PHARM 428: Experiential Education

COURSE OUTLINE and SYLLABUS

Fall, Winter, 2018-2019

PHARM 428:
Experiential Learning Part 4
Acute Care/Inpatient 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 an institutional 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, advocating for patients and developing their practice management skills. This course provides opportunities for students to further develop evidence based clinical decision-making and judgment skills needed 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 (to be completed prior to placement starting)
1. The Patient Care Process document
3. There are additional readings/website resources associated with select activities (to be completed before or 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 when completing activities and assignments;
2. Standards of Practice for Pharmacists and Pharmacy Technicians https://pharmacists.ab.ca/standards-practice
3. Chapter 45: Hospital Pharmacy Management, A World Health Organization Resource. This resource provides an overview of drug distribution systems used in a hospital, and also reviews concepts of drug oversight and organization in the hospital setting.
4. Clinical References: Bugs and Drugs, RxFiles, Dipiro’s Pharmacotherapy: A Pathophysiologic Approach (Textbook), Lexicomp, Dynamed and RxTx.
5. Patient Case Presentation: Chapter 6 in Clinical Skills for Pharmacists
6. AHS Insite (AHS intranet); AHS account needed (username and password); many helpful links; Micromedix, Knowledge Resources

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 21 - 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; e.g., 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 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. Demonstrate the inter-professional competencies of communication, collaboration, role clarification and reflection to optimize patient outcomes.
8. Integrate health promotion into patient care (encourage vaccinations, lifestyle changes, etc)
9. Respond appropriately, using best evidence, to drug information requests and proactively seek answers to self-identified and/or team member questions to care for patients
10. Manage and report/document medication errors and adverse drug reactions
11. Review the steps involved in the drug distribution process and the roles of pharmacists, technicians and assistants in that process.
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; e.g., 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 428 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 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.
• Posted assignments will be reviewed for completion only to ensure course requirements are being 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 of their assignment 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 6.

<table>
<thead>
<tr>
<th>LEARNING PLAN</th>
<th>Information and template in Appendix 5</th>
<th>Posting Instructions (RxPreceptor: as a Requirement)</th>
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<tbody>
<tr>
<td>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.</td>
<td>The Learning Plan must be posted in RxPreceptor as a requirement (under My Requirements) at least 1 week prior to the start of the placement to allow the preceptor to review. The updated plans must be posted by the end of 1st week, midpoint and at the final following review with the preceptor. 4 TOTAL POSTINGS: 1 before the placement and 3 during the placement. Include posting date in title.</td>
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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. Care Plan Assignment
Total: 4 patient care plans & documentation to be posted. Each care plan assignment consists of:
• relevant background data (as narrative) (see Appendix 2a)
• a care plan using the pharmacy care plan worksheet or site-specific forms and corresponding documentation as entered on the patient’s chart/medical record.
• corresponding documentation sent to another health care professional if completed (i.e. discharge note)
Assignments should be reviewed with the preceptor and modify as

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<tr>
<th>POSTING INSTRUCTIONS (eClass)</th>
<th>REMOVE ALL IDENTIFIERS FROM ALL POSTINGS</th>
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| Post patient care plan and chart documentation for 2 patients on eClass by 9:00 PM on the 4th Thursday of the placement. | Post documentation of 2 additional patients on eClass by 9:00 PM on the 6th Thursday of the placement.
Care plans must be typewritten, documentation can be a screen shot with no patient identifiers. |
needed prior to posting. Ensure preceptor is aware of the Care Plan Worksheet Assessment Form; Appendix 2b. Blank Pharmacy Care Plan Worksheet is posted in eClass

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<tr>
<th>2. Pharm 428 Inter-professional Collaboration: Thank you</th>
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<td>It is important that the health care professional(s) that provided you with the Inter-professional Collaboration Activity be thanked for their involvement in our program.</td>
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<tr>
<td>• Students must provide the healthcare professional(s) with a written or emailed thank you note.</td>
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<tr>
<td>• 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.</td>
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**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.

Additional information for some activities is in the appendices.

### COURSE ACTIVITIES

The following are activities that students must complete during the placement to meet course objectives

<table>
<thead>
<tr>
<th>1. Provide Patient Care</th>
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<tr>
<td>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</td>
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<tr>
<td>• Develop &amp; maintain a professional, collaborative relationship with the patient or agent/caregiver.</td>
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<tr>
<td>• Interview the patient or agent or other relevant healthcare providers to obtain necessary information and organize the information required to determine the patient's medication related &amp; other relevant health-related needs.</td>
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<tr>
<td>• Complete Best Possible Medication History/medical history, and complete medication reconciliation (or review for completeness if completed by another provider).</td>
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<tr>
<td>• Assess patient’s medication needs; review for indication, effectiveness, safety and adherence.</td>
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<tr>
<td>• List and prioritize the patient’s medical conditions and drug related problems.</td>
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<tr>
<td>• Develop and implement a care plan that is based on best evidence and prioritizes and addresses the patient's drug therapy problems and wellness needs (include pharmacist responsibilities, specific monitoring parameters)</td>
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<tr>
<td>• Provide accurate and appropriate patient education e.g. patient education, discharge counselling, medication teaching).</td>
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<tr>
<td>• Provide continuity of care; conduct follow-up (seamless care activities) and modify care plans as needed.</td>
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<tr>
<td>• Communicate and document patient care activities.</td>
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Under direct and indirect supervision, students are responsible for providing care for a minimum of 16 patients. Students should choose care plans that best demonstrate their patient care skills for assignment postings. All care plans must be written up by the student and reviewed by the preceptor.

More information: Appendix 2a.

**Corresponding Assignment:** Care Plan Assignment

<table>
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<th>2. Pharmacy Services</th>
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<tr>
<td>Participate in the scope of professional practice under the supervision of the preceptor(s). This includes:</td>
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<tr>
<td>• Medication order adaptation when appropriate.</td>
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<tr>
<td>• Administration of Drugs by Injection: Students in the Class of 2018 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.</td>
</tr>
</tbody>
</table>
• Ordering and monitoring lab tests.

3. **Clinical Judgment: Review and Reflection**
   For 3 patients, students will write a summary of the factors considered (patient preference or specific variables, evidence) to formulate one of the recommendations made. The written summary should include the clinical issue, the patient assessment (including questions asked), clinical data retrieved and considered to make a decision.

   The student should review each written summary with the preceptor and discuss their rationale for the decision made, how they framed their recommendation to the team/prescriber and the outcome.

4. **Inter-professional Collaboration**
   - Students will collaborate with other healthcare professionals to care for patients. This includes attending patient rounds (daily, or at frequency deemed appropriate by preceptors) or patient care conferences to review individual patient progress and provide input on patient’s medication therapy.
   - Students will spend time with at least 1 other health care professional that is caring for their patient(s). If deemed appropriate by the preceptor, more than 1 experience with a health care professional may be arranged. This may include observing or assisting a nurse caring for your patient, shadowing a dietician, social worker, physiotherapist or occupational therapist, etc.


   - Verbal Patient Case Presentation: Students will present a patient to a doctor or nurse who they are both caring for. They should provide a brief overview of the patient (5-10 mins). Include reason for admission, current status, relevant labs, medications currently ordered, assessment and suggested recommendations (if any), and monitoring plan.

   Debrief with the preceptor the benefits of this type of patient review in practice and how it can be used to resolve patient issues. Students are encouraged to collaborate with other health discipline students if available (e.g. medical or nursing students) to provide patient care learn with and from each other.

5. **Patient Care Presentation (with inclusion of a Clinical Question)**
   - During week 6-7, students should present at least 1 patient care experience to pharmacy staff and where possible to other students. Students are encouraged if possible to present to different groups such as allied healthcare team.

   - A PowerPoint or similar presentation format is recommended. Format used by the practice site can be used as deemed appropriate by the preceptor.

   - The student may be asked to provide a copy to the site. It is suggested that the student pdf and reference any clinical data used in their presentation,

   Suggested presentation format and rubric; Appendix 4.

6. **Drug Information Requests**
   - Students will 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. Site-specific forms should be used if available; Drug Information Inquiry Record form is posted in 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.

7. **In-service Presentation**
   Students will provide a minimum of 1 in-service presentation (i.e. overview of a therapeutic topic, journal club, etc) to pharmacy staff and/or allied health care team (including students).

8. **Pharmacy Advocacy Programs**
   Students will participate in site-based advocacy activities where possible (i.e. patient education regarding appropriate use of medications, health promotion campaigns, flu clinics, etc.).

9. **Medication Distribution**
   - Students will participate in the distribution of medications or have a guided tour of the dispensary. Review how medications are delivered to the patient after they are ordered.

   - Students should re-review the article (Chapter 45; Hospital Pharmacy Management) in Recommended Readings as it provides an overview of hospital distribution systems.
10. **Models of Precepting and Learning**
   When applicable students will participate in peer-assisted and near-peer teaching and learning with classmates and other professional students.

11. **Preceptor Library Resources**
   Students 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](http://tinyurl.com/lgppqay).
   The link to the UofA pharmacy library home page is [http://guides.library.ualberta.ca/pharmacy](http://guides.library.ualberta.ca/pharmacy).

12. **OPTIONAL (if applicable): Adverse Drug Reaction Reporting**

### 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 ECLASS

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

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

3. **Communication Skills**
   Discuss communication strategies preceptors use with patients, with their team and other pharmacists to build rapport and ensure continuity of care.

4. **Scope of Practice**
   Discuss with the preceptor how they (or another colleague) use the expanded scope of practice to contribute to patient care. Include additional formal training or specialization that they completed.

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 their preceptor.

6. **Patient Advocacy in a Hospital Setting**
   Discuss the pharmacist’s role in health promotion to patients including what strategies they use and review what health promotion programs are available at the hospital.
   Discuss the advocacy and leadership roles of pharmacists such as handling drug shortages, committee involvement and the development of protocols for patients and team members.

7. **Practice Resources**
   Discuss with the preceptor which resources they use and why they prefer particular resource(s) for specific purposes.

8. **Medication Distribution Process and Safety Practices**
   Discuss with the preceptor and/or dispensary staff the components of the distribution system and the scopes of practice of staff involved with each component.
   Discuss error prevention strategies as well as the policies and process involved with safe and accurate dispensing processes as well as administration practices. Include how pharmacy is involved with the development and/or promotion of these processes and policies.
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
  o students are expected to be at the placement site for a minimum of 40 hours/week
  o know policies regarding completion of Absence Tracker for illness, bereavement, etc
  o 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 (N95-fit testing, first aid, etc.)
• 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 expenses available for placements.

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 ASSIGNMENT and ASSESSMENT POLICIES

It is the student’s responsibility to submit all assignments, including resubmissions, in accordance with the 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, an “Activities, Assignments and Assessments Schedule” has been provided in Appendix 6.
SUGGESTIONS and TIPS FOR SUCCESS

Having completed introductory placements, students are aware that they are different from classroom learning. Professionalism and communication skills are crucial components of the course. Although preceptors will guide the learning, students are ultimately responsible to ensure completion of all activities, assignments and assessments.

This is considered to be an advanced placement so patient accountability and self-motivation is expected by the preceptors. Full participation in the experience is the first step to passing the placement. 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. Students are expected to identify learning opportunities and show initiative; identifying knowledge gaps and self-directed learning is required whether it is independently or with a peer.

Due to variability of practice sites, experiences will differ. Expectations regarding patient care and supervision must be discussed with the preceptor at the beginning of the placement however improvement in timeliness and efficiency over the course of the placement is expected. 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 a 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 an experiential placement.

TECHNOLOGY REQUIREMENTS

Course Information
Course information (syllabi, tools and 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 required with eClass or RxPreceptor, contact phexed@ualberta.ca

Assignments
Assignments will be posted in eClass. To allow for preceptor access, the Learning Plan will be posted in RxPreceptor as a requirement under “My Requirements”.

Assessments and Evaluations
All assessments are submitted using CORE ELMS (RxPreceptor). The anonymous course evaluation is completed in Qualtrix via a link emailed to students.

Netcare
Alberta Netcare registration is arranged by UofA Faculty of Pharmacy, Alberta Health Services (AHS) and eHealth Support Services team prior to the student placement start date to ensure access for the student during the placement. No action from the student is required.

Students are encouraged to login to Netcare on the first day to ensure access has been obtained. A remote access token (fob) is not required for AHS placements.

Further information regarding registration, how to confirm access, troubleshooting and contact information is posted in the Documents Library of RxPreceptor (see Netcare Resources folder), 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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<th>OUTCOME</th>
<th>BEHAVIOURS</th>
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<tr>
<td><strong>Professional</strong></td>
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</table>
| 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 and skills (i.e. maximizes learning opportunities).  
• 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).  
• Seeks and interprets feedback to identify deficits or strengths in competence/performance. |
| **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 (i.e. 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/responds to patient cues.  
- Establishes goals in collaboration with the patient when appropriate  
- Determines when it is ethically and professionally appropriate to involve caregivers and/or family members. |
|---|---|
| 2. Gathers relevant medical and medication history | - 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 accurately based on the Patient Care Process document.  
- Clarifies and manages conflicting data seeking support when necessary. |
| 3. Determine medical conditions and assess if the patient’s medication-related needs are being met | - Prioritizes medication related needs based on urgency and patient perspective/priorities.  
- Determines patient’s medical condition(s) and determines those where medication needs are not currently being addressed.  
- Assesses drug therapy for indication, efficacy, adherence and safety. |
| 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 | - Educates the patient on non-pharmacological (e.g. lifestyle) recommendations.  
- Educates the patient on pharmacological recommendations.  
- Negotiates and adapts plan with team and/or 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. |
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<th>Scholar</th>
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| 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.  
| 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.  
• Exercise critical thinking and clinical judgment to make informed decisions and solve problems.  
• Under conditions of uncertainty, weighs the pros and cons of alternatives to make decisions; may require preceptor support.  
• 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 | • 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 with preceptor guidance.  

APPENDIX 2: Care Provider Outcome

2a. Patient Care Activity and Assignment Information

ACTIVITY
The number of patients may be adjusted by the preceptor depending on patient acuity and complexity. Students may be assigned topics to present to their preceptor to enhance or demonstrate understanding of topics related to patient care activities.

Care Plan Formats
• The Pharmacy Care Plan Worksheet is the format students use at the Faculty and can be used. Alternatively, site specific patient care plan forms may be used. It is suggested that preceptors and students discuss which format is appropriate and most comfortable for the student to use for developing and documenting care plans. In some cases, students may start with the worksheet first and change in time 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).

Students should:
• Be caring for four patients each day by week 3 of the placement (add new patients if patients are discharged).
• Discuss/review all written care plans with the preceptor; modify as required. Discuss patient care decisions and rationale for decisions. Ensure preceptor is aware of the care plan worksheet assessment checklist. (*Appendix 2b*)
• Ensure patient continuity of care is arranged or communicated to the preceptor near placement completion.
• Integrate assessment of patient readiness (state of change into the care plan).

ASSIGNMENT – Guidelines and Suggestions
• patient identifiers MUST be removed
• Each posted care plan assignment must include relevant background data with the following components.
  - Reason for admission
  - 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 Activity

It is important for students to have opportunities to establish positive working relationships with other health care professionals and see how they provide patient care. Students have been provided with Inter-professional Student Shadowing cards; green cards developed by Health Sciences Council (UofA) and advised to use them in previous placements. It is suggested that students use these cards for all placements. These shadowing cards help to guide expectations as it provides suggestions to consider prior to an interaction. i.e. 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. The card provides goals of the interaction as well as 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 experiences students must:
• Prepare an expectation of what they want to learn from the IP experience and review it with the preceptor.

During the IP experience students must:
• Demonstrate respect of the practice and knowledge of other health care professionals;
• Work collaboratively;
• 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 experience, students must debrief their experience with their preceptor. Include:
• What were the primary learning points or insights? (see Inter-Professional Experience Discussion; pg 9)
• Mechanisms the preceptor(s) use to improve or promote inter-professional collaboration
• What barriers affect collaborative relationships between institutional health care professionals?
• Strategies that work to overcome common barriers.
APPENDIX 4: Scholar Outcome

4a. Patient Care Plan Presentation (with inclusion of a Clinical Question)

Goals of this activity are to allow students to:
• Share patient care experiences and understanding of clinical issues.
• Provide a verbal presentation of their patient, DRP(s) and recommendation in a systematic manner (this has been practiced in the skills lab)
  o Practice presentation skills (use of PowerPoint slides is encouraged, presentation format should be discussed with the preceptor)
  o Provide evidence-based review of literature to support their recommendations(s) (this has been practiced in the skills lab using the BEARs format as a way to keep the evidence review brief.)

The presentation should be approximately 20 mins in duration, with up to 5 minutes for questions. It is suggested that a patient case be chosen in which interaction with the patient helped the student to assess the patient’s DRPs and where their intervention affected or potentially will affect patient outcomes.

Students and preceptors should discuss the patient care plan they want to present by the midpoint of the placement (i.e. no later than the midpoint assessment discussion). Students should provide the preceptor with a first draft soon thereafter to allow time for preceptor review. Students should then revise the presentation based on the feedback given.

Suggested Presentation Content
(Adapted from: FMC Clinical Presentation Guidelines and Rural Journal Club Case Presentation Format)

a. Introduction/outline (including learning objectives)
b. Patient case and data
c. Listing of all DRPs and selection of main DRP
d. Disease state background
e. Goals of therapy
f. Therapeutic alternatives
g. Focused clinical question (PICO format- to be researched by student using primary literature)
h. Evidence Review; including search strategy – BEARS (Brief Evidence-based Assessment of Research) worksheet, utilized in Pharm 330, can be used to aid this (see information below)
i. Summary of evidence
j. Therapeutic recommendation; include monitoring plan (efficacy/toxicity)
k. Resolution of patient case

a. Introduction
Introduce the case briefly; include why the case was chosen and what the main focus of the presentation will be. Provide a brief outline of the major components of the presentation. Include learning objectives for the audience.

b. Patient Data
Present the following information about the patient;
• Summarize reason for admission/consult, history of present illness, and relevant medical and drug therapy history.
• Summarize presenting symptoms, physical assessment, labs tests, diagnostic exams pertaining to the focus of the presentation.
• Describe the patient’s drug therapy relating to the case presentation focus, including indications for all drug therapy as well as specific drug therapy information; dose, route, duration, etc.
• Describe the patient’s progress related to the case presentation focus.
c. Listing of all DRPs and Presentation of DRP selected for review and work-up
   List ALL DRPs related to that patient and highlight the DRP that will be the focus of the presentation. The DRP selected does not need to be the most important DRP; it will simply be the focus of the presentation. The student should be familiar with all aspects of the patient’s case and prepared to answer any questions related to any of the DRPs, regardless of whether it was the main focus of the presentation.

d. Disease State Background
   Briefly review the disease state relevant to the main DRP. This review should include pathophysiology, therapeutic alternatives and any therapeutic controversies relevant to this case.

e. Goals of Therapy
   Describe the individualized goals of drug therapy for the main DRP. Include the patient perspective where possible.

f. Therapeutic Alternatives
   Discuss alternative ways (both drug and non-drug) to resolve the main DRP and achieve the individualized goals of therapy for this patient.

g. Focused Clinical Question
   State the focused clinical question using the PICO format:
   \[
   \text{P: Patient, population or problem (How would I describe a group of patients similar to mine?)}
   \]
   \[
   \text{I: Intervention, prognostic factor or exposure (Which main intervention, prognostic factor or exposure am I considering?)}
   \]
   \[
   \text{C: Comparator or alternative intervention (if appropriate) (What is the main alternative to compare with the intervention?)}
   \]
   \[
   \text{O: Outcome you would like to measure or achieve (What can I hope to accomplish, measure, improve or affect?)}
   \]
   Example:
<table>
<thead>
<tr>
<th>Patient</th>
<th>Intervention</th>
<th>Comparator</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>In a mechanically ventilated ICU patient...</td>
<td>...would administering IV ranitidine...</td>
<td>...compared to sucralfate given via NG tube...</td>
<td>...reduce clinically important bleeding?</td>
</tr>
</tbody>
</table>

h. Evidence Review (including search strategy)
   Review each of the meta-analyses, studies or case reports selected as being relevant to answer the clinical question. Students have practiced brief reviews of the literature in their Skills Lab course using the BEARS (Brief Evidence-based Assessment of Research) worksheet, and this can be used if students choose. The form can be found at: [https://www.med.ualberta.ca/departments/family-medicine/research/resident-research/bears](https://www.med.ualberta.ca/departments/family-medicine/research/resident-research/bears)

i. Summary of Evidence
   Summarize the evidence that has been reviewed (i.e. identify strengths and weaknesses of each paper reviewed) and explain the relevance to the patient where applicable.

j. Therapeutic Recommendation and Monitoring Plan
   Outline the recommendation(s) made for the patient to achieve the therapeutic goals for the patient. Explain why this was chosen as the best solution(s) for the patient incorporating best evidence principles and patient-specific factors. Describe monitoring parameters and activities that were/would be done to determine the outcome of the drug therapy recommendations (if applicable).

k. Resolution of Case
   Where possible, present the results of follow-up monitoring to illustrate the patient outcome.
4b. Patient Care Presentation Rubric
Adapted from PharmD Experiential Learning Presentation Rubric and FMC Clinical Presentation Guidelines
To be used by the preceptor, and other observers. Student to bring copies to the presentation.

Student’s Name: ______________________ Assessor’s Name: _____________________________

Presentation Title: __________________________________________________________________

Please circle the number that best describes the student’s presentation in each of the following categories. This form is intended to support the overall assessment of the student’s performance in the placement.

<table>
<thead>
<tr>
<th>1 – Unable to rate</th>
<th>2 – Needs Improvement</th>
<th>3 – Meets Expectations</th>
<th>4 – Exceeds Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Could not evaluate or missing.</td>
<td>Outcome measure partially achieved.</td>
<td>Outcome measure generally achieved.</td>
<td>Outcome measure achieved in exemplary manner.</td>
</tr>
</tbody>
</table>

**Introduction and Overview of Patient Data**
- Includes information that explains why case was chosen
- Identifies the main focus of the presentation
- Provides a brief outline of the major components of the presentation and learning objectives

**Patient Data**
- Presents a concise summary of patient’s history presenting symptoms and progress
- Accurately interprets physical assessment, laboratory and diagnostic data
- Describes the patient’s drug therapy in relation to the presentation focus
- Presents only relevant data

**DRPs**
- Identifies and prioritizes all DRPs accurately
- Identifies the primary DRP that is the focus of the presentation

**Goals of Therapy**
- Describe individualized goals of drug therapy for the focus DRP; include patient perspective where appropriate

**Therapeutic Alternatives**
- Identifies drug and non-drug alternatives for the main DRP and to achieve goals of therapy; considers the pros and cons of each

**Focused Clinical Question**
- States the question using the PICO format
- Outlines the search strategy used and reviews the evidence that was selected to answer the question
- Summarizes the evidence and includes relevance to the patient

**Therapeutic Recommendation**
- Outlines recommendations made to achieve therapeutic goals for the focus DRP; include rationale

**Monitoring Plan and Resolution of Case**
- Describe monitoring parameters and interventions that were/would be done to achieve the outcome of any recommendations make for the focus DRP
- If possible include follow-up monitoring

**Presentation and Organization Skills**
- Speaks clearly; uses appropriate pace and tone
- Poised and maintains focus
- Adheres to time limits (20 min + up to 5 min for questions)
- Key points are presented in a logical, coherent way; uses transitions well

**Questions**
- Understands question(s) and provides (or attempts to provide) reasonable response

**Overall Impression and Comments**
APPENDIX 5: 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 428 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>
</table>
| Communication Skills | - Communicates in a responsible & responsive manner.  
- Uses oral & written communications strategies effectively.  
- 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 | |
| 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.  
- Able to verbally present patient information to a team  
- Demonstrate safe handover of care using oral, written, electronic communication |
STEP TWO: FEEDBACK RECEIVED
To complete your self-assessment required for your Learning Plan, complete the feedback table below.

<table>
<thead>
<tr>
<th>Feedback</th>
<th>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</td>
<td>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 the 3 steps is posted under “Requirements; Pharm 428 Learning Plan” 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?
## LEARNING PLAN

<table>
<thead>
<tr>
<th>Goal</th>
<th>Strategies</th>
<th>Indicators of Progress</th>
<th>Progress at MIDPOINT</th>
<th>Progress at FINAL</th>
</tr>
</thead>
</table>
| • Based on the self-Assessment (Skills Inventory and Feedback; Steps 1 and 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:**
APPENDIX 6: Weekly 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 (page 3)  
- Corresponded with the preceptor; regarding parking, dress code, start time, etc.  
- Completed pre-readings assigned by the preceptor  
- Started to develop the Learning Plan; posted on RxPreceptor as a requirement at least 1 week prior to placement |
| Daily throughout the placement |  
- Provision of Patient Care, review with preceptor.  
  - Prepare care plans and document care provided in accordance with preceptor’s practice  
  - Minimum: 16 patients across the placement (provide care for a minimum of 4 patients concurrently by week 3)  
- Conduct Medication Reconciliations.  
- Retrieve drug information.  
- Collaborate with the pharmacy team as a student pharmacist.  
- Ensure activities, discussions and assignments are being completed (student is ultimately responsible for ensuring completion of all course requirements). |

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Orientation, Create Placement Schedule, Early Assessments</th>
</tr>
</thead>
</table>
| Date:  | Review and discuss the initial Learning Plan, course objectives and activities.  
|        | Discuss student/preceptor expectations and responsibilities.  
|        | Discuss assessment processes and timelines (including informal feedback and debriefing).  
|        | Develop schedule; preliminary activity planning; in-service, presentations, patient care.  
|        | Tour of pharmacy and institution; including patient care units.  
|        | Log in to ensure Netcare access as well as other on-site systems.  
| Orientation (see Orientation Checklist in Preceptor Guide) |  
- Discuss pharmacy care plan worksheet, clinical documentation, format and process for documenting in chart/computer profile.  
- Set up routine and process for providing daily care for assigned patients: e.g. rounding, patient conferences, medication reconciliations, discharge counselling and seamless care.  
- Plan initial patient interaction based on review of patient’s chart and other information sources (Netcare, other healthcare professionals).  
- Implement care for patients including documentation (reviewed by preceptor).  

<table>
<thead>
<tr>
<th>Week 2: Date</th>
<th>Week 3: Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue patient care activities and documentation</td>
<td></td>
</tr>
</tbody>
</table>
- Develop and discuss at least one Clinical Judgement written summary with preceptor (total of 3 to be completed across placement)  
- Schedule in-services and presentations; topics, discuss timelines for preceptor review, presentation format.  
- Plan healthcare collaboration activities.  

END of Week 1: Complete, submit and discuss Student and Preceptor EARLY ASSESSMENTS
<table>
<thead>
<tr>
<th>Week 4: Date</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient Care and other course requirements</strong></td>
<td>Continue care plans and corresponding documentation. &lt;br&gt; Select 2 patients to post care plans; review with preceptor prior to posting. &lt;br&gt; Ensure plan for completing the other 2 Clinical Judgement written summaries with preceptor (if not yet completed). &lt;br&gt; Patient Care Presentation; discuss with preceptor; which patient to use, timelines for review. &lt;br&gt; Review progress regarding in-service.</td>
</tr>
<tr>
<td><strong>4th Thursday of the placement</strong></td>
<td>Post assignment on eClass; first 2 of 4 pharmacy care plan worksheets or site-specific forms and documentation as entered onto the patients chart/profile or sent to a HCP. (care plans must be typewritten, documentation can be a screen shot; no patient identifiers) &lt;br&gt; Complete and submit midpoint Student Self-Assessment (RxPreceptor) to allow preceptor can review prior to Student Performance Assessment.</td>
</tr>
<tr>
<td><strong>Mid-Point (end of Week 4)</strong></td>
<td>MID-POINT Assessments: Student Performance Assessment-midpoint; completed by preceptor; review with student. &lt;br&gt; Student Evaluation of Preceptor and Site and Student Self-Assessment; discuss both with preceptor &lt;br&gt; Update with progress as well as grades of Needs Improvement from the Student Performance Assessment and post the midpoint Learning Plan. (RxPreceptor)</td>
</tr>
<tr>
<td><strong>Week 5: Date</strong></td>
<td>Complete in-service and continue to develop patient care presentation &lt;br&gt; Continue medication reconciliations, patient care plans and corresponding clinical documentation; review with preceptor. &lt;br&gt; Select 2 patients to post care plans and documentation. &lt;br&gt; Assess completion of discussions; professionalism, communication, medication distribution process and safety practices, scope of practice, practice resources, advocacy, etc.</td>
</tr>
<tr>
<td><strong>6th Thursday of the Placement</strong></td>
<td>Post 2 additional care plan worksheets or site-specific documentation and clinical documentation. (Same as week 4 assignment)</td>
</tr>
<tr>
<td><strong>Week 7: Date</strong></td>
<td>Review activity table to ensure all activities and discussions have been completed. &lt;br&gt; Ensure HCP visit has been completed; conduct debrief of HCP visit &lt;br&gt; Conduct Patient Care Presentation &lt;br&gt; Ensure all assignments are near to completion or completed. &lt;br&gt; Ensure completion of discussions; professionalism, communication, advocacy promotion. Inter-professional practice, Medication Distribution Process and Safe practices, scope of practice, practice resources, et</td>
</tr>
<tr>
<td><strong>End of Week 8 (final)</strong></td>
<td>Ensure continuity of care documentation is entered into patient profile and conveyed to patient pharmacy team. &lt;br&gt; <strong>FINAL Assessments (RxPreceptor)</strong> &lt;br&gt; Final Student Performance Assessment and Placement Grade; completed by preceptor: review with student &lt;br&gt; FINAL Student Evaluation of Preceptor and FINAL Student Self-Assessment discuss with preceptor. &lt;br&gt; RxPreceptor Survey: Complete the Post-Course Preceptor Evaluation (non-anonymous). Not to be discussed with preceptor, and evaluation not viewable by preceptor. &lt;br&gt; Ensure assignments are posted &lt;br&gt; Update and submit the final Learning Plan in RxPreceptor &lt;br&gt; Anonymous Student Course Survey (survey link emailed to student)</td>
</tr>
</tbody>
</table>