Pharm 428

Preceptor Course Review

Experiential Education Program
Faculty of Pharmacy, UofA

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AHS/Faculty Liaison

2018/2019
• Preceptor Resources
• Course Overview
• What’s New?
• Course Activities & Assignments
• Assessing Your Student
• Preceptor Roles and Responsibilities
Student comments +++ positive

Why you should mentor a pharmacy student CPJ 2018; 151(2):89-90 Ai-Leng Foong; BSc. The bottom line from 4th yr 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
   • Course Information, news & events, training & resources,
   • Syllabi, podcasts, preceptor guide, library access info, recognition

2. AHS/Covenant/ Preceptor Preparation Flow Map
   • on Provincial Pharmacy Clinical Practice, Preceptor Support, Sharepoint Page
   https://share.ahsnet.ca/teams/PSPP/PCP/PreceptorSupport/U%20of%20A%20Pharm%200428/Forms/AllItems.aspx
   • Documents hyperlinked from Preceptor Preparation Flow Map
   • Site welcome Letter Template, Preceptor Expectation Letter Template, Calendars

3. Preceptor Connection & Online Communities of Support for New Models of Precepting

4. Quick Reference Guide: emailed by (CORE ELMS)RxPreceptor primary preceptor 1 month prior to start of placement
   • Summary tables: activities, preceptor discussions, assignments
   • Assessment tips & suggestions & more
Course Overview

What’s New

and

What’s Not New, But Is Still Really Important
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 below.
What’s New? The Course

• Not much overall ...tweaks here & there...

• Early Assessments (end of 1\textsuperscript{st} week) removed: replaced with formative discussion between preceptor & student

• Re-added Final Student Evaluation of Preceptor & Site

• 90 students accepted into PharmD Pharmacy Bridging Student (PBS) Program February 2018, involved in all placements

PLACEMENT DATES

• Fall Term
  - August 27-October 19, 2018
  - October 22- December 14, 2018

• Winter Term
  - January 7- March 1, 2019
  - March 4- April 27, 2019
Pharm 428: The Course

• Advanced clinical placement: *Entry to Practice* competence expected by end
• Provides opportunities to:
  - accept professional responsibilities
  - apply clinical & ethical judgment,
  - develop critical thinking & decision making skills

<table>
<thead>
<tr>
<th>Pharmacist Roles Emphasized:</th>
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<tbody>
<tr>
<td>Professional</td>
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<tr>
<td>Communicator</td>
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<tr>
<td>Care Provider</td>
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<tr>
<td>Collaborator</td>
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*Planning care: Medical & Medication Histories (including med rec), discharges, documentation*

“Practice & preceptor informs the activities”
FYI: Skills Labs

**Second year skills labs:** students had sessions on;

<table>
<thead>
<tr>
<th>Activity</th>
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<tbody>
<tr>
<td>Allergy assessment</td>
<td>Shared decision Making</td>
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<tr>
<td>Medication Reconciliation</td>
<td>Informal case presentation to another health care professional</td>
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<tr>
<td>Discharge counseling</td>
<td>Critical appraisal of journal article</td>
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**Third year skills labs:** students had sessions on;

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

- During 428 orientations in the spring students receive Advanced Netcare training
- Prior to Pharm 316; Antimicrobial Stewardship session with review of precautions & Institutional Medication Distribution presentation
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

**Step1: Skills Inventory:** Students rate their amount of practice & comfort performing select skills & provide examples of feedback they have received

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<tr>
<th>SKILLS INVENTORY</th>
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<tr>
<td><strong>Activity</strong></td>
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</table>
| Communication Skills | - Communicates in a responsible & responsive manner.  
- Uses oral & written communications strategies effectively.  
- Use appropriate language, tone & pace  
- Expresses facts/evidence & opinions/positions accurately & effectively  
- Engages in respectful, culturally safe conversations with patients, communities and health team members.  
- Demonstrates safe handover of care using oral, written or electronic communication | 1 2 3 4 5 | 1 2 3 4 5 | Practice |
| Gathering medical and medication history | - Uses systematic process to gather data  
- Uses multiple sources  
- Employs effective interviewing strategies | | | |

**Step2: Feedback received:** students provide examples of feedback they have received

<table>
<thead>
<tr>
<th><strong>Feedback:</strong></th>
<th>Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists about areas of strength.</th>
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<tr>
<td><strong>Feedback:</strong></td>
<td>Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists about areas for improvement.</td>
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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 428.
- Post Learning Plan with Skills Inventory on 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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<tr>
<td><strong>Goal</strong></td>
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<td>- Based on the self-Assessment (Skills Inventory and Feedback; Steps 1 &amp; 2), <strong>state 2 learning goals</strong> regarding knowledge or a skill that you would like to focus on during the placement.</td>
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<td><strong>Strategies</strong></td>
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| - 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. |
| **Indicators of Progress** |
| - 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. |
| **Progress at MIDPOINT Include:** |
| - Key accomplishments  
  - Next steps |
| **Progress at FINAL Include:** |
| - Key accomplishments  
  - Next steps |

**Learning Goal 1:**

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**Learning Goal 2:**

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Care Provider Activities

• direct & indirect supervision; responsible to provide care for minimum 16 patients
• should be able to care for minimum 4 patients daily by week 3
• complete patient assessment; interview patient & gather medical history & BPMH (or review for completeness if done by another HCP)
• develop care plan using Patient Care Plan Process (should be familiar with Pharmaceutical Care Plan (PCP) worksheet for care plans)

- **student must review all care plans with preceptor**
- assistance should be minimal; decrease as placement proceeds
- care plans should be comprehensive & well organized
- **all elements of plan should be included;** including DRP statements. Careplan should NOT be a progress note.
- there is a Care Plan Worksheet Checklist in Quick Reference Guide
- **site specific forms** can be used when you feel student is ready
Care Provider: Preceptor Suggestions

• documentation entered onto patient’s chart/computer profile: may require practice; should have clear intent & include only relevant information

• Prepare with student prior to activity:
  - discuss steps involved
  - student should observe preceptor complete
  - student should prepare & share their planned approach with preceptor

• Student conducts session/activity with supervision/observation initially: may have indirect supervision after preceptor comfortable with demonstrated skills. Then:
  - debrief with preceptor; document in chart (if appropriate).
  - preceptor provides feedback to student; include shared decision making and critical thinking skills
Collaborator: Inter-Professional Activities

• Student spend time with at least 1 other HCP caring for one of their patients or from their unit - i.e. assisting nurse with vital, med admin, shadowing dietician, accompanying patient receiving care from PT, OT

• Students are advised to use IP Shadowing Card for planning & activity. Suggested discussion points:
  - Communication & collaboration techniques
  - Dealing with challenges or barriers

• Verbal Patient Case Presentation
  - *informally* present patient to another HCP that both are caring for: RN, OT, MD
  - provide brief overview of patient (5-10 mins); include reason for admission, current status, relevant labs, meds currently ordered, plan
  - different from more formal patient care presentation
Scholar Activities

- Provide DI for patient care & upon request
- In-service; other HCPs including students or pharmacy team
- Patient Care Presentation (with inclusion of a Clinical Question); outline & evaluation form in syllabus
- Assigned topics to present to preceptor or discuss, mini projects
- UofA Library tutorial: student to provide you with strategies to use UofA databases
Advocate & Leadership Activity

• Participate in site-based advocacy activities where possible eg: patient education regarding appropriate use of medications, health promotion campaigns, flu clinics, etc.

Practice Management Activities

• Differences in practices; dispensary participation varies
• Discuss or participate:
  o primary steps of basic drug distribution process; include strategies used to ensure safe & effective drug distribution
  o if possible include:
    - drug formulary, study protocols, special access, compassionate drug programs
    - quality assurance programs; i.e. med admin policies
    - incident & ADR reporting policies & procedures
Assessments

Assessments PRECEPTORS complete of student
Assessments STUDENTS complete
Course Evaluations
Assessments: completed in CORE Elms (RxPreceptor)

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

• Options to address this:
  ◦ 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 RxPreceptor landing page.
    - Preceptors can set up ‘temporary password’ to maintain PW integrity.
  ◦ Print assessment forms; share with other preceptors to write comments

• Assessment information in Quick Reference Guide & at start of Student Performance Assessment on RxPreceptor

• Review assessments (posted in advance in RxPreceptor)

• Viewable by student AFTER submitted: can save as draft

• Important to discuss with student: acknowledgement on form

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

• Overview of Completing Assessments; 14 mins long
  https://youtu.be/helc7ynfe_k
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 to Reach an Acceptable Level of Performance
  - Not Meeting an Acceptable Level of Performance
• Needs Improvement: student getting better, needs more time & practice
  - assessments are reviewed by Faculty for concerns; you may be contacted at midpoint; just to ensure things are OK
  - student to include NI areas to their midpoint Learning Plan; ensures attention
• 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
• 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>
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<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>
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### CARE PROVIDER OUTCOME 2: Gathers relevant medical and medication history

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

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

### CARE PROVIDER OUTCOME 3: Determine medical conditions and assess if the patient’s medication-related needs are being met

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

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

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**Save work frequently when completing!**
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: Preceptors Complete

<table>
<thead>
<tr>
<th>Assessment/Evaluation</th>
<th>Completion</th>
<th>Comments</th>
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<tbody>
<tr>
<td><strong>Midpoint</strong> Student Performance Assessment</td>
<td>End of <strong>Week 4</strong> of Place</td>
<td>• assess behaviours/skills&lt;br&gt;• 7 Learning Outcome Areas (professional, care provider, etc) assessed; <em>distribution may be NA</em>&lt;br&gt;• End of form; identification of expectations and areas for focus for rest of placement&lt;br&gt;• <em>NEW</em>: Student adds all areas given “Needs Improvement” to their midpoint Learning Plan&lt;br&gt;• NO GRADE GIVEN (Pass or Fail)</td>
</tr>
<tr>
<td><strong>Final</strong> Student Performance Assessment</td>
<td>End of <strong>Week 8</strong> of Place</td>
<td>• behaviours/skills assessed same as midpoint&lt;br&gt;• “Placement Grade” given by preceptor; PASS or FAIL as per criteria&lt;br&gt;• Faculty provides “Course Grade” based on assessment &amp; assignment review</td>
</tr>
<tr>
<td>Preceptor Evaluation</td>
<td>End of Placement</td>
<td>• link to evaluation emailed; not RxPreceptor&lt;br&gt;• comments appreciated! (~10 mins to complete)&lt;br&gt;• anonymous, can request Faculty to contact you</td>
</tr>
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</table>
## Assessments: Students Complete

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<tr>
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</table>
| 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 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 and Site | End of **Week 4** and End of **Week 8** | • to be discussed with preceptor                                           |
| 1. Course Evaluation  
2. Preceptor and Site Evaluation | End of **Week 8**; After student has left placement site | • comments about all aspects of the course  
• final quality assurance check                                                     |
Preceptor Roles and Responsibilities

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

• Student should mirror your roles & responsibilities of institutional practice: *guide* student through course; direct instruction, modeling & coaching

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

• Provide regular **feedback:** debriefing after activities is key to learning

• **Review documentation:** care plans, documentation

• **Assess** student; formally & informally

• **Contact us** if needed
Preceptor Tips and Suggestions!

• Students must always consult with preceptor prior to initiating new recommendations
  - injections & prescribing must be completed under direct preceptor supervision

• Activities may require differing degrees of supervision: need for supervision should decrease as placement progresses
  - more coaching and facilitation as placement progresses

• Presentations (patient, in-services) should be submitted to preceptor to allow time for review & revisions: clear deadlines should be given

• Important for preceptors to share their expectations with student
Co-Precepting: important to consider

• **Planning**: meet as a team prior to placement. *Try to schedule preceptors in time blocks vs changing daily*

• **Communication**: establish how you will communicate; especially in transition between preceptors

• **Expectations**: discuss having consistent expectations

• **Assessment**: determine who/how assessments will be completed

• **Debrief**: after placement, *what went well? improvements?*

• **Models of Precepting Information and Resources** found on Faculty website
Pre-Placement Planning

- Ensure you can log into RxPreceptor; contact phexed@ualberta.ca
- Good idea to start developing schedule template prior to start
- Coordinate orientation & activities with team, co-preceptor (if applicable) & other HCPs
- Managers/secretaries request student IT access & Netcare
- Check out resources on Faculty webpage
- View student Resume/CV (RxPreceptor requirement) 1 month prior to placement; contact phexed@ualberta.ca if it is not posted on time
- Important confirm that you have reviewed their Resume/CV. Also advise about where to meet on Day 1, provide pre-readings, advise of dress policies, etc.
ExEd Policies and Procedures Manual

- Online; link included in Quick Reference Guide

- Outlines student responsibilities & course policies (needle stick injuries, 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 & 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: conferences, career fair, PDW, etc.
  - must be authorized by preceptor & feasible with placement schedule

- **Non-Endorsed Activities**: mock OSCE’s, jurisprudence exams, travel/vacation

- Students cannot change placement timelines

- **If unsure**: best to contact Michelle or Marlene
What To Do???

- 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: CONTACT THE FACULTY ASAP
  Michelle: Michelle.macdonald@ahs.ca; 403-561-6278
  Marlene: mgukert@ualberta.ca; 403-254-6449

- Important to tell student your concerns & provide specific feedback; documentation important with specific examples
- Encourage student to contact Faculty; renette@ualberta.ca (Placement Student Advisor)
  - develop plan & work together: Faculty, preceptor(s), student
- You might not have experienced the issue before but we likely have! We want to provide support!!
  - each situation is unique