Pharm 426
Preceptor Course Review

Experiential Education Program
Faculty of Pharmacy, UofA

Marlene Gukert; mgukert@ualberta.ca
Course Coordinator
Renette Bertholet: renette@ualberta.ca
Community Practice Faculty Liaison

2019/2020
• Preceptor Resources and Planning
• Course Overview
• Course Activities & Assignments
• Preceptor Roles and Responsibilities
Student comments +++ positive

Why you should mentor a pharmacy student; CPJ 2018; 151(2):89-90
Ai-LengFoong; BSc. The bottom line from 4th year student to all preceptors.

-“mentor them, watch them become a full-fledged pharmacist & know you played a key role in their development”
Preceptor Resources

1. U of A Pharmacy Faculty Website

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

- you will find course information & tools, podcasts, news & events, library access info, recognition and more!

2. Quick Reference Guide

- Emailed by CORE ELMS (RxPreceptor) to primary preceptor 1 month prior to start of placement.

Contains:

- Summary tables: activities, preceptor discussions
- Activity and Assessment Schedule
Pre-Placement Planning

• Ensure you can log into CORE; contact: phexed@ualberta.ca
• Start developing schedule template (there is a modifiable calendar on the faculty website); weekends & evenings OK
• Coordinate orientation & activities with dispensary team/co-preceptor & other health care professionals
  • Include expectations, how you will communicate & who will complete assessments
• Students advised to send Netcare registration form to preceptor at least 4 weeks prior to placement; important to submit form early!
• View student resume (posted on CORE) as requirement 1 mth prior to placement; contact phexed@ualberta.ca if not posted on time
• Important confirm with student that you have reviewed their resume. Also advise about where to meet on Day 1, provide pre-readings, advise of parking, dress policies, etc.
Finding Student Information in (CORE ELMS)RxPreceptor

Students post their CV/Resume (1 month prior) & Learning Plan (1 week prior) under Student Requirements
- viewable by preceptors; see steps to follow below
Course Overview

What’s New

and

What’s Not New, But Is Still Really Important
What’s New? *Not too much actually* ....

- Minor changes to assignments
- Reorganization of syllabus information

**PLACEMENT DATES**

- Fall Term: August 26-October 18, 2019
  
  October 21 - December 13, 2019

- Winter Term: January 6- February 28, 2020
  
  March 2- April 24, 2020
Pharm 426: The Course

• Advanced clinical placement; Entry to Practice competence expected by end

• Provides opportunity for students to:
  - accept professional responsibilities
  - apply clinical & ethical judgment
  - develop critical thinking & decision making skills

• Pharmacist Roles Emphasized:
  - Professional
  - Scholar
  - Practice Manager
  - Communicator
  - Collaborator
  - Care Provider
  - Advocate and Leader

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

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

**2nd year skills labs**: students had sessions on;
- Allergy assessment
- Medication reconciliation
- Discharge counselling
- Shared decision making
- Critical appraisal
- Informal care presentation to another health care professional

**3rd year skills labs**: students had sessions on;
- Clinical judgment & decision making
- Applying full scope of practice
- Injection training (immunizations)
- Health promotion & disease prevention
- Patient goal setting, motivational interviewing & patient self-empowerment

**Other Training**: Netcare hands on training
Course Activities and Assignments

Brief review to highlight primary activities and changes

Refer to *Quick Reference Guide* for further information
Learning Plan: *posted at least 1 week prior to placement to allow time for preceptor review*

**Step 1: Skills Inventory:** Students rate their amount of practice & comfort performing select skills & provide examples of feedback they have received.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Students should consider the following factors when assessing their abilities</th>
<th><strong>Comfort Scale</strong></th>
<th><strong>Amount of Practice Scale</strong></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>
<td>1 2 3 4 5 Comfortable</td>
<td>1 2 3 4 5 Practice</td>
<td></td>
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<tr>
<td></td>
<td>- Uses oral &amp; written communications strategies effectively.</td>
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<td></td>
<td>- Use appropriate language, tone &amp; pace</td>
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<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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<td></td>
<td>- Demonstrates safe handover of care using oral, written or electronic communication</td>
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<tr>
<td>Gathering medical and medication history</td>
<td>- Uses systematic process to gather data</td>
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<td></td>
<td>- Uses multiple sources</td>
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<td></td>
<td>- Employs effective interviewing strategies</td>
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**Step 2: Feedback Received:** students provide examples of feedback they have received.

**Feedback:** Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists about areas of strength.

**Feedback:** Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists about areas for improvement.
Step 3: Students will:

- State 2 goals using SMART format. They should be linked to specific clinical skills they plan to focus on during Pharm 426.
- Post Learning Plan with Skills Inventory on CORE ELMS (RxPreceptor) as a requirement at least 1 week prior to the start of placement to allow preceptor to review.
- Preceptor & student discuss & finalize plan during first few days of the placement.
- Post revised Learning Plan when finalized.
- Discuss progress achieved for Learning Plan goals with preceptor at midpoint. Student to add areas where “Needs Improvement” provided by preceptor on performance assessment. Repost.
- Discuss & post updated Learning Plan at final.

<table>
<thead>
<tr>
<th>LEARNING PLAN</th>
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<tbody>
<tr>
<td><strong>Goal</strong></td>
</tr>
</tbody>
</table>
| - Based on the self-Assessment (Skills Inventory and Feedback; Steps 1 & 2), state 2 learning goals regarding knowledge or a skill that you would like to focus on during the placement. | - Describe strategies you will use to attain the learning goal. 
- These would be actions you will do to achieve your goal. 
- Strategies may change as you work towards your goal. | - Describe indicators that will inform you of your progress towards or achievement of your goal. 
- Examples include feedback from your preceptor, other team members, reflection. | Include: 
- Key accomplishments 
- Next steps | Include: 
- Key accomplishments 
- Next steps |

**Learning Goal 1:**

**Learning Goal 2:**
Care Provider Activities

1. Patient Assessment: New and Refill Rxs
   - Initially students assess drug therapy to provide & document care for ≥ 2 patients receiving refill & ≥ 2 receiving new Rx
   - Students should develop proficiency with assessment for all rxs in systematic manner to ensure safe & effective drug therapy

2. Acute Condition and/or Self-Care Assessment
   - Minimum 16 patients with acute conditions: GERD, infection, etc
   - Student will review meds for indication, effectiveness, adherence, safety
   - Discuss findings with preceptor; document DAP note on patients' computer profile
   - ECLASS ASSIGNMENT: post note weeks 4 & 6
Care Provider Activities

3. Chronic Disease Management (CDM)

Student will provide care for minimum 16 CDM patients
• Interview patient (with direct or indirect supervision) to gather medical history & BPMH; develop a patient assessment
• Develop care plan using Patient Care Process (preceptors can review the patient care eModules posted on Faculty website)
• Discuss preferred care plan format with student
  • students are familiar with the Care Plan worksheet used by the Faculty
  • 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 & decrease as placement proceeds
• ECLASS ASSIGNMENT: ONE CDM care plan & associated documentation posted weeks 4 & 6
Care Provider: Preceptor Suggestions

• Care plans are NOT MARKED; Faculty feedback may be provided on process; not therapeutics
• Students should use motivational interviewing & include self management strategies
• Documentation entered onto patient’s computer profile may require practice
• Preparation with student prior to initiating activity:
  • discuss steps involved; share expectations with student
  • student should observe preceptor complete at least 1 patient interview
  • student should prepare & share their planned approach with preceptor
• Student conducts session with supervision/observation initially; should be able to have indirect supervision after preceptor comfortable with skills.
• Important to debrief with student: provide feedback; include shared decision making & critical thinking skills
• Sign & cosign care plans & 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 injector
    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 Activity: written summary to be discussed with preceptor.
  • then complete ≥ 2 more clinical judgment discussions (written summary preceptor’s discretion)

• Pharmacist for a Day Activity: 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 & comfort
• Contact Faculty if you need assistance arranging visits
• PCN pharmacists do not qualify for this activity (not IP)
• Appendix 2 page in syllabus can be copied/faxed to HCP for information
• 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
  • Student should include a collaborative example that resonated with them
• Students complete a SURVEY ASSIGNMENT on eClass
Scholar

• Provide drug/medical information for patient care & 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, practice tools)
  • student develops outline; includes goals, resources & timelines

• ECLASS ASSIGNMENT: Project Summary

• UofA Library tutorial: student provides preceptor with strategies to use databases  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 is suggested
• 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 & medication safety practices
• Should be able to fill & check ≥ 20 consecutive Rxs without error
• Discussions regarding medication safety practices and drug shortages
Preceptor Roles and Responsibilities

Pre-Placement Planning
Correspondence with Student
Assessments
Policies and Procedures
Preceptor Roles and Tips

• **Supervision**: guiding principle: *ensure patient safety*
  - usually direct instruction at start; modeling & coaching, later should be more of a “facilitator” role
    - need for supervision should decrease as placement progresses

• **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 & how independently activity is done

• Provide regular **feedback**: debriefing after activities is key to learning
• **Review documentation**: care plans, computer profile notes
Assessments: completed in CORE (RxPreceptor)

- RxPreceptor allows only 1 primary preceptor to be assigned to student
- Options to complete assessment when there is >1 preceptor:
  - Primary preceptor logs in for other preceptor; enter their comments
  - Primary Preceptor shares their RxPreceptor PW so each has access. Password can be changed: "reset password” on CORE landing page.
  - Print assessment forms; share with other preceptors to write comments
- Information at start of Student Performance Assessment on CORE
- Review assessment prior to placement so you know what you are assessing the student on
- Viewable by student AFTER submitted: can save as draft
- Important to discuss with student: acknowledgement on form
- Review Student Self Assessments (midpoint & final) prior to completing Student Performance Assessments; good comparator
- Completing Assessments Overview on Faculty webpage; 14 mins long
  [https://youtu.be/helc7ynfe_k](https://youtu.be/helc7ynfe_k)
Student Performance Assessment: Grades

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

• **Needs Improvement (NI):** student getting better, needs more time & practice
• **Not Meeting an Acceptable Level of Performance:** indicates major concerns
• Please contact Faculty if you have concerns!

• Assessments reviewed by Faculty for concerns; you may be contacted at midpoint just to ensure things are OK 😊
• Student to add NI areas to their midpoint Learning Plan as goals with objectives; ensures increased attention to these areas

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

• Comments VERY helpful for students & Faculty
• Discourage use of “Exceeds” at midpoint unless student is “outstanding”
## Student Performance Assessment: Example

### Care Provider

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

<table>
<thead>
<tr>
<th>Care Provider Outcome 1: Develops and maintains professional relationships with patients/care givers</th>
</tr>
</thead>
<tbody>
<tr>
<td>When making your overall rating, please reflect on how strongly you agree or disagree that your student:</td>
</tr>
<tr>
<td>- engages patient; may require some preceptor prompting and guidance</td>
</tr>
<tr>
<td>- exhibits sensitivity, respect and empathy with patients and care givers</td>
</tr>
<tr>
<td>- identifies/responds to patient cues with preceptor guidance</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MIDPOINT</th>
<th>FINAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required</strong></td>
<td><strong>Required</strong></td>
</tr>
<tr>
<td>Exceeds an Acceptable level of Performance</td>
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</tr>
<tr>
<td>Meets an Acceptable Level of Performance</td>
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</tr>
<tr>
<td>Needs Improvement to Reach an Acceptable Level of Performance</td>
<td>Needs Improvement to Reach an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Not meeting an Acceptable Level of Performance</td>
<td>Not meeting an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Unable to Rate (Midpoint Only)</td>
<td>Unable to Rate (Midpoint Only)</td>
</tr>
</tbody>
</table>

**Save work frequently when completing!**

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

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

<table>
<thead>
<tr>
<th>Care Provider Outcome 2: Gathers relevant medical and medication history</th>
</tr>
</thead>
<tbody>
<tr>
<td>- utilizes multiple sources of patient information (i.e. NPI, patient/caregiver, patient profile/chart, other healthcare providers)</td>
</tr>
<tr>
<td>- employs effective interviewing techniques (i.e. appropriate open and closed ended questions)</td>
</tr>
<tr>
<td>- employs a systematic process to gather data accurately based on the Patient Care Process document with preceptor guidance</td>
</tr>
<tr>
<td>- gathers the appropriate amount of information with preceptor guidance</td>
</tr>
<tr>
<td>- retrieves and assesses relevant lab tests and diagnostic assessments with preceptor guidance</td>
</tr>
<tr>
<td>- is improving timeliness and efficiency over the course of the placement</td>
</tr>
<tr>
<td>- attempts to clarify and manage conflicting data, seeking support when necessary</td>
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<td>Not meeting an Acceptable Level of Performance</td>
</tr>
<tr>
<td>Unable to Rate (Midpoint Only)</td>
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</table>

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

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

<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>- considers patient perspective/priorities regarding meeting medication-related needs</td>
</tr>
<tr>
<td>- determines patient’s medical condition(s)</td>
</tr>
<tr>
<td>- 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)</td>
</tr>
<tr>
<td>- attempts to assess drug therapy and identify DRPs for therapeutic areas NOT covered in the curriculum with preceptor guidance</td>
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</table>

<table>
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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”.
## Assessments: Students Complete

<table>
<thead>
<tr>
<th>Assessment/Evaluation</th>
<th>Completion</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Student Self Assessments; Midpoint & Final | End of Week 4 & End of Week 8 | • compare Student Performance Assessment (completed by preceptor) with Student 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 and Final Assessment of Preceptor & Site | End of Week 4 & End of Week 8 | • to be discussed with preceptor |
| Post Rotation Survey                     | After student has completed the placement site | • Final survey regarding how things went in general; quality assurance |
ExEd Policies and Procedures Manual

• Online, link posted in CORE & Quick Reference Guide
• Outlines student responsibilities & course policies: Needlestick incidents, Netcare, etc

• **Attendance:** 40 hours/week; 5 x 8 hour days
  • Stat holidays; preceptor’s discretion
  • Absences: students must record request in CORE 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, best to contact faculty

• **Endorsed Activities:** 1 day/placement for PD related activities:
  • career fair, 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, never hurts to ask!

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

• Important to tell student your concerns & provide specific feedback, documentation important with specific examples
  • advise student to contact the Faculty (Renette or Marlene)

• Develop plan & work together: Faculty, preceptors & student

• You might not have experienced the issue before but we likely have & we want to provide support!! Each situation is unique.