



UNIVERSITY OF ALBERTA

Advanced Pharmacy Practice Experiences Preceptor Quick Reference Guide 2023-24

4th Year Placements Pharm 556

Pharm 556 (Selective in Patient Care)

Ann Thompson

athompson@ualberta.ca

780-492-5905

Office Hours: Monday-Friday by appointment

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

TABLE OF CONTENTS

Contact Information	4
Quick Links	4
Reminders	4
Planning for the Placement	5
Placement Policies and Procedures	5
Resources for Students	6
Assessment Procedures and Information	6
Grading Criteria	6
Assessment Tips and Suggestions	6
Summary of Assessments / Evaluations to Be Discussed between Preceptor and Student	7
Pharm 556 - Selective in Patient Care - Updates for 2023/2024	7
Pharm 556 - Selective in Patient Care - Course Activities Summary	8
Course Discussions Summary	9
Pharm 556 - Selective in Patient Care - Assignments	10
Assignment #1: Skills Inventory and Learning Plan	10
Assignment #2: Patient Care Assignment	11
Assignment #3: Professional Practice/Education Assignments	11
APPENDIX 1: PharmD Courses	12
APPENDIX 2: Clinical Expectations for Care Provider Role for PharmD Students Across Y4	
Experiential Courses: Guidance for Preceptors and Students	13
APPENDIX 3: Pharmacy Care Plan Worksheet with Checklist for Assessment	14
APPENDIX 4 (Pharm 556 - Selective in Patient Care): Assignment and Assessment Schedule/Checklist	15
APPENDIX 5: Orientation Checklist for Student and Preceptor	16

Contact Information

<p>Course Coordinator (554): Jody Shkrobot</p> <p>Phone: 780.492.7482 E-mail: shkrobot@ualberta.ca</p>	<p>Course Coordinator (555): Pawan Gill</p> <p>Phone: 780.492.8066 E-mail: pawan.gill@ualberta.ca</p>
<p>Course Coordinator (556/557): Ann Thompson</p> <p>Phone: 780.492.5905 E-mail: athompson@ualberta.ca</p>	<p>Institutional (AHS/Covenant Health) Faculty Liaison: Michelle MacDonald</p> <p>Phone: 403.561-6278 E-mail: michelle.macdonald@ahs.ca</p>
<p>General Inquiries: Linh Hang</p> <p>Phone: 780.492.7757 E-mail: phexed@ualberta.ca</p>	<p>General Inquiries: Andrea Michaud</p> <p>Phone: 780.248.5730 E-mail: phexed@ualberta.ca</p>

Quick Links

- [Pharm 554/555/556/557 course information](#) (syllabus, modifiable calendar template, preceptor podcasts, preceptor quick reference guide)
- [Undergraduate Experiential Education Policy and Procedure Manual](#)
- AHS Resources (accessible for AHS employees):
 - [Psychological Safety](#)
 - [Diversity and Inclusion](#) and [Best Practice Guide: Microaggressions](#)

Reminders

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

Student Requirements

Requirements	Completed	Completed On	File	Expiration
Miscellaneous				
Alcohol and Drugs Policy and Procedure (AHS/Covenant)				
Student Resume			FILE 1	
Learning Plans				
Requirements	Completed	Completed On	File	Expiration
Pharm 554 Learning Plan (+ Skills Inventory)				
Pharm 555 Learning Plan (+ Skills Inventory)				
Pharm 556 Learning Plan (+ Skills Inventory)				
Pharm 557 Learning Plan			FILE 1	

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

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

Planning for the Placement

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

Placement Policies and Procedures

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

- *Absence Tracker:* Students are required to use the Absence Tracking feature in CORE ELMS. Students must record any absence in CORE ELMS and the preceptor will receive an email noting the absence and be required to confirm or deny the request on-line.
- *Statutory Holidays:* Should a statutory holiday fall within the timeframe of the placement, it is at the discretion of the preceptor to determine how to proceed. Students may be granted the stat day off, a day off in lieu of the stat, or include that day as a placement day.
- *Illness:* In the case of illness, students are expected to notify the preceptor as soon as possible. Absences due to illness of 2 days or more may require an explanation and/or evidence such as a physician's note. Either the student or preceptor should contact the Faculty if the absence exceeds 2 days. Routine medical appointments are expected to occur on personal time. **Time missed from the placement site due to illness that exceeds 1 day needs to be made up.**
- *Covid-Related Symptoms:* Follow site policies regarding policies attending work while symptomatic or ill.
- *Bereavement:* In the case of death of a family member, students should notify their preceptor and the course coordinator to determine a course of action.
- *Faculty Endorsed Activities:* The Faculty supports student participation in activities such as lab facilitation (for one day per placement block), conferences and PDW if feasible with the placement schedule. Preceptors should be informed of these occurring, and the total time away from the placement should be reasonable. Time missed from the placement for approved professional developments activities that exceeds 1 day needs to be made up. The preceptor may speak to the course coordinator about an activity if they feel the standard of care to patients will be negatively affected by the absence of the student or it's anticipated that the time missed will impact the student's ability to complete the placement successfully. Some students may need to attend interviews for employment, residency programs, and admission to other programs. Any missed time will need to be made up if these activities occur on placement time. Where possible, students should schedule these during non-placement time.
- *Non-Endorsed Activities:* Activities ineligible for absence approval include: mock OSCE's, jurisprudence exams, travel and vacation. Changes to course dates to accommodate personal holidays are not permitted.

- *Placement Timeframe*: Modification to the placement schedule outside of the stated course timelines must be approved by the course coordinator in advance of the change.
- *Needle Stick Injury Procedures*: If a student experiences a needle stick injury, they must report the incident immediately to the preceptor and follow the placement site protocol. The Faculty must be advised immediately. There is further information in the [Policies and Procedures Manual](#).
- Students are NOT permitted to conduct patient home visits without the direct supervision of a preceptor.
- NEW: Discuss with students what they should do if faced with a difficult, abusive, discriminatory patient, staff person, or other health care professional including microaggressions. Bring to the preceptor's attention for appropriate action, debrief together, report and document, as well as contact faculty. Discuss with students the possibility of having a "safety signal" so that the student can gesture to their preceptor if they need assistance. For preceptors at AHS, there are AHS resources noted in Quick Links (page 2).

Resources for Students

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

Assessment Procedures and Information

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

Grading Criteria

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

1. Achieve a rating of at least "**Mostly Consistent in Meeting Expectations**" on all professionalism outcomes and
2. Have no more than 3 (maximum of 2 for care provider) outcomes achieve a rating of "**Inconsistently Meeting Expectations**" and
3. Have zero ratings of "**Not or Rarely Meeting Expectations**"

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

Assessment Tips and Suggestions

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

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

(All assessments are completed and submitted through CORE ELMS)

Assessment/ Evaluation	Submission Timeframe	Submitted by	Comments
Student Self-Assessments (SSA) (completed twice)	Midpoint and end of placement	Student	<ul style="list-style-type: none"> • Midpoint should be submitted 2-days prior to the Midpoint Assessment discussions to allow time for preceptor review. • For Final SSA, students should complete and be prepared to discuss at final assessment.
Student Performance Assessment MIDPOINT	End of week 4	Preceptor	<ul style="list-style-type: none"> • It takes about 30-60 minutes to complete. • Includes identification and discussion of areas and skills that will be focussed on for balance of the placement.
Student Evaluation of Preceptor and Site – MIDPOINT	End of week 4	Student	<ul style="list-style-type: none"> • Students must discuss with preceptor after discussion of the Student Performance Assessment
Student Performance Assessments – FINAL Recommend Final Placement Mark	End of placement	Preceptor	<ul style="list-style-type: none"> • It takes about 30-60 minutes to complete. • Assessment of all learning outcomes. (same as midpoint) • At the end of the assessment preceptors provide a <u>Placement Mark: PASS or FAIL</u> based on the overall grades assigned to each learning outcome.
Student Evaluation of Preceptor and Site – FINAL	End of week 8	Student	<ul style="list-style-type: none"> • Students must discuss with preceptor after discussion of the Student Performance Assessment
Preceptor Evaluation of Course	After student has left placement site	Preceptor	<ul style="list-style-type: none"> • Anonymous – option provided to have Faculty contact the preceptor

Pharm 556 - Selective in Patient Care - Updates for 2023/2024

1. For those who precepted this course last year, there are no changes to course objectives, activities, assignments or assessments.
2. Continued request to have preceptors review organizational processes related to discrimination within the practice site with students (microaggressions and overt discrimination). To better prepare students for EDI-related practice issues, the Class of 2024 will complete the ACP eModule on EDI that was a prescribed activity for all pharmacists in AB to renew their license for 2023-24. We encourage all preceptors to discuss this content in the context of your practice setting with each student.

3. The assessment rating scale has been updated based on feedback received from preceptors and students. Information on the rating scale is outlined in CORE ELMS, and the grading criteria to make the pass/fail decision on the placement portion of the course has been updated with the new rating scale language.

Pharm 556 - Selective in Patient Care - Course Activities Summary

COURSE ACTIVITIES		✓
<p>The following are activities students must complete during the placement to meet course objectives. Completion of course activities is the responsibility of the student, with preceptor guidance to arrange for various opportunities and to identify appropriate learning opportunities.</p>		
<p>1. Patient Care Provide and document patient-centered care for a minimum of 20 patients and develop a care plan for each patient. Care plans should reflect the patient population at the practice site. Students should participate in patient appointments, conferences, meetings or rounds as appropriate. Students should improve their timeliness and efficiency in assessing patients and developing a care plan as they practice and learn across the 8-week placement. ALL care plans must be reviewed by the preceptor(s). The care plan worksheet with checklist for assessment is in Appendix 3 for use as required. NOTE: Administration of Drugs by Injection: Students had the option to complete training as required by ACP to administer 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 do so. More information can be located in this ACP article.</p>		
<p>2. Interprofessional Collaboration 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.</p>		
<p>3. Professional Practice and Education Students must discuss with the preceptor and complete <u>at least TWO Professional Practice Activities</u>.</p> <ul style="list-style-type: none"> ● Examples include (but are not limited to): <ul style="list-style-type: none"> ○ 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 evaluation forms posted for students (please request from student.) 		
<p>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. (Drug Information Inquiry Record form is posted on eClass if a site specific form is not available). Students are expected to use appropriate resources and various levels of evidence; primary, secondary and tertiary references and should also use more than one resource for each question. All answers to be discussed with the preceptor.</p>		
<p>5. Preceptor Library Resources</p> <ul style="list-style-type: none"> ● Students provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) now accessible to preceptors. <ul style="list-style-type: none"> ○ The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: http://tinyurl.com/lgppqay ○ The link to the UofA pharmacy library home page is https://guides.library.ualberta.ca/pharmacy 		

Course Discussions Summary

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

Topic	✓
<p>Practice Site Policy</p> <ul style="list-style-type: none"> Review policies / procedures related to equity, diversity and inclusiveness in the practice site. Discuss how the student and preceptor are to manage situations if they arise (patient / staff / other health care professionals / etc). 	
<p>Maintaining Professional Competency and Lifelong Learning</p> <ul style="list-style-type: none"> 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. 	
<p>Patient Communication</p> <ul style="list-style-type: none"> Discuss when and how motivational interviewing and shared decision-making strategies should be used with patients. Discuss communication strategies used by your preceptor(s) to build rapport with patients; include patients with challenging situations such as those who are very ill, have dementia or mental health concerns. 	
<p>Medication Distribution Processes and Safety Practices (for sites with a dispensary)</p> <ul style="list-style-type: none"> Discuss documentation and reporting of medication errors/incidents, quality assurance processes and how the pharmacy keeps current with regulatory requirements. Discuss with the preceptor and/or dispensary staff components of the distribution system (e.g. unit dose, ward stock) and the scopes of practice of staff involved (e.g. order entry, filling, checking). Discuss error prevention strategies used to promote safe and accurate dispensing (e.g. dose calculation and checks, double/triple checks, use of technology, technician checking, etc.). Review incidence, tracking of errors and near misses. What is the process for reporting of medication errors or incidents at the site? What are the policies and processes involved to address safe medication practices (e.g. high alert meds, injectables, narcotics)? How are pharmacy personnel involved with the development and/or promotion of these processes and policies? 	
<p>Health Promotion and Advocacy</p> <ul style="list-style-type: none"> 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. 	
<p>Pharmacy Services and Scope of Practice</p> <ul style="list-style-type: none"> <i>(PHARM 554 - Community Practice only)</i> Discuss the impact of funding policies on the provision of professional services and how the expanded scope of practice contributes to patient care. Include the impact of funding policies on the provision of professional services with the pharmacy team. Discuss obtaining additional prescribing authorization (APA)? What is their professional experience with APA both in obtaining & using it? If they don't have APA, are they planning to obtain it? If applicable, discuss with the preceptor how they (or other pharmacists with APA) use the expanded scope of practice to contribute to patient care. 	

<p>Health Care Team</p> <ul style="list-style-type: none"> ● 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). 	
<p>Professional Identity</p> <ul style="list-style-type: none"> ● Discuss how the preceptor engages in the following and how you envision yourself to do so: <ul style="list-style-type: none"> ○ Networking opportunities ○ Utilization of online platforms ex. LinkedIn ○ Contributions to the profession ○ Volunteer and Service Work ○ Professional memberships and involvement 	

Pharm 556 - Selective in Patient Care - Assignments

Assignment #1: Skills Inventory and Learning Plan

There is a short video (7 minutes); labeled “Podcast Part 2”) posted [HERE](#) to help preceptors in their role guiding students.

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

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

Key Student Responsibilities

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

Key Preceptor Responsibilities

- Review the Skills Inventory, prior feedback and Learning Plan before the placement starts.
- Provide feedback on the feasibility and appropriateness of the goals. Suggest modifications as needed. Goals need to align with what is feasible within the practice setting.

- Review progress that student presents at midpoint and final; support and/or suggest strategies for enabling the student to achieve their goals.
- Provide feedback on the student's self-assessment ratings for their goals.

Assignment #2: Patient Care Assignment

Students need to provide the following for **4 patients** on the last day of the placement:

- Provide the 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. *Include a short narrative to orient reader to nature of the patient encounter.*
- Next, as a short narrative, include the monitoring and follow-up that occurred based on the 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 happened based on the follow-up/monitoring results – did the plan change? Did it stay the same? Was the student surprised by the result, or was it expected?

Assignment #3: Professional Practice/Education Assignments

Students must complete a minimum of 2 assignments per placement based on the 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 project

Assignment postings should include evidence or artifacts relating to the activity completed such as slides and/or information handouts for presentations, educational sessions or information relating to the project or clinic conducted. If completed, evaluation forms should be submitted as well.

Teaching feedback forms, journal club and presentation format information and evaluation forms are posted in eClass for use by the student and preceptor.

An Assignment/Assessment Checklist is in [Appendix 4](#).

APPENDIX 1: PharmD Courses

Below is a snapshot of courses within each year. For the calendar description for each course, please click [HERE](#).

YEAR 1:

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

YEAR 2:

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

YEAR 3:

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

APPENDIX 2: Clinical Expectations for Care Provider Role for PharmD Students Across Y4

Experiential Courses: Guidance for Preceptors and Students

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

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

GUIDING PRINCIPLES:	
<ol style="list-style-type: none"> 1. As each placement progresses, and similar patient scenarios are encountered, students are expected to incorporate knowledge/skills and provide care with more confidence. Initially, complex patients may require more preceptor support. 2. By the end of APPE 3/4, students should demonstrate competence to apply foundational knowledge and skills to effectively manage patients with common medication therapy problems. 3. Students are expected to embody and demonstrate the attitude and behaviours of a pharmacist, and integrate required skills to enable them to achieve the expectations of their care provider role (such as effective communication, demonstrating professionalism, etc). 4. Students are expected to identify areas for development across placements and incorporate this into their Learning Plans. Furthermore, they should come prepared and ready to learn (for example: read recommended materials, demonstrate initiative). 	
APPE (Advanced Pharmacy Practice Experience) 1 and 2	APPE (Advanced Pharmacy Practice Experience) 3 and/or 4
<p><u>For assigned patients, students should:</u></p> <ul style="list-style-type: none"> ● Gather data completely and accurately. ● Identify and prioritize DRPs/patient needs (may need support with prioritization), ● Recognize and integrate relevant patient-specific factors into pharmacotherapy work-up and care planning; support may be required, especially in weeks 1-4 of each placement. ● Develop an acceptable care plan (emphasis on process). ● Justify recommendations/decisions; clinical judgment will require support, especially initially, but should improve with experience <ul style="list-style-type: none"> ○ Consult literature/references to support rationale. ● Implement care plan and undertake appropriate actions <ul style="list-style-type: none"> ○ Includes adapting, initiating, renewing/continuing, discontinuing, referral, etc. ● Provide accurate and appropriate patient education for common conditions; may need support tailoring and/or researching information for less common conditions/medications. ● Document using DAP or consult format; may require coaching to ensure consistent with the practice; adapts appropriately to practice setting. ● Fulfill commitment for follow-up as appropriate. ● Present patients verbally in an acceptable manner; may need coaching with format and content; confidence builds over placement. ● Increase knowledge of disease states relevant to practice setting, and develop confidence applying knowledge. 	<p><u>Building upon the skills practiced in APPE 1 and 2, students should:</u></p> <ul style="list-style-type: none"> ● Increase confidence and proficiency with patient care. ● Identify and prioritize commonly encountered DRPs. ● Prioritize patient needs appropriately ● Integrate patient specific factors into decision-making with minimal prompting ● Develop acceptable care plans (emphasis on quality and appropriateness of patient care recommendations). ● Defend recommendations with confidence. ● Demonstrate ability to make prescribing decisions, when appropriate. ● Provide accurate and complete patient education, identifying when additional information is required and proactively seeking this. ● Document information in an appropriate manner, with minimal assistance. ● Complete verbal patient presentations concisely and confidently. ● Readily identify knowledge gaps and seek to find answers, and review with a preceptor to verify understanding.

APPENDIX 3: Pharmacy Care Plan Worksheet with Checklist for Assessment

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

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

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

APPENDIX 4 (Pharm 556 - Selective in Patient Care): Assignment and Assessment Schedule/Checklist

Week	Student Activities
1-4 weeks before placement starts	<input type="checkbox"/> Posted updated CV/resume in CORE ELMS <input type="checkbox"/> Review syllabus: course expectations, activities and assignments. <input type="checkbox"/> In the week prior to student arriving, review the Skills Inventory/Learning Plan posted by your student. This is in Student Requirements in CORE ELMS. <input type="checkbox"/> Correspond with student regarding: therapeutics to review, start time, dress code, parking, etc <input type="checkbox"/> Develop preliminary schedule for placement. (Use modifiable calendar template, posted on Faculty website under Pharm 556) <input type="checkbox"/> Determine if IT access, and any other required accesses, is established for your student.
Week 1: Orientation to Practice Site	
Orientation	<input type="checkbox"/> Review items on orientation checklist (Appendix 5) <input type="checkbox"/> Discuss student-prepared Skills Inventory, prior feedback and Learning Plan. <input type="checkbox"/> Review preliminary schedule: plan activities and assignments and add to schedule as needed. <input type="checkbox"/> Discuss expectations for feedback process and timelines. <input type="checkbox"/> Tour of practice site. <input type="checkbox"/> Log-in to ensure Netcare access, as well as access to other on-site systems.
Patient Care	<input type="checkbox"/> Discuss care plans, clinical documentation; format and process
Early Check-In and Learning Plan	<input type="checkbox"/> END of Week 1: Discuss how things are going from both preceptor/student perspectives. Clarify any questions. Review schedule and expectations for balance of placement.
Weeks 2-4	
Patient Care	<input type="checkbox"/> Continue to provide care to patients. Develop and discuss care plans and documentation Minimum 20 patients/8 weeks.
Mid-Point Assessments (in CORE ELMS)	<input type="checkbox"/> Review the Student's Midpoint Self-Assessment in preparation for the Student Performance Assessment discussion. <input type="checkbox"/> Complete Student Performance Assessment, and review with the student at end of week 4. <input type="checkbox"/> Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment <input type="checkbox"/> Identify Professional Practice/Education assignments (2 to be completed) for the student to begin.
Learning Plan	<input type="checkbox"/> Student to share progress achieved in the Learning Plan, including self-assessment rating. Student will incorporate new goals or update/refine existing ones as appropriate.
Week 5 - 7:	
Patient Care	<input type="checkbox"/> Continue with Patient Reviews; care plans and documentation. Review with student. Reminder: Should be close to or exceed the minimum of 20 patients. <input type="checkbox"/> Continue planning/completion of activities and ensuring assignment completion is on-track, including the Professional Practice/Education assignments (2 to be completed).
Week 8:	
Finalize activities and assignments	<input type="checkbox"/> Review activities and assignments to ensure all have been completed. <input type="checkbox"/> Ensure continuity of care is communicated to patient pharmacy team.
FINAL Assessments (in CORE ELMS)	<input type="checkbox"/> Review Final Student Performance Assessment with student and recommend Placement Grade. <input type="checkbox"/> Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment <input type="checkbox"/> Student to share progress achieved on Learning Plan
Complete Course Survey	<input type="checkbox"/> Anonymous Preceptor Course Survey (survey link emailed to preceptor)

APPENDIX 5: Orientation Checklist for Student and Preceptor

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

Orientation Activity	✓
<p>1. Professional Discussions</p> <ul style="list-style-type: none"> • Preceptor’s practice experience and interests • Feedback and communication including preceptors preferred method of contact • Student/preceptor responsibilities and expectations including preceptor review of assignments, provision of feedback and student’s submission of assignments or documentation for review • Practice expectations, patient confidentiality, dress and appearance policies • Practice setting information regarding policies and procedures, including patient and staff safety • Information regarding professional and pharmacy activities • Discuss student-prepared Skills Inventory, prior feedback and Learning Plan • Discuss with students what they should do if faced with a difficult, abusive, racist patient or staff person, including microaggressions. Bring to the preceptors attention for appropriate action, debrief together, report and document, as well as contact faculty. Discuss with students the possibility of having a “safety signal” so that the student can gesture to their preceptor if they need assistance. 	<p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p>
<p>2. Course Discussions; review course syllabus</p> <ul style="list-style-type: none"> • Objectives • Activities: patient care, presentations, in-services, projects, etc. • Assignments • Assessment process: review forms (Student Performance Assessment in syllabus) and timing • Discuss student/preceptor responsibilities and expectations • Review preliminary student schedule; modifiable calendar available on website 	<p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p>
<p>3. Pharmacy Practice</p> <ul style="list-style-type: none"> • Practice specialties and characteristics • Site resources and learning opportunities • How will the student be involved in patient care? • Provide samples of forms used, documentation policies and procedures 	<p>___</p> <p>___</p> <p>___</p> <p>___</p>
<p>4. Practice Environment</p> <ul style="list-style-type: none"> • Guided tour of practice environment • Introduction to staff; include roles and how they will be involved with student experience • Library, drug information and other resources • Student workspace • Eating area, lockers, washrooms, etc. 	<p>___</p> <p>___</p> <p>___</p> <p>___</p> <p>___</p>
<p>5. Technology orientation</p> <ul style="list-style-type: none"> • Computer order entry systems • Phone, fax, internet 	<p>___</p> <p>___</p>
<p>6. Other</p>	