PHARM 428: Experiential Education

COURSE OUTLINE and SYLLABUS

Fall, Winter, 2017-2018

PHARM 428: Experiential Learning Part 4 – Institutional 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 managing their practice. 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. CSHP’s webinar with presentation handout; “Goals and Objectives – What’s the Difference Anyways?” Helpful resource for writing learning objectives, which are needed for the Learning Plan assignment. Go to webinars, scroll down to the topic; May 21, 2014. It is suggested that the handout be printed and reviewed (listening to the webinar is optional). Focus on slides 11-39.
5. There are additional readings/website resources associated with select activities (to be completed during the course) to support discussion topics with the preceptor.

RECOMMENDED RESOURCES
Prior to the placement students should ask their preceptor about references and resources that should be brought to the placement or pre-readings that should be completed prior to the placement.

These resources may be helpful for students to use when completing activities and assignments;
1. Standards of Practice for Pharmacists and Pharmacy Technicians
   https://pharmacists.ab.ca/standards-practice
2. 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.
3. Clinical References: Bugs and Drugs, RxFiles, Dipiro’s Pharmacotherapy: A Pathophysiologic Approach (Textbook), Lexicomp, Dynamed and RxTx.
4. Patient Case Presentation: Chapter 6 in Clinical Skills for Pharmacists
5. AHS Insite (AHS intranet); AHS account needed (username and password); many helpful links; Micromedix, Knowledge Resources
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.

Skills:
2. Provide patient care and manage patients’ medication and health needs.
3. Exercise critical thinking, clinical judgment and inter-professional collaboration to make informed decisions and solve problems.
4. Communicate effectively with patients, family members, caregivers and team members both verbally and in writing.
5. Work collaboratively with the patient, family, caregivers and other healthcare professionals to facilitate the management of the patient’s health needs.
6. Demonstrate the inter-professional competencies of communication, collaboration, role clarification and reflection to optimize patient outcomes.
7. Integrate health promotion into patient care (encourage vaccinations, lifestyle changes, etc)
8. 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
9. Manage and report/document medication errors and adverse drug reactions
10. Determine the components and steps of the drugs distribution process to ensure accurate, effective and safe drug distribution.

Attitudes:
11. Demonstrate professionalism to patients and others, and practice in a manner demonstrating professional accountability.
12. Develop personal and professional leadership skills.
13. 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 at Risk
If at any time, the preceptor or student has a concern about the student’s performance or ability to pass the course, they should contact the Course Coordinator. The Course Coordinator must be contacted if any outcomes are rated as Not Meeting an Acceptable Level of Performance or more than 3 outcomes are rated Needs Improvement to Reach an Acceptable Level of Performance on the Midpoint Assessment of Student Performance.
ASSESSMENT INFORMATION

- There are three types of assessments in the course: **Summative**, **Formative**, and **Course Evaluation**.
- All assessments are completed and submitted using RxPreceptor. Information regarding assessments, grades, students at risk and placement failure can be found in the *Undergraduate Experiential Education Policies and Procedures Manual; see required reading.*
- 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 RxPreceptor prior to the start of the placement. Students are encouraged to review so they know what they will be assessed on and what they will be assessing.

1. **SUMMATIVE ASSESSMENT**

   **Purpose:** facilitate the final decision on the extent to which students have achieved the course learning objectives for the course. There is one summative assessment in the course; at the end of the placement called the Final Student Performance Assessment.

   **A. Final Student Performance Assessment**

   *Completed at the end of placement by preceptor*

   Preceptor assesses student’s performance on 18 outcomes (grouped in 7 major areas):
   - Professionalism (3 outcomes)
   - Communication (1 outcome)
   - Care Provider (7 outcomes)
   - Collaborator (1 outcome)
   - Scholar (3 outcomes)
   - Advocacy and Leadership (1 outcome)
   - Practice Management (2 outcomes)

   The skills and behaviours associated with each outcome define expectations for Pharm 428.
   The individual behaviours for each of the 18 outcomes assessed in Pharm 428 are listed in *Appendix 1*.

   Preceptors indicate student’s level of achievement of the outcomes using the following 4 point scale:

   - **Not Meeting an Acceptable Level of Performance:** Student has significant difficulty or deficits on the skills and behaviours associated with this outcome.
   - **Needs Improvement to Reach an Acceptable Level of Performance:** Student needs improvement on the skills and behaviours associated with this outcome.
   - **Meets an Acceptable Level of Performance:** Student is performing as expected on the skills and behaviours associated with the outcome.
   - **Exceeds an Acceptable Level of Performance:** Student is performing better than expected on the skills and behaviours associated with the outcome.

   ***IMPORTANT***

   In order for the preceptor to provide a recommendation of “PASS” for the placement, 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 (maximum of 2 for Care Provider) outcomes achieve a rating of “Needs Improvement to Reach an Acceptable Level of Performance”** AND,
   3. **Have ZERO ratings of “Not Meeting an Acceptable Level of Performance”**.

   Preceptors base their overall rating for each outcome on how strongly they agree or disagree that the student has demonstrated a set of expected skills, behaviours and knowledge.

   The student must include any area rated Needs Improvement or Not Meeting an Acceptable Level of Performance into the objectives of the Learning Plans for future placements.

2. **FORMATIVE ASSESSMENTS**

   **Purpose:** support the provision of specific feedback to students that can be used to improve learning and to provide specific feedback to preceptors that can be used help improve their ability to instruct and
guide student learning.

A. Preceptor and Student Early Assessments

*Completed by the preceptor and student at the end of the first week.* (Preceptor completes the “Early Assessment of the Student”; student completes the “Early Assessment of the Preceptor”)

- Identifies and addresses concerns early in the hope that discussion will provide a resolution to any early identified concerns.
- If there are concerns, the student and preceptor are offered the option to discuss the assessment and may indicate if they would like to be contacted by a Faculty member.

B. Student Self-Assessments; Midpoint and Final

*Completed by student at the midpoint and at the end of the placement.*

Students rate their perceived level of ability on the same 18 outcomes assessed on the Student Performance Assessment using the following 3 point scale:

<table>
<thead>
<tr>
<th>Needs Improvement</th>
<th>Meets an Acceptable Level of Performance</th>
<th>Exceeds an Acceptable Level of Performance</th>
</tr>
</thead>
</table>

i. Midpoint Student Self-Assessment

- Provides opportunity for students to identify the behavior, skills and knowledge that need to be focused on for the balance of the placement. Students must also provide written comments to support their ratings.
- Students must complete and submit the Midpoint Student Self-Assessment at least 1 day prior to the Midpoint Student Performance Assessment discussion allowing the preceptor to pre-review and compare ratings. Students should print and bring a copy to the assessment discussion.

ii. Final Student Self-Assessment

- It is important that students reflect on their learning at the end of the placement.
- This assessment does not need to be submitted in advance for preceptor review, but students must come prepared to discuss their perceived performance with the preceptor and any discrepancies.

C. Midpoint Student Performance Assessment

*At a time, determined by the preceptor, around the midpoint of the course the preceptor will complete the Midpoint Student Performance Assessment.*

This assessment:

- Is important as it ensures the student is aware of their progress, by indicating areas of strength and areas that require improvement.
- Provides a good indication of what needs to be focused on as well as indicating areas of concern.
- Has the same format as the final Student Performance Assessment.
- Requires preceptors to rate students on each of the 18 outcomes using the same rating scale shown under the Final Student Performance Assessment.

A midpoint grade of:

- *Needs Improvement* indicates that the preceptor feels that with more time, effort and practice the skills will likely be achieved.
- *Not Meeting an Acceptable Level of Performance* indicates that the preceptor has concerns about the ability of the student to pass and the Faculty should be contacted.

These ratings in combination with the Midpoint Student Self-Assessment serve as a basis for the preceptor to identify goals and expectations for the remainder of the placement. The preceptor includes these goals and expectations at the end of the Midpoint Student Performance Assessment and discusses them with the student.

The student must add these outcomes and skills that are identified as needing improvement to the Midpoint Learning Plan for the second half of the placement.

D. Student Midpoint Evaluation of Preceptor and Site

*Completed by the student and discussed with the preceptor at the midpoint of the placement.*

- This evaluation is designed to generate discussion about important preceptor attributes, placement site qualities and opportunities for learning.
3. COURSE EVALUATION ASSESSMENTS

Purpose: provide summative evaluation of different aspects of course effectiveness. They are also used to identify problems that might arise when students or preceptors are not meeting the course expectations.

A. Student Course Evaluation - Anonymous

• At the end of the course, students complete an on-line survey with questions pertaining to Faculty administration of the course, learning objectives and activities.

B. Post Course Evaluation of Preceptor and Site: Non-Anonymous

• Completed on RxPreceptor within 48 hours after completing the course and the student has left the placement site.
• Purpose of this evaluation is to allow students to provide comments without any potential influences and serves as a final measure of quality assurance.

COURSE SCHEDULE

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

Fall Term (PharmD for BScPharm Students will be taking this course in Blocks 1 and 2):
  • Block 1: August 28 - October 20, 2017
  • Block 2: October 22 - December 15, 2017

Winter Term (BScPharm Students will be taking this course in Blocks 3 and 4):
  • Block 3: January 8 – March 2, 2018
  • Block 4: March 5 - April 27, 2018

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

1. Patient Care
   For all patient care encounters students should provide patient care as deemed appropriate by the preceptor(s).
   • Develop & maintain a professional, collaborative relationship with the patient or agent/caregiver.
   • Interview the patient or agent or other relevant healthcare providers to obtain necessary information.
   • Gather and organize the information required to determine the patient’s medication related & other relevant health-related needs.
   • Assess if the patient’s medication needs are being met.
   • List and prioritize the patient’s medical conditions and drug related problems.
   • 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 (care plan to include pharmacist responsibilities, specific monitoring parameters and follow up schedule).
   • Provide accurate and appropriate patient education
   • Conduct follow-up and modify care plans as needed.
   • Communicate and document patient care activities.
   • Provide continuity of care.

1a. Provide Patient Care
   Under direct and indirect supervision, students are responsible for providing care for a minimum of 16 patients. Providing patient care includes:
   • Complete patient assessment, including interviewing patient and gathering a Best Possible Medication History/medical history, and complete medication reconciliation (or review for completeness if completed
- Development of a care plan based on information gathered.
- Documentation entered onto the patient’s chart or computer profile.
- Completing patient education and seamless care activities as appropriate.
- Providing care to assigned patients that require care; e.g. patient education and counselling; discharge counselling, medication teaching). More information: Appendix 2a

Students should choose care plans that best demonstrate their patient care skills for assignment postings. All care plans must be reviewed by the preceptor. More information; Appendix 2a.

**Corresponding Assignment:** Care Plan Assignment

### 2. Pharmacy Services

Participate in the scope of professional practice under the supervision of the preceptor(s). This includes:

- Medication order adaptation when appropriate.
- 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.

- 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 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 this 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 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 another health care professional that 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. Discuss presentation style, format and content with the health care professional.

- Students will collaborate with other health discipline students if available (e.g. medical or nursing students) to 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.

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
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
- 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 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
Participate in peer-assisted and near-peer teaching and learning with classmates and other professional students when applicable.

### 11. OPTIONAL: Preceptor Library Resources
Provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) now accessible to preceptors.

- The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: [http://tinyurl.com/lgppqay](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

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### COURSE DISCUSSIONS
The following are discussions that students must complete during the placement to meet course objectives.

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

- Include strategies the preceptor uses to practice in an ethical manner.
- The student should include how they demonstrate this during the placement. Sharing examples during the discussion is helpful. (i.e. patient confidentiality, practice challenges) It is important for the student to see if their ideas and strategies align with their preceptor.
- Discuss the role of the pharmacist in the practice setting and how they independently and collaboratively contribute to improving outcomes.

#### 2. Maintaining Professional Competency and Life-Long Learning
- Discuss with the preceptor how they maintain professional competence through self-directed learning. Examples to highlight include reading literature (how is this identified?), conferences, formal training (i.e. Geriatric or Diabetic Certification) or obtaining additional prescribing authorization.
- Discuss ACP’s Continuing Competence Program. Review the preceptor’s previous or current learning and implementation records for their CCP portfolio. The student should reflect on this and compare/contrast it to their Learning Plan for the placement.
- At the end of the placement the student will summarize the activities completed that would comply with ACP’s Continuing Competence Program for learning and implementation. Review with the preceptor.

#### 3. Communication Skills
- Discuss communication strategies to build rapport with patients and address their concerns. Include patients with challenging situations such the very ill, have dementia or mental health concerns.
- Discuss communication strategies used to optimize team functioning and the contributions of each healthcare provider to patient care. How are conflicts managed if they occur between team members?
- Discuss how the preceptor communicates patient care responsibilities to ensure continuity of care; e.g. patient care hand off; is it verbal or written, what information is included? How do they communicate therapeutic information that is controversial?

#### 4. Scope of Practice
Discuss with the preceptor how they (or another colleague) use the expanded scope of practice (APA, injections, ordering lab tests, etc) to contribute to patient care.

#### 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. The example must be outside of the pharmacy team. In the discussion,
students should include:
- A description of the experience, what resonated with them and why it had such an impact.
- What they learned from the experience; personally and/or professionally.
- How they can apply what they have learned in their future practice.

6. **Patient Advocacy in a Hospital Setting**
- Determine what health promotion programs are available at the hospital.
- Discuss the pharmacist’s role in health promotion to patients including what strategies they use. (e.g. immunizations, smoking cessation, lifestyle changes, etc.)
- Discuss and where possible demonstrate the patient advocacy roles of pharmacists in the hospital (e.g. research involvement, how to handle drug shortages, acquisition of compassionate/special access drugs).
- Discuss and where possible demonstrate the leadership roles of pharmacists within their team and also within the institution; e.g. committee involvement, development of resources and protocols for patients and team members, disaster planning (i.e. pandemics).

7. **Practice Resources**
- Netcare and EMR: Discuss the benefits of having Netcare access and the implications for assessing and monitoring drug therapy in institutional practice. Discuss how pharmacists incorporate its use into their patient care activities.
- 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**; the student should have the following discussion with the preceptor and/or dispensary staff.
Students should review the article (Chapter 45; Hospital Pharmacy Management) in Recommended Readings prior to the discussions as it provides an overview of hospital distribution systems. Students should compare the processes at this site to the processes at their Pharm 316 site. Discuss:
- Distribution process (order entry, filling, checking), and scope of practice for each team member (pharmacists, technicians, assistants, as applicable).
- Various components of the distribution system present at the site (unit dose, IV admixture, ward stock, narcotic controls) and the various scopes of practice of staff involved with each.
- The hospital’s drug formulary and how this impacts medication ordering (i.e. therapeutic substitutions).
- Unique or special medication processes used at the site; e.g. study protocols, special access drugs, compassionate drug programs.
- Error prevention strategies that are used to promote safe and accurate dispensing? (e.g. dose calculation checks, double or triple checks (tech-check-tech)
- Medication administration policies.
- Documentation and reporting of medication errors or incidents (i.e. what to do if there is an error).

**ASSIGNMENTS**
- Assignments are posted before, during the placement on various weeks and by the last day of the placement.
- All posted documents must have all identifiers removed to ensure patient confidentiality.
- All assignments must be typewritten; using minimum 11-point font and double-spaced.
- Assignments posted during the placement will be reviewed for completion only to ensure course requirements are being met.
- If deemed necessary by the Course Coordinator (or designate Faculty reviewer), assignments may require resubmission. Students will be advised by email if their assignment met the criteria or if a resubmission is required. If a resubmission is deemed necessary, students are provided with an explanation regarding the reason for the resubmission as well as instructions about how to better meet the assignment requirements.
- No grade is assigned to the posted assignments however reviewer comments will be provided.
- As per course policy students must check UofA e-mail accounts every 3 days for at least 2 weeks following course completion in case a resubmission of an assignment is required.
• To assist students and preceptors with planning across the 8 weeks, an “Activities, Assignments and Assessments Schedule” has been provided in Appendix 7.

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<tr>
<th>Learning Plan Assignment</th>
<th>Posting Instructions (MyCred)</th>
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<tbody>
<tr>
<td><strong>The Learning Plan needs to be initiated before the start of the placement. First posting is 1 week prior to the start of the placement</strong></td>
<td>The Learning Plan must be posted in the “GOALS MODULE” of MyCred (student portfolio available through RxPreceptor) at <strong>least 1 week prior to the start of the placement</strong> to allow the preceptor to review. The assignment should be posted in the “GOALS” MODULE. The <strong>updated</strong> 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. Students should title each upload to reflect the posting date to assist preceptor review.</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.

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<tr>
<th>ASSIGNMENTS</th>
<th>POSTING INSTRUCTIONS (eClass)</th>
</tr>
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<tbody>
<tr>
<td><strong>1. Care Plan Assignment</strong></td>
<td><strong>REMOVE ALL IDENTIFIERS FROM ALL POSTINGS</strong> Post patient care plan and chart documentation for 2 patients on eClass by <strong>9:00 PM on the 4th Thursday</strong> of the placement. Post documentation of 2 additional patients on eClass by <strong>9:00 PM on the 6th Thursday</strong> of the placement. <strong>Care plans must be typewritten, documentation can be a screen shot; no patient identifiers</strong></td>
</tr>
</tbody>
</table>

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 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><strong>2. Pharm 428 Inter-professional Visit: Thank you</strong></th>
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<tbody>
<tr>
<td><strong>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.</strong></td>
<td>The letter(s)/email(s) must be scanned onto eclass by the last day of the placement.</td>
</tr>
</tbody>
</table>

- Students must provide the healthcare professional(s) with a written or emailed thank you note.
- In addition to the thank you gesture, the note or email should include at least one thing that they learned from that health care professional. |
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 (illness, bereavement) and participation in professional opportunities such as conferences, UofA flu clinics, PDW, Pharm D interviews, etc.
- 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 Deficiency 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 7.
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 an individual and confidential manner.

The article “Strategies Pharmacy Students Can Use to Ensure Success in an Experiential Placement” (*see Required Reading List*) provides helpful information including “obvious” and “not-so-obvious” strategies to ensure success in 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 MyCred (linked to RxPreceptor) under the GOALS module. MyCred can be accessed on the RxPreceptor landing page; at the bottom of the grey column on left side of the page.

Assessments

All assessments are submitted using RxPreceptor.

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.

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional</td>
<td></td>
</tr>
</tbody>
</table>
| 1. Displays professional behaviour | • Displays honesty, integrity, and commitment.  
• Respects patients/other team members and does not engage in distracting behavior.  
• Is well groomed and wears clothing and attire that is appropriate for the practice setting.                                                                                                                                  |
| 2. Demonstrates professional responsibility and accountability | • Fulfills their professional commitments and assignments in a diligent and timely manner.  
• Accepts responsibility for his/her recommendations.  
• Prioritizes activities to fulfill all responsibilities in a timely manner.  
• Is punctual.  
• Responds to and incorporates feedback on ways to improve.                                                                                                                                |
| 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.                                                                                                                                         |
| Care Provider                     |                                                                                                                                                                                                                                                                                                                                 |
| 1. Develops and maintains professional relationships with patients/caregivers | • Engages patient independently to determine reason for seeking care.  
• Exhibits sensitivity, respect and empathy with patients and caregivers.  
• Identifies/responds to patient cues.  
• 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.  
• Gathers an appropriate amount of information.  
• Retrieves and assesses relevant lab tests and diagnostic assessments.  
• Is improving timeliness and efficiency over the course of the placement.  
• Clarifies and manages conflicting data seeking support when necessary.                                                                                                                                 |

Pharm 428 Experiential Education Institutional Placement 2017-2018
### OUTCOME BEHAVIOURS

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
</tr>
</thead>
</table>
| 3. Determine medical conditions and assess if the patient’s medication-related needs are being met | • 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. |
| 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.  
• Determines monitoring parameters (what, when & how it may change) for chosen plan.  
• Decides on specific actions for managing medication-specific needs (i.e.: dispense, adapt, prescribe, refer, etc.)  
• Determines patient needs outside of pharmacist’s scope of practice that require referral.  
• 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. |
| 7. Documents patient information gathered in an appropriate manner | • Is written using an organized process (i.e. DAP [Data, Assessment and Plan])  
• Has focus/clear intent or purpose.  
• Includes relevant information. |

**Collaborator**

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
</tr>
</thead>
</table>
| 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.  
• Joins with others in respectful, effective shared decision-making.  
• Contributes to optimize team functioning. |

**Scholar**

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>BEHAVIOURS</th>
</tr>
</thead>
</table>
| 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 | • 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...
### OUTCOME

#### Integrates clinical judgment and critical thinking

- 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

#### 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

#### Manages the safe and efficient distribution of medications

- Evaluates factors critical for safe and efficient medication distribution.

#### Participates in quality assurance and improvement programs

- Understands the process of disclosing, managing and reporting adverse drug events.
- Understands the process of disclosing, managing and reporting incidents and unsafe practices.
- 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 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 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)
### 2b. Pharmacy Care Plan Worksheet Assessment Form for preceptors and students

**Background Data/Patient Narrative:** (i.e.: HPI, PMHx, Medication Hx, Pertinent ROS, Relevant Labs/Test Results)

<table>
<thead>
<tr>
<th>MEDICAL CONDITION AND/OR MED-RELATED NEEDS</th>
<th>GOALS OF THERAPY</th>
<th>ALTERNATIVES</th>
<th>RECOMMENDATIONS/PLAN</th>
<th>MONITORING PLAN</th>
<th>FOLLOW-UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>For each medical condition and/or DRP identified, create an integrated pharmacy care plan. List and prioritize each medical condition first, followed by any DRPs identified for a given condition. Although some medical conditions may not have a DRP, a care plan is still necessary for ongoing patient monitoring. <strong>DRP Categories:</strong> <strong>Indication:</strong> 1. Unnecessary drug therapy, 2. Additional drug required, 3. Effectiveness, 4. Dose too low, 5. Safety, 6. Adverse drug reaction/interactions, 6. Dose too high, 7. Non-adherence.</td>
<td>For each medical condition and/or DRP state desired goals of therapy. <strong>Goals:</strong> cure, prevent, slow/stop progression, reduce/eliminate symptoms, and normalize a lab value. <strong>(Consider realistic goals determined through patient discussion. Goals of therapy are measurable or observable parameters that are used to evaluate the efficacy and safety of therapy).</strong></td>
<td>Compare relevant drug and non-drug therapies that will produce desired goals. List the pros and cons of each therapy. <strong>(Consider indication, efficacy, safety, adherence and cost/coverage).</strong></td>
<td>In collaboration with the patient and other providers, select the best alternative and implement the plan. Provide a rationale for the chosen plan. <strong>Consider:</strong> Drugs: consider drug, formulation, route, dose, frequency, schedule, duration, medication management. Non-drug: non-drug measures, education, patient referral.</td>
<td>Determine the parameters for monitoring efficacy and safety for each therapy. <strong>Provide rationale for including this and how you expect the parameter to change.</strong> (Consider clinical and laboratory parameters, the degree of change and the time frame).</td>
<td>Determine <strong>who, how and when</strong> follow-up will occur.</td>
</tr>
</tbody>
</table>

**ASSESSMENT CHECKLIST**

- Are all medical conditions and/or medication needs identified? (For DRPs, consider drug therapy assessment of indication, efficacy, safety, medication organization/adherence)?
  - If no, discuss with student and probe to see if those missing can be determined.

- Are medical conditions/DRPs prioritized in an acceptable manner?

- Is rationale provided or discussed (based on either patient or provider data)?

- Therapeutic goal/outcome(s) stated?

- Patient goal incorporated (if appropriate)

- Is an assessment of each medical condition/DRP provided (factors considered to influence/determine a plan)?

- Are alternatives (with rationale for each) provided?

- Plan/recommendations are outlined

  - Includes:
    - dosing considerations
    - patient preferences

- ACTIONS TAKEN

  - Appropriate/acceptable action has been taken
  - Inappropriate or suboptimal action has been taken – need to discuss next steps

- Monitoring plan present

  - Includes:
    - safety
    - efficacy
    - frequency
    - duration (if appropriate)

  - which healthcare provider will follow-up

- Follow-up plan present

  - Includes:
    - who
    - how
    - when

  - includes outcome (if possible)
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)
  - Practice presentation skills (use of PowerPoint slides is encouraged, presentation format should be discussed with the preceptor)
  - 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)

- Introduction/outline (including learning objectives)
- Patient case and data
- Listing of all DRPs and selection of main DRP
- Disease state background
- Goals of therapy
- Therapeutic alternatives
- Focused clinical question (PICO format- to be researched by student using primary literature)
- 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)
- Summary of evidence
- Therapeutic recommendation; include monitoring plan (efficacy/toxicity)
- 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:
   
P: Patient, population or problem (How would I describe a group of patients similar to mine?)
   I: Intervention, prognostic factor or exposure (Which main intervention, prognostic factor or exposure am I considering?)
   C: Comparator or alternative intervention (if appropriate) (What is the main alternative to compare with the intervention?)
   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

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
- Attempts to be concise and 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 made 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

5a. Learning Plan Assignment Instructions

This assignment helps with preparation for the placement as well as assessment of learning during the placement. Self-directed learning is similar to the Continuing Professional Development model used by practicing pharmacists. Completion of Learning Plans during placements will provide students with practice so they can confidently complete them when they are practicing pharmacists. Determining objectives to meet self-directed goals emphasizes the student’s responsibility for development during the placement. It also assists with development of skills needed for practice. As this is an advanced placement it is important that students are looking for areas in which they can improve in order to become excellent practitioners.

There are blank templates and examples posted in eClass as well as instructions regarding use of MyCred. (linked to RxPreceptor)

Steps to Learning Plan completion; students should:

• First reflect on their comfort with the skills and complete the Skills Inventory table within the Learning Plan Template below.

• Then, state 2 goals and corresponding objective(s) on the Learning Plan template using the SMART format. The CSHP Webinar and handout listed in the Required Reading list will be helpful with development of goals and objectives. It is suggested to review the handout and focus on slides 11-39. Examples are included that will be helpful in development of a goal and corresponding objectives using a SMART format.

• Determine indicators that inform their progress for the chosen goal.

• Post Learning Plan on MyCred (GOALS module) at least 1 week prior to the start of the placement to allow the preceptor to review.

• Review and finalize the goals and objectives with the preceptor during the first few days of the placement. When finalized, post the revised Learning Plan on MyCred. Include the posting date in the title of this and all future Learning Plan postings.

• MIDPOINT: Discuss the progress achieved for each Learning Plan goal with the preceptor at the midpoint. The outcomes and areas identified as “needing improvement” on the Midpoint Student Performance Assessment should be included in the Midpoint Learning Plan so they can be addressed during the second half of the placement. Post the updated Learning Plan into MyCred.

• END OF PLACEMENT: Discuss the progress regarding all goals at the end of the placement with the preceptor. Post the updated Learning Plans into MyCred at the end of the placement.

NOTE: If applicable: preceptor feedback from the previously completed Final Student Performance assessment should be incorporated into the learning objectives on the initial Learning Plan for the next placement. This allows future preceptors to better support the student to achieve ongoing skill/knowledge/attitude development across placements. This applies to students who are proceeding to another placement.
**5b. Learning Plan Template**

**Pre Placement Student Skills Inventory and Feedback**
Students must rate their level of comfort in performing the following skills prior to starting the placement based on the amount of practice they have had. They must also include examples of feedback provided to them and discuss both the Skills Inventory and the feedback provided to them in the past with the preceptor.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Limited amount of Practice (i.e. completed in Skills lab &amp; placements only)</th>
<th>Moderate Amount of Practice (i.e. completed in skills lab, placements and work experience)</th>
<th>Comments: (to provide perspective on the rating)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathering medical and medication history</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conducting patient assessments in complex patients</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creating and implementing patient care plans, including rationale for recommendations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daily patient assessment and monitoring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verbally presenting patient information to a team</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient education (e.g. reviewing medications with patient, providing medication calendar)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seamless care activities such as discharge counselling, advising other healthcare professionals of patient status or needs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documenting patient care activities in patient chart</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responding to drug information requests using appropriate information retrieval processes such as use of multiple resources and primary literature</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delivering a formal case presentation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collaborating with other healthcare professionals to achieve patient outcomes.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Feedback**: Student should provide examples of feedback that they have received from preceptors, lab facilitators, peers and/or pharmacists about areas of strength.

**Feedback**: Student should provide examples of feedback that they have been received from preceptors, lab facilitators, peers and/or pharmacists about areas for improvement.
<table>
<thead>
<tr>
<th>Learning Goal 1:</th>
<th>Learning Objective(s):</th>
<th>Indicators of Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Use SMART format (objectives must be measurable/observable by the preceptor.)</td>
<td>Describe the indicators that will inform you of your progress or achievement; i.e. debriefing with preceptor, receiving feedback from team members, self-reflection or evaluation, etc.</td>
</tr>
<tr>
<td><strong>Progress at MIDPOINT (end week 4)</strong></td>
<td>Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
<td></td>
</tr>
<tr>
<td><strong>Progress at FINAL (end week 8)</strong></td>
<td>Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Learning Goal 2:</th>
<th>Learning Objective(s):</th>
<th>Indicators of Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Use SMART format (objectives must be measurable/observable by the preceptor.)</td>
<td>Describe the indicators that will inform you of your progress or achievement; i.e. debriefing with preceptor, receiving feedback from team members, self-reflection or evaluation, etc.</td>
</tr>
<tr>
<td><strong>Progress at MIDPOINT (end week 4)</strong></td>
<td>Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
<td></td>
</tr>
<tr>
<td><strong>Progress at FINAL (end week 8)</strong></td>
<td>Summarize: Key accomplishments, important next steps, behaviours/skills/knowledge requiring further improvement</td>
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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>
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</table>
| 1-4 weeks before placement starts | Review:  
- Therapeutics as instructed by preceptor or relevant to the practice area.  
- Syllabus: course expectations, patient care process tools, activities and assignments.  
- Readings included on the Course Required Reading list (page 3).  
Students should ensure they have:  
- corresponded with the preceptor; regarding parking, dress code, start time, etc.  
- completed any pre readings assigned by the preceptor  
- started to develop the Learning Plan; post on MyCred 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.  
- Address specific patient issues as they arise and/or are assigned.  
- Retrieve drug information.  
- Collaborate with the pharmacy team as a student pharmacist.  
- Ensure activities and assignments are being completed (student is ultimately responsible for ensuring completion of all course requirements). |

Week 1  Orientation, Create Placement Schedule, Early Assessments

Date: ______________________

☐ Orientation (see Orientation Checklist in Preceptor Guide)  
- Review and discuss the Skills Inventory and Learning Plan.  
- Review course objectives and activities.  
- 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.  

Daily Patient Care and Documentation  
- 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). |

Additional Activities to be incorporated and scheduled across the placement  
- Schedule and arrange visits with HCP(s); Inter-professional Activity.  
- Discuss/schedule in-services(s) and presentation(s).  
- Discuss professional and advocacy responsibilities of the preceptor (see professional and advocacy discussion questions)  
- Observe/dis participate with the institution’s distribution process.  
- Discuss key factors for effective and safe distribution systems. Include discussions about ADR report and mitigating risk (Manager Assignment)  
- END of Week 1: Complete, submit and discuss Student and Preceptor EARLY ASSESSMENTS (RxPreceptor)
<table>
<thead>
<tr>
<th>Week 2: Date ____________________</th>
<th>Week 3: Date ____________________</th>
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<tbody>
<tr>
<td>- Continue patient care activities and documentation</td>
<td>- Continue to develop patient care presentation</td>
</tr>
<tr>
<td>- Schedule in-services and presentations; topics, discuss timelines for preceptor review, presentation format.</td>
<td>- Contribute to the development of patient care plans and corresponding documentation.</td>
</tr>
<tr>
<td>- Plan healthcare collaboration activities</td>
<td>- Conduct medication reconciliations, patient care plans and corresponding clinical documentation; review with preceptor.</td>
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<tr>
<th>Week 4: Date ____________________</th>
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<tbody>
<tr>
<td>- Continue care plans and corresponding documentation.</td>
</tr>
<tr>
<td>- Select 2 patients to post care plans and documentation; review with preceptor prior to posting.</td>
</tr>
<tr>
<td>- Continue to discuss the Patient Care Presentation with the preceptor; which patient to use, timelines for review.</td>
</tr>
<tr>
<td>- Review progress regarding in-service</td>
</tr>
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</table>

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<tr>
<th>4th Thursday of the placement eClass Posting</th>
<th>6th Thursday of the Placement eClass Posting</th>
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<tbody>
<tr>
<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)</td>
<td>- Post 2 additional care plan worksheets or site specific documentation and clinical documentation. (Same as week 4 assignment)</td>
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<tr>
<th>Mid-Point (end of Week 4)</th>
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<tbody>
<tr>
<td>- MID-POINT Assessments (RxPreceptor): Student Performance Assessment-midpoint; completed by preceptor; review with student.</td>
</tr>
<tr>
<td>- Student Evaluation of Preceptor and Site and Student Self-Assessment; discuss both with preceptor</td>
</tr>
<tr>
<td>- Update with progress as well as grades of Needs Improvement from the Student Performance Assessment and submit the Learning Plan. (MyCred)</td>
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<tr>
<th>Week 7: Date ____________________</th>
<th>Week 8: Date ____________________</th>
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<tr>
<td>- Review activity table to ensure all activities and discussions have been completed.</td>
<td>- Final Student Performance Assessment and Placement Grade; completed by preceptor: review with student</td>
</tr>
<tr>
<td>- Conduct Patient Care Presentation</td>
<td>- Student Self-Assessment (final); discuss with preceptor.</td>
</tr>
<tr>
<td>- Ensure all assignments are near to completion or completed.</td>
<td>- RxPreceptor Survey: Post Course Preceptor Survey; non anonymous. Not to be discussed with preceptor.</td>
</tr>
<tr>
<td></td>
<td>- Ensure assignments are posted</td>
</tr>
<tr>
<td></td>
<td>- Update and submit the final Learning Plan on MyCred</td>
</tr>
<tr>
<td></td>
<td>- NOTE: Course student surveys are emailed at the end of the course; after both placements have been completed.</td>
</tr>
</tbody>
</table>

NOTE: Course student surveys are emailed at the end of the course; after both placements have been completed.