Summary of

Introduction

The primary goal of the Roseman University of Health Sciences College of Pharmacy (RUCOP) experiential curriculum is to ensure that every student obtains the knowledge, skills and abilities necessary to practice competently in a variety of pharmacy settings. The early exposure and progression of pharmacy practice experiences is designed to help students make the successful transition from the didactic academic setting to the practice environment via practical application of what the student has learned.

INTRODUCTORY PHARMACY PRACTICE EXPERIENCES

Introductory Pharmacy Practice Experiences (IPPEs) provide opportunities to learn the basic functions of the Pharmacist Patient Care Process. During IPPEs, students expand their knowledge base, practice skills, and develop professional attitudes with direct patient interactions in both community and institutional pharmacy settings. Preceptors are required to supervise all activities undertaken by students.

Experiential Policies

CORE

ATTENDANCE POLICY

Students are expected to be present at the practice site as scheduled by RUCOP.

Excused Absences

Reasons for consideration for excused absences are listed in the Student Handbook. A summary, as it relates to absences for experiential rotations, is provided in the table below:

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Student Illness	8:00 AM* on the day of the absence. Submit an absence request on the Aca0.6 (ed)-9n th( )Tj0.005 T29 (q95 T29 (q95 T24JE9 (f)8.51.261e)9 (-1.1 e00307 (e)9 (d i	

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Professionalism Outcomes Assessment Rubric

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Exemplary Above Average

General Learning Outcomes Assessment Rubric

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I trust the student completely as an independent practitioner (upon licensure) AND *This student is qualified to give meaningful feedback to other learners for this outcome.*	I trust the student completely as an independent practitioner (upon licensure)	I trust the student, with limited correction. AND *The student is self-directed and seeks guidance as necessary.*	I trust the student, with direct supervision and (Œ ‹ µ v š correction. AND *The student accepts feedback for performance improvement.* If selected on FINAL assessment by PRECEPTOR, *student will receive a No Pass (NP) for the rotation.*	I only trust the student, with specific direction and direct supervision. AND *The student requires significant correction for performance improvement.* If selected on FINAL assessment by PRECEPTOR, *student will receive a No Pass (NP) for the rotation.*

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General Learning Outcomes

1. Collect information to identify patients' medication-related problems and health-related needs.
2. Assess information to determine the effects of medication therapy, identify medication-related problems, and prioritize health-related needs.
3. Establish patient-centered goals and create patient care plans.
4. Implement patient care plans in collaboration with the patient, caregivers and other health care professionals.
5. Follow up and monitor patient care plans.
6. Empower and advocate for patients when appropriate.
7. Collaborate as a member of an inter-professional team.
8. Identify patients at risk for prevalent diseases in a population (e.g. hypertension, diabetes, depression).
9. Minimize adverse drug events and medication errors.
10. Maximize the appropriate use of medications in a population.
11. Respect cultural and social determinants of health.
12. Ensure that eligible patients are educated about and offered immunizations for vaccine-preventable diseases.
13. Educate patients and caregivers regarding disease prevention and appropriate self-care.
14. Educate patients and professional colleagues regarding the appropriate use of medications.
15. Fulfill a medication order.
16. Use evidence-based information to advance patient care.
17. Effectively communicate with patients, caregivers, and other health professionals (listening, writing and verbal skills).
18. Demonstrate the knowledge and abilities to oversee pharmacy operations, including resource management, personnel, and technology of the practice site.
19. Demonstrate the knowledge and abilities to function in accordance with pharmacy laws, regulations, and accreditation standards.

ROTATION RESULTING IN NO PASS OR INCOMPLETE

Preceptors and Experiential Directors have the authority to dismiss a student from the practice site.

Appropriate site employees have the authority to immediately dismiss a student from the practice site without notice or hearing at their sole discretion, because of student violation of practice site's policy or procedure.

Rotation resulting in a grade of No Pass

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student performance.

Reasons for a grade of No Pass on after starting the pharmacy practice experience which will result in a No Pass (NP) include, but are not limited to:

- Violation of the *Attendance Policy*, including arriving to rotation late or leaving rotations early
- Failure to make up excused absences within the designated time frame
- Falsifying any document
- Plagiarism
-

STUDENT USE OF CASH REGISTERS

If permitted by the rotation site's policy, students are allowed to operate the cash register at their rotation site,

Preceptor Selection Criteria

1. Preceptors must be licensed pharmacists in good standing with the State Board of Pharmacy where the practice site is located, and eligible to serve as a preceptor per their respective local Board of Pharmacy regulations.
2. Preceptors must abide by the laws and regulations that govern pharmacy practice.
3. Preceptors must notify the RUCOP experiential office within 24 hours of pharmacist license probation, revocation, suspension, or any other disciplinary actions by the Board of Pharmacy.
4. Preceptors must complete required documentation on the CORE rotation management system.
5. Preceptors must annually acknowledge reviewing and being knowledgeable of the material contained in the RUCOP *Experiential Policy Manual* and *Student Handbook*.
6. Preceptors must devote adequate time for interacting with the students to assure that progress is communicated and assure opportunities are provided for learning outcomes to be met.

Practice Site Selection Criteria

1. The site maintains an active affiliation agreement or contractual agreement with RUCOP.
2. The site meets all state and federal laws related to the practice of pharmacy.
3. The site provides experiences that meet the goals, objectives, and educational outcomes of the experiential rotation.
4. The site provides a caring and compassionate environment committed to educating pharmacy students.
5. The site has an adequate patient population to accomplish the goals, objectives and educational outcomes of the specific rotation.
6. The site fosters an environment that nurtures and supports professional interactions between students, pharmacists, other healthcare professionals, patients and their caregivers.
7. The site is devoted to patient-centered care consistent with the Pharmacist Patient Care Process.
8. Sites utilized for core rotations exhibit diverse socioeconomic cultures, medical conditions, gender, and age.
9. The site provides adequate resources to ensure that students receive oversight, professional guidance, and performance feedback from preceptors.
10. The site identifies a primary preceptor for student supervision during the rotation. Additional staff at the facility can participate in educating the student as appropriate.
11. The site has available equipment, technology, informatics, and learning resources needed to support the student training and provide optimal patient care.
12. The site provides student access to patient health information (patient profiles, patient history, medication history, physical examinations, disease states, and laboratory data).
13. The site exhibits a strong commitment to health promotion, disease prevention, population-based health care, and patient safety, as reflected by the services provided.

Preceptor Responsibilities

Preceptors are required to abide by the following responsibilities:

1. Complete necessary documentation on the CORE rotation management system
2. Complete RUCOP orientation prior to accepting students
3. Serve as a positive role model to the student
4. Identify an acceptable replacement (licensed pharmacist) to supervise student during absences
5. Foster an environment of mutual learning
6. Determine student competency by reviewing the student's performance, through discussions, observation, and feedback from others
7. Review and communicate student progress and provide feedback in a timely and appropriate manner
8. When concerns arise, contact the RUCOP Experiential Director
9. Submit assessments by the prescribed due date using CORE, documenting any areas needing improvement
10. Verify the intern hours completed by each student to the College. The hours recorded should reflect those applicable as per State Board of Pharmacy requirements
11. Orient student to the practice site, including:
    a. Contact information
    b. Dress code
    c. Hours of operation
    d. Tour of facility
    e. Staff introductions, assignments, and reporting structure
    f. Student use of electronic devices
    g. Pharmacy department policies and procedures including pharmacist responsibilities: writing in medical records, patient note format, answering questions, documenting interventions, taking verbal prescriptions, patient counseling, etc.
    h. Available clinical resources: drug information references, clinical specialists, etc.
    i. Site forms: adverse drug reaction, drug utilization, formulary requests, prescription notes, etc.
    j. Site resources: photocopier, inter-library loan, computers, internet access, telephones, etc.
    k. Rotation specific expectations
    l. Review of rotation outcomes and experiential manual policies
    m. Preceptor and student goals
    n. Scheduled meetings, conferences and other activities
    o. Preceptor and student daily responsibilities
    p. Projects and presentations
    q. Assessment procedure and timeline
    r. Any additional site policies
12. As soon as a potential conflict of interest related to an assigned rotation is identified (may include, but not limited to: consensual relationships; immediate family member; or, business or personal relationship with a preceptor or site) the preceptor shall disclose it the appropriate Director.

Appendix 1: Rotation Types & Outcomes

ROTATIONTYPES

OUTCOMES FOR COMMUNITY PHARMACY ROTATIONS

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Outcomes For Community Pharmacy Rotations

OUTCOMES FOR COMMUNITY PHARMACY ROTATIONS

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√	√	√	√	• Discuss use of the teach-back method when counseling patients on appropriate use of medications. •

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√	√	√	√	• Accurately read and process a written prescription including: • Demonstrate basic computer entry knowledge by obtaining and entering into the computer the demographic information, medication, allergy and medical history of a new patient. • Interpret commonly used abbreviations that appear on prescriptions. • Accurately perform calculations needed to safely dispense medications. (i.e. days-supply, correct dosage based on patient weight, etc.) • Input new and refill prescriptions when requested by the patient, caregiver, or physician. • Select the appropriate medication when filling a prescription. • Accurately label and dispense a prescription. • Accurately prepare a medication that requires reconstitution. • Add a third-party plan into the computer system.
	√	√	√	• Accurately perform calculations needed to safely compound medications. • Accurately compound an extemporaneous dosage form. • Accurately document the non-sterile compounding as required by state law. • Demonstrate the steps used when filling the fill-on-arrivals (partial fills) or IOUs. • Discuss the steps required for appropriate order verification final check with the preceptor.
		√	√	• Demonstrate the steps required for appropriate order verification final check with the preceptor (note: only a pharmacist may actually verify a script). • Discuss with the preceptor reasons that orders require rejection at final verification, and the steps to re-route the order back for correction.

Outcomes For Community Pharmacy Rotations

OUTCOMES FOR COMMUNITY PHARMACY ROTATIONS

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	√	√	√	• emonst an undertndingf inventrontl inclng t prcedurs and prcesss used t rorrentrnd handlingf outtduct. • ewnd discuss nnual peroranc evaluaton crtra forracy srt tff, pharacy thnicians and pharacit at si. • erform more adan -el tion withnhrmac's software system. (spit - bledition worker's compedtion etc.)
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			√	• scus howifferent corporate initiatives have positively and negatively affected atientare. • eview perrmancmetics fo the pharmac (i.e. ill times, prescription metrics, hone wait times, vaccination metrics, correct stafing). • iscss perrmancetric fo the pharmacst (emploee satisfacio surveys,

Outcomes For Community Pharmacy Rotations

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Due to the short duration of PHAR 573 P2 Institutional Pharmacy 2 Week Block Rotation, the following grading rubric will be used. Students must achieve a grade of "acceptable" for all applicable outcomes.

- Acceptable for an introductory rotation
- Not acceptable for an introductory rotation

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7. Collaborate as a member of an interprofessional team.

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√	√	• Discuss an evidence-based approach that considers the cultural and social determinants of health in a population. • Discuss how patients' beliefs, values, and cultural norms influence patient decision making surrounding health care and identify how they impact appropriate patient use of medications.
	√	• Promote evidence-based approach that considers the cultural and social determinants of health in a population. • Identify ways patients' beliefs, values, and cultural norms influence patient decision making surrounding health care and identify how they impact appropriate patient use of medications.

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OUTCOMES OR INSTITUTIONAL PHARMACY ROTATIONS

OUTCOMES FOR INSTITUTIONAL PHARMACY ROTATIONS

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√	√	•	• Describe the National Patient Safety Goals (NPSG) program at a given institution. •

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- Assist in the identification of underlying system-associated causes of errors.
- Report adverse drug events and medication errors to stakeholders.
- Provide appropriate patient education to reduce medication errors and adverse drug events.
- Collect thorough patient histories to minimize adverse drug events and medication errors.
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- Communicate effectively with patients, caregivers, and other health professionals for the purpose of obtaining information or conveying drug information.
- Use appropriate non-verbal language when communicating with patients, caregivers, and other health professionals.
- Document patient care activities clearly, concisely, and accurately using appropriate medical terminology.
- Use available technology and other media to assist with communication as appropriate.
- Develop professional documents pertinent to organizational needs (e.g., monographs, policy documents).

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- Utilize technology to optimize the medication use system.
- Discuss benefits and challenges to implementing pharmacy policies and procedures.
- Discuss coordination of pharmacy services in the clinic setting, including personnel and resources involved.
- Identify pharmacy service problems and/or medication safety issues.

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- Describe the purpose and role of regulatory agencies in promoting patient safety (CMS, The Joint Commission, State Board of Pharmacy, etc.).
- Interpret pharmacy quality and productivity indicators using continuous quality improvement techniques.
- Discuss the process to prepare for regulatory visits and inspections.
- Review the results of previous regulatory visits and inspections.
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Appendix 2: Rotation Remediation Charts

IPPEREMEDIATION

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