PHARM 426: Experiential Education

COURSE OUTLINE and SYLLABUS

Fall, Winter, 2018-2019

PHARM 426: Experiential Learning Part 4
Community Practice Placement
Course weight: *8

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Policy about course outlines can be found in
Course Requirements, Evaluation Procedures and Grading of the University Calendar
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COURSE DESCRIPTION

This 8-week experiential course is designed for students to practice their knowledge and skills from the classroom and skills lab in a community practice setting. Through structured activities, the student is expected to demonstrate increasingly efficient professional competencies with the focus on providing effective patient care. Students are also expected to develop their role in supporting patient care through effective provision of drug information and drug distribution, advocating for patients and communities, and developing their practice management skills. This course provides opportunities for students to further develop evidence based clinical decision-making and judgment skills necessary for optimizing patient-centered care.

This is considered to be an advanced clinical placement as students are in their final year of undergraduate degree studies. Students are expected to be self-directed and step into the role of a pharmacist, accepting professional responsibilities as outlined in the course under the guidance of a pharmacist preceptor. By completion of the placement, students should be “entry to practice” competent as they are within months of graduating.

COURSE PREREQUISITE

Pharm 316

REQUIRED READING

1. The Patient Care Process
3. There are additional readings/website resources associated with select activities (to be completed during the course) to support discussion topics with the preceptor.

RECOMMENDED RESOURCES

Prior to the placement students should ask their preceptor about references and resources that should be brought to the placement or pre-readings that should be completed prior to the placement. These resources may be helpful for students to use these when completing activities and assignments.

2. Standards of Practice for Pharmacists and Pharmacy Technicians https://pharmacists.ab.ca/standards-practice
4. Clinical Resources: Bugs and Drugs, RxFiles, Dipiro’s Pharmacotherapy: A Pathophysiologic Approach (Textbook), Lexicomp, Dynamed and RxTx (all located at: http://guides.library.ualberta.ca/pharmacy
5. Alberta College of Pharmacists (ACP) Jurisprudence Learning Module; Login required to access. https://pharmacists.ab.ca/login/jurisprudence/. Review of this resource will assist with preparation for the Jurisprudence Exam as well as be beneficial for the placement.

COURSE SCHEDULE

Course dates are listed by the term. Individual student schedules are listed in RxPreceptor.

Fall Term
- Block 1: August 27 - October 19, 2018
- Block 2: October 22 - December 14, 2018

Winter Term
- Block 3: January 7 – March 1, 2019
- Block 4: March 4 - April 26, 2019
COURSE OBJECTIVES

The course is designed to develop the following knowledge, skills and attitudes. During the course, students will:

Knowledge:
1. Apply fundamental knowledge in daily practice.
2. Integrate best available evidence into pharmacy practice; eg drug information requests, patient care

Skills:
3. Provide patient centered care and manage patients’ medication and health needs.
4. Exercise critical thinking and clinical judgment and inter-professional collaboration to make informed decisions and solve problems.
5. Communicate both orally and in writing in an effective, responsible and responsive manner that encourages trust and confidence.
6. Work collaboratively with the patient, family, caregivers and other healthcare professionals to facilitate the management of the patient's health needs.
7. Promote the health of communities and populations (e.g. cultural groups, the vulnerable, disease awareness and prevention) and integrate health promotion into patient care
8. Participate in the site’s process for managing accurate, effective and safe drug distribution.
10. Describe the impact of funding to provide professional services, and participate in strategic planning of new and/or improved patient care services where possible.
11. Participate in quality assurance and improvement programs (e.g. quality of care, cost effectiveness of services provided, planning for practice change and/or implementation of services).
12. Develop personal and professional leadership skills.

Attitudes:
13. Adhere to ethical standards in the delivery of pharmacy care.
14. Display professional behavior and attitude, eg. Initiative, maximizing learning opportunities.
15. Demonstrate professional accountability and respect to patients and others.
16. Demonstrate a commitment to learning by evaluating their practice and knowledge/skills to identify areas for development.

GRADING

Pharm 426 is a Credit/No Credit course. At the end of the placement, preceptors recommend a grade on the final Student Performance Assessment. To pass the course, students must receive a “pass” on their final Student Performance Assessment (see Appendix 1) from their preceptor, complete all required assignments including resubmissions requested by the course coordinator (or designate reviewer) in a satisfactory manner (see Course Assignments) and complete all required assessments (see information below). The Faculty course coordinator provides a final course grade (Pass: Credit or Fail: No Credit) following review of the submitted assessments and assignments.

Students Who May Require Support
The student should email the Course Coordinator following review of the Midpoint Student Performance assessment if any outcomes are rated as Not Meeting an Acceptable Level of Performance or if performance concerns are identified and students would like additional support to address these.

ASSESSMENT INFORMATION

• All assessments are completed and submitted using CORE ELMS (RxPreceptor).
• Preceptors are encouraged to provide comments to support their assessment ratings and must discuss their final recommendation with students prior to submitting the assessment.
• All assessments are posted in CORE ELMS (RxPreceptor) prior to the start of the placement. Students are encouraged to review so they know the assessment outcomes and criteria.
• Further information and details regarding each assessment can be found in eClass.

ASSIGNMENTS

• Assignments are posted before, during the placement on various weeks and by the last day of the placement.
• All posted documents must have all identifiers removed to ensure patient confidentiality.
• All assignments must be typewritten; using minimum 11-point font and double-spaced.
• Assignments will be reviewed for completion only to ensure course requirements are met. Individual feedback may be provided if the assignment does not meet course requirements.
• If deemed necessary by the Course Coordinator (or designate Faculty reviewer), assignments may require resubmission. Students will be advised by email if a resubmission is required. Students are provided with an explanation regarding the reason for the resubmission as well as instructions about how to better meet the assignment requirements.
• As per course policy students must check UofA e-mail accounts every 3 days for at least 2 weeks following course completion in case a resubmission of an assignment is required.
• To assist students and preceptors with planning across the 8 weeks, an “Activities, Assignments and Assessments Schedule” has been provided in Appendix 7.

LEARNING PLAN

The learning plan needs to be initiated before the start of the placement. First posting is 1 week prior to start of the placement to allow for preceptor review.

Based on their self-assessment (Steps 1 and 2), students will determine 2 practice goals to focus on during their placement. (Step 3). The learning plan should be:
1. Discussed with the preceptor during first week of the placement; make adjustments if necessary.
2. Finalized by the end of the first week.
3. MIDPOINT: Reviewed with the preceptor and updated to indicate progress made with the initial learning goals.
Students must add the outcomes and skills that are identified as “needs improvement” in the Midpoint Student Performance Assessment to the Midpoint Learning Plan for the second half of the placement.
4. FINAL: Reviewed with the preceptor and updated at the final.

OTHER COURSE ASSIGNMENTS

These assignments are completed during the placement and posted at various times during the placement as well as at the end of the placement.

1. Acute Condition Assignment
• Following discussion of a patient with an acute condition with the preceptor, document assessment findings on the patient’s computer profile. (review indication, effectiveness, safety and adherence)
• Total: 2 examples of documentation to be posted
• Screen shot is OK
• Post patient documentation in eClass [as entered on the computer profile] for 1 patient by 9:00 PM on the 4th Tuesday of the placement.
• Post documentation of 1 additional patient by 9:00 PM on the 6th Tuesday of the placement.

2. Chronic Disease Care Plan Assignment
Each assignment consists of:
• relevant background data (see Appendix 2a)
• a care plan using the pharmacy care plan worksheet or site
• Post patient documentation in eClass for 1 patient by 9:00 PM on the 4th Tuesday of the placement.
• Post documentation of 1 additional
specific forms
• corresponding clinical documentation as entered on the patient computer profile
• written communication sent to another healthcare professional (if completed).
• Students will be developing care plans for ALL patients.
• Total: 2 patient care plans & documentation to be posted.
Students should choose care plans that best demonstrate their patient care skills for assignments.
• blank pharmacy care plan worksheet and worksheet assessment form for preceptors and students are both posted in eClass
Activity and Assignment Information: Appendix 2a

3. Inter-Professional Collaboration: Confirmation Form
The student completes the Inter-Professional Confirmation Form; including the number of hours spent at the site.
See Appendix 3b; Confirmation template is also posted in eClass.

4. Pharm 426 Inter-professional Visit: Thank You
It is important that the health care professionals be thanked for their involvement in our program.
• Students must provide the healthcare professional(s) with a written or emailed thank you note.
• In addition to the thank you gesture, the note or email should include at least one thing that they learned from that health care professional.

5. Enhancement of Community Pharmacy Practice Project
Following completion of the project create a summary that includes:
• Outline: topic, learning goals, stimulus/trigger and activities completed.
• Outcomes: potential and real for the practice site; include what was learned through completion of the project
Word Count: Max. 250 words. Include word count on assignment.

ACTIVITIES
Preceptor supervision is important, especially early in the placement, with graduated independence for various activities such as gathering a medication history, patient education, as competence is demonstrated. Throughout the placement, restricted activities such as final checking of prescriptions and injections must be supervised.

Additional information for some activities is in the appendices.

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<th>COURSE ACTIVITIES</th>
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<tr>
<td>The following are activities that students must complete during the placement to meet course objectives.</td>
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1. Provide Patient Care
For all patient care encounters students should provide patient care as deemed appropriate by the preceptor(s) and outlined in the Patient Care Process Document.
• Interview the patient or agent or other relevant healthcare providers to obtain necessary information and organize the information to determine the patient’s medication related & other relevant health-related needs.
• Assess if the patient’s medication needs are being met. (complete a medication reconciliation and review for indication, effectiveness, safety and adherence)
• List and prioritize the patient’s medical conditions and drug related problems.
• Develop and implement a care plan (e.g. CACPs, SMMAs, etc.) that is based on best evidence and prioritizes and addresses the patient’s drug therapy problems and wellness needs (include pharmacist
• Engage patients in shared decision-making (as appropriate).
• Provide accurate and appropriate patient education, including patient self-management.
• Provide continuity of care; conduct follow-up and modify care plans as needed.
• Assist in patients’ self-care (e.g. use of diagnostics, point-of-care testing and self-monitoring of patient’s health status)

1A. Patient Assessment during dispensing (Refill and New Prescriptions)
• Students must assess patients and their drug therapy to provide and document care for a minimum of 2 patients each day receiving refills and 2 patients each day receiving new Rx’s. Assess drug therapy for indication, safety, adherence and efficacy.
• Across the placement, students should develop proficiency doing this for all prescriptions as part of a systematic patient care process (including documentation) to ensure safe and effective drug therapy.

1B. Acute Condition and/or Self-Care Assessment
• Students must provide patient care for a minimum of 16 patients with acute conditions and/or self-care needs such as infection, pain, allergic reaction, minor ailments, etc.
• The assessment developed by the student should be discussed with the preceptor and then documented on the patient’s profile. (Written care plan is not required; a care plan worksheet may be used to guide the care provided.)

Corresponding Assignment: Acute Condition Assignment.

1C. Chronic Disease Management
• Students must provide patient care for a minimum of 16 patients with chronic conditions.
• Students should provide care for a minimum of 4 different chronic diseases.
• As the placement progresses, students should care for patients with co-morbidities and increasing complexity.

ALL care plans must be reviewed by the preceptor. If a CACP or SMMA is submitted it must also be signed by the preceptor prior to submission.

ANY documentation to be sent to another healthcare professional must be co-signed by the preceptor, and include their contact information, prior to sending. More information; Appendix 2a.

Corresponding Assignment: Chronic Disease Management Assignment.

2. Pharmacy Services
During the placement, students will participate in the scope of professional practice under the supervision of the preceptor(s). This includes;
• Prescription renewal and adaptation when appropriate.
• Emergency prescribing.
• Prescribing at initial access (Pharmacist must have additional prescribing authorization from ACP.)
• Administration of Drugs by Injection: Students in the Class of 2019 had the option to complete the training as required by ACP to administer drugs by injection. Students who successfully completed the training and also have completed CPR Level C + First Aid, should practice administering drugs by injection. Students must only administer injections under the direct supervision of a pharmacist authorized by ACP to administer drugs by injection.
• Ordering (with pharmacists who have a PracID) and monitoring lab test results on Netcare.

3. Medication Distribution
• Participate in all stages of the distribution process and apply the standards of practice, laws, and regulations governing pharmacy practice. This includes prescription intake, review, processing and checking (under preceptor supervision) and counselling.
• By the end of the placement students should be able to fill and check at least 20 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.

ACP’s Jurisprudence Learning Module: https://pharmacists.ab.ca/jurisprudence/ is recommended as a resource for this. (Note: students need to be logged into the ACP website to access this resource).
4. **Drug Information Requests**
   - Respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients.
   - Information may be required either verbally, written or both. (Drug Information Inquiry Record form is posted on RxPreceptor and eClass).
   - Students are expected to use appropriate resources and various levels of evidence; primary, secondary and tertiary references. Student should also use more than 1 resource for each question and discuss all answers with the preceptor.

5. **Clinical Judgment: Review and Reflection**
   - For at least one patient care assessment and resulting actions, students will write a summary of the decision making and critical thinking that they used to justify their actions (e.g. change a dose, recommend a different therapy, refuse to fill, no change required, etc). The summary should include the clinical issue, the findings from the patient assessment and rationale for their recommendation.
   - The student should review this written summary with the preceptor and discuss their rationale for the decision made, the challenges they encountered (if any), the documentation required and the outcome.
   - After the initial discussion with a written summary, it is suggested that students have at least 2 more clinical judgment discussions with the preceptor. If deemed appropriate by the preceptor, a written summary is not required.

6. **Inter-Professional Collaboration**
   - Students are required to complete visits with a physician. If a physician opportunity is not available, alternatives include a PCN or homecare nurse, optometrists, physiotherapists, etc. (PCN pharmacists, or other pharmacists, do not qualify for this activity, as they are not a different health care professional.)
   - Four 1/2 day visits or 2 full days are recommended. The number of visits with the same healthcare professional should be maximized. The intent is that with repeated visits with the same practitioner, students will be involved as a collaborator rather than an observer.

   **Corresponding Assignments**: Pharm 426 Inter-Professional Confirmation Form; see Appendix 3b. Pharm 426 Inter-Professional Visit Thank You Assignment

7. **Enhancement of Community Pharmacy Practice Project**
   - 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 brochure, and/or enhancing patient care processes and clinical services. More Information: Appendix 4.
   - **Corresponding Assignment**: Enhancement of Community Pharmacy Practice Project

8. **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). This should be done in the community.

9. **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.
   - The activities (presentation and clinic mentioned above) are NOT a substitute for the Community Pharmacy Practice Enhancement Project). However, they may be linked. i.e. the Project may be preparation of a brochure/poster and planning for a clinic.

10. **Pharmacist for the Day**
    - Students (with supervision) should assume patient care and dispensing responsibilities as the sole pharmacist at the practice site. A minimum of a ½ day during week 7 of the placement is suggested; can be increased as deemed appropriate by preceptor. The experience should be discussed so the student can reflect on their strengths and weaknesses and ways to address these. The activity may be repeated if needed to better assess if the student is capable and confident regarding these responsibilities.
    - Students should be aware of dispensing regulations (see Jurisprudence Module; recommended reading.)

11. **Patient and Medication Safety**
    - ACP and ISMP have developed a resource; Systems Approach to Quality Assurance for Pharmacy Practice: A Framework for Mitigating Risk. Pharmacies are busy environments and this tool helps teams to identify potential process vulnerabilities before an incident occurs. Students will go to:
After reading the resource students will have a discussion with the preceptor to discuss and potentially apply the concepts in the resource to the practice environment.

More information regarding activity and discussion topics: Appendix 5

12. Preceptor Library Resources
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.

The link to the UofA pharmacy library home page is http://guides.library.ualberta.ca/pharmacy

13. OPTIONAL: Practice Based Research
Students may be involved with practice-based research developed by Faculty during their placement.

Students will be provided with information regarding research possibilities prior to the start of the placement. Student participation in these research activities is voluntary. Research information is posted on eClass.

### COURSE DISCUSSIONS

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

These are the themes or topics for discussion. ADDITIONAL DISCUSSION POINTS ARE IN ECCLASS.

1. **Responsibilities as a Professional**
   Discuss ACPs Code of Ethics (https://pharmacists.ab.ca/code-ethics)

2. **Maintaining Professional Competency and Lifelong Learning**
   Discuss with the preceptor how they maintain professional competence through self-directed learning and the ACP Continuing Competence Program.

3. **Patient Communication**
   Discuss motivational interviewing strategies used to engage patients with their care.

4. **Dispensing Regarding Schedule II and III drugs**
   Discuss the responsibility of the pharmacist and other pharmacy team members? Include strategies and stressors.

5. **Inter-Professional Experience**
   Based on an inter-professional experience during the placement students should choose one example of inter-professional collaboration that impacted them and that they would like to model in their future practice and discuss this with the preceptor.

6. **Health Promotion and Advocacy**
   Discuss the health promotion or disease prevention programs that the preceptor is involved with and/or are available at the pharmacy (e.g. smoking cessation, travel advice, blood pressure screening, etc.)

7. **Practice Resources**
   Discuss with the pharmacists resources they use including Netcare.

8. **Pharmacy Services and Scope of Practice**
   Discuss the impact of funding policies on the provision of professional services and how the expanded scope of practice contributes to patient care.

9. **Safe and Effective Medication Distribution Practices**
   Discuss documentation and reporting of medication errors/incidents, quality assurance processes and how the pharmacy keep current with jurisprudence/standards of practice.

10. **Practice Based Research**
    Discuss the challenges and benefits of participating in Practice Based Research.
POLICIES AND PROCEDURES

All course policies and procedures are included in the Undergraduate Experiential Education Policies & Procedures Manual. Students must review this manual prior to the placement, as there are policies specific to this placement. These include:

- Attendance policies
  - students are expected to be at the placement site for a minimum of 40 hours/week
  - know policies regarding completion of Absence Tracker for illness, bereavement, etc.
  - know policies regarding Faculty endorsed (e.g. job fair, PDW) and non-endorsed activities (e.g. job interviews)
- Human Blood and Bodily Fluid Exposure (HBBFE) Procedures (Needlestick Injury)
- Requirements (i.e. first aid)
- Netcare access, deletion and troubleshooting information
- Procedure for failed Clinical Placements
- Protection of Privacy Policy
- Preceptor Award procedures

Additional Course Costs
Costs associated with the travel, accommodation or additional practice site requirements are the responsibility of the student. Students are encouraged to apply for travel awards that are available.

Plagiarism and Cheating
The University of Alberta is committed to the highest standards of academic integrity and honesty. Students are expected to be familiar with these standards regarding academic honesty and to uphold the policies of the University in this respect. Students are particularly urged to familiarize themselves with the provisions of the Code of Student Behaviour (online at www.governance.ualberta.ca) and avoid any behaviour which could potentially result in suspicions of cheating, plagiarism, misrepresentation of facts and/or participation in an offence. Academic dishonesty is a serious offence and can result in suspension or expulsion from the University. See Academic Regulations.

Student Accessibility Services (SAS)
Students registered with Student Accessibility Services (SAS) who require accommodations are advised to contact the course coordinator early in the year to discuss. Given placements occur off-campus, time is needed to assess appropriateness and ability to meet any recommended accommodations.

LATE SUBMISSION POLICY

It is the student’s responsibility to submit all assignments, including resubmissions, according to stated deadlines. UofA email accounts must be monitored every 3 days for at least 2 weeks after the end of the course to ensure all assignments have been completed satisfactorily and assessments submitted. Late assignments, including requests for a resubmission, may result in a delay of course grade posting; students will receive a grade of “incomplete” until all course requirements are satisfied. Assignments that are posted late on eClass will require completion and submission of a Professional Accountability Form. This form is placed on the student’s file.

Activity, Assignment and Assessment Schedules
To assist students and preceptors with planning across the 8 weeks, an “Activities, Assignments and Assessments Schedule” has been provided in Appendix 7.
**SUGGESTIONS and TIPS FOR SUCCESS**

Pharm 426 students have completed introductory placements and are aware that these courses are different from classroom learning. Professionalism and communication skills are crucial components of these experiences. Although preceptors will guide learning, students are ultimately responsible to ensure completion of all activities, assignments and assessments.

*Full participation in the experience is the first step to passing the placement.* Because this is considered to be an advanced placement, patient accountability and self-motivation is expected by the preceptors. The course activities listed are minimums; maximizing learning opportunities is a professional responsibility. Students that succeed go beyond these minimums and participate as a pharmacy team member. Due to the variability of practice sites, experiences will differ and students are expected to take initiative, identify learning opportunities and improve timeliness and efficiency over the course of the placement.

Another important student responsibility is contacting the Faculty with concerns if they arise. There are assessments built into the course that provide checks and balances about learning and the overall experience, however it is important that students contact the Faculty prior to or during the placement to discuss concerns or questions. These are dealt with in an individual and confidential manner.

The article “Strategies Pharmacy Students Can Use to Ensure Success in an Experiential Placement” (see Required Reading List) provides helpful information including “obvious” and “not-so-obvious” strategies to ensure success in a placement.

Students are invited to participate in the nomination process for the Preceptor of the Year Award and Preceptor Recognition Program. Information regarding these awards can be found in the Undergraduate Experiential Education Policies & Procedures Manual.

**TECHNOLOGY REQUIREMENTS**

**Course Information**

Course information (syllabi, tools, resources) will be posted in eClass prior to the start of the first placement. Experiential program information such as Netcare will be posted in the documents library of RxPreceptor and eClass. If assistance is needed with eClass or RxPreceptor, contact phexed@ualberta.ca.

**Assignments**

Assignments are posted in eClass. *To allow for preceptor access*, The Learning Plan is posted in RxPreceptor as a requirement under “My Requirements.”

**Assessments**

All assessments are submitted using CORE ELMS(RxPreceptor).

**Netcare**

The pharmacy student is responsible for initiating their Netcare request for Pharm 426 with the site Access Administrator (AA) at least 4 weeks in advance of the placement start date to ensure access is obtained in time. Student Netcare hard token will be mailed directly to the pharmacy address that was entered on the eForm. Students are encouraged to login to Netcare on the first day to ensure access. Further information regarding registration, how to confirm access, troubleshooting and contact information is posted in eClass and in the Undergraduate Experiential Education Policies & Procedures Manual.
### APPENDIX 1: Student Performance Assessment

This table outlines the behaviours and outcomes that students will be assessed on by the preceptor at the midpoint and final points of the placement.

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<td><strong>Professional</strong></td>
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| 1. Displays professional behaviour | • Displays honesty, integrity, and commitment, compassion and respect for diversity and patient autonomy.  
• Is well groomed and wears clothing and attire that is appropriate for the practice setting.  
• Is punctual  
• Respects patients/other team members and does not engage in distracting behavior.  
• Maintains privacy and confidentiality. |
| 2. Demonstrates professional responsibility and accountability | • Fulfills their professional tasks, practice and course assignments in a diligent and timely manner.  
• Accepts responsibility for their actions and inactions.  
• Balances and prioritizes activities to fulfill all responsibilities in a timely manner.  
• Responds to and incorporates feedback.  
• Is improving timeliness and efficiency over the course of the placement. |
| 3. Demonstrates initiative and self-directed learning | • Takes initiative to learn, enhance skills and integrate knowledge (i.e. maximizes learning opportunities).  
• Seeks and interprets feedback to identify deficits or strengths in competence/performance.  
• Evaluates their skills and knowledge to identify areas for continuing professional development. (i.e.: development of Learning Plan, with progress updates and addition of new goal(s) as appropriate). |
| **Communicator**          |                                                                                                                                              |
| 1. Demonstrates effective non-verbal and verbal communication skills | • Speaks clearly and effectively.  
• Uses appropriate language, tone and pace  
• Uses appropriate non-verbal communication. (e.g. open body language, use of facial expressions)  
• Engages in and manages 2-way conversations with patients/caregivers.  
• Listens effectively.  
• Demonstrates the appropriate level of confidence. |
| 2. Is able to communicate effectively and respectfully in writing. | • Correctly applies the rules of syntax, grammar and punctuation  
• Has focus and clear intent or purpose.  
• Includes relevant and appropriate content and tone to suit target audience (e.g. documentation for other health care professionals, drug info questions, written assignments).  
• Documents patient information in an effective manner.  
• Provides appropriate level of detail and is written using an organized process (e.g. care plans DAP notes [Data, Assessment, Plan]) |
| **Care Provider**         |                                                                                                                                              |
| 1. Develops and maintains professional relationships with patients/care givers | • Engages patient independently to determine reason for seeking care.  
• Exhibits sensitivity, respect and empathy with patients and care givers.  
• Identifies and responds to patient cues.  
• Establishes goals in collaboration with the patient when appropriate |
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<th>OUTCOME</th>
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<td>2. Gathers relevant medical and medication history</td>
<td>• Determines when it is ethically and professionally appropriate to involve caregivers and/or family members.</td>
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| 3. Determine medical conditions and assess if the patient’s medication-related needs are being met | • Utilizes multiple sources of patient information. (e.g. Netcare, patient/caregiver, patient profile/chart, other healthcare providers)  
• Employs effective interviewing techniques. (e.g. appropriate open and closed ended questions, uses motivational interviewing when appropriate)  
• Employs a systematic process to gather data (including labs and other diagnostic assessment) accurately based on the Patient Care Process  
• Completes appropriate physical exam when applicable, e.g. blood pressure assessment,  
• Gathers an appropriate amount of information.  
• Clarifies and manages conflicting data seeking support when necessary. |
| 4. Develops a care plan that addresses medication and health needs | • Uses a systematic approach to develop care plans including for patients with multiple co-morbidities.  
• Seeks guidance for complex problems or areas with poorly defined evidence.  
• Sets goals that are relevant, realistic and that include timelines if appropriate.  
• Generates a realistic set of alternatives and assess the pros and cons  
• Develops a safe and effective plan (recommendations, monitoring and follow up) including decisions regarding specific actions for managing patient needs (e.g. refer, adapt, dispense)  
• Provides rationale for the chosen plan. |
| 5. Implements the care plan when appropriate | • Implements and adapts plan (if needed) with patient/caregivers  
• Educates the patient on pharmacological and non-pharmacological recommendations  
• Negotiates and adapts plan with patient/caregivers with preceptor support when necessary  
• Initiates and completes seamless care activities when appropriate. |
| 6. Follow-up and evaluate as appropriate | • Determines follow-up required including who is responsible.  
• Provides follow-up if possible.  
• Interprets follow-up information and modifies plan if needed. |

**Collaborator**

| 1. Works effectively with members of the team including patients and their families, pharmacy colleagues and individuals from other professions | • Establishes and maintains positive relationships.  
• Recognizes and respects the roles and responsibilities of team members.  
• Join with others in respectful, effective shared decision-making.  
• Contributes to optimize team functioning. |

**Scholar**

| 1. Demonstrates the fundamental knowledge required for pharmacists | • Has minimal gaps in therapeutic knowledge required to provide patient care.  
• Uses experience(s) and knowledge gained in the placement to better manage patients. |
<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
</tr>
</thead>
</table>
| 2. Uses evidence-based processes to provide drug information and recommendations | • Integrates best available evidence into clinical practice (information requests, patient care.)  
• Determines appropriate search terms for a given question.  
• Uses multiple and appropriate sources to gather information. (e.g. guidelines, primary, secondary and tertiary sources)  
• Documents and references recommendations where applicable.  
• Critically analyzes information and demonstrates clinical judgment.  
• Responds with an appropriate recommendation based on analysis of evidence/information. |
| 3. Integrates clinical judgment and critical thinking | • Able to apply fundamental knowledge in daily practice to arrive at recommendations and decisions that are appropriate, accurate and practical.  
• Under conditions of uncertainty, weighs the pros and cons of alternatives to make decisions; *may require preceptor support.*  
• Exercise critical thinking and clinical judgment to make informed decisions and solve problems.  
• Logically defends recommendation(s). |

**Advocacy and Leadership**

| 1. Promotes the health of individual patients, communities and populations | • Facilitates patient’s interaction with the health care system through advice, education and/or guidance *with minimal preceptor guidance.*  
• Integrates health promotion into patient care (e.g. encourages vaccinations, smoking cessation, lifestyle changes, self-monitoring of medical conditions.  
• |

**Practice Management**

| 1. Manages the safe and efficient distribution of medications | • Participates in the site’s process for managing accurate, effective and safe drug distribution. (i.e. can fill and check prescriptions accurately and appropriately and provide relevant patient education.  
• Evaluates factors critical for safe and efficient medication distribution. |
| 2. Participates in quality assurance and improvement programs | • Participates in practice change initiatives to improve the quality of care and/or practice environment *with preceptor guidance.* |
APPENDIX 2: Patient Care Outcome

2a. Chronic Disease Management Activity Information

Chronic disease management (CDM) care plans include all disease states considered to be chronic in nature. This includes those eligible for Comprehensive Annual Care Plans (COPD, asthma, heart failure, ischemic heart disease, mental health, hypertension, diabetes) as well as chronic pain, bone and joint disease, women’s or men’s health, cancer, etc or as identified by the preceptor.

To gain a greater understanding of an illness, it is suggested that students care for more than 1 patient with the same/similar condition as this allows for a greater understanding of how conditions present in different patients and also see various stages or severity of diseases.

Students must develop care plans for a minimum of 4 different conditions; exceeding this is encouraged.

Students should:

- Use all sources (Netcare, speaking with patient/caregiver, other pharmacy team members) to develop the Best Possible Medication History and care plan, identify discrepancies and if appropriate make suggestions.
- Integrate assessment of patient readiness (state of change) into the care plan.
- Review all care plans and documentation with the preceptor; discuss the rationale for decisions and modify as needed. If the care plan is submitted it must be signed by the preceptor.
- Ensure preceptor is aware of the care plan worksheet assessment checklist. (Appendix 2b)
- Develop written communication to other health care professionals as needed; ensure it is reviewed and co-signed by the preceptor prior to sending.
- Ensure continuity of care for patients is arranged or handed-over to the preceptor after placement completion.

Assignment Guidelines and Suggestions

- The Pharmacy Care Plan Worksheet is the format students use at the Faculty and can be used. Alternatively, the Comprehensive Annual Care Plans (CACP) and Standard Medication Management Assessments (SMMA) are care plans using a different format, with similar components. It is suggested that preceptors and students discuss which format is appropriate and most comfortable for the student to use. In some cases, students may start with the worksheet first and change later in the placement to site specific forms.
- It is important that the care plans demonstrate a patient care process and include the elements of a care plan; medical conditions and/or DRPs, goals of therapy, alternatives (as appropriate), plan and monitoring, follow-up (as appropriate).
- ALL chronic medical conditions should be included in chronic disease management care plans. Students should be caring for the patient holistically, not just one specific condition. 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.
- If the site uses only hand-written documentation processes, these can be posted as is.
- All patient identifiers MUST be removed.
- Each posted care plan assignment must include relevant background data with the following components.
  - Chief complaint/concern
  - HPI
  - PMHx (past medical history)
  - Medication history (include generic name, doses and sig)
  - Pertinent ROS (if applicable)
  - Relevant labs/diagnostic information (if applicable)
APPENDIX 3: Collaborator Outcome

3a. Inter-Professional Visit Activity Information

This activity allows students to have opportunities to establish positive working relationships with other health care professionals, see how they provide patient care, and collaborate if possible.

The number of visits with one health care professional should be maximized. The hope is that with repeated visits with the same practitioner, students will be involved more as collaborators than observers.

Students have been provided with Inter-professional (IP) Student Shadowing cards; green cards developed by Health Sciences Council (UofA) and advised to use them in all placements. This card helps to guide expectations as it provides suggestions to consider prior to an interaction. e.g. communication methods; student may ask how the healthcare professional prefers to communicate with pharmacists. The card is perforated so it can be given to the healthcare professional for their suggestions regarding which questions may be the best or most appropriate for the interaction as well as it provides goals of the interaction and suggested discussion points.

Cards can also be printed by going to:
http://issuu.com/hserc/docs/student_s_guid_to_interprofessional_shadowing/2

Prior to the IP visits, students will:
• Prepare an expectation of what they want to learn at the IP practice site and review it with the preceptor.
• Activity information (pg 20) can be copied and sent to the physician/healthcare professional involved with the visits so they understand the objectives for the visits.

During the IP visits, students will:
• Work collaboratively and demonstrate respect of the practice and knowledge of other health care professionals.
• Give the healthcare professional the “Practitioners Guide to IP Student Shadowing” (half of the green shadowing card) to provide topics for discussion.

Following the IP visits, students will debrief his/her experience with his/her preceptor. Include:
• Primary learning points/insights? (see Inter-Professional Experience Discussion; pg 10).
• Mechanisms the preceptor(s) use to improve or promote inter-professional collaboration
• What barriers affect collaborative relationships between physicians and community pharmacists? (non-face-to-face interactions, use of written documentation)
• Strategies that work well to overcome common barriers or negotiate role-overlap.
Pharmacy 426: Course Description: This course for students completing their final undergraduate year of the pharmacy program is designed to allow them to practice their knowledge and skills from the classroom and skills lab in a community practice setting. Through structured activities, the student is expected to demonstrate professional competencies with the focus on providing effective patient care; this includes development of clinical decision-making and judgment skills as well as gain an understanding of the opportunities for inter-professional collaboration.

Guidelines for Other Health Care Providers
Four 1/2 day visits or 2 full days are recommended within a medical clinic in collaboration with the physician or healthcare professional team.

During the visit(s) the student should be able to:
• Recognize and respect the roles and responsibilities of other healthcare professionals.
• Contribute to optimize team functioning.
• Respectfully share expertise and point of view.

Examples of activities for the pharmacy student
• Collaborate with the patient’s physician and other health care providers to obtain the necessary medical information, discuss proposed care plans related to the patients medication needs.
• Provide the patient and the patient’s physician and other health care providers with a best possible medication history including OTCs, herbal and other products.
• Assess patients to determine any concerns with current medications and discuss findings and recommendations. Document care as required by the practice.
• Counsel patients on newly prescribed medications including demonstration of techniques for unique dosage delivery systems and use of blood glucose meters, inhalers, patches, nasal sprays.
• Provide drug information as needed by other health care providers.
• Provide an in-service or formal presentation on a requested topic.

Inter-professional Collaboration - Confirmation Form
To be completed by student and posted on eClass at the end of the placement.

| Name of Student | ________________________________________________ |
| Time Spent by Student at Clinic/Practice Site (i.e. 4 half days, 2 full days, 16 hours): |
| Comments/ feedback provided to you by the healthcare professional: |
| Name (Physician/Health Professional) : |
| Address : ____________________________________ Email (if available): __________________________ |
| Profession: ____________________________________ |
APPENDIX 4: Advocate Outcome

Enhancement of Community Pharmacy Practice Project Information

In collaboration with the preceptor, students design and implement a project that will benefit the practice site. Examples include setting up processes for patient care documentation, profiling clinical services provided by the pharmacy, facilitating inter-professional collaboration, developing community programs. Students should review the project periodically with the preceptor to discuss progress or challenges.

Project Criteria:
• The goal is focused on a professional or clinical area of practice.
• Outcomes can be integrated into practice.

Project Outline:
The outline should be completed by the end of the second week to allow for discussion and implementation. Include:
- Topic
- Learning goal
- Stimulus/Trigger: the most influential factor involved in selecting the goal.
- Proposed resources: potential resources or activities needed to complete the project.

Suggested timeframe:
• Week 1/2: set project goals, develop project outline.
• Week 3/4: mid-point progress review. Discuss project with the preceptor. Include timelines, resources needed and proposed outcomes.
• Final week: Review project outcomes.

Assignment: review with the preceptor prior to posting
Summary that includes the following:
• Outline: topic, learning goals, stimulus/trigger, and activities completed.
• Outcomes: potential and real for the practice site; include what was learned through completion of the project.
APPENDIX 5: Practice Management Outcome

Medication Safety Activity and Assignment

ACP and ISMP have developed a document; Systems Approach to Quality Assurance for Pharmacy Practice; A Framework for Mitigating Risk. This document describes the Failure Mode and Effects Analysis concept (FMEA) which identifies potential process problems before they occur. Pharmacies are busy environments so it is inevitable and unfortunate that errors occur.

ACTIVITY DESCRIPTION - Failure Mode and Effects Analysis (FMEA)
This activity introduces the FMEA concept and addresses 2 processes that are important to pharmacy practice; Drug Shortages and Patient Assessment. Students will become familiar with the FMEA concept and then discuss one of these topics with the preceptor. The discussion should include what process the site currently follows as well as a comparison to the corresponding example in the ACP document.

Students will NOT be conducting a FMEA for this activity. The purpose of this activity is to become aware of this important safety initiative that has been utilized by other professions such as aviation and is being utilized more in healthcare. The discussion with the preceptor is not to “fix” concerns but more to gain awareness and explore possible options.

ACTIVITY STEPS
1. Go to ACP Online Learning Modules
2. Click on “Learning Modules” and Listen to Module 1- The Systems Approach for Quality Assurance for Pharmacy Practice; A Framework for Mitigating Risk. This presentation provides an introduction to the FMEA concept and background information needed for the next step. (duration: just over 5 minutes)
4. Consider which “process” you would like to discuss with your preceptor. Either:
   a. Operational Pharmacy – managing drug shortages; pages 31-38 or
   b. Clinical Pharmacy – patient assessment process; pages 39-46
   Review the information so you are familiar with some of the key concepts.
5. Have a discussion with your preceptor about the topic you have chosen. Include:
   a. What processes they currently are using; are they effective? Any potential/current concerns?
   b. Discuss possible actions or suggestions that have been provided to reduce risk. (as outlined in the examples)
   c. Discuss whether some of these are reasonable to implement at the practice site or considered to be helpful suggestions.
APPENDIX 6: Learning Plan: Instructions and Templates

Your learning plan allows you to prepare for the placement by identifying goals in areas or skills where you would like to build more confidence or comfort. Then, during the placement you will work with your preceptor to develop strategies and opportunities to achieve these goals. This activity is modelled after the Continuing Professional Development Model used by each year by practicing pharmacists. It provides you with practice identifying your learning needs and how to reach goals so you are prepared for self-directed, lifelong learning as a practicing pharmacist.

- A self-assessment of skills and abilities is needed to complete a learning plan. Steps 1 and 2 provide a self-assessment and Step 3 is the learning plan.
- The 3 steps indicated below (1. Skills Inventory, 2. Feedback Summary and 3. Learning Plan) must be posted at least 1 WEEK PRIOR to the start of the placement to allow time for your preceptor to review.
- Templates/forms are posted in RxPreceptor under “Requirements: Pharm 426 Learning Plan” and in eClass.
- Peer review is often helpful. We suggest you ask a classmate to review your Learning Plan and provide you with comments prior to posting.

STEP ONE: SKILLS INVENTORY

Complete the Skills Inventory below to assess skills that may be a focus for your Learning Plan. Below are some of the primary skills you will be using during your placement. Indicate your comfort and practice scale with each skill/activity.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Students should consider the following factors when assessing their abilities</th>
<th>Comfort Scale</th>
<th>Amount of Practice Scale</th>
<th>Comments: (to provide perspective on the ratings)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication Skills</td>
<td>- Communicates in a responsible &amp; responsive manner.</td>
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<tr>
<td></td>
<td>- Uses oral &amp; written communications strategies effectively.</td>
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<tr>
<td></td>
<td>- Use appropriate language, tone &amp; pace</td>
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<td></td>
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<tr>
<td></td>
<td>- Expresses facts/evidence &amp; opinions/positions accurately &amp; effectively</td>
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<td></td>
<td>- Engages in respectful, culturally safe conversations with patients, communities and health team members.</td>
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<tr>
<td></td>
<td>- Demonstrate safe handover of care using oral, written, electronic communication</td>
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<td></td>
</tr>
</tbody>
</table>
| Gathering medical and medication history | - Uses systematic process to gather data  
- Uses multiple sources  
- Employs effective interviewing strategies |
|----------------------------------------|--------------------------------------------------------------------------------|
| Patient Assessments                    | - Determines patient medical conditions & assesses if there are drug needs that are not addressed  
- Assesses drug therapy; indication, efficacy, safety, adherence  
- Prioritizes drug related needs |
| Creating and Implementing Patient Care Plans | Uses systematic approach to develop safe & effective care plans.  
- Sets relevant & realistic goals  
- Generates realistic alternatives with pros & cons  
- Creates monitoring, recommendations, follow up (includes decisions about actions for managing DRPs; adapt, refer) |
| Ongoing Patient Assessment, Care and Follow Up | - Implements & adapts plan if needed  
- Educates patient on pharm and non-pharm recommendations  
- Determines/provides follow up plan including seamless care activities |
| Responding to Drug Information Requests | - Integrates best available evidence into clinical practice  
- Critically analyzes information & demonstrates clinical judgment. |
| Interacting with Other Healthcare Professionals | - Establishes & maintains positive relationships  
- Join with others in respectful, effective shared decision-making.  
- Can present patient information to a team |
| Manages safe and efficient drug distribution | - Able to fill & check Rxs accurately & effectively |
STEP TWO: FEEDBACK RECEIVED
To complete your self-assessment required for your Learning Plan, complete the feedback table below.

<table>
<thead>
<tr>
<th>Feedback: Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists about areas of strength.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feedback: Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists about areas for improvement.</td>
</tr>
</tbody>
</table>

STEP THREE: LEARNING PLAN
- Review the self-assessment you have completed in Steps 1 and 2 and list 2 areas/skills that rated lower in comfort and practice and that you would like to develop during the placement; **that will be your Learning Plan**.
- State these as 2 areas/skills that you identified as SMART goals in the learning plan table below using the reminders of how to state a SMART goal. Also state the strategies you will use and the indicators of progress associated with each goal.
- Post your learning plan (Step 3) with the Skills Inventory (Step 1) and the Feedback Summary (Step 2) at least 1 week prior to the start of your placement in CORE ELMS (RxPreceptor) under “Requirements.” Review it with your preceptor during the first week of your placement. If changes were made post the updated learning plan. If no changes were made, the initial learning plan can remain posted.
- **AT MIDPOINT:** Update your learning plan and review with your preceptor.
  - If you receive grades of Needs improvement on your Midpoint Student Performance Assessment, these must be added at midpoint to your learning plan to enable increased development.
  - Students should post their learning plan 2 days prior to midpoint, and verbally discuss their progress with their preceptor.
- **AT FINAL:** Review your learning plan with your preceptor to see where you are at the end of the placement. Did you reach your goals? Do you have plan for continuing your goals into the next placement.
- A Learning Plan template/form with the 3 tables associated with each step is posted under Pharm 426 Learning Plan Requirements in RxPreceptor and is available in eClass.

SMART GOAL: **Reminders; use these points when you are stating your learning goals.**
- Specific: Have you precisely described what you are going to achieve?
- Measurable: How will you know if you have achieved your goal?
- Attainable: Is this realistic in the time-frame specified?
- Relevant: Why is this important?
- Timed: When will you achieve your goal?
<table>
<thead>
<tr>
<th>LEARNING PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
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<td></td>
</tr>
<tr>
<td><strong>Learning Goal 1:</strong></td>
</tr>
<tr>
<td><strong>Learning Goal 2:</strong></td>
</tr>
</tbody>
</table>
APPENDIX 7: Activity, Assignment and Assessment Schedule

Students are required to thoroughly read the syllabus to ensure they are meeting all course objectives. This outline should be used as a guideline.

<table>
<thead>
<tr>
<th>Week</th>
<th>Student Activities</th>
</tr>
</thead>
</table>
| 1-4 weeks before placement starts | Students should ensure they have:  
- Reviewed therapeutics as instructed by preceptor or relevant to the practice area.  
- Reviewed Syllabus: course expectations, patient care process tools, activities and assignments; including Course Required Reading list. *(pg 3)*  
- Corresponded with preceptor regarding start time, dress code, parking, pre-readings, etc  
- Provided their preceptor with their Netcare registration form.  
- Started to develop the Learning Plan: post as a requirement on RxPreceptor at least 1 week prior to placement. *(include posting date on title)* |
| Daily throughout the placement |  
- Provision of Patient Care, review with preceptor.  
  - Patient Assessments for Refills and New Rxs  
  - Acute condition patients (pain, infection, GERD etc) minimum: 16 patients  
  - Chronic medical condition patients: minimum: 16 medical/medication reviews  
- Prepare care plans for ALL patients using pharmacy care plan worksheet or practice specific forms; document in accordance with preceptor’s practice. *(care plan documentation is not required for acute condition patients but may be requested by the preceptor.)*  
- Document care provided according to site processes.  
- Complete medical and drug information requests.  
- Conduct follow-up as required, callbacks, seamless care.  
- Participate in Patient Education; Rx and OTC counselling.  
- 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, Early Assessments | Date:  
Orientation (see Orientation Checklist in Preceptor Guide)  
- Review and discuss the Skills Inventory and Learning Plan  
- Review course objectives and activities.  
- Develop preliminary schedule: Inter-Professional visits, clinics, presentations,  
- Discuss student/preceptor expectations and responsibilities.  
- Discuss assessment processes and timelines (including informal/daily feedback)  
- Log in to ensure Netcare access, as well as access to other on-site systems.  
| Daily Patient Care and Documentation |  
- Discuss care plans, clinical documentation; format and process.  
- Discuss key factors for effective and safe distribution systems  
- 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 findings with preceptor and post documentation on the patient’s computer profile. Minimum 16 patients.  
- Schedule first Chronic Condition Patient Management session for week 2. Plan patient assessment; review profile, information from preceptor, Netcare.  
| Additional Activities to be incorporated and scheduled across the placement |  
- 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 with preceptor. Finalize by end of week 2.  
- Ensure discussions are scheduled: Professionalism; responsibilities as a professional, maintaining professional competency, pharmacy services and scope of practice, dispensing
Week 2: Date:  
- Continue to complete assessments of New and Refill Rxs.
- Continue to conduct Acute Condition Assessments and document on patient’s profile following preceptor discussion. Select 1 example of documentation to post in week 3.
- Conduct Chronic Patient Management (CDM) session for first patient and schedule additional CDM reviews.
- Consider a patient scenario for the clinical judgment review and reflection; write a summary and review with preceptor.

Week 3: Date:  
- Ensure health care professional visits are scheduled and review progress on projects and presentations/clinic day.
- Complete the ACP Module; Systems Approach for Quality Assurance for Pharmacy Practice; A Framework for Mitigating Risk. Schedule time to discuss with preceptor.
- Review written Clinical Judgment Summary with preceptor(s). Student to have at least 2 more conversations involving clinical judgment; written summary vs discussion only is the preceptor’s discretion.

Week 4: Date:  
- Continue Patient Medication Reviews; care plans and corresponding clinical documentation for chronic disease patients. (minimum 16 patients)
- Continue with assessment of Acute Condition Patients and documentation into patient profile. (minimum 16 patients)

Mid-Point Evaluations
- For 1 patient with an Acute Condition: post documentation (as entered on the computer patient profile; screen shot OK, no care plan required)
- For 1 patient with a Chronic Condition: post a care plan worksheet or site-specific care plan and documentation (as entered on the computer patient profile). Include documentation sent to another health care professional (if occurred). Ensure preceptor review prior to posting.
- MID-POINT Assessments: Student Performance Assessment: midpoint; completed by preceptor; review with student.
- MID-POINT Student Evaluation of Preceptor and Student Self-Assessment (midpoint); discuss both with preceptor.
- Update and post the Learning Plan on RxPreceptor.

Week 5: Date:  
- Complete physician/healthcare professional Inter-professional visits. Ensure debriefing is completed following these visits.
- Assess completion of discussions; professionalism, dispensing practices, scope of practice, practice resources.
- Assess completion of the minimum 3 clinical judgment discussions.
- Continue CDM reviews and acute condition assessments (should have 10-12 of each).

Week 6: Date:  
- Complete Physician/Healthcare Inter-professional visits.
- Continue with follow-up and documentation for patient reviews and assessments.
- Time permitting continue to provide care for new patients.

Chronic Condition Management
- For 1 patient with an Acute Condition: post documentation (as entered on the computer patient profile; screen shot OK, no care plan required)
- For 1 patient with a Chronic Condition: post a care plan worksheet or site specific care plan and documentation (as entered on computer patient profile). Include documentation sent.
### Week 7: Date: ________________

<table>
<thead>
<tr>
<th>Acute and Chronic Patients Safety Processes Assessment Pharmacist for the Day Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Conduct “Pharmacist for the Day” activity early in the week. Debrief with preceptor afterwards. Redo later in the week if needed.</td>
</tr>
<tr>
<td>- Discuss chosen Medication Safety process with preceptor. (Mitigating Risk Activity)</td>
</tr>
<tr>
<td>- Complete discussions with preceptor; professionalism, communication, health promotion. Inter-professional practice, dispensing practices, scope of practice, practice resources, etc</td>
</tr>
<tr>
<td>- Ensure the minimum 3 Clinical Judgment summaries/discussions have been completed</td>
</tr>
<tr>
<td>- Complete HCP inter-professional visit debrief with preceptor(s)</td>
</tr>
</tbody>
</table>

### Week 8: Date: ________________

<table>
<thead>
<tr>
<th>Finalize activities and assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure continuity of Care</td>
</tr>
<tr>
<td>- Ensure continuity of care documentation is entered into patient profile and conveyed to patient pharmacy team.</td>
</tr>
<tr>
<td>- Review activities, discussions and assignments to ensure all have been completed</td>
</tr>
<tr>
<td>- Update and submit the final Learning Plan in RxPreceptor; include posting date on title.</td>
</tr>
<tr>
<td>- Ensure completion of: minimum of one community presentation and one health promotion activity/clinic in the pharmacy. (2 separate activities)</td>
</tr>
<tr>
<td>- Finalize Practice Enhancement Project and assignment for the preceptor for review.</td>
</tr>
<tr>
<td>- Ensure Inter-professional Visit Confirmation Form has been completed and posted on eClass by the end of the placement.</td>
</tr>
<tr>
<td>- Email or mail a thank you card to the physician/healthcare professionals involved in your inter-professional visits. Scan before sending; post on eClass by end of placement.</td>
</tr>
</tbody>
</table>

### Final Assessments (RxPreceptor)

- Final Student Performance Assessment and Placement Grade; completed by preceptor; reviewed with student.  
- FINAL Student Evaluation of Preceptor and FINAL Student Self-Assessment; discuss both with preceptor

### Posting of Assignments Surveys

- All assignments are to be posted by last day of placement including the Learning Plan  
- RxPreceptor: Learning Plan; posted on RxPreceptor  
- eClass: Inter-professional Visit Thank You, Enhancement of Community Pharmacy Practice Project Summary, Inter-Professional Skills Confirmation Form, Site/Placement Description  
- RxPreceptor: 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 Awards form; link emailed to student.  
- Anonymous Student Course Evaluation (link emailed to student)