Pharm 305
Preceptor Course Review
APRIL 2017

Experiential Education Program
Faculty of Pharmacy and Pharmaceutical Sciences
UofA

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Community Practice Coordinator
• Preceptor Resources
• Course Overview
• What’s New?
• MyCred
• Course Activities & Assignments
• Assessing Your Student
• Preceptor Roles and Responsibilities
First of All!

Preceptors are the HEART of our program....

A small sample of student comments from last year:
far too numerous to include all!

*Both preceptors actively provided learning opportunities within their schedule to assist my objectives. Furthermore they were effective with their teachings.*

*My preceptor was always willing and available to answer any questions that I had. She provided me with many opportunities to practice my skills while still being available if I needed assistance. I learnt so much from the entire experience.*

*My preceptor was a perfect example of what it means to build strong relationships where patients trust your counsel and he was helpful in explaining how to achieve this.*
U of A Pharmacy Faculty Website

• https://www.ualberta.ca/pharmacy/preceptors

• Course Information
  • Syllabi
  • Preceptor Course Review Podcasts

• News and Events
  • Preceptor Appreciation Event

• How to become a Preceptor

• Training and Resources
  • Preceptor Guide
  • Experiential Program Policies and Procedures Manual
  • Patient Care Process Module Podcasts
  • Preceptor Workshops
  • Library Access Form

• Preceptor Benefits and Awards
Preceptors are the “heart” of the pharmacy profession and make substantial contributions to the advancement of our students and the profession.

In this section

Course Information
Comprehensive reviews and manuals to give you information about the course you are precepting.

News and Events
News and event information.

How to Become a Preceptor
Outlines the steps you take to get started as a preceptor.

Training and Resources
Information on training opportunities and preceptor/course resources.

Four distinct areas of preceptorship

The success of this program is due to our preceptors’ dedication. They create patient care opportunities, guide students and then assess our student’s performance.

These committed professionals work in a wide variety of sites:

- Institutions
- Community pharmacies
- Ambulatory clinics (including Primary Care Networks or Family Care Clinics)
- Specialty sites/Out of province
Quick Reference Guide

1 month prior to start of placement emailed via RxPreceptor to each primary preceptor. Includes:

- Summary of “What’s New”
- Summary tables: activities, preceptor discussions, assignments
- Learning Plan Information
- Assessment information; tips and suggestions
- Pharmacy Care Plan Worksheet with Checklist for Assessment
- Orientation Checklist
- Curriculum Overview
Course Overview

What’s New

and

What’s Not New, But Is Still Really Important
Pharm 305: The Course

**Focus:** introduction to community pharmacy practice
- practice basic skills; including communication
- participate in patient care
- socialization in the profession
- involvement in community practice; including community interactions
- observe pharmacist role, provision of patient care, application of clinical judgment & decision making to improve patient outcomes

<table>
<thead>
<tr>
<th>Pharmacist Role Emphasized</th>
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</thead>
<tbody>
<tr>
<td>Professional</td>
</tr>
<tr>
<td>Communicator</td>
</tr>
<tr>
<td>Care Provider</td>
</tr>
<tr>
<td>Collaborator</td>
</tr>
</tbody>
</table>

- **Activities and discussions enable student to learn about pharmacist practice in a community setting.**
- **Build basic skills & apply what they learned in classroom & skills labs**
First Year Courses

Class Room: Medicinal Chemistry          Communication
          Drug Information               Pharmacy Math
          Dispensing Workflow            Pharmaceutics (compounding)
          Critical appraisal of literature
          Pharmaceutical Biotech and Immunology
          Introduction to Patient Care Process

Therapeutic Modules: Dermatology (warts, dermatitis, psoriasis, acne, lice, etc.)
                     EENT: allergic rhinitis, general ear conditions, glaucoma, etc.

Skills Lab: Focus on professionalism and communication skills (patients, team)
             Patient-centered care and health assessment
             Medication/medical history
             Care plan creation and patient care process
             Documentation - basic
             Patient education
             Drug information & basic literature evaluation
             Dispensing/compounding
Placement Dates

• Block 1: May 1 – 26, 2017
• Block 2: May 29 - June 23, 2017

* Stat: Monday, May 22; preceptor discretion
What’s New in Pharm 305...not very much

• RxPreceptor emails from CORE ELMS

• Students will be posting a Medical/Medication Review form along with care plan

• Policy Update: Students must use “Absence Tracking” in RxPreceptor. Records and emails preceptor regarding an absence. Preceptor confirms/denies request.

• Learning Plan Activity and Assignment; introduced last year.
  - information session provided to students by Debbie Lee (ACP)
  - presentation on Continuing Competence Model and SMART goals
  - important students develop Continuing Professional Development skills early to influence their learning
What’s Not New But Still Important

• Professionalism: ethical behaviours, appropriate appearance, punctual, demonstrates initiative

• Communication: verbal and written

• Patient Care activities
  • Medical and Medication Histories
  • Patient Counselling of Prescription Topical Preparations
  • Patient Counselling of OTC Dermatological Preparations
  • Documentation

• Collaboration with dispensary team and other health professionals

• Health Advocacy

• Drug Information questions

• Drug Distribution process
• MyCred is an Electronic Credential Presentation Portfolio; available through RxPreceptor

• Available to all students and preceptors for 5 years; FREE

• Manage & store educational, professional and personal achievements

• In your RxPreceptor account, navigate to ‘MyCred’ to activate and develop your ePortfolio

• Information and set up instructions are in Documents library of RxPreceptor or contact phexed@ualberta.ca
This is MG’s eportfolio page
- student & preceptor accounts look same

Manage My Portfolio

Header Content Module
Available for viewing in your Portfolio

Tell me and I forget, teach me and I may remember, involve me and I learn.
- Benjamin Franklin

Active Content Modules
Currently available for viewing in your Portfolio

Biography / Summary
Goals (Personal & Professional)
Academic Service
How do I view MyCred Student ePortfolios? Through Student Snapshot

Contact information

Name: [Redacted]
Grad year: [Redacted]
Email: [Redacted]
Phone: [Redacted]
Cell Phone: [Redacted]
MyCred: [Redacted]

Log into RxPreceptor & Click here.
MyCred: Students’ Responsibilities

Students have been advised to complete the following on MyCred:

• Add photo and contact information
• Activate 2 mandatory ‘modules’; ‘Biography/Summary’ and ‘Goals’; these will be used in Pharm 305
• Type in a brief summary of self in “brief bio section”
• Attach their Student Information Summary under the Biography/Summary module (see template next slide)
• They must NOT “lock their module”
Student Information Summary (SIS) Template

- Student posts SIS for your review on MyCred
- Template includes:
  - Contact Information
  - Education
  - Employment History
  - Experiential Placement History
  - Goals, Practice Interests and more!

Student deadlines for posting template in Biography/Summary Module as attachment

Block 1: by April 1  ||  Block 2: by April 29
How to Access Student Information and Goals

Click on Biography/Summary Module to see Student Info

Click on Goals to see Learning Plan Assignment

Tell me and I forget, teach me and I may remember, involve me and I learn. - Benjamin Franklin
When you click on Biography/Summary Module; you will see:

Click here to see Student Information Summary

Tell me and I forget, teach me and I may remember, involve me and I learn.
- Benjamin Franklin
Course Activities and Assignments

Brief Review to highlight changes

Refer to *Quick Reference Guide* for further information
Learning Plan: Activity and Assignment
Posted on MyCred: in Goals Module

Part 1: Student Skills Inventory (acts as “self assessment”)
- Students rate their level of “comfort” performing select skills prior to starting the placement.
- Students must post at least 1 week prior to start of placement to allow preceptor time to review.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Needs Improvement</th>
<th>Meets Acceptable Level of Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathering information to create a Patient Database (includes allergy/intolerance and adherence assessment)</td>
<td></td>
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<tr>
<td>Creating Basic Care Plan</td>
<td></td>
<td></td>
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<tr>
<td>Patient Counseling: Rx Topical Preparations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Counseling: OTC Dermatological Preparations</td>
<td></td>
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<tr>
<td>Communicating with Patients</td>
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<tr>
<td>Identification of the basic components involved in the Prescription Dispensing Process</td>
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<tr>
<td>Drug Information Retrieval</td>
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<tr>
<td>Interacting with Other Healthcare Professionals</td>
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</tbody>
</table>
Learning Plan: Activity and Assignment

Part 2: Student Learning Plan. Students will:

- State 1 goal & corresponding objective(s) using SMART format. (A) They should be
  - linked be clinical skill they plan to focus on during Pharm 305.
  - specific & linked to placement activities
  - include a posting date each time to avoid confusion
- Post Learning Plan template (A) along with Skills Inventory on MyCred (Goals Module) at least 1 week prior to the start of placement to allow preceptor to review.
- Preceptor & student discuss & finalize goal & objective(s) during first few days of placement.
- Post revised Learning Plan (A) on MyCred. (Goals Module) when finalized
- Discuss progress achieved for Learning Plan goal with preceptor at midpoint (B) & final (C)
- Post revised Learning Plans into MyCred. (Goals Module) both at midpoint & final

Learning Plan Template

<table>
<thead>
<tr>
<th>LEARNING GOAL:</th>
<th>Indicators of Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Learning Objective(s)</strong></td>
<td>Describe the indicators that will inform you of your progress or achievement. Examples include debriefing with preceptor, receiving feedback from team, etc.</td>
</tr>
</tbody>
</table>

| **B. Progress at MIDPOINT (end week 2)** | Student to type progress here. |
| Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement. |

| **C. Progress at FINAL (end week 4)** | Student to type progress here. |
| Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement. |
CARE PROVIDER Activities

1. Patient Medication History: PRIMARY ACTIVITY
   - Minimum 3: one prior to midpoint for feedback & assessment
   - Preceptor should:
     - Assist with patient recruitment: at least first
     - Directly observe first session beginning of placement & provide feedback
   - Students should:
     - After session, complete assessment & develop care plan *(Pharmacy Care Plan Worksheet)* from information gathered using Medical/Medication Review Form
       - students have used both forms during first year
     - Review with preceptor prior to giving patient advice unless it is very obvious (i.e. change to snap caps, compliance packaging)
     - Complete Medication Record (on-line resources in syllabus)
       - consider as a BPMH
       - vaccination/other medical information can also be added to the record
     - Document finding on patient profile: DAP (Data, Assessment, Plan) note
       - brief & for continuity
   - NOTE: Dermatology; only therapeutic module completed
<table>
<thead>
<tr>
<th>MEDICAL CONDITION AND/OR DRPs</th>
<th>GOALS OF THERAPY</th>
<th>ALTERNATIVES</th>
<th>RECOMMENDATIONS/PLAN</th>
<th>MONITORING PARAMETERS</th>
<th>FOLLOW-UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>For each medical condition and/or DRP identified, create an integrated pharmacy care plan. 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: Indication: 1. Unnecessary drug therapy, 2. additional drug required, 3. ineffective drug, 4. dose too low, Safety: 5. adverse drug reaction/Interactions, 6. dose too high, Compliance: 7. Non-adherence</td>
<td>For each medical condition and/or DRP state desired goals of therapy. 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).</td>
<td>Compare relevant drug and non-drug therapies that will produce desired goals. List the pros and cons of each therapy. (Consider indication, efficacy, safety, adherence and cost/coverage).</td>
<td>In collaboration with the patient and other providers, select the best alternative and implement the plan. Provide a rationale for the chosen plan. Consider: Drugs: consider drug, formulation, route, dose, frequency, schedule, duration, medication management. Non-drug: non-drug measures, education, patient referral.</td>
<td>Determine the parameters for monitoring efficacy and safety for each therapy. (Consider clinical and laboratory parameters, the degree of change and the time frame).</td>
<td>Determine who, how and when follow-up will occur.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>ASSESSMENT CHECKLIST</th>
<th>Therapeutic goal/outcome(s) stated?</th>
<th>Is an assessment of each DRP provided (factors considered to influence/determine a plan)?</th>
<th>Plan/recommendations are outlined includes: dosing considerations, patient preferences</th>
<th>Monitoring plan present includes: safety, efficacy, frequency, duration (if appropriate) which healthcare provider will follow-up (first year students will likely require assistance)</th>
<th>Follow-up plan present includes: who, how, when</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are all DRPs identified (based on 4 prime areas of indication, efficacy, safety, medication organization/adherence)? If no, discuss with student and probe to see if those missing can be determined. Is there an attempt to prioritize DRPs in an acceptable manner for a first year student? Is rationale provided or discussed for DRPs (based on either patient or provider data)?</td>
<td>Patient goal incorporated (if appropriate)</td>
<td>Are alternatives (with rationale for each) provided that would be considered acceptable for a first year students? (First year students will likely require assistance)</td>
<td>Appropriate/acceptable action has been taken (First year students will likely require assistance)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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CARE PROVIDER Activities

Primary Focus: assess student’s ability to gather information

Students should:

- *Determine* medical conditions and indication for medications
- *Address* effectiveness & safety
- *Address* adherence, administration, patient goals
- *Develop* a care plan & documentation (DAP note) for computer profile
  - likely need preceptor support beyond assessment
  - focus is on determination of DRPSs related to above, medical conditions & patient goals
  - other columns on care plan worksheet (alternatives, monitoring, etc.) beyond their abilities...but they can try!
- Write up as many care plan worksheets as needed for practice
  - preceptor review helpful

ASSIGNMENT: Post 1 Medical/Medication review Form and a corresponding Care plan with 1 DRP for 1 patient along with relevant background data.
Other CARE PROVIDER Activities

2. Counselling of Topical Rxs
   • all types of topicals; eye & ear drops, vag, rectal, etc.

3. OTC Counseling of OTC Dermatological Preparation

   Students should:
   • develop Pharmacy Care Plan worksheet for all 3 Care Provider activities (helps to develop systematic process skills)
   • role play activities 2 and 3 if opportunities don’t arise

• DISCUSSION ACTIVITIES: about practice

Reminder: Patient Care Process eModules on Faculty webpage: https://www.ualberta.ca/pharmacy/preceptors/preceptors/training-and-resources/patient-care-process-module
CARE PROVIDER: Preceptor Tips and Suggestions

• Prepare with student prior to initiating activity
  • discuss steps involved, always explain your expectations
  • student should observe preceptor complete 1 patient interview
  • student should prepare & share with preceptor their planned approach
• Students conduct session/activity with supervision/observation initially; may be able to have indirect supervision after preceptor comfortable with demonstrated skills. Then
  • debrief with preceptor
  • preceptor provides feedback to student
• Patient profile documentation; may require practice, should have clear intent & include only relevant information
• ALL care plans and documentation should be reviewed by preceptor
COLLABORATOR

• Concept of inter-professional practice introduced early
• ACTIVITY: Community Based Inter-Professional Collaboration
• Identify health care practices in the community available to patients (eg. physiotherapists, chiropractors, dieticians, well baby clinics, etc.)
• Visit with practitioner to briefly discuss (15-20 mins) healthcare professional collaboration
  • Prior to visit: discuss their expectations with you
  • After visit: debrief with you
  • Students given *IP Student Shadowing Cards* to use to guide discussion
• DISCUSSION ACTIVITIES: with techs & assistants (Intra-Professional) about roles & Scope of Practice

ASSIGNMENT: Inter-Professional Reflection of Experience; your review not required
ADVOCACY and LEADERSHIP

• ACTIVITY: Prepare or participate in health promotion initiative at pharmacy OR in community
Examples:
• creating sun safety or first aid display, having diabetes
• blood pressure screening day at the pharmacy
• giving a presentation to seniors group or a school

• DISCUSSION ACTIVITIES
• **ACTIVITY:** students should be completing all drug information questions
• DI form available to students in eClass or use site specific form
• **DISCUSSION ACTIVITIES:** PADIS, Netcare, medical & drug information resources at practice site
• Provide preceptors with overview of U of A Library: upon request
• [https://www.ualberta.ca/pharmacy/preceptors/preceptors/training-and-resources/library-resources](https://www.ualberta.ca/pharmacy/preceptors/preceptors/training-and-resources/library-resources)
PRACTICE MANAGEMENT

- Participate with dispensing; not formally assessed on dispensing or compounding proficiency

- **ACTIVITY: Patient Information Requirements**
  - Complete “*Patient Information*” section of Institute for Safe Medication Practices (ISMP) Self-Assessment for Community & Ambulatory Pharmacy
  - Discuss findings with preceptor: purpose is to have positive discussion about requirements of practice as well as some of challenges, not to determine aspects of practice that need to be fixed

- **ACTIVITY: Medication & Patient Safety**
  - Complete “*Quality Processes & Risk Management*” section of ISMP Medication Safety Self-Assessment for Community/ Ambulatory Pharmacy
  - Discuss findings with preceptor
  - Following discussion, choose 1 characteristic to include in Medication & Patient Safety Assignment
Assessing Your Student

Assessments YOU complete of student
Assessments STUDENTS complete
Course Evaluations
Student Performance Assessments

• RxPreceptor allows only 1 primary preceptor to be assigned
  • ensure comments are shared between preceptors
• Options we have seen co-preceptors do to address this:
  • Primary preceptor logs in for other preceptor; enter their comments.
  • Primary Preceptor shares their RxPreceptor password with other preceptor so each has access.
  • Print assessment forms; share with other preceptor to write comments & submit back to primary preceptor. Comments could be also be emailed

NOTE: Your RxPreceptor password can be changed before & after placement. Easy to do; “reset password” on RxPreceptor landing page. Preceptors can set up ‘temporary password’ to maintain password integrity.
## Assessments: Preceptors Complete

<table>
<thead>
<tr>
<th>Assessment /Evaluation</th>
<th>Completion</th>
<th>Comments</th>
</tr>
</thead>
</table>
| **Early** Assessment of Student| End of **Week 1** of placement | - Identifies early concerns, mostly involves professionalism criteria  
- Quick, 5-10 mins to complete |
| **Midpoint** Student Performance Assessment | End of **Week 2** of placement | - Assess behaviours/skills  
- 6 learning outcome areas (professional, care provider, etc.) are assessed; 20 specific outcomes  
- End of form; *Identification of Expectations & Areas for Focus* for the rest of placement; discuss with student  
- NO GRADE GIVEN (pass or fail) |
| **Final** Student performance Assessment | End of **Week 4** of placement | - Behaviours/skills assessed same as midpoint  
- “Placement Grade” given preceptor; PASS or FAIL  
- Faculty provides “Course Grade” based on assessment & assignment review |
| **Preceptor Evaluation/Survey** | End of placement | - Link to survey emailed; not RxPreceptor  
- Comments appreciated! (~30 mins to complete)  
- Anonymous; can request Faculty to contact you |
Student Performance Assessment: Grades

- Provided descriptors for each outcome on assessment
- Preceptors provide **overall mark** for that outcome:
  - Not Meeting an Acceptable level of performance
  - Needs Improvement to Reach an Acceptable Level of Performance
  - Meets Acceptable Level of Performance
  - Exceeds an Acceptable Level of Performance
- Needs Improvement (NI): **OK at MIDPOINT:** not at FINAL
  - NI at midpoint means that with more effort & time you think student will pass, just need more time & practice
- **Not Meeting an Acceptable Level of Performance:** indicates major concerns, Faculty must be notified by midpoint at latest
- You may be contacted by Faculty; **just to ensure things are OK**
- To pass placement:
  - Student must achieve at least “*Meets Acceptable Level of Performance*” on **all 20** outcomes
  - Needs Improvement at FINAL on any outcome is a FAIL
**Student Performance Assessment: Example**

**Care Provider**

Please provide an overall rating for each of the Care Provider outcomes.

### Care Provider Outcome 1: Develops and maintains professional relationships with patients/caregivers

When making your overall rating, please reflect on how strongly you agree or disagree that your student:

- engages patient; *may require some preceptor prompting and guidance*
- exhibits sensitivity, respect and empathy with patients and caregivers
- identifies/responds to patient cues with *preceptor guidance*

### Care Provider Outcome 2: Gathers relevant medical and medication history

When making your overall rating, please reflect on how strongly you agree or disagree that your student:

- utilizes multiple sources of patient information (i.e. Netcare, patient/caregiver, patient profile/chart, other healthcare providers)
- employs effective interviewing techniques (i.e. appropriate open and closed-ended questions)
- employs a systematic process to gather data accurately based on the Patient Care Process document with *preceptor guidance*
- gathers the appropriate amount of information with *preceptor guidance*
- retrieves and assesses relevant lab tests and diagnostic assessments with *preceptor guidance*
- is improving timeliness and efficiency over the course of the placement
- attempts to clarify and manage conflicting data, seeking support when necessary

### Care Provider Outcome 3: Determine medical conditions and assess if the patient’s medication-related needs are being met

When making your overall rating, please reflect on how strongly you agree or disagree that your student:

- considers patient perspective/priorities regarding meeting medication-related needs
- determines patient’s medical condition(s)
- assesses drug therapy for indication, efficacy, adherence and safety to identify DRPs with minimal preceptor guidance for therapeutic areas ALREADY covered in the curriculum (see Preceptor Guide for list)
- attempts to assess drug therapy and identify DRPs for therapeutic areas NOT covered in the curriculum with *preceptor guidance*
Assessment Tips

• Review assessments in advance on RxPreceptor
• Review Student Self Assessment (especially at midpoint) before completing Student Performance Assessments: good comparator
• Discuss assessments with student; acknowledgement on form
• Discourage use of “Exceeds” at midpoint unless student is outstanding
• Comment boxes are helpful for student and Faculty; be specific
• Midpoint Identification of Goals:
  • *After midpoint assessment* important to discuss “action plan”
  • Include goals for areas that “need improvement” or to address course objectives that have not yet been done

An overview of Completing Assessments is available: see webinar: http://youtu.be/n1C0QxVzGf0 (22 min long)
Assessment Tips

• What if student clearly “Needs Improvement” or you have concerns???
  • CONTACT THE FACULTY ASAP; Renette or Marlene
  • You do not need to wait until midpoint if concerned

• Important:
  • tell student your concerns
  • provide specific feedback
  • document with specific examples
  • advise student to contact the Faculty (Renette or Marlene)
# Assessments: Students Complete

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<td></td>
<td></td>
<td>- Quick; 5-10 mins to complete</td>
</tr>
<tr>
<td>Student Self Assessments; <strong>Midpoint and Final</strong></td>
<td>End of Week 2 and End of Week 4 of placement</td>
<td>- Compare Student Performance Assessment (completed by preceptor) with Student Self Assessment</td>
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<tr>
<td></td>
<td></td>
<td>- At midpoint, student should provide this to you 1-2 days in advance of assessment review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- At final; include in final assessment review; good comparator</td>
</tr>
<tr>
<td>Midpoint Assessment of Preceptor and Site</td>
<td>End of Week 2</td>
<td>- To be discussed with preceptor</td>
</tr>
<tr>
<td>1. Course Evaluation</td>
<td>End of Week 4; after student has completed course</td>
<td>- Comments about all aspects of the course</td>
</tr>
<tr>
<td>2. Post Course</td>
<td></td>
<td>- Final quality assurance check</td>
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<tr>
<td>Preceptor and Site Evaluation</td>
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Preceptor Roles and Responsibilities

Pre-Placement Planning
Co-Precepting
Correspondence
Policies and Procedures
Preceptor Roles

- **Pharm 305**: preceptor usually providing direct instruction, modeling & coaching
  - student observes preceptor → student assists preceptor → student performs while preceptor observes → student performs independently
- **Guide** student through course; roles and responsibilities of community practice
- **Provide** regular feedback; debriefing after activities is key to learning
- **Supervision** - guiding principle: **ensure patient safety**
  
  **ACP:**  
  - **Direct Supervision:** Restricted Activities: 
    Dispensing Schedule 1 & 2 drugs, administer vaccines, adapting, emergency prescribing  
  - **Indirect Supervision:** 
    Other patient care related activities preceptor’s discretion how often & how independently an activity is done
- **Review documentation:** care plans, chart notes
- **Assess** the student; formally & informally
- **Contact us** if needed
Pre-Placement Planning

• Ensure you can log into RxPreceptor; contact: phexed@ualberta.ca or 780-492-9780 with any login, MyCred or viewing difficulties

• Good idea to start developing schedule template; weekend & evenings OK

• Coordinate orientation & activities with team, co-preceptor (if applicable) & other health care professionals

• Students should have already contacted you about Netcare Access: important to submit form early!

• Review Quick Reference Guide; includes Orientation Checklist and Syllabus

• Syllabus also posted on RxPreceptor Documents Library & Faculty website
Co-Precepting

Often we are not precepting alone: co-precepting in teams of 1-2 preceptors

Important to consider:

- **Planning**: meet prior to student starting to plan. *Try to schedule preceptors in “time blocks” vs changing daily*
- **Communication**: establish how you will communicate; especially in transition between preceptors
- **Expectations**: discuss having consistent expectations
- **Assessment**: If primary preceptor is not completing the assessments, determine who will. How will RxPreceptor be accessed? Have plan for each preceptor involved to contribute.
  - If student is struggling, preceptors develop an action plan, Faculty can help with that.
- **Debrief**: after placement, *what went well? improvements?*
- Information about new models of precepting and co-precepting: https://www.ualberta.ca/pharmacy/preceptors/preceptors/training-and-resources/models-of-precepting/co-precepting-model
Preceptor/Student Correspondence

Ensure you can log into RxPreceptor; contact phexed@ualberta.ca or 780.492.9780 if problems

<table>
<thead>
<tr>
<th></th>
<th>Block 1</th>
<th>Block 2</th>
</tr>
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<tbody>
<tr>
<td>Date whereby student info summary should be posted in MyCred</td>
<td>April 1</td>
<td>April 29</td>
</tr>
<tr>
<td>Date whereby preceptors should email student to confirm review of MyCred (3 wks prior)</td>
<td>April 10</td>
<td>May 8</td>
</tr>
<tr>
<td>When students have been instructed to email/phone preceptor if no communication received from preceptor (2 wks prior)</td>
<td>April 17</td>
<td>May 15</td>
</tr>
</tbody>
</table>

Important to reply to students to confirm that you have reviewed MyCred and advise about where to meet on Day 1 and pre-readings they should complete to prepare.
ExEd Policies and Procedures Manual

• Online; link included in Quick Reference Guide
• Outlines student responsibilities & course policies
• Attendance: 40 hours/week; 5 x 8 hour days
  • *May 22: stat holidays; preceptor’s discretion
• Absences: students must record request in RxPreceptor; you confirm/deny
  • Sickness: if > 1 day missed, time must be made up
  • Bereavement (for family member); same as above
  • Contact faculty for guidance
• Cannot take another course at same time as placement
• Change of schedule outside of stated timelines must be approved by course coordinator in advance of change
• Schedule routine medical appts outside of course time
What To Do?

• If you think you have a problem; you usually do!!!
• Call Faculty early
  • Renette Bertholet: renette@ualberta; 780-492-8066
  • Marlene Gukert: mgukert@ualberta.ca; 403-254-6449
    • you might not have experienced the issue before but we likely have
    • we would like to assist you in any way we can!
    • no concern is too small; we develop plan & work together
    • encourage student to contact Faculty
    • IMPT to discuss difficulties with students, concerns should not be a
erprise; specific feedback helpful with examples for student

• Contacts listed in syllabus, website, or just contact: phexed@ualberta.ca or 780.492.9780 and they will triage
• Course Questions; contact Marlene; mgukert@ualberta.ca
• RxPreceptor/MyCred Questions: phexed@ualberta.ca