and Student Self-Assessment (midpoint); discuss both with preceptor.

- **Learning Plan (end of week 4)**
  - Update and post Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS). Outcomes and skills that are identified by the preceptor as needing improvement should be included.

### Weeks 5, 6 and 7

- **Patient Care**
  - Continue providing patient care. Review with preceptor.
  - Continue planning/completion of activities and corresponding assignments.

### Week 8: Date: ________________

- **Finish assignments**
  - Review activities and assignments to ensure all have been completed and posted. (Professional Practice and Education Assignments).

- **FINAL Assessments**
  - Review Final Student Performance Assessment and Placement Grade with preceptor.
  - Student Self-Assessment (final): discuss with preceptor.
  - Discuss final Learning Plan and status of progress with preceptor.

- **Posting of Assignments Surveys**
  - Post the finalized Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS).
  - Submit Preceptor Recognition Award survey; survey emailed to students
  - Post Placement Evaluation (in CORE ELMS); submit AFTER leaving site, due 48 hours after placement completion
  - Anonymous Student Survey (survey link emailed to student)
APPENDIX 3: RESOURCES for PROFESSIONAL PRACTICE ASSIGNMENTS

3a. Presentation Evaluation Forms
Evaluation forms are available in eClass for:
1. Journal Club presentation
2. Patient Case presentation
3. General Education session
4. Teaching Session feedback form

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

3b. Site-Based Project Guidance Information
In collaboration with the preceptor, students can design and implement a project that can be used by the practice site to enhance or evaluate patient care or evaluate care at the site. Examples include processes to facilitate inter-professional collaboration, developing tools and resources to provide enhanced patient care such as assessments or algorithms for disease management or patient education information, improving practice skills and/or processes at the site (i.e. completing monitoring and follow-ups).

Project Criteria: The goal is focused on a professional or clinical area of practice and the outcomes can be integrated into practice. The project outline should be completed by the end of the second week to allow for discussion & implementation. Outline should include:
- Topic and goal/rationale for the project
- Methods for achieving goal (steps involved, resources needed, timelines)
- Outcomes (real or potential)
- Next steps

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

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

Suggested format: Prepare a 1 page summary of the outline as a handout.
1. Describe the patient case or problem that attracted you to this paper.
2. Describe the study (i.e. methods, location, unique features) and the research question (PICO).
3. Describe the importance/relevance/ of the study.
4. State your answers to the critical appraisal questions on validity.
5. Summarize the results and describe why the results can or cannot be applied to your patient.
6. Conclude with your decision by resolving the PICO questions and how this applied to your patient and practice.
APPENDIX 4: Skills Inventory and Learning Plan Activity and Assignment

Your learning plan allows you to prepare for the placement by identifying goals in areas or skills where you would like to build more confidence or comfort. Then, during the placement you will work with your preceptor to create opportunities to achieve the goals. This activity also requires you to report on your progress, a skill required for future practice. This activity has 3 steps as outlined below (1. Skills Inventory, 2. Feedback Summary and 3. Learning Plan). **This must be posted at least 1 WEEK PRIOR to the start of the placement to allow time for preceptor(s) review.**

Templates are posted in eClass (in Word). Posting in CORE ELMS allows your preceptor to view this assignment.

**STEP ONE: SKILLS INVENTORY**

Complete the Skills Inventory below to assess skills that may be a focus for your Learning Plan. Below are some of the primary skills you will be using during your placement. Indicate your comfort and practice scale with each skill/activity.

<table>
<thead>
<tr>
<th>Activity/Skill</th>
<th>Students should consider the following factors when assessing their abilities:</th>
<th>Comfort/Confidence Scale</th>
<th>Comments: (to provide perspective on the rating)</th>
</tr>
</thead>
</table>
| Communicating with patients, team members, colleagues (both verbally and in writing) | • Speak clearly, effectively and respectfully, tailoring responses to context and audience  
• Use appropriate non-verbal communication. (e.g. open body language, use of facial expressions)  
• Listen effectively (conversations are 2-way)  
• Employ effective interviewing strategies  
• Use appropriate language, pace and tone  
• Demonstrate appropriate confidence  
• Document information appropriately and accurately | 1 2 3 4 5 6 7 Uncomfortable/Lack Confidence |            |
| Gathering medical and medication history | • Use systematic process to gather data  
• Use multiple sources to synthesize data  
• Employs effective interviewing techniques  
• Gather and interpret appropriate amount of information including relevant physical exam, lab tests, point-of-care and diagnostic assessments | 1 2 3 4 5 6 7 |            |
| Conducting Patient Assessments (Pharmacotherapy Work-up) | • Prioritize medication-related needs based on urgency and patient preference  
• Assess medical conditions & DRPs, and determine if there are needs not addressed  
• Assess drug therapy for indication, efficacy, safety, adherence | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
|---|---|
| Creating Patient Care Plans | • Use a systematic process  
• Establishes goals in collaboration with patient that are relevant, realistic and timely  
• Generate realistic alternatives with pros/cons  
• Develop safe and effective plan (recommendations, monitoring and f/u) for managing patient needs | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
| Implementing Patient Care Plans | • Implement specific actions to achieve plan  
• Communicate plan to others  
• Educate patient  
• Initiate seamless care as needed | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
| Conducting Patient Follow Up | • Provides follow up if possible.  
• Interprets follow-up information and modifies plan if needed. | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
| Responding to DI Requests | • Integrates best available evidence into clinical practice  
• Critically analyzes information & demonstrates clinical judgment. | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
| Interacting with Other Healthcare Professionals | • Establishes & maintains positive relationships  
• Recognizes and can negotiate shared and overlapping responsibilities with others.  
• Verbally present patient information to a team  
• Demonstrate safe handover of care using oral, written, electronic communication | 1 2 3 4 5 6 7  
Uncomfortable/ Uncomfortable/ Lack Confidence  
Lack Confidence  
Confident  
Confident |
STEP TWO: FEEDBACK RECEIVED
To inform potential areas of learning for your Learning Plan, and to provide helpful information to your preceptor(s), complete the feedback table.

| Areas of Strength Feedback: Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists. | Insert response here |
| Areas for Improvement Feedback: Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists. | Insert response here |

STEP THREE: DEVELOP YOUR LEARNING PLAN
- Review Steps 1 and 2. Develop 2-3 SMART goals. These may be guided by skills rated lower in comfort and practice and that you would like to develop during the placement. Also state strategies you will use and the indicators of progress associated with each goal.
- Review it with your preceptor during the first week of your placement. If changes are made, post the updated learning plan. If no changes are made, the initial learning plan can remain posted.
- **AT MIDPOINT:** Update your learning plan and review with your preceptor.
  - If you receive grades of Needs improvement on your Midpoint Student Performance Assessment, these must be added at midpoint to your learning plan to enable increased development.
  - Students should post their learning plan 2 days prior to midpoint, and verbally discuss their progress with their preceptor.
- **AT FINAL:** Review your learning plan with your preceptor to see where you are at the end of the placement. Did you reach your goals? Do you have plan for continuing your goals into the next placement?

<table>
<thead>
<tr>
<th>LEARNING PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong> (Stated in SMART format)</td>
</tr>
<tr>
<td>Learning Goal 1:</td>
</tr>
<tr>
<td>Learning Goal 2:</td>
</tr>
<tr>
<td>Learning Goal 3:</td>
</tr>
</tbody>
</table>
APPENDIX 5: APPE Discussion Topics (see Google doc)

Maintaining Professional Competency and Lifelong Learning
- Discuss with the preceptor how they maintain professional competence and the ACP Continuing Competence Program.
- Review the preceptor’s previous or current ACP learning / implementation records and compare it to the student’s placement Learning Plan.

Patient Communication
- Discuss when motivational interviewing and shared decision-making strategies should be used with patients.
- Discuss communication strategies used by your preceptor(s) to build rapport with patients; include patients with challenging situations such as those who are very ill, have dementia or mental health concerns.

Medication Distribution Processes and Safety Practices (for sites with 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 these (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
- Discuss obtaining additional prescribing authorization (APA)? What is their professional experience with APA both in obtaining & using it? If they don’t have APA, are they planning to obtain it?
- If applicable, discuss with the preceptor how they (or other pharmacists with APA) use the expanded scope of practice to contribute to patient care.

Health Care Team
- Review how the preceptor communicates patient care responsibilities to ensure continuity of care (e.g. patient care hand off)
• Discuss communication strategies used to optimize team functioning, including how conflicts are managed (this should include within the pharmacy team and the broader healthcare team).