Pharm 316
Preceptor Course Review

Experiential Education Program
Faculty of Pharmacy, UofA

Ann Thompson, Course Coordinator
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Michelle MacDonald: AHS & Covenant Health/Faculty Liaison
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MARCH and APRIL 2017
AGENDA

• Overview of Feedback from 2016
• Preceptor Resources
• Course Overview, including What’s New?
• Expectations of 2nd year Student
• MyCred
• Course Activities & Assignments
• Assessing your student
• Preceptor Roles and Responsibilities
Feedback from 2016

Students:

**HIGHLY rated:**

- The length of the course (to achieve outcomes)
- Sufficiently challenging to enable learning
- Safe learning environment to enable my learning
- Preceptors role modeled good rapport building with teams and patients (4.8/5)
- Preceptors facilitated my learning (4.8/5) and demonstrated a commitment to teaching (4.7/5)
- Overall, valuable learning experience (4.7/5)

Preceptors are the HEART of our program....

*guide, coach, mentor, teacher, assessor, role model*
Feedback from 2016

Student Comments:

**Liked:**

• Seeing role of hospital pharmacist
• Diverse roles – rural practice, various patient populations,
• Ability to increase confidence in speaking with patients
• Opportunity to participate in patient care processes
• Co-precepting – seeing various styles of practice

**Suggestions for Improvement:**

• Allow more hands-on experience to foster independence
• Encourage more participation in patient/team communication
• Explain rationale in decision-making
• Provide more feedback, both positive and constructive
• Scholarly opportunities for quiet times
Feedback from 2016

Preceptors:

**HIGHLY rated:**
- The Preceptor Quick Reference Guide was useful (4.9/6)
- The course builds upon student knowledge and skill (5.1/6)
- Confidence in assessing students and providing student performance ratings using course assessments (4.9/6)
- Knowledge of when to contact faculty about at-risk students (5.2/6)
- Faculty promotes professional behaviour among preceptors and students (5.2/6)

**LOWER rated:**
- Accessing library resources (4/6)
- How to obtain a preceptor faculty appointment (3/6)
Preceptor Resources:
https://www.ualberta.ca/pharmacy/preceptors

- Course Information: Syllabi, Preceptor Course Review Podcasts
- Training and Resources:
  - Preceptor Guide
  - Models of Precepting
  - Patient Care Process Module Podcasts
  - Library Access Form
- Preceptor Faculty Appointment process, awards and recognition
AHS/Covenant: Preceptor Resource Package

• **New “Preceptor Preparation Flow Map”**

• **Purpose:** assist and guide preceptors with preparing for a placement, navigate available resources and avoid ‘re-inventing the wheel’.

• **Encourage you to use this document;** located on Provincial Pharmacy Clinical Practice, Preceptor Support, Sharepoint Page
  
  https://share.ahsnet.ca/teams/PSPP/PCP/PreceptorSupport/Mentorship%20Documents/Forms/AllItems.aspx

• Supporting documents hyperlinked from Preceptor Preparation Flow Map
  - Site Welcome Letter Template (may be used by site secretary or manager depending on site’s processes)
  - Preceptor Expectation Letter Template
  - Template Calendars

• Preceptor Connection & Online Communities of Support for New Models of Precepting
  - Throughout year. Invites sent out via LYNC.
Course Overview

What’s New

and

What’s Not New, But Is Still Really Important
Pharm 316: The Course

**Focus:** introduction to hospital practice

- First exposure for most students
- Building basic clinical skills
- Observe pharmacist role, provision of patient care, application of clinical judgment & decision making to improve patient outcomes

<table>
<thead>
<tr>
<th>Pharmacist Roles Emphasized:</th>
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<tbody>
<tr>
<td>Professionalism</td>
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<tr>
<td>Communication</td>
</tr>
<tr>
<td>Care Provider</td>
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<tr>
<td>Collaborator</td>
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</tbody>
</table>

*Activities and discussions will enable student to learn about pharmacist practice in an institutional setting.*
Placement Dates

• 4 Placement Blocks; Blocks 1-3 overlap
  - Block 1: May 1 -26, 2017
  - Block 2: May 15 – June 9, 2017
  - Block 3: May 29 - June 23, 2017
  - Block 4: June 26- July 21, 2017

NOTES: Students have had 4 week community placement following 1st year.
This course increased to 4 week duration in 2016.
What’s New in Pharm 316

• Very little!
• New Policy: Tracking of student absences from placement in Rxpreceptor; student to submit, and preceptors will be prompted to approve/deny.

• Will maintain following processes/activities:
  • MyCred: professional ePortfolio (for use by students; preceptors can view posted information in RXpreceptor)
    • Updated Student Information Summary
  • Learning Plan Activity and Assignment
    • Additional explanation to students about importance and resources available to support development
    • Importance of preceptor feedback to ensure appropriateness and feasibility
What’s Not New But Still Important

• Professionalism and Communication
• Patient care activities: more opportunity for practice; increase in number of patient care activities to complete
  • Medical and Medication histories (including med rec and allergy assessments)
  • Risk assessments (i.e. renal function, CV risk, etc)
  • Care planning
  • Discharge teaching, where possible and appropriate
  • Documentation
• Collaboration with other health professionals
• Patient Case Presentation (informal; to support learning)
• Drug Information questions
• Drug distribution overview
Expectations of a Second Year Student
What can they do?

- Review a chart; familiar with components
- Communication with patients
- Medication history (BPMH)
- Allergy assessments; need guidance with alternatives if allergy present
- Basic documentation (DAP format)
- Approach to answering DI questions
  - May need help with decision-making based on findings

**Skills with initial development, but guidance/support required in “real” practice**

- Medication reconciliation – practiced in lab
- Development of basic care plan for conditions covered
  - Includes identifying and resolving DRPs
- Communication with team members (have practiced SBAR)
- Patient education (for conditions covered)
My Cred

ePortfolio for Student Use
(and preceptors are linked via RXpreceptor)
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
How do I view MyCred Student ePortfolios? - through Student Snapshot

Log into RxPreceptor & Click here.

Contact information
Name: 
Grad year: 
Email: MyCred

Click Here
MyCred: Students’ Responsibilities

Students have been asked to complete the following on MyCred:

• Add a photo
• Add their contact information
• Activate mandatory ‘modules’; ‘Biography/Summary’ and ‘Goals’
• Type in a brief summary of self
• Attach their Student Information Summary (using template)
Student Information Summary

- Students post a Student Information Summary (SIS) for your review on MyCred
- This template includes:
  - Contact Information
  - Education
  - Employment History
  - Experiential Placement History
  - Goals, Practice Interests and more!

- Student deadline for posting in the Biography/Summary Module (as attachment)
  - Blocks 1 and 2: by April 1
  - Blocks 3 and 4: by May 1
# How to Access Student Information and Goals

Click on **Biography/Summary Module** to see Student Info.

Click on **Goals** to see Learning Plan Assignment.

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In medicine, as in statecraft and propaganda, words are sometimes the most powerful drugs we can use.  
*Dr. Sara Murray Jordan*
When you click on Biography/Summary Module; you will see:

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*Faculty of Pharmacy and Pharmaceutical Sciences*
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**Student Information Summary**

**Goals (Personal & Professional)**

**Educational Background**

**Employment History**
Course Activities and Assignments

Refer to *Quick Reference Guide* for further information
(It includes summary tables included for activities, preceptor discussions and assignments.)
Learning Plan: Activity and Assignment
Posted on MyCred

Part 1: Student Skills Inventory (acts as a 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 an Acceptable level of Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathering medical and medication history (Medication Reconciliation and BPMH)</td>
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<tr>
<td>Conducting Initial patient assessment</td>
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<td>Creating Basic Care Plans</td>
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<td>Ongoing Patient Assessment and Monitoring</td>
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<td>Patient Education</td>
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<td>Seamless Care Activities</td>
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<tr>
<td>Documenting Patient Care Activities</td>
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<tr>
<td>Responding to Drug Information Requests</td>
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<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:

• Students will state 1 goal & corresponding objective(s) using SMART format. (A) They should be:
  - linked to a clinical skill they plan to focus on during Pharm 316.
  - may need help determining what is realistic.
• 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 the placement.
• Your feedback is very helpful to student to choose a goal and objectives that are feasible.
• Students are responsible to report their progress to you at midpoint (B) and final (C)!

Learning Plan Template

<table>
<thead>
<tr>
<th>Learning Goal:</th>
<th>Indicators of Progress</th>
</tr>
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<tbody>
<tr>
<td><strong>A. Learning Objective(s)</strong> Use SMART format (objectives must be measureable/observable by your preceptor.</td>
<td>Describe the indicators that will inform you of your progress or achievement Examples include debriefing with preceptor, receiving feedback from team members, self-reflection or evaluation, etc.</td>
</tr>
<tr>
<td><strong>B. Progress at MIDPOINT (end week 2)</strong> Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
<td>Student to type progress here.</td>
</tr>
<tr>
<td><strong>C. Progress at FINAL (end week 4)</strong> Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
<td>Student to type progress here.</td>
</tr>
</tbody>
</table>
Care Provider Activities

Medical Chart Review Activity
• Student reviews Medical Chart Module on AFPC Informatics eResource; http://afpc-education.info/moodle/index.php
• Student also reviews patient chart(s) at site
• Following review of both, student discusses what they have learned with preceptor (no assignment required)
  - i.e. organization & content comparisons and differences
• Activity must be completed in first 3 days of the placement
• Students have reviewed one mock chart in Skills Lab

BPMH & Medication Reconciliation for at least 4 patients
• Practiced both in Skills Lab
• If Med Rec completed by other team member, student can verify it is correct, and document as appropriate.
Care Provider Activities

Medical/Medication History and Care Planning for at least 4 patients
- with preceptor supervision
- following interview → create patient database (medical & medication review)
- complete patient assessment & care plan using patient care process
- care plans should include all elements; may need support
- document if appropriate: chart note
- develop acceptable, systematic assessment & care plan (only assessed on therapeutics they have taken in class)

**Assignment:** student will post 1 care plan with 1 DRP for 1 patient (along with relevant data) after reviewed with preceptor
- Care plans reviewed by Faculty for completion; students will present their care plan in September during Skills Lab.

Allergy Assessment, Risk Assessment and Discharge Patient Care/Patient Teaching for at least 2 patients
- document findings, include in chart if appropriate
Care Provider: Preceptor Tips and Suggestions

• Preparation with student prior to initiating activity:
  • Discuss steps involved
  • Student should observe preceptor complete one patient interview
  • Student should prepare & share with preceptor his/her 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; document in chart (if appropriate).
  • Preceptor provides feedback to student; challenge student to think about decision making and next steps

• All care plans and documentation should be reviewed by preceptor.

• Encourage use of Pharmacy Care Plan Worksheet as guide (teaches systematic process)

• Care Plan Worksheet Preceptor Checklist; in both syllabus & Quick Reference Guide, posted at: https://www.ualberta.ca/pharmacy/preceptors/preceptors/course-information
Collaborator

Inter-Professional Activity: student will spend time with at least 1 other HCP caring for one of their patients or is from their unit
- i.e. assisting nurse with BP/med admin, shadowing dietician, social worker, accompanying patient while they are receiving care from PT, OT

• Students should use IP Shadowing Card for planning & activity. Suggested discussion points:
  • Communication and collaboration techniques (past and current)
  • Dealing with challenges or barriers

• Students should debrief with preceptor to discuss what they learned
  - i.e. what skills used by that professional were interesting?
Practitioner's Guide to Interprofessional Student Shadowing

Student's Guide to Interprofessional Shadowing

Goal: To explore another profession's role in context.

Before a shadowing interaction:
- Plan ahead in advance
- Negotiate length of interaction based on professional's caseload; adapt if clinical issues emerge
- Discuss format of interaction: observation of routine, consultation, independent learning
- Provide learning objectives in advance
- Understand patient contact is dependant on patient consent and professional discretion

During a shadowing interaction, discuss:
- Professional's role, broadly (including scope of practice and restricted activities)
- Education of their profession (after years, clinical time, courses etc.)
- Activities in their daily work routine
- How have they adapted their role to setting
- How they work with patients to achieve patient's goals
- How and when patient contact is initiated
- How they work with other professions, including points of role overlap

Practitioner's Guide to Interprofessional Student Shadowing

Goal: Support students to learn more about your profession's role.

Before a shadowing interaction:
- Be realistic about your time, agreeing to shadow when you are pressured for time may not produce the optimal experience
- Discuss the length of the interaction, even short interactions can be useful if intentional; inform student that length of interaction may change based on emerging clinical issues
- Discuss the format of the interaction — will you provide information via discussion, see the students observe your clinical routine and/or rounds
- Request student's formal and/or informal learning objectives in advance
- Use patient consent and your discretion to determine if student-patient interaction is appropriate
- Consider providing student with background information on your profession
- Connect with student's preceptor or instructor to discuss interaction

During a shadowing interaction, you may wish to describe:
- Your role, broadly, including scope of practice changes and restricted activities
- Education requirements of your profession (number of years, clinical time, courses etc.)
- Activities in your daily work routine
- How you have adapted your role for this setting
- How you work with a patient to achieve patient's goals
- How and when patient contact is initiated
- How you work with the student's profession
- How you work with other professions, including points of role overlap

Scholar

• **Drug Information:** student will answer at least 4 drug information questions that utilize different resources
  - provide DI as needed for patient care
  - answers written or verbal: preceptor discretion

• **Patient Care Plan Presentation (with clinical question) [15-18 min]**
  - students have learned components of formal patient presentations; have not presented individually
  - completed activity that asked them to consider what content to include in a presentation (formal/informal) depending on audience
  - created formal case presentation outline using their shared decision case
  - presented their patient as an informal case using SBAR format
  - suggested format & evaluation in syllabus & Quick Reference Guide

Advocacy and Leadership

• Participate in site based advocacy activities (PAW, immunizations, smoking cessation) & discuss pharmacist’s role (committee involvement, development of resources for patients & team members)
Practice Management

• Differences in practice depending on site; participation varies
• Students should have guided tour or participate in distribution
  - drug distribution process; include delivery to patient & who
    is responsible for each step (Scope of Practice)
• Other activities involve
  - drug formulary
  - AHS Adverse Events & Patient Safety Website
  - error prevention strategies
  - incident & ADR reporting processes

Deb van Haaften has recorded a presentation on: *Drug Distribution in Hospital Pharmacies*. Students will be required to watch prior to placement starting.
Assessment and Evaluation

1. Assessments YOU complete of student
2. Assessments STUDENTS complete
3. Course Evaluations
Student Performance Assessments

• RxPreceptor assigns 1 primary preceptor to student
• Options for co-precepting teams:
  - Primary preceptor logs in for other preceptor to review RxP (student profile/ resume & assessment).
  - Primary Preceptor shares RxPreceptor password with team for each to access. Password can be changed after placement.
  - Print assessment forms; co-preceptors write comments & submit back to primary preceptor. (comments could be also be emailed)

NOTE: Your RxPreceptor password can be changed before & after placement. Preceptors can set up ‘temporary password’ to maintain own password integrity & privacy.
Assessments: Preceptors Complete

• **End of Week 1:** Early Assessment of Student (quick, 5-10min)
  • Ensures progress on track, mostly involves professionalism criteria and preparedness for experience

• **End of Week 2:** Midpoint Student Performance Assessment (~1hr)
  • Assess behaviours/skills
  • Identification of expectations & areas for focus for rest of placement
  • NO GRADE GIVEN (Pass or Fail)

• **End of Week 4:** Final Student Performance Assessment (~ 1hr)
  • Assess same behaviours/skills as midpoint
  • Placement Grade given by preceptor; pass or fail

• Faculty provides “Course Grade” based on assessment & assignment review
  - 6 Learning Outcome Areas (professional, care provider, etc) will be assessed; 19 specific outcomes
Student Performance Assessment: Grades

- Descriptors for each outcome on assessment
- Preceptors provide overall mark for that outcome:
  - Not Meeting an Acceptable level of performance
  - Needs Improvement*
  - Meets Acceptable Level of Performance
  - Exceeds an Acceptable Level of Performance
- To pass placement: student must achieve at least “Meets Acceptable Level of Performance” on all 6 outcomes
- Needs Improvement (NI) OK at MIDPOINT: not at FINAL
  - At midpoint means that with more effort & time you think student will pass, just needs more time & practice
- You may be contacted by Faculty; just to ensure things are OK.
- Needs Improvement at FINAL on any outcome is a FAIL.
- Not Meeting an Acceptable Level of Performance: indicates major concerns, Faculty must be notified by midpoint at latest.
## 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/care givers

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 care givers
- 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

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**Save work frequently when completing!**
Assessment Tips

• Review assessments in advance on RxPreceptor

• Midpoint Identification of Goals:
  - after midpoint assessment important to discuss “action plan” with goals for areas that “need improvement” or to address course objectives that have not yet been done

• What to do if student clearly “Needs Improvement” or you have concerns:
  - CONTACT THE FACULTY ASAP; Michelle or Ann
  - Important to tell student your concerns & provide specific feedback; documentation important with specific examples

• Discourage use of “Exceeds” at midpoint unless student is “outstanding”.

• Remember to review Student Self Assessments prior to completing Student Performance Assessments at midpoint; good comparator

• For overview of Completing Assessments, see webinar at: http://youtu.be/n1C0QxVzGf0 (22 min long)
Assessments and Evaluations: Students Complete

• Student Self Assessments
  • Midpoint & final
  • Compare student performance assessment completed by you with self assessment completed by the student (at midpoint, student should provide this to you 1-2 days in advance of review)

• Early Assessment of Preceptor; quick
  • End of Week 1

• Midpoint Assessment of Preceptor and Site
  • Formative assessment to be discussed at the midpoint

• Two evaluations completed post placement by student
  • Preceptor & site
  • Course
Preceptor Roles and Responsibilities

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

• Pharm 316: preceptor usually providing direct instruction, modeling & coaching
  • Student observes preceptor → student assists preceptor → student performs while preceptor observes → student performs independently

• Guide student through the course; roles and responsibilities of hospital practice; including inter-professional & patient-centred care opportunities

• Provide regular feedback and assess the student

• Supervision - guiding principle: ensure patient safety
  • ACP: Direct Supervision - Restricted Activities: dispensing Sch 1 & 2 drugs, administer vaccines, adapting, emergency prescribing
    Indirect Supervision – other patient care related activities
  • Preceptor’s discretion to determine how often and how independently an activity is done

• Contact us with questions or if your student is struggling or not progressing in any way
Pre-Placement Planning

• Primary Preceptors (all blocks) were emailed “Pharm 316 Quick Reference Guide”. This guide includes:
  - links to course syllabus, ExEd Program Policies & Procedures Manual
  - orientation checklist, activity & discussion summaries & schedules
  - suggested presentation format & evaluation form
  - assessment information
  - information about courses covered in curriculum already including skills lab
• Good idea to start developing schedule template
• Coordinate orientation & activities with team, co-preceptor (if applicable) & other HCPs

• Managers/secertaries are requesting student IT access and Netcare
• See Sharepoint:
  https://share.ahsnet.ca/teams/PSPP/PCP/PreceptorSupport/SitePages/Home.aspx
Co-Precepting

• Often you are not precepting alone; co-precepting team of 1-2 preceptors

• Important to consider:
  • Planning- meet as a team prior to placement to plan.
  • Communication- establish strategies especially in transition
  • Expectations - discuss having consistent expectations
  • Assessment- determine who will complete assessments & RxPreceptor access.
  • Debrief- after placement

• See Guide:  
  https://www.ualberta.ca/pharmacy/preceptors/preceptors/training-and-resources/models-of-precepting/co-precepting-model

• Students have had an overview of precepting models included in orientation sessions.
## Preceptor/Student Correspondence

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

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<tr>
<th></th>
<th>Blocks: 1 &amp; 2</th>
<th>Blocks: 3 &amp; 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date whereby student info should be in MyCred</td>
<td>April 1</td>
<td>May 1</td>
</tr>
<tr>
<td>Date whereby preceptors should email student to confirm review of MyCred</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</td>
<td>April 17</td>
<td>May 15</td>
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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 manual; link included in Quick Reference Guide
• Outlines student responsibilities & course policies

• Scheduling
  • 40 hours/week; 5 x 8 hour days (*May 22 and July 1: stat holidays; preceptor’s discretion)
  • Sickness, bereavement 1 day OK; if > 2 days missed, time must be made up
  • 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*
  • Michelle.macdonald@AHS.ca; 403-561-6278
  • athompson@ualberta.ca; 780-492-5905
  - 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!

• Contacts listed in syllabus, website, preceptor guide, etc or just contact: phexed@ualberta.ca
  - 780.492.9780 (Candace Ramjohn)

• Course Questions; contact Ann; athompson@ualberta.ca

• AHS Related Questions; contact Michelle; Michelle.macdonald@AHS.ca

P. Retxamer / McCall Questions and General Questions