PHARM 536: Selective Placement – Direct Patient Care
Preceptor Quick Reference Guide

This guide is designed to provide you with links and quick information that will be helpful when precepting your Pharm 536 student.

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What's *New* in Pharm 536?

1. Assessment processes/forms have been updated
   a. The Student Performance Assessment (midpoint and final) has been updated to reflect the new Association of Faculty of Pharmacy (AFPC) Educational Outcomes published in 2017.
   b. The Student Self-Assessment has been updated, with the intent that students can provide more informative ratings about their perceived progress at midpoint and final during the placement.
2. The PharmD for BScPharm Students (PBS) program requires students to be co-enrolled in a Seminar Course when they are also in experiential education courses. In the past, student groups were asked to meet for seminar course activities on a specific day. The new format allows students to schedule their meetings in a 1 week timeframe.

Quick Links

- Pharm 536 Course Syllabus and Modifiable Calendar Template
- Undergraduate Experiential Education Policy and Procedure Manual
- Faculty Preceptor Webpage

Planning for the Placement

- Review course syllabus and/or this quick reference guide,
- Watch the preceptor course overview podcast here (scroll down table to Pharm 536, link located in right-hand column).
- Utilize the modifiable calendar available to you for customization and organization of schedule/activities. This is posted on the Faculty Course Information webpage in Word for customized use.
- Review the on-campus courses the students have taken in year 4 prior to this placement (Appendix 1).
- Within week before placement starts, review student's first draft of Learning Plan (posted in CORE under Student Requirements, located on your dashboard once you select your student(s).
- For patient care placements, review Appendix 2 which outlines clinical expectations for students in their care provider role as they progress through placements 1-4.

Placement Policies and Procedures

The following are policies that preceptors often have questions about. Further information regarding other policies can be found in the [Policies and Procedures Manual](). Preceptors are encouraged to contact the Faculty if they are unsure.

- *Absence Tracker:* Students are required to use the new Absence Tracking feature in CORE ELMS. Students must record an intended absence in CORE ELMS and the preceptor will receive an email noting the absence and be required to confirm or deny the request on-line.
- *Statutory Holidays:* Should a statutory holiday fall within the timeframe of the placement, it is at the discretion of the preceptor to determine how to proceed. Students may be granted the stat day off, a day off in lieu of the stat, or include that day as a placement day.
- *Illness:* In the case of illness, students are expected to notify the preceptor as soon as possible. Absences due to illness of 2 days or more may require an explanation and/or evidence such as a physician's note. Either the student or preceptor should contact the Faculty if the absence exceeds 2 days. Routine medical appointments are expected to occur on personal time. Time missed from the placement site due to illness that exceeds 1-day needs to be made up.
- *Bereavement:* In the case of death of a family member, students should notify their preceptor and the course coordinator to determine a course of action.
- *Faculty Endorsed Activities:* The Faculty supports student participation in activities such as the UofA on-campus flu clinic, lab facilitation (for one day per placement block), conferences and PDW if feasible with the placement schedule, if preceptor approval is confirmed prior to the activity and the time away from the placement is reasonable. Time missed from the placement for approved professional developments activities that exceeds 1 day needs to be made up.
  The preceptor may deny a request for professional development should the standard of care to patients or practice site be negatively affected by the absence of the student or it's anticipated that the time missed will impact the student's ability to complete the placement successfully.
- *Non-Endorsed Activities*: Activities ineligible for absence approval include: mock OSCE's, jurisprudence exams, travel and vacation.
  Changes to course dates to accommodate personal holidays are not permitted.
- *Placement Timeframe*: Modification to the placement schedule outside of the stated course timelines must be approved by the course coordinator in advance of the change.
- *Needle Stick Injury Procedures:* If a student experiences a needle stick injury, they must report the incident immediately to the preceptor and follow the placement site protocol. The Faculty must be advised immediately. There is further information in the [Policies and Procedures Manual]().
- Students are NOT permitted to conduct patient home visits without the direct supervision of a preceptor.

Resources for Students

Student Wellness is important. If you feel your student is experiencing difficulty, many resources are outlined for them on our [Student Services Wellness Resources webpage](). This includes access to AB province-wide resources.

Assessment Procedures and Information

- All assessments are completed and submitted through CORE ELMS.
- After logging in, the evaluation tab is in the green column on the left side of the screen.
- To allow for preparation by preceptors, assessments can be viewed in CORE ELMS at least 1 week prior to the start of the placement. Instructions are outlined at the top of the Student Performance Assessment.
- The criteria for each outcome is in CORE ELMS (on-line) and is also in the [course syllabus]().
- An overview of assessments and procedures, as well as a FAQ document, is on [our website here](). This information will help you in completing assessments.
- If you have difficulties accessing or submitting assessments, contact: [phexed@ualberta.ca]().

Grading Criteria

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 3 *Professionalism* outcomes **AND**
2. **Have no more than 3 (maximum of 2 for *Care Provider, if applicable*) 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/knowledge. The skills and behaviours associated with each outcome define expectations for this placement.

Assessment Tips and Suggestions

- Periodically click on "save" tab at bottom of form, to avoid a "time-out" and losing information entered.
- Assessments can be saved as a draft and completed later; "save" before exiting or information will be lost.
- Once the completed assessment is submitted, it is visible to the student being assessed.
- Disregard the "section weight" and "minimum AVS score required" sections.
- All assessments must be discussed. There is an acknowledgment at the end of each form that indicates the assessment has been discussed by the student and preceptor.
- Comment boxes should be used to provide evidence to support the grade given. This is especially important when the student is not meeting expectations, or needs improvement, as it provides specific details about concerns.
- Completion reminders are emailed by the Faculty.
- Faculty reviews all assessments at midpoint and final for completion and content.
- If you are co-precepting or using another precepting model such as peer-assisted learning, refer to the Faculty Models of Precepting Webpage for suggestions on completing assessments.

Summary of Assessments/Evaluations to Be Discussed between Preceptor and Student

(all are completed and submitted through CORE ELMS)

Assessment/ Evaluation	Submission Timeframe	Submitted by	Comments
Student Self-Assessments (SSA) (completed twice)	Midpoint and end of placement	Student	- Midpoint should be submitted 2-days prior to the Midpoint Assessment discussions to allow time for preceptor review. - For Final SSA, student should complete and be prepared to discuss at final assessment.
Student Performance Assessment MIDPOINT	End of week 4	**Preceptor**	- Take about 30-60 minutes to complete. - Includes identification and discussion of areas and skills that will be focussed on for balance of the placement.
Student Evaluation of Preceptor and Site – MIDPOINT	End of week 4	Student	- Students must discuss with preceptor after discussion of the Student Performance Assessment
Student Performance Assessments – FINAL Recommend Final Placement Mark	End of placement	**Preceptor**	- Take about 30-60 minutes to complete. - Assessment of all learning outcomes. (same as midpoint) - At the end of the assessment preceptors provide a Placement Mark: PASS or FAIL based on the overall grades assigned to each learning outcome.
Student Evaluation of Preceptor and Site – FINAL	End of week 8	Student	- Students must discuss with preceptor after discussion of the Student Performance Assessment
Preceptor Evaluation of Course	After student has left placement site	**Preceptor**	- Anonymous – option provided to have Faculty contact the preceptor

Course Activities Summary

COURSE ACTIVITIES **The following are activities students must complete during the placement to meet course objectives.** Completion of course activities is the responsibility of the student, with preceptor guidance to arrange for various opportunities and to identify appropriate learning opportunities.	✓
1. Patient Care Provide and document patient-centered care for a minimum of 20 patients and develop a care plan for each patient. Care plans should reflect the patient population at the practice site. Students should participate in patient appointments, conferences, meetings or rounds as appropriate. Students should improve their timeliness and efficiency in assessing patients and developing a care plan as they practice and learn across the 8-week placement. *ALL* care plans must be reviewed by preceptor(s). The care plan worksheet with checklist for assessment is in Appendix 3 for use as required. *NOTE: Administration of Drugs by Injection*: Students had the option to complete 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 do so. More information can be located in this ACP article.	
2. Inter-Professional Collaboration Integrate into the patient care team where possible and work collaboratively with the other healthcare professionals to facilitate management of the patient's health needs.	

3. Professional Practice and Education
Students must discuss with the preceptor and complete ***at least TWO Professional Practice Activities***.
  • Examples include (but are not limited to):
    ○ providing an educational session on a therapeutic topic or controversy,
    ○ providing a patient case presentation or in-service for pharmacist colleagues and/or interdisciplinary audiences.
    ○ participation in a health promotion clinic (i.e. BP screening),
    ○ developing and implementing a patient care project (i.e. assessment tool or algorithm for disease management, practice site evaluation or improvement project).
  • The chosen activities should be of importance to the team, and preceptor/student should negotiate the activity details.
  • The student is responsible for completing the activity to the expectations set with the preceptor(s). If not completed in a satisfactory manner, the activity will need to be re-done to a satisfactory level.
  • The activity may be assessed using evaluation forms posted for students (please request from student.)	

4. Drug Information Requests Respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients.	
5. Library Resources – Review with Preceptor(s) Students are to provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s) (accessible to all preceptors upon application).	

Course Discussions Summary

More information available for students in eClass; students are responsible for scheduling time to discuss topics.

COURSE DISCUSSIONS **The following are discussions that students must complete during the placement to meet course objectives.**	✓
• ***Responsibilities as a Professional***: Discuss ACPs Code of Ethics (https://pharmacists.ab.ca/code-ethics) • ***Professional Accountability*** and strategies the preceptor(s) use to fulfill professional obligations. • ***Maintaining Professional Competency and Lifelong Learning*** • ***Communication Strategies*** used to improve patient care and team collaboration, including goal setting and shared-decision making. • ***Inter-Professional Practice*** and steps pharmacists can/do take to develop their practice.	

Assignment #1: Skills Inventory and Learning Plan

Students are required to complete a Skills Inventory, reflect upon feedback they have received to-date, and develop a Learning Plan using the template provided in the syllabus. Once developed, the student will post it to Student Requirements in CORE ELMS for his/her preceptor (or co-preceptor team) for review 1-week prior to start of placement. In consultation with the preceptor(s), the student will refine and finalize the components of the Learning Plan by the end of week 1 of the placement. The revised plan should be posted in CORE ELMS. At midpoint and final, progress updates must be added, and the newest version re-ported to CORE ELMS.

Preceptor feedback is important to ensure that student's learning goals and objectives are appropriate and feasible. Also preceptors can reinforce the importance of self-directed learning and the expectation that students update their progress at midpoint and final in their learning plan is encouraged.

Key Student Responsibilities
- Students develop 3 goals in areas that they feel require development. The Skills Inventory and feedback received to date should inform their creation.
- Students determine strategies to achieve each, as well as indicators of progress that will inform if they are achieving their goals.
- Students must post a _revised Learning_ Plan when progress updates are added (at midpoint and final). The Skills Inventory does not need to be updated at midpoint and final, just the learning plan.
- Areas indicated by the preceptor as "Needs Improvement" on the midpoint Student Performance Assessment should be added by the student to their midpoint Learning Plan as learning goals. This is to ensure these areas will be addressed in the second half of the placement

Key Preceptor Responsibilities
- Review the Skills Inventory, prior feedback and Learning Plan before the placement starts.
- Provide feedback on the feasibility and appropriateness of the goals. Suggest modifications as needed. Goals need to align with what is feasible within the practice setting.
- Review progress that student presents at midpoint and final; support and/or suggest strategies for enabling the student to achieve their goals.
- Provide feedback on the student's self-assessment ratings for their goals.

Assignment #2: Patient Care Assignment

Students need to provide the following for **4 patients** on the last day of the placement:
- Provide the documentation note(s) that outlined the care provided for each patient (this can either be a screen shot, with patient identifiers removed, or a typed note). This could be an initial consult with the patient, or a patient receiving follow-up care. _Include a short narrative to orient reader to nature of the patient encounter._
- Next, as a short narrative, include the monitoring and follow-up that occurred based on the interaction. In other words, what happened based on what was recommended? This could be based on a second interview with the patient, a phone call, checking pertinent lab work, speaking with a care giver, family member, or team member, etc.
- Finally, for each patient, briefly state what happened based on the follow-up/monitoring results – did the plan change? Did it stay the same? Was the student surprised by the result, or was it expected?

Assignment #3: Professional Practice/Education Assignments

Students must complete a minimum of 2 assignments per placement based on the activities they completed during the placement. These may include:

- Case presentation
- Developing and presenting a live educational session or written educational materials
- Delivering a journal club or teaching session
- Presenting an in-service
- Professional practice activity or project

Assignment postings should include evidence or artifacts relating to the activity completed such as slides and/or information handouts for presentations, educational sessions or information relating to the project or clinic conducted. If completed, evaluation forms should be submitted as well.

Teaching feedback forms, journal club and presentation format information and evaluation forms are posted in eClass for use by the student and preceptor.

An Assignment/Assessment Checklist is in Appendix 4.

Student Scheduled Activities/Opportunities

Seminar Course

Students will attend Seminar Course on select weeks throughout each Block of placements. Dates include:

- o Block 1: Weeks 2, 4, and 8
- o Block 2: Weeks 2 and 6
- o Block 3: Week s2, 4 and 7
- o Block 4: Weeks 3 and 6

Students will be responsible for letting you know if they will be participating in these during the work day (typically over lunch hour).

Lab Facilitation By Students

Students may participate in one Skills Lab at the faculty (students in Edmonton only) across the placement, and this provides them with skills in teaching and providing feedback. If students sign up for a lab, they are responsible to let preceptor(s) know which date they will be at the faculty.

APPENDIX 1: On-Campus PharmD for BScPharm Students Courses

(Taken in spring/summer after year 3, and prior to experiential placements.)

Course Name	When Taken	Course Description

Pharm 531: Critical Analysis of Evidence in Practice	Spring/summer after Y3	Apply the evidence-based clinical practice process by searching for best evidence, critically appraising and applying the evidence, incorporating patient values and clinical expertise to manage a patient's medication therapy.
		
		• Randomized Controlled Trials
		   o Superiority Trials
		   o Non-inferiority Trials
		• Clinical Practice Guidelines
		• Systematic Reviews and Meta-analysis
		• Observational Research
		• Qualitative Research
		• Diagnostic Studies

Pharm 532: Patient Assessment		Topics covered: 1. Symptom Assessment 2. Anemia Assessment 3. Liver and Kidney Function Assessment 4. Pharmacokinetic Assessment (ex: tacrolimus, phenytoin, tobramycin, vancomycin; PK implications with IV/po conversion, missed doses, time to reach SS). 5. Infectious Disease Assessment 6. Mental Health Assessment 7. Skin Assessment 8. HTN and HF assessment 9. COPD and Asthma Assessment
Pharm 547: Advanced Therapeutics, Collaboration and Professional Learning		Therapeutic topics include: 1. CV Risk reduction - primary prevention lipid & HTN management 2. DM - oral, novel, insulin, comorbidity management 3. HF (geriatrics) - deprescribing, MAID (medical assistance in dying) discussion 4. Asthma (pediatrics) 5. Mental Health – depression 6. Substance Use Disorder - oral opioids 7. Infectious Diseases - Staph aureus Cases 1-3 are in one South Asian patient; Cases 5-7 are in one young Indigenous patient. Focus of the course is collaboration (Team Based Learning pedagogy), confidence in decision making, monitoring/follow up with "what's next" as well as considering the broader picture (ie, cultural issues).

Pharm 538/539: PharmD Seminars	Fall and winter terms in Y4	• Capstone courses - 1 credit each, taken concurrently across each term of ExEd
		• Designed to evaluate students' ability to integrate knowledge and skills in pharmacy practice.
		• Provides a forum for students to integrate experience gained through coursework with experiential learning.
		• Sample activities:
		   o Educating peers: oral presentations
		   o Participation in the ACP Continuing Competency Portfolio process
		   o Reflection, self- and peer-assessment

Experiential Education Courses	Fall or winter term; must take all 4 courses	Pharm 426: Community Practice Placement (8 weeks) Pharm 428: Acute Care/Inpatient Hospital Placement (8 weeks) Pharm 536: Selective in Patient Care (8 weeks) Pharm 537: Mandatory Elective Practice Experience (8 weeks)

APPENDIX 2: Clinical Expectations for Care Provider Role for PBS PharmD Students Across Y4
Experiential Courses:Guidance for Preceptors and Students

During 4th year, students in PBS program complete **three 8-week clinical experiences**, and **one 8-week specialty elective/professional practice experience** that may or may not be in a patient care setting. The order these are completed will vary for each student. This table is to guide expectations from initial to final placement **for the Care Provider role.** Students are expected to improve across their final year placements and:
- Integrate/apply their knowledge using a systematic patient care process
- Increase proficiency, clinical judgment, confidence and complexity of care by the final placement.

GUIDING PRINCIPLES:
1. As each placement progresses, and similar patient scenarios are encountered, students are expected to incorporate knowledge/skills and provide care with more confidence.   Initially, complex patients may require more preceptor support.
2. By the end of APPE 3/4, students should demonstrate competence to apply foundational knowledge and skills to effectively manage patients with common medication therapy problems.
3. Students are expected to embody and demonstrate the attitude and behaviours of a pharmacist, and integrate required skills to enable them to achieve the expectations of their care provider role (such as effective communication, demonstrating professionalism, etc).
4. Students are expected to identify areas for development across placements and incorporate this into their Learning Plans. Furthermore, they should come prepared and ready to learn (for example: read recommended materials, demonstrate initiative).

APPE (Advanced Pharmacy Practice Experience) 1 and 2	APPE (Advanced Pharmacy Practice Experience) 3 and/or 4
For assigned patients, students should:	*Building upon the skills practiced in APPE 1 and 2, students should:*
- Gather data completely and accurately. - Identify and prioritize DRPs/patient needs (may need support with prioritization), - Recognize and integrate relevant patient-specific factors into pharmacotherapy work-up and care planning; support may be required, especially in weeks 1-4 of each placement. - Develop an acceptable care plan (emphasis on process). - Justify recommendations/decisions; clinical judgment will require support, especially initially, but should improve with experience - Consult literature/references to support rationale. - Implement care plan and undertake appropriate actions - Includes adapting, initiating, renewing/continuing, discontinuing, referral, etc. - Provide accurate and appropriate patient education for common conditions; may need support tailoring and/or researching information for less common conditions/medications. - Document using DAP or consult format; may require coaching to ensure consistent with the practice; adapts appropriately to practice setting. - Fulfill commitment for follow-up as appropriate. - Present patients verbally in acceptable manner; may need coaching with format and content; confidence builds over placement. - Increase knowledge of disease states relevant to practice setting, and develop confidence applying knowledge.	- Increase confidence and proficiency with patient care. - Identify and prioritize commonly encountered DRPs. - Prioritize patient needs appropriately - Integrate patient specific factors into decision-making with minimal prompting - Develop acceptable care plans (emphasis on quality and appropriateness of patient care recommendations). - Defend recommendations with confidence. - Demonstrate ability to make prescribing decisions, when appropriate. - Provide accurate and complete patient education, identifying when additional information is required and proactively seeking this. - Document information in appropriate manner, with minimal assistance. - Complete verbal patient presentations concisely and confidently. - Readily identify knowledge gaps and seek to find answers, and review with preceptor to verify understanding.

APPENDIX 3: Pharmacy Care Plan Worksheet with Checklist for Assessment

When using, think about level of student, where they are in APPE sequence and topics/skills covered in curriculum-to-date. Students will likely require assistance for new/emerging therapeutics areas.

Pharmacy Care Plan Worksheet with Checklist

MEDICAL CONDITIONS & MED- RELATED NEEDS: 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.
DRP Categories: unnecessary drug● drug therapy required● ineffective drug● dose too low● adverse drug reaction/interaction ●dose too high ●nonadherence

☐ Are all DRPs identified (based on 4 prime areas of **indication, efficacy, safety, adherence**)?
☐ If no, discuss with student; probe to see if those missing can be determined.
☐ Is rationale provided or discussed for DRPs (based on either patient or provider data)?

GOALS OF THERAPY: For each medical condition and/or DRP state desired goals of therapy/timeframe.
Goals: cure, prevent, slow/stop progression, reduce/eliminate symptoms, normalize a lab value.
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.

☐ Therapeutic goal/outcome(s) stated?
☐ Patient goal incorporated (if appropriate)

ALTERNATIVES: Compare relevant drug and non-drug therapies that will produce desired goals. List the *pros* and *cons* of each therapy as well as rationale for each being included.
Consider: Indication ● Efficacy ● Safety ● Adherence ● Cost/coverage

☐ Is an assessment of each DRP provided (factors considered to influence/determine a plan)?
☐ Are alternatives (with rationale for each) provided that would be considered acceptable for current level of student(s)?

RECOMMENDATIONS/ PLAN: In collaboration with the patient and other health care providers, select the best alternative and implement the plan. Provide a rationale for the chosen plan relative to the other alternatives considered.
Consider: *Drugs*: correct drug, formulation, route, dose, frequency, schedule, duration, medication management. *Non-drug*: non-drug measures, education, patient referral.

☐ Plan/recommendations are outlined
Includes:
    ☐ dosing considerations
    ☐ patient preferences

ACTIONS TAKEN
☐ Appropriate/acceptable action has been taken

MONITORING PLAN

MONITORING PARAMETERS: Determine the parameters for monitoring *efficacy* and *safety* for each therapy. Provide rationale for including this and how you expect the parameter to change.
Consider: Clinical & laboratory parameters ● The degree of change ● The time frame

☐ Monitoring plan present
Includes: ☐ safety ☐ efficacy ☐ frequency ☐ duration (if appropriate)
    ☐ which healthcare provider will follow-up

FOLLOW-UP: Determine *who*, *how* and *when* follow-up will occur.

☐ Follow-up plan present
Includes:
    ☐ who ☐ how ☐ when ☐ includes outcome (if possible)

APPENDIX 4: Assignment and Assessment Schedule/Checklist

Week	Student Activities
1-4 weeks before placement starts	☐ Review syllabus: course expectations, activities and assignments. ☐ In week prior to student arriving, review Skills Inventory/Learning Plan posted by your student. This is in Student Requirements in CORE ELMS. ☐ Correspond with student regarding: therapeutics to review, start time, dress code, parking, etc ☐ Develop preliminary schedule for placement. (Use modifiable calendar template, posted on Faculty website under Pharm 536) ☐ Determine if IT access, and any other required accesses, is established for your student.
Week 1: Orientation to Practice Site	
Orientation	☐ Review items on orientation checklist (Appendix 5) ☐ Discuss student-prepared Skills Inventory, prior feedback and Learning Plan, and your learning objectives and activities. ☐ Review preliminary schedule: plan activities and assignments and add to schedule as needed. ☐ Discuss expectations for feedback process and timelines. ☐ Tour of practice site. ☐ Log-in to ensure Netcare access, as well as access to other on-site systems.
Patient Care	☐ Discuss care plans, clinical documentation; format and process
Early Check-In and Learning Plan	☐ **END of Week 1**: Discuss how things are going from both preceptor/student perspectives. Clarify any questions. Review schedule and expectations for balance of placement.
Weeks 2-4	
Patient Care	☐ Continue to provide care to patients. Develop and discuss care plans and documentation Minimum 20 patients/8 weeks.
Mid-Point Assessments (in CORE ELMS)	☐ Review the Student's Midpoint Self-Assessment in preparation for the Student Performance Assessment discussion. ☐ Complete Student Performance Assessment, and review with student at end of week 4. ☐ Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment
Learning Plan	☐ Student to share progress achieved in Learning Plan, including self-assessment rating. Student will incorporate new goals or update/refine existing ones as appropriate.
Week 5 - 7:	
Patient Care	☐ Continue with Patient Reviews; care plans and documentation. Review with student. Reminder: Should be close to or exceed the minimum of 20 patients. ☐ Continue planning/completion of activities and ensuring assignment completion is on-track.
Week 8:	
Finalize activities and assignments	☐ Review activities and assignments to ensure all have been completed. ☐ Ensure continuity of care is communicated to patient pharmacy team.
FINAL Assessments (in CORE ELMS)	☐ Review Final Student Performance Assessment with student and recommend Placement Grade. ☐ Student will discuss Student Evaluation of Preceptor/Site and Student Self-Assessment ☐ Student to share progress achieved onLearning Plan
Complete Course Survey	☐ Anonymous Preceptor Course Survey (survey link emailed to preceptor)

APPENDIX 5: Orientation Checklist for Student and Preceptor

This orientation checklist is to be used by both the student and preceptor to cover important topics at the beginning of the placement. Site specific items can be added to the list at the bottom.

Orientation Activity	√
1. Professional Discussions	
• Preceptor's practice experience and interests	___
• Feedback and communication including preceptors preferred method of contact	___
• Student/preceptor responsibilities and expectations including preceptor review of assignments, provision of feedback and student's submission of assignments or documentation for review	___ ___ ___
• Practice expectations, patient confidentiality, dress and appearance policies	___
• Practice setting information regarding policies and procedures, including patient and staff safety	___
• Information regarding professional and pharmacy activities	
• Discuss student-prepared Skills Inventory, prior feedback and Learning Plan	___
2. Course Discussions; review course syllabus	
• Objectives	___
• Activities; patient care, presentations, in-services, projects, etc.	___
• Assignments	___
• Assessment process; review forms (Student Performance Assessment in syllabus) and timing	___
• Discuss student/preceptor responsibilities and expectations	___
• Review preliminary student schedule; modifiable calendar available on website under Pharm 536.	___
3. Pharmacy Practice	
• Practice specialties and characteristics	___
• Site resources and learning opportunities	___
• How will the student be involved in patient care?	___
• Provide samples of forms used, documentation policies and procedures	___
4. Practice Environment	
• Guided tour of practice environment	___
• Introduction to staff; include roles and how they will be involved with student experience	___
• Library, drug information and other resources	___
• Student workspace	___
• Eating area, lockers, washrooms, etc.	___
5. Technology orientation	
• Computer order entry systems	___
• Phone, fax, internet	___
6. Other	