



UNIVERSITY OF ALBERTA
FACULTY OF PHARMACY AND
PHARMACEUTICAL SCIENCES

PHARM 536

Experiential Education

COURSE OUTLINE and SYLLABUS

Fall/Winter 2018/19

PHARM 536: Experiential Learning Part 5 - *Selective in Direct Patient Care*
Course weight: *8

Course Coordinator: Ann Thompson
Office: ECHA 3-281 Phone (780) 492-5905
E-mail: athompson@ualberta.ca

Online course access: <https://eclass.srv.ualberta.ca/portal/>
Office Hours: Monday to Friday by appointment

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 course enables students to engage in the roles of a pharmacist in a structured practice environment to acquire, strengthen and integrate skills, knowledge and clinical judgment required to provide quality patient care.

Building on previous experiential and on-campus courses, students are expected to demonstrate professional competencies in the provision of direct patient care including patient assessment to identify and prioritize medication concerns and wellness needs, develop and implement care plans including monitoring, follow-up, documentation and education. The full scope of pharmacist practice should be performed as appropriate. Students will communicate and collaborate effectively with patients, care givers and other health care professionals to optimize patient care outcomes. Student will also contribute to the education of patients, other health care professionals and other student learners at their practice site. Learning activities will differ depending on the practice site, and students and preceptors should collaborate to determine which activities will best enable learning and prepare the student for future practice.

It is important that students engage in reflective and self-directed practice. The student is expected to fulfill the role of a pharmacist, accepting professional responsibilities with preceptor guidance. The preceptor is expected to guide the student to enhance patient care skills, utilize knowledge and skills appropriately, and navigate the practice setting.

COURSE PREREQUISITE: Pharm 316, Restricted to PharmD for BScPharm students.

OTHER COURSE REQUIREMENTS: Course requirements are listed and outlined on the Faculty of Pharmacy and Pharmaceutical Sciences website under Current Students > [Experiential Education Requirements](#). Students must have all items up-to-date to proceed on placement.

REQUIRED READING

See eClass for Required Readings that pertain to all Advanced Pharmacy Practice Experiences (APPEs). Review prior to the first APPE and then review as needed to support learning. The following 2 readings are required additionally for Pharm 536.

1. Jorgensen D, Dalton D, Farrell B et al. Guidelines for pharmacists integrating into primary care teams. *Can Pharm J* 2013; 146(6); 342: 52. <http://cph.sagepub.com/content/146/6/342.full>
2. Barry, AR, Pammett RT. Applying the guidelines for pharmacists integrating into primary care teams. *Can Pharm J* 2016; 149: 219-25. <http://cph.sagepub.com/content/149/4/219.full.pdf+html>

RECOMMENDED RESOURCES

See eClass for Recommended Resources that pertain to all Advanced Pharmacy Practice Experiences (APPEs). Prior to the placement students should ask their preceptor about resources that should be brought to the site or pre-readings that should be completed prior to the placement.

COURSE OBJECTIVES

The course is designed to develop the following **knowledge, skills and attitudes**. 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 and clinical judgment and inter-professional collaboration (when possible) to make informed decisions and solve problems.
4. Communicate effectively with patients, family members, caregivers and team members both verbally and in writing.
5. Promote the health of communities and populations (e.g. cultural groups, the vulnerable, disease awareness and prevention) and integrates health promotion into patient care (e.g. encourage vaccinations, lifestyle changes, etc.)
6. Work collaboratively with the patient, family, caregivers and other healthcare professionals to facilitate the management of the patient's health needs.
7. Respond appropriately using best evidence, to drug information requests and proactively seek answers to self-identified questions to care for patients.
8. Develop personal and professional leadership skills.

Attitudes:

9. Demonstrate professionalism to patients and others, and practice in a manner demonstrating professional accountability.
10. Demonstrate a commitment to learning by evaluating their practice and knowledge/skills to identify areas for development.

GRADING

Pharm 536 is a Credit/No Credit course. At the end of the placement, preceptors recommend a grade on the final Student Performance Assessment. Formative feedback is provided by preceptors to guide and support achievement of course goals.

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 (*see Course Assignments*) and complete all required assessments (*see information below*). The Faculty course coordinator provides a final course grade (Pass: Credit or Fail: No Credit) following review of the submitted assessments and assignments.

Students Who May Require Support

Students should email the Course Coordinator following review of the Midpoint Student Performance assessment if any outcomes are rated as **Not Meeting an Acceptable Level of Performance** or if performance concerns are identified and students would like additional support to address these.

ASSESSMENT INFORMATION

- All assessments are completed and submitted using CORE ELMS (RXpreceptor). All assessments are posted prior to the start of the placement. Students are encouraged to review so they know the assessment outcomes and criteria.
- Formative feedback is encouraged throughout the placement. It is recommended students and preceptors discuss how things are going after week 1 (formerly called the Early Assessment). Items to be discussed at this time include any early concerns or clarifications regarding expectations or course related activities.
- Time points for completing assessments is outlined in the Assessment and Assignment Schedule (*Appendix 2*).
- Further information and details regarding each assessment can be found in eClass.

COURSE SCHEDULE

This course is offered in each of the following blocks. Students will take this course once and must register for the course in the term that the placement is scheduled to occur in accordance with University Policies outlined in the Calendar. Individual student schedules are listed in CORE ELMS (formerly RxPreceptor).

- Block 1: August 27 – October 19, 2018
- Block 2: October 22 – December 14, 2018
- Block 3: January 7 – March 1, 2019
- Block 4: March 4 – April 26, 2019

Students enrolled in PHARM 538/539 Integrating Seminars are expected to be away from the placement site to attend PHARM 538/539 Seminars. Please refer to PHARM 538/539 syllabi for exact dates.

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. Throughout the placement, restricted activities such as final checking of prescriptions and injections, must be supervised.

COURSE ACTIVITIES	
The following are activities that students must complete during the placement.	
<p>1. Patient Care</p> <p>For all patient care encounters, students should provide patient care as deemed appropriate by the preceptor(s).</p> <ul style="list-style-type: none"> • 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. (complete a medication reconciliation and review for indication, effectiveness, safety and adherence) • 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 medication therapy problems and wellness needs (care plan to include pharmacist responsibilities, specific monitoring parameters and follow-up schedule). • Take appropriate actions as required (i.e. prescribe under pharmacist supervision, order appropriate labs under pharmacist supervision if pharmacist has PraclD, etc). • Engage patients in shared decision making regarding their medication therapy (as appropriate). • Provide accurate and appropriate patient education, including patient self-management. • Conduct follow-up and modify care plans as needed. • Communicate and document patient care activities. (HCP correspondence, computer documentation) • Provide continuity of care. • Assist in patients' self-care (as appropriate) <p>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.</p> <p>ALL care plans must be reviewed by the preceptor. The care plan worksheet and checklist are posted in eClass for download and use as required.</p> <p>NOTE: Administration of Drugs by Injection: Students had the option to complete training as required by ACP</p>	

<p>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.</p>	
<p>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.</p> <ul style="list-style-type: none"> • Involve and refer to other team members when outside the scope of pharmacist practice. • Proactively communicate identified drug therapy issues, appropriate recommendations for care and monitoring plans to appropriate team members. 	
<p>3. Professional Practice and Education (see Appendix 3 for more information) Students must discuss with the preceptor and complete at least TWO Professional Practice Activities.</p> <ul style="list-style-type: none"> • Examples include (but are not limited to): <ul style="list-style-type: none"> - 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 exemplar evaluation form(s) posted in eClass. 	
<p>4. Drug Information Requests Respond to questions in a timely manner using best evidence, including answers to self-identified questions to care for patients.</p> <ul style="list-style-type: none"> • Information may be required either verbally, written or both. (DI Inquiry Record posted in eClass). <p>Students are expected to use appropriate resources and various levels of evidence as available and required to provide an acceptable response. Student should also use more than 1 resource for each question and discuss all answers with the preceptor.</p>	
<p>5. Preceptor Library Resources As a way to promote library resources to preceptors, provide preceptors with an overview of the library resources and search strategies for the UofA Library Database(s). Inform preceptors they are eligible for access as a benefit of precepting. The How-To-Guide: UofA Faculty of Pharmacy Library Resources is: http://tinyurl.com/lgppqay. The link to the UofA pharmacy library home page is http://guides.library.ualberta.ca/pharmacy</p>	
<p>6. OPTIONAL: Practice-Based Research Students may be involved with practice-based research during their placement. Student participation in research activities is voluntary. Research resources and information, as applicable, are posted on eClass.</p>	
<p>COURSE DISCUSSIONS The following are discussions that students complete during the placement. More information is located in eClass to guide discussion.</p>	
<ol style="list-style-type: none"> 1. Responsibilities as a Professional: Discuss ACPs Code of Ethics (https://pharmacists.ab.ca/code-ethics) 2. Professional Accountability and strategies the preceptor(s) use to fulfill professional obligations. 3. Maintaining Professional Competency and Lifelong Learning 4. Communication Strategies used to improve patient care and team collaboration, including goal setting and shared-decision making. 5. Inter-Professional Practice and steps pharmacists can/do take to develop their practice. 	

ASSIGNMENTS

- Assignments are due as indicated in the table below.
- **All posted documents must have all identifiers removed to ensure patient confidentiality.**
- Assignments posted during the placement will be reviewed for completion to ensure course requirements are being met.
- Students will be notified if further information or clarification of their assignment(s) is required.

Learning Plan Assignment <i>The Learning Plan needs to be initiated <u>before the start of the placement.</u></i>	Posting Instructions (CORE ELMS, Student Requirements)
<p>Students are to develop 3 goals (these can be related to development of clinical skill(s), inter-professional practice, leadership, etc).</p> <p>The Learning Plan should be:</p> <ol style="list-style-type: none"> 1. Discussed with the preceptor during first week of the placement; make adjustments if necessary based on preceptor feedback. 2. Finalized by the end of the first week. 3. Reviewed with the preceptor and updated at the midpoint and final points of the placement to indicate progress made with the learning goals. 4. At midpoint, add learning goals and objectives as needed to address knowledge/skill deficiencies as identified by the midpoint Student Performance assessment. <p>Learning Plan Activity and Assignment information and template suggestion: <i>Appendix 4.</i></p>	<p>Post in CORE ELMS (RXpreceptor) as a Requirement under Pharm 536 Learning Plan at least 1 week prior to the start of the placement to allow the preceptor to review. The <u>updated</u> plans must be posted by the end of 1st week, midpoint and at the final following review with the preceptor.</p> <p>4 TOTAL POSTINGS; 1 before the placement and 3 during the placement. Title each upload to reflect the posting date.</p>
Other Course Assignments	Due Date (eClass)
<p>Patient Care Assignment</p> <p>Students need to provide the following for 4 patients in a single document (start each patient on a new page):</p> <ul style="list-style-type: none"> • Provide your 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. <i>Please include a short narrative above the documentation to orient reader to nature of the patient encounter.</i> • Next, as a short narrative, include the monitoring and follow-up that occurred based on your 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 you did based on the follow-up/monitoring results – did your plan change? Did it stay the same? Were you surprised by the result, or was it what you expected to happen? 	<ul style="list-style-type: none"> • Due by 12pm on the last day of the placement
<p>Professional Practice and Education Assignments</p> <p>Students must complete a minimum of 2 assignments per placement based on 2 different activities they completed during the placement. These may include:</p> <ul style="list-style-type: none"> • 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 site-based project 	<ul style="list-style-type: none"> • Assignments are posted on eClass by the last day of the placement.

Assignment postings should include a narrative that outlines the rationale for completing the assignment, as well as evidence or artifacts relating to the activity completed such as slides and/or handouts related to clinical activity, or outline and results of the project conducted. If completed, evaluation forms should be submitted as well. Various rubrics are posted in eClass for use (see <i>Appendix 3</i>).	
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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, etc.) and participation in professional opportunities such as conferences, UofA flu clinics, PDW, Pharm D interviews, etc. In general, it is expected that students are at the placement site 40 hours per week, with schedule to be determined between student and preceptor.
- Human Blood and Bodily Fluid Exposure (HBBFE) Procedures (Needlestick Injury)
- Netcare access, deletion and troubleshooting information
- 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. (<https://www.ualberta.ca/pharmacy/programs/undergraduate-bsc-in-pharmacy/current-student/awards-scholarships-bursaries>)

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 SUBMISSION POLICY

It is the student's responsibility to submit all assignments in accordance with the stated deadlines. UofA email accounts must be monitored daily during the placement and every 3 days after the placement is completed for at least 2 weeks to ensure all assignments and assessments have been submitted satisfactorily. All assignments must be completed to the satisfaction of the preceptor during the placement.

Assignments that are posted late on eClass will require completion and submission of a Professional Accountability Form. This form is placed on the student's file.

SUGGESTIONS and TIPS FOR SUCCESS

Pharm 536 students will be provided with an opportunity to provide patient and engage in the learning afforded at the practice setting. Students will be expected to prepare for the placement ensuring they have reviewed pre-readings provided by the preceptor so that they can be engaged in patient care immediately. Therefore, *professionalism, and self-directed learning* are crucial components to these placements. Although preceptors will guide the learning, *students are ultimately responsible* to ensure completion of all activities, assignments and assessments and to direct their learning.

This is considered to be an advanced placement, therefore preceptors expect motivation and patient accountability to be demonstrated by the students. Engagement and full participation 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. Due to the variability of practice sites, experiences will differ and students are expected to take initiative and identify learning opportunities. Students are expected to identify knowledge gaps through self-assessment and seek feedback and information as needed. Students are also expected to improving with timeliness and efficiency over the course of the placement.

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 regarding 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 a placement.

TECHNOLOGY REQUIREMENTS

Course Information

Course information, resources and links to online resources will be posted in eClass prior to the start of the first placement. Students should review eClass prior to the start of the placement to see what is available to them. If assistance is required with eClass or CORE ELMS, contact phexed@ualberta.ca.

Assignments

Assignments will be posted in eClass.

To allow for preceptor access, the Learning Plan will be posted in CORE ELMS (formerly RxPreceptor) under Student Requirement. Preceptors can see this on their student’s dashboard when they login in and select their student from the dropdown menu. The Learning Plan template is posted on eClass.

Assessments

All assessments are submitted using CORE ELMS.

Netcare

Netcare access procedures will differ depending on the site. Non-AHS/Covenant sites will follow community practice procedures where the pharmacy student is responsible for initiating their Netcare access.

Further information regarding registration, how to confirm access, troubleshooting and contact information is in the [Undergraduate Experiential Education Policies & Procedures Manual](#).

Students should contact phexed@ualberta.ca if they have questions regarding Netcare.

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.

OUTCOME	BEHAVIOURS
Professional	
1. Displays professional behaviour	<ul style="list-style-type: none"> • Displays honesty, integrity, and commitment. • Respects patients/team members and does not engage in distracting behavior. • Is well groomed and wears attire appropriate for the practice setting.
2. Demonstrates professional responsibility and accountability	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Speaks clearly and effectively. • Uses appropriate language, tone and pace. • Uses appropriate non-verbal communication. (e.g. 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/care givers	<ul style="list-style-type: none"> • Engages patient independently. (when appropriate) • Exhibits sensitivity, respect and empathy with patients and care givers. • Identifies/responds to patient cues. • Establishes goals in collaboration with the patient. (when appropriate) • Determines when it is ethically and professionally appropriate to involve caregivers and/or family members.
2. Gathers relevant medical and medication history	<ul style="list-style-type: none"> • Appropriately 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 and interprets relevant data; e.g. past medical and medications history, lab tests and diagnostic assessments. • Completes appropriate physical exam when applicable (e.g. blood pressure assessment). • Synthesizes data to complete a patient history. • Clarifies and manages conflicting data <i>seeking support when necessary</i>.

OUTCOME	BEHAVIOURS
3. Determine medical conditions and assess if the patient's medication-related needs are being met	<ul style="list-style-type: none"> Evaluates patient's medications for indication, efficacy, adherence and safety. Determines whether a patient's medications are achieving the desired goals. Prioritizes medication-related needs based on urgency and patient preferences. Identifies all medical conditions and determines those where medication needs are not currently being addressed.
4. Develops a care plan that addresses medication and health needs	<ul style="list-style-type: none"> Establishes relevant and realistic goals. 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. Generates a realistic set of alternatives and assesses the pros and cons before making a decision. Develops a safe and effective plan (recommendations, monitoring and follow-up), including decisions regarding specific actions for managing patient needs. (e.g. dispense, adapt, prescribe, refer, etc.) Provides rationale for the chosen plan.
5. Implements the care plan when appropriate	<ul style="list-style-type: none"> Implements and adapts plan (if needed) with team and patient/caregivers. <i>Preceptor support may be required depending on complexity of patient.</i> Undertakes the actions specified. Educates the patient on both non-pharmacological. (e.g. lifestyle) and pharmacological recommendations. Initiates and completes seamless care activities when appropriate.
6. Follow-up and evaluate as appropriate	<ul style="list-style-type: none"> Determines follow-up process and timelines 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	<p>Documentation:</p> <ul style="list-style-type: none"> Is written using an organized process. (i.e. DAP [Data, Assessment and Plan]) Has focus/clear intent or purpose. Includes relevant information and appropriate level of detail
Collaborator	
1. Works effectively with members of the team including patients and their families, pharmacy colleagues and individuals from other professions.	<ul style="list-style-type: none"> Establishes and maintains positive relationships Recognizes and respects the roles and responsibilities of team members. Join with others in respectful, effective shared decision-making. Contributes to optimize team functioning.
Scholar	
1. Demonstrates the fundamental knowledge required for pharmacists	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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	BEHAVIOURS
	evidence/information.
3. Integrates clinical judgment and critical thinking	<ul style="list-style-type: none"> • Completes learning to address new clinical situations. • Under conditions of uncertainty, weighs the pros and cons of alternatives to make decisions; <i>may require preceptor support.</i> • Logically defends recommendation(s). • Anticipates the outcome of decisions and actions.
Advocacy and Leadership	
1. Promotes the health of individual patients, communities and populations	<ul style="list-style-type: none"> • Facilitates patient's interaction with the health care system through advice, education and/or guidance <i>with minimal preceptor guidance.</i> • Integrates health promotion into patient care (e.g. encourages vaccinations, smoking cessation, lifestyle changes, self-monitoring of medical conditions) • Student promotes the role of the pharmacist in patient care

APPENDIX 2: Activity, Assignment and Assessment Schedule

Week	Student Activities
1-4 weeks before placement starts	<input type="checkbox"/> Review therapeutics as instructed by preceptor(s) or relevant to the practice area. <input type="checkbox"/> Review syllabus: readings, objectives, assessments, activities and assignments. <input type="checkbox"/> Correspond with preceptor regarding: start time, dress code, parking, etc. <input type="checkbox"/> Provide preceptor(s) with Netcare registration form (if applicable) <input type="checkbox"/> Develop Learning Plan; post on CORE ELMS at least 1 week prior to placement.
Week 1: Orientation, Create Placement Schedule, Learning Plans, Early Assessments	
Orientation	<input type="checkbox"/> Review and discuss student-prepared Learning Plan and prior feedback received. <input type="checkbox"/> Develop preliminary schedule: plan activities and assignments. <input type="checkbox"/> Discuss student/preceptor expectations and responsibilities. <input type="checkbox"/> Discuss assessment processes including informal feedback and debriefing. <input type="checkbox"/> Tour of pharmacy/facility. <input type="checkbox"/> Log-in to ensure Netcare access, as well as access to other on-site systems.
Assessments and Learning Plan	<input type="checkbox"/> END of Week 1: Discuss and debrief with preceptor how things have gone, and what adjustments, if any, need to be made. Contact Course Coordinator if any concerns. <input type="checkbox"/> Post revised Learning Plans (if revised) to reflect preceptor feedback.
Weeks 2 and 3	
Patient Care	<input type="checkbox"/> Provide care to patients. Develop and discuss care plans and documentation Minimum 20 patients/8 weeks.
Assignments	<input type="checkbox"/> Discuss activities and plans for and progress on professional practice assignments.
Week 4	
Patient Care	<input type="checkbox"/> Continue providing care to patients, including documentation as required by site.
Mid-Point Assessments	<input type="checkbox"/> MID-POINT Assessments (in CORE ELMS): Complete the midpoint Self-Assessment in preparation for the Student Performance Assessment discussion. <input type="checkbox"/> Student Performance Assessment: midpoint (by preceptor); review together. <input type="checkbox"/> Student Evaluation of Preceptor; midpoint; and Student Self-Assessment (midpoint); discuss both with preceptor.
Learning Plan	<input type="checkbox"/> Update and post Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS). Outcomes and skills that are identified by the preceptor as needing improvement should be included.
Weeks 5, 6 and 7	
Patient Care	<input type="checkbox"/> Continue providing patient care. Review with preceptor. <input type="checkbox"/> Continue planning/completion of activities and corresponding assignments.
Week 8: Date: _____	
Finish assignments	<input type="checkbox"/> Review activities and assignments to ensure all have been completed and posted. (Professional Practice and Education Assignments).
FINAL Assessments	<input type="checkbox"/> Review Final Student Performance Assessment and Placement Grade with preceptor. <input type="checkbox"/> Student Self-Assessment (final): discuss with preceptor. <input type="checkbox"/> Discuss final Learning Plan and status of progress with preceptor.
Posting of Assignments Surveys	<input type="checkbox"/> Post the finalized Learning Plan with self-reported progress made thus far (in Student Requirements, CORE ELMS). <input type="checkbox"/> Submit Preceptor Recognition Award survey; survey emailed to students <input type="checkbox"/> Post Placement Evaluation (in CORE ELMS, formerly RxPreceptor); submit AFTER leaving site, due 48 hours after placement completion <input type="checkbox"/> Anonymous Student Survey (survey link emailed to student)

APPENDIX 3: RESOURCES for PROFESSIONAL PRACTICE ASSIGNMENTS

3a. Presentation Evaluation Forms

Evaluation forms are available in eClass for:

1. Journal Club presentation
2. Patient Case presentation
3. General Education session
4. Teaching Session feedback form

Ask your preceptor(s) and/or audience members to evaluate your presentation using the rubric posted in eClass (you will need to provide copies).

3b. Site-Based Project Guidance Information

In collaboration with the preceptor, students can design and implement a project that can be used by the practice site to enhance or evaluate patient care or evaluate care at the site. Examples include processes to facilitate inter-professional collaboration, developing tools and resources to provide enhanced patient care such as assessments or algorithms for disease management or patient education information, improving practice skills and/or processes at the site (i.e. completing monitoring and follow-ups).

Project Criteria: The goal is focused on a professional or clinical area of practice and the outcomes can be integrated into practice. The project outline should be completed by the end of the second week to allow for discussion & implementation. Outline should include:

- Topic and goal/rationale for the project
- Methods for achieving goal (steps involved, resources needed, timelines)
- Outcomes (real or potential)
- Next steps

Suggested timeframe:

- Week 1/2: set project goals, develop project outline.
- Week 3/4: mid-point progress review. Discuss project outline with the preceptor. (see outline below). Provide summary of the project; timelines, resources needed & proposed outcomes.
- Final week: Review project outcomes.

3c. Journal Club Information

Recommended reading: Improving journal club presentations, or, "I can present that paper in under 10 minutes" (<http://ebm.bmj.com/content/12/3/66.2.full.pdf+html>)

Suggested format: Prepare a 1 page summary of the outline as a handout.

1. Describe the patient case or problem that attracted you to this paper.
2. Describe the study (i.e. methods, location, unique features) and the research question (PICO).
3. Describe the importance/relevance/ of the study.
4. State your answers to the critical appraisal questions on validity.
5. Summarize the results and describe why the results can or cannot be applied to your patient.
6. Conclude with your decision by resolving the PICO questions and how this applied to your patient and practice.

APPENDIX 4: Learning Plan Activity and Assignment

Your learning plan allows you to prepare for the placement by identifying goals in areas or skills where you would like to build more confidence or comfort. Then, during the placement you will work with your preceptor to create opportunities to achieve the goals. This activity also requires you to report on your progress, a skill required for future practice. This activity has 3 steps as outlined below (1. Skills Inventory, 2. Feedback Summary and 3. Learning Plan). **This must be posted at least 1 WEEK PRIOR to the start of the placement to allow time for preceptor(s) review.**

Templates/forms are posted in eClass. Posting in CORE ELMS (RXpreceptor) allows your preceptor to view this assignment.

STEP ONE: SKILLS INVENTORY

Complete the Skills Inventory below to assess skills that may be a focus for your Learning Plan. Below are some of the primary skills you will be using during your placement. Indicate your comfort and practice scale with each skill/activity.

Activity/Skill	Students should consider the following factors when assessing their abilities:	Comfort Scale 1 2 3 4 5 Uncomfortable Comfortable	Amount of Practice Scale 1 2 3 4 5 Limited Practice ++ Practice	Comments: (to provide perspective on the rating)
Communicating with patients, team members, colleagues	<ul style="list-style-type: none"> • Speak clearly and effectively. • Use appropriate non-verbal communication. (e.g. open body language, use of facial expressions) • Listen effectively (conversations are 2-way). • Employ effective interviewing strategies. • Demonstrate appropriate confidence. • Document information appropriately and accurately. 	Comfort Scale 1 2 3 4 5 Uncomfortable Comfortable	Amount of Practice Scale 1 2 3 4 5 Limited Practice ++ Practice	
Gathering medical and medication history	<ul style="list-style-type: none"> • Use systematic process to gather data • Use multiple sources • Gather and interpret relevant data; e.g. past medical and medications history, lab tests and diagnostic assessments. • Complete appropriate physical exam when applicable (e.g. BP assessment). 	Comfort Scale 1 2 3 4 5 Uncomfortable Comfortable	Amount of Practice Scale 1 2 3 4 5 Limited Practice ++ Practice	

<p>Conducting Patient Assessments</p>	<ul style="list-style-type: none"> Assess medical conditions & DRPs, and determine if there are needs not addressed Assess drug therapy; indication, efficacy, safety, adherence Prioritize patient needs 	<p>Comfort Scale</p> <p>1 2 3 4 5</p> <p>Uncomfortable Comfortable</p>	<p>Amount of Practice Scale</p> <p>1 2 3 4 5</p> <p>Limited Practice ++ Practice</p>	
<p>Creating and Implementing Patient Care Plans</p>	<ul style="list-style-type: none"> Set relevant & realistic goals Generate realistic alternatives with pros/cons Develop appropriate plan / recommendations Educate patient on recommendations Create monitoring & follow-up plan (includes what, when, by whom) 	<p>Comfort Scale</p> <p>1 2 3 4 5</p> <p>Uncomfortable Comfortable</p>	<p>Amount of Practice Scale</p> <p>1 2 3 4 5</p> <p>Limited Practice ++ Practice</p>	
<p>Conducting Patient Follow Up</p>	<ul style="list-style-type: none"> Provides follow up if possible. Interprets follow-up information and modifies plan if needed. 	<p>Comfort Scale</p> <p>1 2 3 4 5</p> <p>Uncomfortable Comfortable</p>	<p>Amount of Practice Scale</p> <p>1 2 3 4 5</p> <p>Limited Practice ++ Practice</p>	
<p>Responding to DI Requests</p>	<ul style="list-style-type: none"> Integrates best available evidence into clinical practice Critically analyzes information & demonstrates clinical judgment. 	<p>Comfort Scale</p> <p>1 2 3 4 5</p> <p>Uncomfortable Comfortable</p>	<p>Amount of Practice Scale</p> <p>1 2 3 4 5</p> <p>Limited Practice ++ Practice</p>	
<p>Interacting with Other Healthcare Professionals</p>	<ul style="list-style-type: none"> Establishes & maintains positive relationships Join with others in respectful, effective shared decision-making. Verbally present patient information to a team Demonstrate safe handover of care using oral, written, electronic communication 	<p>Comfort Scale</p> <p>1 2 3 4 5</p> <p>Uncomfortable Comfortable</p>	<p>Amount of Practice Scale</p> <p>1 2 3 4 5</p> <p>Limited Practice ++ Practice</p>	

STEP TWO: FEEDBACK RECEIVED

To inform potential areas of learning for your Learning Plan, and to provide helpful information to your preceptor(s), complete the feedback table.

Areas of Strength Feedback: Provide examples of feedback that you have received from preceptors, lab facilitators, peers and/or pharmacists.

Insert response here

Areas for Improvement Feedback: Provide examples of feedback that you have been received from preceptors, lab facilitators, peers and/or pharmacists.

Insert response here

STEP THREE: DEVELOP YOUR LEARNING PLAN

- Review Steps 1 and 2. Develop 3 SMART goals. These may be guided by skills rated lower in comfort and practice and that you would like to develop during the placement. Also state strategies you will use and the indicators of progress associated with each goal.
- Review it with your preceptor during the first week of your placement. If changes are made, post the updated learning plan. If no changes are made, the initial learning plan can remain posted.
- **AT MIDPOINT:** Update your learning plan and review with your preceptor.
 - **If you receive grades of Needs improvement on your Midpoint Student Performance Assessment, these must be added at midpoint to your learning plan to enable increased development.**
 - Students should post their learning plan 2 days prior to midpoint, and verbally discuss their progress with their preceptor.
- **AT FINAL:** Review your learning plan with your preceptor to see where you are at the end of the placement. Did you reach your goals? Do you have plan for continuing your goals into the next placement?

LEARNING PLAN				
Goal (Stated in SMART format)	Strategies • Describe strategies for attaining the goal.	Indicators of Progress (how will you know if achieving goal? (ie: feedback from preceptor, reflection)	Progress at MIDPOINT Include: • Key accomplishments • Next steps	Progress at FINAL Include: • Key accomplishments • Next steps
Learning Goal 1:				
Learning Goal 2:				
Learning Goal 3:				