

# Advanced Pharmacy Practice Experiences Preceptor Quick Reference Guide 2023-24

# 4th Year Placements Pharm 557

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

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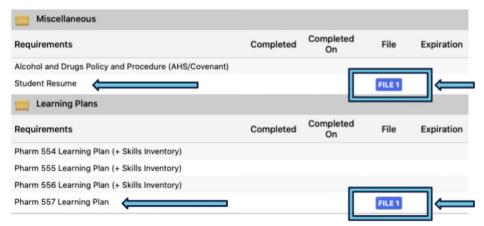
#### **Quick Links**

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

#### **Reminders**

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

#### Student Requirements



- 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) <u>here</u> (scroll down to the correct course number and click on the appropriate links).
- Utilize the modifiable calendar available on the website for customization and organization of schedule/activities. This is in Word for customized use.
- Review the on-campus courses the students have taken in years 1-3 (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 <u>Policy and Procedure Manual</u>. Preceptors are encouraged to contact the Faculty if they are unsure. **In general, time away from each placement that exceeds one day needs to be made up.** 

- Absence Tracker: Students are required to use the Absence Tracking feature in CORE ELMS. Students must record any absence in CORE ELMS and the preceptor will receive an email noting the absence and be required to confirm or deny the request on-line.
- Statutory Holidays: 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 (<a href="mailto:phexed@ualberta.ca">phexed@ualberta.ca</a>) or the course coordinator.

#### **Assessment Procedures and Information**

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

#### **Grading Criteria**

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

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

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

#### **Assessment Tips and Suggestions**

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

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

(All assessments are completed and submitted through CORE ELMS)

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

#### Pharm 557 - Mandatory Elective - 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 557 - Mandatory Elective - Course Activities Summary**

#### **COURSE ACTIVITIES**

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.



**NOTE:** Administration of Drugs by Injection (for practice sites where this is an activity): 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.

#### 1. TWO Assignments (as chosen between student and preceptor)

Students must complete at least TWO Assignments.

- Examples include (but are not limited to):
  - o 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.
  - o participation in a health promotion clinic (i.e. BP screening),
  - o 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 preceptor, 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.)

#### **Course Discussions Summary**

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

	Topic	$\checkmark$
Practice •	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).	
Mainta  •	ining 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 and how motivational interviewing and shared decision-making strategies should be used with patients.  Discuss communication strategies used by your preceptor(s) to build rapport with patients; include patients with challenging situations such as those who are very ill, have dementia or mental health concerns.	

#### Medication Distribution Processes and Safety Practices (for sites with a dispensary)

- Discuss documentation and reporting of medication errors/incidents, quality assurance processes and how the pharmacy keeps current with regulatory requirements.
- Discuss with the preceptor and/or dispensary staff components of the distribution system (e.g. unit dose, ward stock) and the scopes of practice of staff involved (e.g. order entry, filling, checking).
- Discuss error prevention strategies used to promote safe and accurate dispensing (e.g. dose calculation and checks, double/triple checks, use of technology, technician checking, etc.). Review incidence, tracking of errors and near misses.
- What is the process for reporting of medication errors or incidents at the site?
- What are the policies and processes involved to address safe medication practices (e.g. high alert meds, injectables, narcotics)? How are pharmacy personnel involved with the development and/or promotion of these processes and policies?

#### **Health Promotion and Advocacy**

- Discuss the health promotion or disease prevention programs that the preceptor is involved with and/or are available at the practice site (e.g. immunizations, smoking cessation, travel advice, blood pressure screening, etc.).
- Review the health advocacy activities provided by the pharmacy team and the practice site.
- Discuss and where possible demonstrate the advocacy and leadership roles of pharmacists such as research involvement, acquisition of compassionate/special access drugs, advocacy for drug coverage, committee involvement, development of patient care protocols.

#### **Pharmacy Services and Scope of Practice**

- (PHARM 554 Community Practice only) Discuss the impact of funding policies on the provision of professional services and how the expanded scope of practice contributes to patient care. Include the impact of funding policies on the provision of professional services with the pharmacy team.
- Discuss obtaining additional prescribing authorization (APA)? What is their professional experience with APA both in obtaining & using it? If they don't have APA, are they planning to obtain it?
- If applicable, discuss with the preceptor how they (or other pharmacists with APA) use the expanded scope of practice to contribute to patient care.

#### **Health Care Team**

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

#### **Professional Identity**

- Discuss how the preceptor engages in the following and how you envision yourself to do so:
  - Networking opportunities
  - O Utilization of online platforms ex. LinkedIn
  - O Contributions to the profession
  - O Volunteer and Service Work
  - Professional memberships and involvement

#### **Pharm 557 - Mandatory Elective - Assignments**

#### Assignment #1: Skills Inventory and Learning Plan

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

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-ported to CORE ELMS. This is a living document that should inform the student's personal learning goals. It can be updated to include new goals as needed (including areas that may require improvement after receiving feedback). The student should be taking ownership, and preceptors can support their students to ensure that goals are SMART and achievable in the practice setting.

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

#### **Key Student Responsibilities**

- Students develop 3 goals in areas that they feel require development. The Skills Inventory and feedback received to date should inform their creation.
- Students determine strategies to achieve each, as well as indicators of progress that will inform if they are achieving their goals.
- Students must post a *revised Learning* Plan when progress updates are added (at midpoint and final). The Skills Inventory does not need to be updated at midpoint and final, just the learning plan.
- Areas indicated by the preceptor as "<u>Inconsistently Meeting Expectations</u>" or "<u>Not or Rarely Meeting Expectations</u>" 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: Two Assignments**

Specific placement activities and assignments will be determined between student and preceptor. The Site Description for each elective placement setting outlines the Learning Objectives appropriate for the practice setting. Should presentations be required as part of the placement, rubrics for the following types of presentations are located in eClass (student can access these) and can be used during the placement:

- Case presentation
- Journal Club presentation
- · General presentation
- · Education Session Feedback Form

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 <u>HERE</u>.

#### YEAR 1:

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

#### YEAR 2:

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

#### YEAR 3:

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

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

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

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

#### **GUIDING PRINCIPLES:**

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

#### APPE (Advanced Pharmacy Practice Experience) 1 and 2

#### For assigned patients, students should:

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

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

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

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

#### **APPENDIX 3: Pharmacy Care Plan Worksheet with Checklist for Assessment**

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

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

Adapted with permission from the Division of Pharmacy Practice, Leslie Dan Faculty of Pharmacy, University of Toronto, 2011. Excerpt from Patient Care Process, Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta, 201

## APPENDIX 4 (Pharm 557 - Mandatory Elective): Assignment and Assessment Schedule/Checklist

Week	Planning/Assessments/Assignments
1-4 weeks before placement starts	<ul> <li>Posted updated CV/resume in CORE ELMS</li> <li>Review syllabus: course expectations, activities and assignments.</li> <li>In week prior to student arriving, review Skills Inventory/Learning Plan posted by your student. This is in Student Requirements in CORE ELMS.</li> <li>Correspond with student regarding start time, dress code, parking, etc.</li> <li>Develop preliminary schedule for placement. (Use modifiable calendar template, posted on Faculty website under Pharm 557)</li> <li>Determine if IT access, and any other required accesses, is established for your student.</li> </ul>
Week 1: Orientation	to Practice Site
Orientation	<ul> <li>Review items on orientation checklist (<u>Appendix 5</u>)</li> <li>Discuss student-prepared Skills Inventory, prior feedback and Learning Plan.</li> <li>Review preliminary schedule: plan activities and assignments and add to schedule as needed.</li> <li>Discuss expectations for feedback process and timelines.</li> <li>Tour practice setting.</li> </ul>
Early Check-In	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.
Week 4: Date:	
Midpoint Assessments and Evaluations	<ul> <li>Review MID-POINT Student Performance Assessment (in CORE ELMS) with student.</li> <li>Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment</li> <li>Ensure projects to be completed as part of placement activities are initiated and on-track.</li> </ul>
Learning Plan Progress Update	<ul> <li>Student to share progress achieved in Learning Plan, including self-assessment rating.</li> <li>Student will incorporate new goals or update/refine existing ones as appropriate.</li> </ul>
Week 8: Date:	
Final Assessments and Evaluations	<ul> <li>Review Final Student Performance Assessment with student and recommend the Placement Grade.</li> <li>Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment</li> </ul>
Learning Plan Progress Update	Student to share progress achieved in Learning Plan, including self-assessment rating.
Complete Course Survey	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	٧
1. 1	Professional Discussions	V
•	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.  Course Discussions; review course syllabus	
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	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	
<b>3.</b> l	Pharmacy Practice	
•	Practice specialties and characteristics	
•	Site resources and learning opportunities	
•	How will the student be involved in patient care?	
•	Provide samples of forms used, documentation policies and procedures	
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4.	Practice Environment	
•	Guided tour of practice environment	
•	Introduction to staff; include roles and how they will be involved with student experience	
•	Library, drug information and other resources	
•	Student workspace	
•	Eating area, lockers, washrooms, etc.	
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5.	Technology orientation	
•	Computer order entry systems	
•	Phone, fax, internet	
6.	Other	