Pharm 426
Preceptor Course Review

Experiential Education Program
Faculty of Pharmacy, UofA

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Community Practice Faculty Liaison

2017/2018
• Preceptor Resources
• Course Overview
• What’s New?
• MyCred
• Course Activities & Assignments
• Assessing Your Student
• Preceptor Roles and Responsibilities
First of All: *Thank You!*

Preceptors are the *heart* of our program

A small sample of student comments from last year:

far too numerous to include all!

- *I had forgotten some of the highlights of community pharmacy such as being able to build patient relationships. This rotation has brought those back into perspective, and I will bring that with me into the future.*

- *My preceptor is an exceptional role model for building collaborative relationships with other health care professionals. She is a strong advocate for her patients and she utilizes the full expanded scope of pharmacy practice to manage and optimize their health.*

- *My preceptor provided a great example of what to strive for in my future practice.*

- *My preceptor and his staff provided a safe and collaborative learning environment.*

- *My preceptor encouraged questions and my feedback throughout the rotation. She ensured that I had access to adequate resources so I could complete all course requirements such as arranging times to do presentations and collaborations.*
U of A Pharmacy Faculty Website

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

• Course Information
  • Syllabi
  • Preceptor Course Review Podcasts

• News and Events
  • Preceptor Appreciation Event

• How to become a Preceptor

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

• Preceptor awards, news and events
Preceptors are the “heart” of the pharmacy profession and make substantial contributions to the advancement of our students and the profession.

In this section

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

**News and Events**
News and event information.

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

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

Four distinct areas of preceptorship

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

These committed professionals work in a wide variety of sites:

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

Emailed by RxPreceptor to each primary preceptor 1 month prior to start of placement

• Contains links to resources: Course Syllabus, Policies and Procedures Manual, Preceptor Guide, etc
• Includes summary tables: activities, preceptor discussions and assignments
• Assessment information: tips and suggestions
• Pharmacy Care Plan Worksheet with Checklist for Assessment
• Orientation Checklist, Curriculum Overview
• *Let Marlene/Renette know if you didn’t receive it*
Course Overview

What’s New
and
What’s Not New, But Is Still Really Important
What’s New? Bridging Program

• 65 students accepted into Pharmacy Bridging Student (PBS) Program February 2017
• PBS Program; BScPharm students bridging to Pharm D
• Complete courses spring/summer 2017 and complete 2 extra placements

Pharm 426 PLACEMENT DATES

• Fall Term: PBS students
  - August 28-October 20, 2017
  - October 23- December 15, 2017
  - then complete 2 more placements Winter 2018: Selective and Elective

• Winter Term: BSc Pharm students
  - January 8- March 2, 2018
  - March 5- April 27, 2018
What’s New? Seminars: Fall Only – PBS

• PBS students will be completing Pharm 426 in the fall
• Required to participate in on-line seminars during 426 placements
• Purpose: integrate practice experiences with ongoing professional learning
• Online peer facilitated small group sessions; driven by student engagement and participation
• Schedule and topics coordinated by the faculty
• Students provided schedule: *Wednesdays; 12:00-13:30h (working lunch)*
• *Students need to prioritize and manage patients and time effectively*
• Important that students prioritize patient care those days

**Block 1:** Week 2 (Sept 6): Discussion; Success in Experiential Education
  Week 4 (Sept 20): Delivering Effective Feedback
  Week 7 (October 11): Reflection and Developing Learning Plans

**Block 2:** Week 3 (November 8): Journal Club
  Week 6 (November 29): Clinical Coffee; Clinical Encounter
What’s New? The Course

• **Patient Care:** increased minimum patient number from 12 → 16

• **Clinical Judgment Assignment:** *changed to written summary* to be discussed with preceptor during placement. Then complete ≥ 2 more clinical judgment discussions; written summary preceptor’s discretion.

• **Inter-Professional Assignment:** *changed to discussion* with preceptor about a collaborative example that resonated with them. Assessment from HCP still required.

  - **NEW:** student sends HCP “thank you” including what they learned from their IP experience. Posted as assignment at end of placement.

• **Learning Plan:** *student must add outcomes and skills* identified as needing improvement on Midpoint Performance Assessment to Midpoint Learning Plan

  - Skills Inventory *modified*
What’s New? Assessment

• Final Student Performance Assessment policy **changed**
• To align with Post Professional Pharm D grading policies
• From: “to pass student must receive grades of Meets or Exceeds Acceptable Level of Performance on ALL outcomes” to:

**The student must:**

1. Achieve rating of "Meets an Acceptable Level of Performance" on **all Professionalism outcomes** AND

2. Have no more than 3 grades (maximum of 2 for Care Provider) of "Needs Improvement” AND

3. Have **no** grades of “Not Meeting an Acceptable Level of Performance”
Pharm 426 – The Course

• Advanced clinical placement; *Entry to Practice* competence

• Able to provide collaborative and comprehensive patient care; increasingly efficient

• Opportunity to:
  - accept professional responsibilities
  - apply clinical judgment
  - develop critical thinking and decision making skills

**Pharmacist Roles Emphasized:**

<table>
<thead>
<tr>
<th>Professional</th>
<th>Scholar</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communicator</td>
<td>Advocacy and Leadership</td>
</tr>
<tr>
<td>Care Provider</td>
<td>Practice Management</td>
</tr>
<tr>
<td>Collaborator</td>
<td></td>
</tr>
</tbody>
</table>

• *Activities and discussions enable student to learn about pharmacist practice in a community setting.*

• *Advanced Placement: practice & preceptor “informs” activities*
FYI: Skills Labs

Second year skills labs: students had sessions on;

<table>
<thead>
<tr>
<th>Allergy assessment</th>
<th>Shared decision making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication Reconciliation</td>
<td>Informal case presentation to another health care professional</td>
</tr>
<tr>
<td>Discharge counseling</td>
<td>Critical appraisal of journal article</td>
</tr>
</tbody>
</table>

Third year skills labs: students had sessions on;

<table>
<thead>
<tr>
<th>Clinical judgment</th>
<th>Patient goal setting/ motivational interviewing/ patient self-empowerment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical decision making</td>
<td>Health promotion, disease prevention</td>
</tr>
<tr>
<td>Applying full scope of practice</td>
<td>Injections training (immunizations)</td>
</tr>
</tbody>
</table>

Other Training:

- During 428 orientations in the spring students receive Advanced Netcare training
- Prior to Pharm 316 (2nd year placement); Antimicrobial Stewardship session with review of precautions and Institutional Medication Distribution presentation
What’s Not New But Still Important

• **Professionalism**: ethical behaviours, initiative, appropriate appearance, punctual, accountability

• **Communication**: written and verbal

• **Provide Patient Care**
  • Care planning
  • Medical and Medication Histories (care plans, CACPs, SMMAs)
  • Documentation

• **Collaboration** with dispensary team and other health professionals

• **Health Advocacy**

• **Drug Information** questions

• **Drug Distribution** process
• MyCred: Electronic Credential 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 Access Student Information?
- through Student Snapshot

Contact information

Name:
Grad year:
Email:
Phone:
Cell Phc:
MyCred:
MG’s MyCred Page: student & preceptor accounts look same

<table>
<thead>
<tr>
<th>Section</th>
<th>Updated</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biography / Summary</td>
<td>02-22-16</td>
<td></td>
</tr>
<tr>
<td>Goals (Personal &amp; Professional)</td>
<td>No Content</td>
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<tr>
<td>Academic Service</td>
<td>No Content</td>
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<tr>
<td>Assignments</td>
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<td>Association &amp; Society Membership</td>
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<td>Committees &amp; Boards</td>
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<tr>
<td>Competency Assessments</td>
<td>No Content</td>
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</tbody>
</table>

Tell me and I forget, teach me and I may remember, involve me and I learn.
- Benjamin Franklin
MyCred: Students have been advised to:

• Add their photo and contact information
• Activate 2 modules needed for the course; ‘Biography/Summary’ and ‘Goals’
• Type in a brief summary of self in “brief bio section”
• Attach their Student Information Summary under Biography/Summary Module (see template next slide)
• NOT “lock” these modules

Click on Biography/Summary Module to see Student Information

Click on Goals Module to see Learning Plan Assignment
Student Information Summary Template

- Students post this template for preceptor review AT LEAST 1 MONTH prior to start of placement
- Template includes:
  - Contact Information
  - Education
  - Employment History
  - Experiential Placement History
  - Goals, Practice Interests and more!
- Posted in Biography/Summary Module as an attachment
When you click on Biography/Summary Module; you will see:

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

Click here to see Student Information Summary
Course Activities and Assignments

Brief review to highlight primary activities and changes

Refer to *Quick Reference Guide* for further information
# Learning Plan: Activity and Assignment

Posted on MyCred: Goals Module

**Part 1: Student Skills Inventory (acts as self assessment)**
- Students rate their amount of practice so far performing select skills prior to starting placement and provide examples of feedback they have received
- 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>Limited Amount of Practice (completed Skills Lab &amp; placements only)</th>
<th>Moderate Limited Amount of Practice (completed Skills Lab, placements &amp; work experience)</th>
<th>Comments (provide perspective on rating)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathering medical</td>
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<tr>
<td>Conducting patient assessments</td>
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<tr>
<td>Creating &amp; implementing patient care plans</td>
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<tr>
<td>Ongoing patient assessment &amp; monitoring</td>
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<tr>
<td>Patient education</td>
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<tr>
<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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<tr>
<td>Interacting with other healthcare professionals</td>
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</table>

**Feedback:** student should provide examples of feedback received from preceptors, lab facilitators, etc about areas of strength

**Feedback:** student should provide examples of feedback they have received from preceptor, lab facilitators, etc about areas for improvement.
Learning Plan: Activity and Assignment

Part 2: Student Learning Plan. Students will:

- State 1 goal & corresponding objective(s) using SMART format. (A) The goal should be linked to specific clinical skill they plan to focus on during Pharm 426.
- 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.
- Post revised Learning Plan (A) on MyCred. (Goals Module) when finalized.
- Discuss progress achieved for Learning Plan goal with preceptor at midpoint (B) & final (C).
- Post revised Learning Plans into MyCred. (Goals Module) both at midpoint & final of placement.

Learning Plan Template

<table>
<thead>
<tr>
<th>LEARNING GOAL:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Learning Objective(s)</strong></td>
</tr>
<tr>
<td>Use SMART format (objectives must be measureable/observable by your preceptor.)</td>
</tr>
<tr>
<td><strong>Indicators of Progress:</strong> Describe indicators that will inform you of your progress or achievement. Examples: debriefing with preceptor, receiving feedback from team members, reflection, assessment.</td>
</tr>
</tbody>
</table>

| **B. Progress at MIDPOINT (end week 4)** |
| Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement. |
| Student to type progress here |
| Student must add outcomes and skills identified as “Needs Improvement” by preceptor on Midpoint Student Performance Assessment to Midpoint Learning Plan for second half of placement. |

| **C. Progress at FINAL (end week 8)** |
| Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement |
| Student to type progress here. |
Care Provider Activities

1. Patient Assessment: New and Refill Rxs

• Weeks 1 and 2: daily provide and document care for ≥ 2 patients receiving refill and ≥ 2 receiving new Rx (after week 2: complete prn)
  • Must use care plan worksheet:
    • transition to site specific forms
  • Review meds for indication, effectiveness, adherence, safety
  • Allows students to be “Drug Detective”; ask right questions
  • Opportunity:
    • to track drug therapy/monitoring and build relationships
    • for clinical services; Rx adaptations, refill extension, CACPs, etc
  • Student documents intervention:
    • DAP (Data/Assessment/Plan) note in computer
  • ECLASS ASSIGNMENT: Week 2: Post care plan AND DAP for ONE refill & for ONE new Rx
Care Provider Activities

2. Acute Condition Assessment Activity

• Minimum **16** patients with acute conditions: GERD, infection, etc
• Could be self care
• Review meds for indication, effectiveness, adherence, safety
• Discuss findings with preceptor
  • document DAP note on patients' computer profile

• ECLASS ASSIGNMENT: post note weeks 4 and 6
Care Provider Activities

3. Chronic Disease Management

• Provide care for minimum 16 CDM patients;
  • ≥ 4 different chronic diseases
• Direct and indirect supervision
• Interview patient to gather medical history and BPMH
  • Complete patient assessment
• Develop care plan using Patient Care Plan Process;
  • eModules posted on Faculty website
• Be familiar with Pharmaceutical Care Plan worksheet for care plans
• Discuss preferred care plan format with student
  • can use site specific forms when you feel student is ready
  • all elements of plan should be included; including DRP statements
• student must review plan with preceptor:
  • assistance should be minimal and decrease as placement proceeds
• Care plans should be comprehensive including follow-up
• Document onto patient’s computer profile: DAP or scanning of CACP OK
• ECLASS ASSIGNMENT: ONE CDM care plan & associated documentation posted weeks 4 & 6
Care Provider: Care Plan Suggestions

• Care plans are NOT MARKED;
  • Faculty feedback may be provided on process (not therapeutics)
• Students should use motivational interviewing and self management strategies
• Documentation entered onto patient’s computer profile may require practice
  • should be clear and concise

• Preparation with student prior to initiating activity:
  • discuss steps involved; important to share expectations with student
  • student should observe preceptor complete at least one patient interview
  • student should prepare and share their planned approach with preceptor
• Student conducts session/activity with supervision/observation initially; may be able to have indirect supervision after preceptor comfortable with demonstrated skills. Then;
  • debrief with preceptor
  • preceptor provides feedback to student; include shared decision making and critical thinking skills
  • nearer the end of placement, preceptor role should be more coaching and facilitation

• Sign and cosign care plans and physician correspondence after review
Care Provider

• Students should participate in full-scope of pharmacist activities as deemed appropriate by preceptor
  • Rx renewal, adaptation, etc: requires direct supervision
  • Injections: must be supervised by certified pharmacist
    ACP Link: Can Interns and students administer injections?
    https://pharmacists.ab.ca/link-october-6-2015
  • CACPs/SMMAs: preceptor must review, provide feedback, sign
  • Students must always consult with preceptor prior to initiating new recommendations.

• Clinical Judgment Assignment: changed to written summary to be discussed with preceptor.
  • then complete ≥ 2 more clinical judgment discussions
  • written summary preceptor’s discretion

• Pharmacist for a Day; towards end of placement
  • good measuring tool for skills assessment
Collaborator: Inter-Professional Collaboration Activity

• Minimum 4 half day or 2 full days visits with physician or other healthcare professional; optometrist, PCN, RN/LPN, etc
• Should be with same practitioner; increased familiarity and comfort
• Contact Faculty if you need assistance arranging visits
• PCN pharmacists do not qualify for this activity (not IP)
• Syllabus pages 19-21 can be copied and faxed to HCP
• HCP Assessment form can be written or completed online
• Students encouraged to use IP Shadowing Card to help with discussion
• Prior to visits students should discuss with you what they expect or want to learn
• After the visits students should debrief the experience with you
• IP Assignment changed to discussion with preceptor about collaborative example that resonated with them.
Scholar

• Provide drug/medical information for patient care and upon request
• Enhancement of Community Practice Project
  • create project with student that will benefit your practice (i.e. brochures, setting up programs, facilitating IP collaborations)
  • student develops outline; includes goals, resources and timelines
• ECLASS ASSIGNMENT: Project Summary
• UofA Library tutorial: upon request;
  https://www.ualberta.ca/pharmacy/preceptors
Health Advocacy

• ONE health promotion presentation for the public **AND** ONE clinic/health promotion for the public; diabetes, asthma, etc

• One in the *pharmacy* and One in the *community*

• OK to have students collaborate with other students; clinics, etc

• Can be linked to Enhancement Project; but is not the project itself

Practice Management

• Medication Distribution; participate in all stages of distribution; emphasis on intake, counselling and medication safety practices

• Scope of Practice Discussions

• Medication Safety Activity Discussion; students review ACP: *Systems Approach to Quality Assurance for Pharmacy Practice; Mitigating Risk*
  • choose topic; either ‘Drug Shortages’ or ‘Patient Assessment’
  • discuss your current process to identify and discuss possible risks
  • discuss documentation and reports of med errors/incidents
  • discuss QA programs and policies
Assessing Your Student

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

• Ensure you can login to RxPreceptor; difficulties contact phexed@ualberta.ca

• RxPreceptor allows only 1 primary preceptor to be assigned to student
  • ensure comments are shared between preceptors

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

NOTE: Easy to change your RxPreceptor password;
  - “reset password” on RxPreceptor landing page
Student Performance Assessment: Grades

• Provided descriptors for each outcome on assessment

• Preceptors provide overall mark for that outcome:
  • Exceeds an Acceptable Level of Performance
  • Meets an Acceptable Level of Performance
  • Needs Improvement*
  • Not Meeting an Acceptable level of performance

• Needs Improvement (NI): student getting better, more time and practice needed

• Assessments are reviewed by Faculty for concerns; you may be contacted at midpoint if grades of Needs Improvement at >3;
  • just to ensure things are OK
  • student must include NI areas to their midpoint Learning Plan as goals with objectives; ensures increased attention to these areas

• Not Meeting an Acceptable Level of Performance: indicates major concerns
  • Faculty must be notified by midpoint at latest

• Unable to Rate (midpoint): use if you have not had opportunities vs. using Needs Improvement
Student Performance Assessment: PASS

To pass the placement, on the Final Student Performance Assessment the student must:

1. **Achieve a rating of** "Meets an Acceptable Level of Performance" on **ALL Professionalism** outcomes, **AND**

2. **Have no more than 3** "Needs Improvement” Grades (maximum of 2 for **Care Provider**) **AND**,

3. **Have ZERO** ratings of “Not Meeting an Acceptable Level of Performance”. 
**Student Performance Assessment: Example**

<table>
<thead>
<tr>
<th>Care Provider Outcome 1: Develops and maintains professional relationships with patients/care givers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MIDPOINT</strong></td>
</tr>
<tr>
<td><strong>FINAL</strong></td>
</tr>
<tr>
<td><strong>Required</strong></td>
</tr>
<tr>
<td>Exceeds an Acceptable level of Performance</td>
</tr>
<tr>
<td>Meets an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Needs Improvement to Reach an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Not meeting an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Unable to Rate (Midpoint Only)</td>
</tr>
</tbody>
</table>

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

**Save work frequently when completing!**

<table>
<thead>
<tr>
<th>Care Provider Outcome 2: Gathers relevant medical and medication history</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MIDPOINT</strong></td>
</tr>
<tr>
<td><strong>FINAL</strong></td>
</tr>
<tr>
<td><strong>Required</strong></td>
</tr>
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<td>Exceeds an Acceptable level of Performance</td>
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<tr>
<td>Meets an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Needs Improvement to Reach an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Not meeting an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Unable to Rate (Midpoint Only)</td>
</tr>
</tbody>
</table>

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/responses to patient cues with preceptor guidance
- 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

<table>
<thead>
<tr>
<th>Care Provider Outcome 3: Determine medical conditions and assess if the patient’s medication-related needs are being met</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MIDPOINT</strong></td>
</tr>
<tr>
<td><strong>FINAL</strong></td>
</tr>
<tr>
<td><strong>Required</strong></td>
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<tr>
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<tr>
<td>Not meeting an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Unable to Rate (Midpoint Only)</td>
</tr>
</tbody>
</table>

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
## Assessments: Preceptors Complete

<table>
<thead>
<tr>
<th>Assessment/Evaluation</th>
<th>Completion</th>
<th>Comments</th>
</tr>
</thead>
</table>
| **Early** Assessment of Student        | End of **Week 1** of placement                  | • Identifies early concerns, mostly involves professionalism criteria  
• Quick; 5-10 mins to complete         |
| **Midpoint** Student Performance       | End of **Week 4** of Placement                  | • assess behaviours/skills; 7 Learning Outcome Areas (Professional, Care Provider, etc)  
• End of form; Identification of Expectations and Areas for Focus for rest of placement  
• **NEW:** Student adds all areas given “Needs Improvement” to their midpoint Learning Plan  
• NO GRADE GIVEN (Pass or Fail)        |
| **Final** Student Performance          | End of **Week 8** of Placement                  | • behaviours/skills assessed same as midpoint  
• “Placement Grade” given by preceptor; PASS or FAIL  
• Faculty provides “Course Grade” based on assessment & assignment review |
| Preceptor Evaluation                   | End of Placement                                 | • link to evaluation emailed; not RxPreceptor  
• comments appreciated! (~30 mins to complete)  
• anonymous, can request Faculty to contact you |
Assessment Tips

• Assessment information and tips in Quick Reference Guide and at beginning of Student Performance Assessment on RxPreceptor

• Review assessments in advance on RxPreceptor:
  • know what you will be assessing student on, also in syllabus

• Viewable by student AFTER submitted: save as draft

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

• Important to discuss and review with student:
  • acknowledgement on each form indicating discussion occurred

• Comment boxes are helpful for students and Faculty: be specific

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

• New Assessment Webinar Coming in August!!
### Assessments: Students Complete

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<thead>
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</tr>
</thead>
</table>
| **Early** Assessment of Preceptor           | End of **Week 1** of placement | • identifies early concerns, mostly involves professionalism criteria  
                                           |                                             | • quick; 5-10 mins to complete                                                               |
| Student Self Assessments; Midpoint and Final| End of **Week 4** and End of **Week 8** | • compare Student Performance Assessment (completed by preceptor) with Student Self Self Assessment  
                                           |                                             | • at midpoint, student should provide this to you 1-2 days in advance of assessment review  
                                           |                                             | • at final; include in final assessment review; good comparator                             |
| **Midpoint** Assessment of Preceptor and Site | End of **Week 4** | • to be discussed with preceptor                                                                |
| 1. Course Evaluation                        | End of **Week 8**; After student has left placement site | • comments about all aspects of the course  
                                           |                                             | • final quality assurance check                                                             |
| 2. Preceptor and Site Evaluation            |                             |                                                                                                    |
Preceptor Roles and Responsibilities

Pre-Placement Planning
Correspondence
Policies and Procedures
Preceptor Roles

• Student should mirror your roles & responsibilities of community practice:
  • guide student through experiences

• **Supervision**: guiding principle: *ensure patient safety*
  • usually direct instruction at start; modeling and coaching, later should be more of a “facilitator” role
    • need for supervision should decrease as placement progresses
  • *Supervision/Learning Continuum*: student observes preceptor → student assists preceptor → student performs while preceptor observes → student performs independently

• **ACP**: Direct Supervision: Restricted Activities
  • Dispensing Schedule 1 & 2 drugs, administer vaccines, adapting, emergency prescribing
  Indirect Supervision: other patient care related activities
  • Preceptor’s discretion to determine how often and how independently an activity is done

• Provide regular **feedback**: debriefing after activities is key to learning
• **Review documentation**: care plans, computer profile notes
• **Assess** the student; formally & informally
• **Contact us** if needed
Pre-Placement Planning

• **Ensure you can log into RxPreceptor;** contact: phexed@ualberta.ca or 780.492.9780 with login, MyCred, viewing difficulties
• Good idea to start developing schedule template; weekends and evenings OK
• Coordinate orientation & activities with dispensary team/co-preceptor and other health care professionals
  • Include expectations, how you will communicate and who will complete assessments
• Students should have already contacted you about Netcare Access; important to submit form early!
• Review Quick Reference Guide; tons of resources for you!
• Students instructed to post their Student Information Template on MyCred 1 month prior to placement
  - contact phexed@ualberta.ca if not posted on time
Preceptor/Student Correspondence

<table>
<thead>
<tr>
<th>Pharm 426 and Pharm 428 run back to back. Either placement can be first</th>
<th>First Placement</th>
<th>Second Placement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>When</strong> student information should be posted on MyCred</td>
<td>At least 1 month prior to start of 1st placement</td>
<td>Will already be posted from 1st placement</td>
</tr>
<tr>
<td><strong>When</strong> preceptors should email student to confirm review of MyCred information</td>
<td>At least 3 weeks prior to start of the placement</td>
<td>At least 3 weeks prior to the start of the placement</td>
</tr>
<tr>
<td><strong>When</strong> students have been instructed to email/phone preceptor if no communication received from preceptor</td>
<td>2 weeks prior to the start of the placement</td>
<td>2 weeks prior to the start of the placement</td>
</tr>
</tbody>
</table>

- **Important** that preceptors reply to students to confirm that they have reviewed the Student Information Template posted MyCred.
- **Also advise** about where to meet on Day 1, provide pre-readings, advise of dress policies, etc.
ExEd Policies and Procedures Manual

• Online, link posted in RxPreceptor and Quick Reference Guide
• Outlines student responsibilities and course policies:
  • UofA flu clinics, PharmD interviews, Needlestick incidents, Netcare, etc
• **Attendance:** 40 hours/week; 5 x 8 hour days
  • Stat holidays; preceptor’s discretion
  • Absences: students must record request in RxPreceptor Absence Tracker; preceptor receives email and confirms/denies request
  • Sickness: if > 1 day missed, time must be made up
  • Bereavement (for family member): same as above
• **Endorsed Activities:** 1 day/placement for PD related activities: e.g.
  • UofA flu clinic, conferences, PDW, etc.
  • must be authorized by preceptor and feasible with placement schedule
• **Non-Endorsed Activities:**
  • mock OSCE’s, jurisprudence exams, travel/vacation
• Students cannot change placement timelines
• **If unsure: best to contact Renette or Marlene**
What To Do???

• If you are going to be away during the placement please advise the student AND US

• If you think you have a problem; you usually do!!!
  
  • What to do if student clearly “Needs Improvement” or you have concerns: don’t wait until midpoint: CONTACT THE FACULTY ASAP
    • Renette Bertholet renette@ualberta.ca; 780-492-8066
    • Marlene: mgukert@ualberta.ca ; 403-254-6449

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

• Student should be encouraged to contact Faculty; same contacts as above
  • develop plan & work together: Faculty, preceptors & student

• You might not have experienced the issue before but we likely have and we want to provide support