Advanced Pharmacy Practice Experiences
Preceptor Quick Reference Guide
2022-23

4th Year Placements
Pharm 554

Pharm 554 (Community Pharmacy)
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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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Contact Information

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<thead>
<tr>
<th>Course Coordinator (554): Jody Shkrobot</th>
<th>Course Coordinator (555/556/557): Ann Thompson</th>
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<tbody>
<tr>
<td>Phone: 780.492.7482   E-mail: <a href="mailto:shkrobot@ualberta.ca">shkrobot@ualberta.ca</a></td>
<td>Phone: 780.492.5905   E-mail: <a href="mailto:athompson@ualberta.ca">athompson@ualberta.ca</a></td>
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<tr>
<th>General Inquiries: Anjela dela Cruz</th>
<th>Community Practice Faculty Liaison: Renette Bertholet</th>
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<tr>
<td>Phone: 780.492.3362   E-mail: <a href="mailto:phexed@ualberta.ca">phexed@ualberta.ca</a></td>
<td>Phone: 780.492.8066   E-mail: <a href="mailto:renette@ualberta.ca">renette@ualberta.ca</a></td>
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<tr>
<th>Institutional (AHS/Covenant Health) Faculty Liaison: Michelle MacDonald</th>
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<tr>
<td>Phone: 403.561-6278   E-mail: <a href="mailto:michelle.macdonald@ahs.ca">michelle.macdonald@ahs.ca</a></td>
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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

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.

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 minimal disruption to placement schedules. Students are expected to let their preceptor(s) know when these are scheduled (if during placement time).
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. Current provincial public health measures related to COVID-19 must be followed at each site. Students and preceptors must ensure the appropriate course coordinator is advised of any isolation requirements that impact a student’s placement (i.e. greater than 1 day).

- **Covid-Related Symptoms:**
  - DO NOT GO TO WORK
  - Contact preceptor(s) and complete AHS On-Line Assessment and follow instructions.
  - Contact Student Services & course coordinator
  - Students are expected to make up time missed due to illness. This can be a combination of time at site (extending placement time, or extending the length of day, depending what is possible at site). Remote work may also be factored into how much additional time is required. Please contact the course coordinator (Ann Thompson or Jody Shkrobot) who will advise after consulting with the preceptor(s) and site management.

- **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. Province-wide student resources are outlined on our Student Services Wellness Resources webpage. This includes access to province-wide resources.

**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 “Needs Improvement” or any ratings of “Does not Meet an Acceptable Level of Performance”, 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.
- An overview of assessments and procedures, as well as a FAQ document, is on our website here. This information will help you in completing assessments.
- 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, the student must:

1. **Achieve a rating of** "Meets an Acceptable Level of Performance" on all 3 **Professionalism** outcomes **AND**
2. **Have no more than 3 (maximum of 2 for Care Provider, if applicable) outcomes achieve a rating of** "Needs Improvement to Reach an Acceptable Level of Performance" **AND,**
3. **Have ZERO ratings of** “Not Meeting an Acceptable Level of Performance”. 
Preceptors base their overall rating for each outcome on how strongly they agree or disagree that the student has demonstrated a set of expected skills/behaviours/knowledge. The skills and behaviours associated with each outcome define expectations for this placement.

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 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 is especially important when the student is not meeting expectations, or needs 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)

<table>
<thead>
<tr>
<th>Assessment/Evaluation</th>
<th>Submission Timeframe</th>
<th>Submitted by</th>
<th>Comments</th>
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| Student Self-Assessments (SSA) (completed twice) | Midpoint and end of placement | Student | ● Midpoint should be submitted 2-days prior to the Midpoint Assessment discussions to allow time for preceptor review.  
● For Final SSA, students should complete and be prepared to discuss at final assessment. |
| Student Performance Assessment MIDPOINT | End of week 4 | Preceptor | ● It takes about 30-60 minutes to complete.  
● Includes identification and discussion of areas and skills that will be focussed on for balance of the placement. |
| Student Evaluation of Preceptor and Site – MIDPOINT | End of week 4 | Student | ● Students must discuss with preceptor after discussion of the Student Performance Assessment |
| Student Performance Assessments – FINAL Recommend Final Placement Mark | End of placement | Preceptor | ● It takes about 30-60 minutes to complete.  
● Assessment of all learning outcomes. (same as midpoint)  
● At the end of the assessment preceptors provide a Placement Mark: PASS or FAIL based on the overall grades assigned to each learning outcome. |
| Student Evaluation of Preceptor and Site – FINAL | End of week 8 | Student | ● Students must discuss with preceptor after discussion of the Student Performance Assessment |
| Preceptor Evaluation of Course | After student has left placement site | Preceptor | ● Anonymous – option provided to have Faculty contact the preceptor |
Pharm 554 - Community Practice - Updates for 2022/2023

1. No changes have been made to the course objectives, activities, assignments or assessments.
2. Request to have preceptors review organizational processes related to discrimination within the practice site with students (microaggressions and overt discrimination).
3. Due to COVID, some students were unable to complete the interprofessional activities as outlined in the course. We are asking preceptors to ensure that this activity occurs unless extenuating circumstances arise.

Pharm 554 - Community Practice - Course Activities Summary

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<tr>
<th>COURSE ACTIVITIES</th>
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<td><strong>The following are activities students must complete during the placement to meet course objectives.</strong> Completion of course activities is the responsibility of the student, with preceptor guidance to arrange for various opportunities and to identify appropriate learning opportunities.</td>
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<tr>
<td><strong>Provide Patient Care</strong></td>
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<tr>
<td>During the placement, students will provide care to patients under the supervision of the preceptor(s). For all patient care encounters, students should provide patient care as deemed appropriate by the preceptor(s) and as outlined in the <a href="#">Patient Care Process</a>.</td>
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<td>All documentation of patient care activities must be written by the student and reviewed by the preceptor.</td>
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<tr>
<td>- Interview the patient or agent and / or other relevant healthcare providers to obtain necessary information to obtain necessary information and organize the information to determine medication and health related needs.</td>
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<td>- Assess if the patient’s medication and other health related needs are being met. (complete best possible medication history and / or review a medication reconciliation; review for indication, effectiveness, safety and adherence)</td>
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<td>- List and prioritize the patient’s medical conditions and drug related problems.</td>
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<td>- Develop and implement a care plan that is based on best evidence and prioritizes and addresses the patient’s drug therapy problems and wellness needs. Integrate assessment of patient readiness into the care plan (i.e. engage patients in shared decision-making, as appropriate).</td>
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<td>- Take appropriate actions as required (i.e. prescribe under pharmacist supervision, order appropriate labs under pharmacist supervision, etc).</td>
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<tr>
<td>- Provide patient education (e.g. medication teaching, discharge counselling, etc.). Include education pertaining to patient self-management.</td>
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<tr>
<td>- Assist in patients’ self-care (e.g. use of diagnostics, point-of-care testing and self-monitoring) as required</td>
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<td>- Provide follow-up/continuity of care and modify care plans as needed; conduct follow-up (e.g. seamless care activities, modify plans as needed)</td>
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<td>- Communicate and document patient care activities</td>
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<td>- The Pharmacy Care Plan Worksheet (posted in eClass) can be used or site-specific patient care plan formats may be used. At the start of the placement, it is suggested that preceptors and students discuss which format is appropriate and comfortable for the student to use.</td>
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<td>- 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. Some sites may not be providing injections.</td>
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<tr>
<td><strong>Designated Patient Care Activities</strong></td>
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<tr>
<td>- Dispensing related</td>
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<tr>
<td>- Students assess patients and their drug therapy for indication, safety, adherence and efficacy and document care for a minimum of 4 patients each day.</td>
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• Across the placement, students should develop proficiency assessing all prescriptions as part of a systematic patient care process (including documentation).
  ○ Acute care and/or Self-care
    ○ Students provide patient care for a minimum of 20 patients with acute conditions and/or self-care needs such as infection, pain, allergic reaction, heartburn, etc.
    ○ The assessment by the student should be discussed with the preceptor and then documented on the patient’s profile.
  ○ Chronic disease management
    ○ Students provide patient care for a minimum of 20 patients with chronic conditions (minimum of 4 different chronic diseases). To gain a greater understanding of an illness, it is suggested that students care for more than 1 patient with the same/similar condition to allow for a greater understanding of how conditions present in different patients and also see various stages or severity of diseases. As the placement progresses, students should care for patients with co-morbidities and increasing complexity.

Clinical Judgment: Review and Reflection
• For 3 patients, students will write a summary of the factors considered (i.e. specific variables, evidence) to formulate one of the recommendations made. The written summary should include the clinical issue, the patient assessment (including questions asked), clinical data retrieved and considered to make a decision. The student should review each written summary with the preceptor and discuss their rationale for the decision made and the outcome.

Medication Distribution
• Students participate in all stages of the distribution process and apply the standards of practice, laws, and regulations governing pharmacy practice. Includes prescription intake, review, processing, checking (under preceptor supervision) and counselling.
• By the end of the placement students should be able to fill and check at least 25 sequential prescriptions without errors.
• Students are expected to demonstrate competency in each stage of the distribution process as well as with the laws and regulations associated with pharmacy practice.

Continuous Quality Improvement
• Students will review the ACP’s “The Systems Approach to Quality Assurance for Pharmacy Practice: A Framework for Mitigating Risk”. Students will complete a Failure Mode and Effects Analysis (FMEA) on one aspect of the patient care process within the practice site. This process does not need to be limited to dispensing activities within the practice site - it can be used to prospectively identify and correct processes within the pharmacy that could lead to patient safety incidents.

Drug Information Requests
• Students will respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients.
• 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.

Interprofessional Collaboration
• It is suggested that students use Inter-professional Student Shadowing cards developed by the Health Sciences Council (UofA) to guide expectations and discussion. Cards can be printed by going to: [http://issuu.com/hserc/docs/student_s_guid_to_interprofessional_shadowing/2](http://issuu.com/hserc/docs/student_s_guid_to_interprofessional_shadowing/2)
• It is important that the student thanks the health care professional for their time spent with the student. This can be in the method of choice by the student; verbal, email, card, etc.
• Prior to the IP visits, students will prepare an expectation of what they want to learn from the experience.
and review with the preceptor.

- During the IP visits, students will work collaboratively and demonstrate respect for the practice and knowledge of other health care professionals.
- After the IP visits, students will debrief their experience with their preceptor. Include strategies the preceptor uses to improve/promote collaboration and what barriers may affect professional collaboration.
- IP collaboration opportunities with a physician are preferred. If a physician opportunity is not available, alternatives include a PCN or homecare nurse, optometrists, physiotherapists, etc.
- Four 1/2-day visits or 2 full days are recommended. We ask that preceptors attempt to maximize the inter-professional opportunities for the student.

Health Promotion Presentation
- Provide a minimum of one health promotion presentation for the public. (e.g. school; teachers or student classes, senior groups, disease advocacy groups, etc).
  - If an in person presentation is not possible, the student should prepare a recorded presentation that can be used by the pharmacy.

Health Awareness Clinic
- Provide a health promotion, screening or education clinic for the public on a disease state or focus for the pharmacy. (e.g. women’s health, hypertension). This can be done in the community or the pharmacy.

Pharmacist for the Day
- Students, with supervision, should assume patient care and dispensing responsibilities as the sole pharmacist at the practice site. Minimum of a ½ day during week 7 of the placement is suggested and can be increased as deemed appropriate by the preceptor. The experience should be debriefed so the student can reflect on their strengths and challenges. The activity may be repeated if needed to better assess if the student is capable and confident regarding these responsibilities.

Preceptor Library Resources
- Students provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) now accessible to preceptors.
  - The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: [http://tinyurl.com/lgppqay](http://tinyurl.com/lgppqay)
  - The link to the UofA pharmacy library home page is [https://guides.library.ualberta.ca/pharmacy](https://guides.library.ualberta.ca/pharmacy)

OPTIONAL: Practice Based Research
- Students may be involved with practice-based research during their placement. Information will be provided prior to the start of the placement. Student participation in research activities is voluntary.

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

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<tr>
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<tr>
<td><strong>Practice Site Policy</strong></td>
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<tr>
<td>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).</td>
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<tr>
<td><strong>Maintaining Professional Competency and Lifelong Learning</strong></td>
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<td>Discuss with the preceptor how they maintain professional competence and the ACP Continuing Competence Program.</td>
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<tr>
<td>Review the preceptor’s previous or current ACP learning / implementation records and compare it to the student’s placement Learning Plan.</td>
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**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).

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**Pharm 554 - Community Practice - Assignments**

**Assignment #1: Skills Inventory and Learning Plan**
There is a short video (7 minutes) 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 (by student), 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.

**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 “Needs Improvement” 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: Medical Condition Diary**
When providing care for patients with acute care, self-care and chronic diseases, students are to use the Medical Condition Diary Google form over the course of their rotation.
- As students provide care for patients (i.e. minimum of 20 acute care / self care cases and 20 chronic disease management cases), they are to complete the Google form to document the various conditions encountered when providing care to patients. This diary should help the student broaden their exposure to various medical conditions they encounter.
- Students are to review their Medical Condition Diary with their preceptor during their rotation so that the preceptor can help identify patients with conditions that the student has not been exposed to
  - Students will receive a copy of this form, via email, when they submit it.

*NOTE: Students are not expected to provide care for ALL of the conditions listed in the “Medical Condition Diary”. This is only a guide to assist students and preceptors when determining which patients are selected for care plans.*

**Assignment #3: Patient Care Assignment**
Students need to provide the following for 4 patients on the last day of the placement:
- The Pharmacy Care Plan Worksheet (posted in eClass) can be used or site specific Comprehensive Annual Care Plans (CACP) or Standard Medication Management Assessments (SMMA) can be submitted. It is suggested that preceptors and students discuss which format is appropriate and most comfortable for the student to use.
- ALL chronic medical conditions should be included in chronic disease management care plans as students should be caring for the patient holistically. If there is no DRP associated with a condition it should be stated in the care plan that the assessment resulted in no DRP for that specific condition but monitoring will be ongoing.
- Each assignment consists of:
- relevant background data as applicable (reason for consult, past medical history, BPMH, pertinent ROS, relevant labs/diagnostic information)
- care plan using the pharmacy care plan worksheet or site-specific format
- corresponding clinical documentation as entered on the patient computer profile if applicable
- written communication sent to another healthcare professional (if completed)

**Assignment #4: Interprofessional Assignment**

Students are to participate in four 1/2-day visits or 2 full days visits within a medical practice in collaboration with the physician or healthcare professional team. The student is expected to demonstrate their professional competencies with the focus on providing effective patient care. This includes development of clinical decision-making and judgment skills as well as gaining an understanding of the opportunities for inter-professional collaboration.

After completion of their visits with a healthcare professional, the student completes the Inter-Professional Survey Assignment on eClass. This assignment is due on the last day of the placement.

**Assignment #5: Enhancement of Community Pharmacy Practice Assignment**

In collaboration with the preceptor, the student will design and complete a project that will benefit the practice site. Examples include creating a resource or tool for practice, developing a patient brochure, and/or enhancing patient care processes and clinical services. Following completion of the project, the student completes the Enhancement Project Survey questions on eClass at the end of the placement. Questions include title/topic, stimulus/trigger, activities completed, potential and real outcomes and what was learned through the completion of the project.
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:

<table>
<thead>
<tr>
<th>Fall Term</th>
<th>Winter Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmaceutics Part 1</td>
<td>Pharmacotherapy Part 1 (Self-care/pulmonary)</td>
</tr>
<tr>
<td>Principles of Medicinal Chemistry</td>
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</tr>
<tr>
<td>Pharmacotherapy Part 1</td>
<td></td>
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<tr>
<td>Introduction to Pharmacology</td>
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<tr>
<td>Physiology &amp; Anatomy Parts 1 and 2</td>
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</tr>
<tr>
<td>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)</td>
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</tr>
<tr>
<td>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)</td>
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<tr>
<td>Essentials of Collaborative Practice</td>
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</tbody>
</table>

### YEAR 2:

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

### YEAR 3:

<table>
<thead>
<tr>
<th>Fall</th>
<th>Winter</th>
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</thead>
<tbody>
<tr>
<td>Pharmacotherapy 6 (Sexual/Reproductive Health &amp; MSK/Joint)</td>
<td>Pharmacotherapy 9 (Viral/Fungal/Protozoal Infections, Immunization and Transplant)</td>
</tr>
<tr>
<td>Pharmacotherapy 7 (Neurology &amp; Oncology)</td>
<td>Pharmacotherapy 10 (Various populations, integrated approach to patient care issues)</td>
</tr>
<tr>
<td>Pharmacotherapy 8 (Pain and Mental Health)</td>
<td>Toxicology: Drugs of Abuse and Related Pharmacology</td>
</tr>
<tr>
<td>Patient Care Skills 5 (focus on prescribing and complex patients)</td>
<td>Patient Care Skills 6 (focus on critical thinking and decision making to address complex drug therapy problems)</td>
</tr>
<tr>
<td>Behavioural, Administrative, Social and Evidence-Based Pharmacy 5 (focus on societal impacts of a pharmacist)</td>
<td>Behavioural, Administrative, Social and Evidence-Based Pharmacy 6 (focus on business planning, social theory and pharmacy practice research)</td>
</tr>
</tbody>
</table>
APPENDIX 2: Clinical Expectations for Care Provider Role for PharmD Students Across Y4 Experiential Courses: Guidance for Preceptors and Students

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

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

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

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

<table>
<thead>
<tr>
<th>Pharmacy Care Plan Worksheet with Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEDICAL CONDITIONS &amp; MEDICAL-RELATED NEEDS:</strong> 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. <strong>DRP Categories:</strong> unnecessary drug • drug therapy required • ineffective drug • dose too low • adverse drug reaction/interaction • dose too high • nonadherence</td>
</tr>
</tbody>
</table>
| □ Are all DRPs identified (based on 4 prime areas of indication, efficacy, safety, adherence)?  
□ If no, discuss with the student; probe to see if those missing can be determined.  
□ Is rationale provided or discussed for DRPs (based on either patient or provider data)? |
| **GOALS OF THERAPY:** For each medical condition and/or DRP state desired goals of therapy/timeframe. **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.  
□ Therapeutic goal/outcome(s) stated?  
□ Patient goal incorporated (if appropriate) |
| **ALTERNATIVES:** Compare relevant drug and non-drug therapies that will produce desired goals. List the **pros** and **cons** of each therapy as well as rationale for each being included.  
Consider: Indication • Efficacy • Safety • Adherence • Cost/coverage  
□ Is an assessment of each DRP provided (factors considered to influence/determine a plan)?  
□ Are alternatives (with rationale for each) provided that would be considered acceptable for the current level of student(s)? |
| **RECOMMENDATIONS/PLAN:** In collaboration with the patient and other health care providers, select the best alternative and implement the plan. Provide a rationale for the chosen plan relative to the other alternatives considered.  
□ Plan/recommendations are outlined  
Includes:  
□ dosing considerations  
□ patient preferences  
□ ACTIONS TAKEN  
□ Appropriate/acceptable action has been taken |
| **MONITORING PLAN** |
| **MONITORING PARAMETERS:** Determine the parameters for monitoring **efficacy** and **safety** 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 |
| □ Monitoring plan present  
Includes: □ safety □ efficacy □ frequency □ duration (if appropriate)  
□ which healthcare provider will follow-up |
| **FOLLOW-UP:** Determine who, how and when follow-up will occur. |
| □ Follow-up plan present  
Includes:  
□ who □ how □ when □ includes outcome (if possible) |

Adapted with permission from the Division of Pharmacy Practice, Leslie Dan Faculty of Pharmacy, University of Toronto, 2011.  
Excerpt from Patient Care Process, Faculty of Pharmacy and Pharmaceutical Sciences, University of Alberta, 2018
<table>
<thead>
<tr>
<th>WEEK</th>
<th>STUDENT ACTIVITIES</th>
</tr>
</thead>
</table>
| 1-4 weeks before placement starts | Students should ensure they have:  
  __ Posted updated CV/resume in CORE ELMS  
  __ Reviewed therapeutics as instructed by preceptor or relevant to the practice area.  
  __ Reviewed syllabus and required readings (in syllabus and eClass): be aware of course expectations, activities and assignments.  
  __ Corresponded with preceptor; start time, dress code, parking, pre-readings, etc.  
  __ Provided their preceptor with their Netcare registration form.  
  __ Started to develop Learning Plan: post as requirement on CORE ELMS at least 1 week prior to placement. (include posting date on title) |
| Daily throughout the placement | ___ Provide Patient Care, review with preceptor.  
  • Patient Assessments.  
  • Acute condition patients (pain, infection, GERD, etc) minimum: 20 patients.  
  • Chronic medical condition patients: minimum: 20 medication reviews.  
  • Complete Medical Condition Diary for patient interactions.  
  ___ Prepare care plans for ALL patients using pharmacy care plan worksheet or practice specific forms; document care provided according to site processes.  
  ___ Complete medical and drug information requests.  
  ___ Participate in Patient Education; Rx and OTC counselling and follow -ups.  
  ___ Participate in Pharmacy Services; injections, Rx adaptations and renewals, emergency prescribing, prescribing (if pharmacist has authority) under direct supervision. |
| WEEK 1: Orientation, Create Placement Schedule | Orientation  
  ___ Review and discuss the Skills Inventory and Learning Plan.  
  ___ Review course objectives and activities  
  ___ Discuss preliminary schedule: Inter-Professional visits, clinics, presentations  
  ___ Discuss student/preceptor expectations and responsibilities.  
  ___ Discusss assess assessment processes and timelines (including informal/daily feedback)  
  ___ Tour of site and log in to ensure Netcare access  
  ___ Review COVID-19 policies and procedures in place for staff and patients. |
| Daily Patient Care and Documentation | ___ Discuss care plans, clinical documentation; format and process.  
  ___ Discuss and complete assessments of New and Refill Rxs. |
| Acute and Chronic Condition Management | ___ Provide care for at least 1 Acute Condition Patient (review indication, effectiveness, safety and adherence). Discuss with preceptor and post findings on patient profile.  
  ___ Schedule first Chronic Condition Patient Management review for week 2. Plan patient assessment; review profile, Netcare, discuss plan with preceptor. |
### Additional Activities to be incorporated and scheduled across the placement
- Discuss Continuous Quality Improvement activity - plan for the FMEA
- Schedule and arrange visits with MD or HCP (Inter-professional activity)
- Discuss/schedule the health promotion presentation for the public.
- Discuss/schedule the health promotion activity or clinic day in the pharmacy.
- Discuss topic and scope of Community Pharmacy Practice Enhancement Project.
- Ensure discussions are completed see eClass for complete list: Professionalism; etc

### WEEK 2:

#### Daily Patient Care and Chronic Condition Management
- Continue to complete assessments of New and Refill Rxs.
- Continue Acute Condition Assessments.
- Conduct Chronic Patient Management (CDM) session for first patient and schedule additional CDM reviews.
- Consider a scenario for clinical judgment assignment; review written summary.

### WEEK 3:

- Continue to complete assessments of New and Refill Rxs.
- Continue Acute Condition Assessments.
- Conduct Chronic Patient Management (CDM) session for first patient and schedule additional CDM reviews.
- Consider a scenario for clinical judgment assignment; review written summary.
- Start FMEA review process.

### WEEK 4:

#### Medication Reviews and Course Activities
- Ensure health care professional visits are scheduled. Review progress on projects, presentations, clinics.
- Review written Clinical Judgment Summary with preceptor. Have at least 2 more conversations involving clinical judgment.
- Continue Patient Medication Reviews; care plans and corresponding documentation.
- Continue with assessment of Acute Condition patients and documentation.

#### Mid-Point Evaluations and Learning Plan
- Submit MID-POINT Student Self-Assessment 2 days prior to Performance Assessment Session to allow time for preceptor review. Discuss with preceptor at review session.
- MID-POINT Assessments: Student Performance Assessment: completed by preceptor;
- MID-POINT Student Evaluation of Preceptor; discuss with preceptor
- Update Learning Plan with progress as well as grades of “Needs Improvement” from Student Performance Assessment and post the midpoint Learning plan on CORE ELMS.

### WEEK 5:

- Assess completion of activities and discussions
- Assess completion of the minimum 3 clinical judgment discussions
- Continue CDM reviews and acute condition assessments (should have 10-12 of each completed by now.

### WEEK 6:

- Complete Physician/Healthcare Inter-professional visits.
### WEEK 7:

- **Acute and Chronic Patients Discussions**
  - Conduct “Pharmacist for the Day” activity early in the week. Debrief with preceptor afterwards. Repeat later in the week as needed.
  - Complete discussions with preceptor; professionalism, communication, health promotion. Inter-professional practice, dispensing practices, medication safety, etc.
  - Ensure minimum 3 Clinical Judgment summaries/discussions have been completed.
  - Complete HCP inter-professional visit debrief with preceptor(s).

- **Pharmacist for the Day Activity**
  - Conduct “Pharmacist for the Day” activity early in the week. Debrief with preceptor afterwards. Repeat later in the week as needed.
  - Complete discussions with preceptor; professionalism, communication, health promotion. Inter-professional practice, dispensing practices, medication safety, etc.
  - Ensure minimum 3 Clinical Judgment summaries/discussions have been completed.
  - Complete HCP inter-professional visit debrief with preceptor(s).

### WEEK 8:

- **Finalize activities and assignments**
  - Ensure continuity of care documentation is entered into patient profile and conveyed to patient pharmacy team.
  - Finalize FMEA review.
  - Review activities, discussions and assignments to ensure all have been completed.
  - Update and submit the final Learning Plan in CORE ELMS.
  - Ensure completion of: minimum of 1 community presentation and 1 health promotion activity/clinic in the pharmacy. (2 separate activities)
  - Finalize Practice Enhancement Project; complete corresponding assignment on eClass.
  - Complete Inter-Professional Survey Assignment in eClass.

- **Ensure continuity of care**
  - Ensure continuity of care documentation is entered into patient profile and conveyed to patient pharmacy team.
  - Finalize FMEA review.
  - Review activities, discussions and assignments to ensure all have been completed.
  - Update and submit the final Learning Plan in CORE ELMS.
  - Ensure completion of: minimum of 1 community presentation and 1 health promotion activity/clinic in the pharmacy. (2 separate activities)
  - Finalize Practice Enhancement Project; complete corresponding assignment on eClass.
  - Complete Inter-Professional Survey Assignment in eClass.

- **FINAL Assessments**
  - **Final Assessments (CORE ELMS)**
    - FINAL Student Performance Assessment and Placement Grade; completed by preceptor; reviewed with student.
    - FINAL Student Evaluation of Preceptor and Site; completed by student; reviewed with preceptor.
    - FINAL Student Self-Assessment; completed by student; reviewed with preceptor.

- **Posting of Assignments**
  - Assignments are to be posted by last day of placement:
    - CORE ELMS: post final Learning Plan
    - Google Form: ensure Medical Condition Diary is complete
    - eClass: post FOUR care plans for the Chronic Disease Care Plan Assignment
    - eClass: complete Enhancement of Community Pharmacy Practice Project Assignment survey
    - eClass: complete Interprofessional Assignment survey
  - CORE ELMS: Post-Course Student Evaluation of Preceptor and Practice Setting; submit AFTER leaving site; due 48 hours after placement completion. This survey is NOT visible to the preceptor.
  - Submit Preceptor Recognition form; link emailed to student.
  - Complete Anonymous Student Course Evaluation (link emailed to student).
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.

<table>
<thead>
<tr>
<th>Orientation Activity</th>
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<tbody>
<tr>
<td><strong>1. Professional Discussions</strong></td>
<td></td>
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<tr>
<td>• Preceptor’s practice experience and interests</td>
<td></td>
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<tr>
<td>• Feedback and communication including preceptors preferred method of contact</td>
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<tr>
<td>• Student/preceptor responsibilities and expectations including preceptor review of assignments, provision of feedback and student’s submission of assignments or documentation for review</td>
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<tr>
<td>• Practice expectations, patient confidentiality, dress and appearance policies</td>
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<tr>
<td>• Practice setting information regarding policies and procedures, including patient and staff safety</td>
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<tr>
<td>• Information regarding professional and pharmacy activities</td>
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<tr>
<td>• Discuss student-prepared Skills Inventory, prior feedback and Learning Plan</td>
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<tr>
<td>• <strong>NEW</strong>: 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.</td>
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<tr>
<td><strong>2. Course Discussions; review course syllabus</strong></td>
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<tr>
<td>• Objectives</td>
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<tr>
<td>• Activities; patient care, presentations, in-services, projects, etc.</td>
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</tr>
<tr>
<td>• Assignments</td>
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<tr>
<td>• Assessment process; review forms (Student Performance Assessment in syllabus) and timing</td>
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<tr>
<td>• Discuss student/preceptor responsibilities and expectations</td>
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<tr>
<td>• Review preliminary student schedule; modifiable calendar available on <a href="#">website</a></td>
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<tr>
<td><strong>3. Pharmacy Practice</strong></td>
<td></td>
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<tr>
<td>• Practice specialties and characteristics</td>
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<tr>
<td>• Site resources and learning opportunities</td>
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<tr>
<td>• How will the student be involved in patient care?</td>
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<tr>
<td>• Provide samples of forms used, documentation policies and procedures</td>
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<tr>
<td><strong>4. Practice Environment</strong></td>
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<tr>
<td>• Guided tour of practice environment</td>
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<tr>
<td>• Introduction to staff; include roles and how they will be involved with student experience</td>
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<tr>
<td>• Library, drug information and other resources</td>
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<tr>
<td>• Student workspace</td>
<td></td>
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<tr>
<td>• Eating area, lockers, washrooms, etc.</td>
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<tr>
<td><strong>5. Technology orientation</strong></td>
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<tr>
<td>• Computer order entry systems</td>
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<tr>
<td>• Phone, fax, internet</td>
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<tr>
<td><strong>6. Other</strong></td>
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</table>