YPHP 804 Health System, 9 Quarter Hours

2022-2023

COURSE DESCRIPTION

APPEs take place during the last academic year and after all pre-advanced pharmacy practice experience requirements are completed. APPEs are designed to integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum. APPEs fulfill at least 1440 hours of the curriculum. All students are required to complete six APPEs: four required APPEs, and two elective APPEs.

Health-Systems pharmacy practice is a required APPE. This course is structured to give students hands-on experience working in a **Health-Systems** pharmacy setting. The **Health-Systems** APPE lasts 6 weeks, during which the students will engage in patient care, distributive functions, and administrative processes in **Health-Systems** pharmacies and enhance their experience interacting directly with patients, preceptors, technicians, and other health care providers and pharmacy personnel. Students also participate in simulation and co-curricular 'C3'activities and on the last day of each experience attend developmental sessions as part of the YPHP 800 Practical Approaches to Professional Development didactic course. Combined, these activities ensure preparation as practice-ready and team oriented pharmacists and complement the concurrent experiential and didactic curriculum.

Quarter Offered: Fall, Winter, Spring, and Summer

Figure 1. Experiential Education Structure

ROSALIND FRANKLIN UNIVERSITY OF MEDICINE AND SCIENCES
COLLEGE OF PHARMACY
EXPERIENTIAL EDUCATION CURRICULUM AT A GLANCE Class of 2021-2023

IPPE Year			APPE Year
P1	**P2**	**P3**	**P4**
Community YPHP 515 IPPE I (Onsite 104 hours) 1 hour reflection Thirteen 8-hour visits Fall through Spring	Health-System YPHP 615 IPPE II (Onsite 104 hours) 1 hour reflection Thirteen 8-hour visits Fall through Spring	Elective YPHP 715 IPPE III (Onsite 80 hours) Two 1-week experiences Ten 8-hour visits Breaks: Summer, Fall/Winter, Spring	Required & Elective YPHP 801-806 APPE (Onsite 240 hours each) Six 6-Week Rotations Summer, Fall, Winter, Spring *Acute Care*[‡] (YPHP 801) *Ambulatory Care*[‡] (YPHP 802) Community (YPHP 803) *Health-System*[‡](YPHP 804) *Elective I*[‡] (YPHP 805/6) Elective II (YPHP 805/6)
		Service Learning (7 hours) IPPE-APPE Transition Workshop*	Return to Campus*(YPHP 800)
Simulation (10 hours) Co-Curricular C3 Activities*	Simulation (10 hours) Co-Curricular C3 Activities*	Simulation* Co-Curricular C3 Activities*	Simulation* Co-Curricular C3 Activities*
115 hours	115 hours	87 hours	Total APPE Hours= 1,440 hours
Total IPPE Hours = 317 hours			

IPPE = Introductory Pharmacy Practice, APPE= Advanced Pharmacy Practice Experience
updated 9/1/2017 (format update 1/29/21)
*Hours dedicated to these items are not counted in experiential hour total
‡ Included within longitudinal experience

Access to Course Material and Information

In addition to what will be provided during experiential class meetings, materials and information will be distributed using the University email system, E*Value, and Desire2Learn (D2L). These systems are *mandatory* communication modalities among faculty, preceptors, and students involved with this course.

Prerequisite(s):

Successful completion of the first three professional years and all Introductory Pharmacy Practice Experiences (IPPEs) is required before beginning the P4 year. Documented completion and compliance with the following is required before beginning a practice experience:

a. Licensure
b. Criminal Background Check
c. Drug Screen
d. Health Record-Immunizations (including annual TB and Influenza)
e. Health Insurance Portability and Accountability Act (HIPAA) Training
f. OSHA Blood borne Pathogens Training
g. Basic Life Support (BLS) and Cardiopulmonary Resuscitation (CPR) Certification
h. APhA Immunization Certification (Certificate of Completion)
i. Other site-specific administrative requirements

For additional information, refer to the Experiential Education Manual.
*Some sites may have additional requirements for student pharmacists completing APPEs.

Instructional Methods and Learning Experiences:

Student pharmacists participating in the P4 APPE will be engaged in active learning through the use of practice-based activities in **Health Systems** team-based projects, preceptor interaction, and simulation activities.

Course Director(s):

Faculty Name, Degree, and Title	Bradley Cannon, PharmD Director of Experiential Education	Lisa Michener, PharmD, MS, Associate Director of Experiential Education
Phone	847-578-3433	847-578-8762
Email	copexperientialed@rosalindfranklin.edu	copexperientialed@rosalindfranklin.edu
Office location	IPEC 2.808	IPEC 2.816

Office Hours: By appointment

COURSE OBJECTIVES

Upon completion of this experiential course, the student pharmacists should have met the following performance domains and abilities:

Terminal Performance Outcomes

1. Learner—Develop, integrate, and apply knowledge from the foundational sciences to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population and patient-centered care.
2. Patient-centered care—Provide patient-centered care as the medication expert
3. Medication use systems management—Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use
4. Health and wellness—Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness
5. Problem solving—Identify problems, explore and prioritize potential strategies, and design, implement, and evaluate viable solutions
6. Educator—Educate respective audiences by determining the most effective and enduring ways to impart information and assess understanding
7. Patient advocacy—Assure that patients' best interests are represented
8. Interprofessional collaboration—Actively participate and engage as a health care team member by demonstrating mutual respect, understanding, and values to meet patient care needs

9. Cultural sensitivity—Recognize social determinants of health to diminish disparities and inequities in access to quality care
10. Communication—Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization
11. Self-awareness—Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth
12. Leadership—Demonstrate responsibility for creating and achieving shared goals, regardless of position
13. Innovation and entrepreneurship—Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals
14. Professionalism—Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other health care providers, and society

- Based on the Center for the Advancement of Pharmacy Education's Educational Outcomes 2013 and the 2016 Accreditation Council for Pharmacy Education's Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (Guidance document, 1a.)

COURSE OBJECTIVES AND EXPECTATIONS[1]

Upon completion of this advanced pharmacy practice experience in **Health Systems**, the student pharmacist will be able to:

Learner
• Summarizes key information, including brand and generic names, dosage forms, usual dosing ranges, and counseling points related to the use of common prescription and nonprescription medications • Describes the mechanism of action of common medications • Identifies appropriate sources of information and evaluate primary literature to synthesize answers when responding to drug information questions • When responding to drug information requests from patients or health care providers, identifies appropriate sources of information and evaluate primary literature to synthesize answers • Critically analyzes scientific literature and clinical practice guidelines related to medications and diseases to enhance clinical-decision making • Performs accurate pharmaceutical calculations, including preparation of compounded medications, weight-based pediatric dosing, and dose adjustments based on body weight and renal function
Patient-Centered Care
• Collects subjective and objective evidence related to patient, medications, allergies, adverse reactions, and diseases • Collects patient histories in an organized fashion, appropriate to the situation and inclusive of cultural, social, educational, economic, and other patient- specific factors affecting self- care behaviors, medication use and adherence to determine the presence of a disease, medical condition, or medication-related problem(s). • Evaluates a patient's medications and conditions to identify actual and potential medication-related problems • Formulates evidence-based care plans, assessments, and recommendations based on subjective and objective data, the patient's needs, and the patient's goals • Implements patient care plans and monitors response to therapy • Reconciles a patient's medication record • Refers patients to other healthcare providers when appropriate • Documents all patient information accurately, legally, and succinctly in a manner that ensures continuity of care • Accurately assesses and records a patient's blood pressure, pulse, respiratory rate, and other objective data as applicable
Medication Use Systems Management
• Manages health care needs of patients during transitions of care • Distributes medications in a safe, accurate, and timely manner • Compounds drug products using accurate calculations, pharmaceutical components, and techniques • Accurately evaluates, processes, labels, and dispenses medications and devices pursuant to a new prescription, prescription refill, or drug order in accordance with legal requirements • Determines appropriate storage and beyond-use dating of compounded and reconstituted medications before and after dispensing • Incorporates continuous quality improvement techniques when processing prescriptions for patients to reduce and prevent errors
Health and Wellness
• Provides preventive health and wellness education (e.g. immunizations, tobacco cessation counseling, wellness screenings, risk assessments
Problem Solving
• Identifies and prioritizes a patient's medication-related problems
Educator
• Uses effective written, visual, verbal, and nonverbal communication skills to educate patients and/or caregivers on medication use, self-management, and preventive care • Assesses the ability of patients and their agents to obtain, process, understand and use health- and medication-related information • Uses appropriate methods of patient education to review indications, adverse effects, dosage, storage, and administration techniques • Demonstrates and/or describes proper use of various drug delivery and monitoring systems (e.g., inhalers, eye drops, glucometers, injectables, etc.) • Uses effective written, visual, verbal, and nonverbal communication skills to accurately respond to drug information questions • Educates health care providers, pharmacy staff, and student pharmacists regarding a patient case or other pharmacy-specific information

- Educates patients and providers on the mechanism of action, appropriate use, adverse effects, and benefits of medications and devices used to manage chronic conditions
- Adjusts the amount and depth of information presented to patients based on their level of education, interest, emotional state, and ability to understand the information

Patient Advocacy

- Assists patients in navigating the complex healthcare system
- Encourages patients to set priorities and goals to better meet their health care needs
- Assists a patient or caregiver with problems related to prescription medication coverage, health insurance, or government healthcare programs
- Encourages patients to set priorities and goals to better meet their health care needs

Interprofessional Collaboration

- Engages as a member of a health care team by collaborating with and demonstrating respect for other areas of expertise

Cultural Sensitivity

- Incorporates patients' cultural beliefs and practices into health and wellness care plans

Communication

- Effectively communicates recommendations to other healthcare providers
- Documents patient care activities clearly, concisely, and accurately using appropriate medical terminology
- Foster sustainable relationships with patients and providers to ensure continuity of care

Self-Awareness

- See Professionalism Below

Leadership

- Fosters collaboration among the pharmacy and / or healthcare team to achieve a common goal

Innovation and Entrepreneurship

- Demonstrates creative decision-making when dealing with unique problems or challenges
- Develops new ideas or strategies to improve patient care services
- Describes how to manage workflow, scheduling, and billing

Professionalism

Ethical, Professional, and Legal Behavior

- Demonstrates professional behavior in all practice activities
- Maintains ethical behavior in all practice activities
- Complies with all federal, state, and local laws related to pharmacy practice
- Demonstrates a commitment to the advancement of pharmacy practice
- *Appearance*: Displays appropriate appearance in terms of dress, grooming, and hygiene
- *Punctuality*: Arrives on time, calls/notifies preceptor in advance of planned absence or when unable to meet deadlines or arrive on time.
- *Initiative*: Accepts accountability/responsibility (without reminders), sincere desire to learn, shows flexibility to help patients, applies knowledge to best of ability, seeks help when needed, works independently
- Complies with the professionalism expectations of the Office of Experiential Education

Self-Awareness

- Approaches tasks with a desire to learn
- Displays positive self-esteem and confidence with interacting with others
- Accepts constructive criticism and strives for excellence
- Demonstrates the ability to be a self-directed, life-long learner

General Communication Abilities

- Shows empathy and sensitivity to the culture, race/ethnicity, age, socioeconomic status, gender, sexual orientation, spirituality, disease state, lifestyle, and mental/physical disabilities of others.
- *Verbal*: Verbal communication is professional, confident, clear, not aggressive, and lacks distracters (e.g., um, uh, like, you know)
- *Nonverbal*: Maintains appropriate eye contact and body language
- *Written*: Written communication is clearly understood by others and does not contain significant spelling/grammatical errors
- *Listening*: Demonstrates active listening, focuses on the patient/caregiver/health care provider, pays attention to nonverbal cues, responds empathetically
- Verifies information is understood by patient/caregiver or healthcare provider
- Demonstrates proficiency with the English language

- Based on the Center for the Advancement of Pharmacy Education's Educational Outcomes 2013 and the 2016 Accreditation Council for Pharmacy Education's Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (Guidance document, 1a.).

RECOMMENDED COURSE MATERIALS

1. Clinical Pharmacology [database online]. Available via RFUMS Boxer University Library Electronic Resources.
2. Malone PM, Kier KL, Stanovich JE, Malone MJ. eds. Drug Information: A Guide for Pharmacists 6e New York, NY: McGraw-Hill; 2018. http://accesspharmacy.mhmedical.com.ezproxy.rosalindfranklin.edu:2048/content.aspx?bookid=981&se

ctionid=57697146. Accessed April 29, 2019.
3. Ansel HC. *Pharmaceutical Calculations.* 15th ed. Philadelphia: Woltors Kluwer; 2017.
4. Berger BA. Communication Skills for Pharmacists: Building Relationships. 3rd ed. Washington, DC: American Pharmacists Association; 2009.
5. Reist JC, Development of the Formal Case Presentation. Active Learning Exercises. In the American Pharmacist Association Pharmacy Library. The University of Iowa College of Pharmacy, Department of Pharmacy Practice and Science, American Pharmacist's Association Washington DC © 2016 https://pharmacylibrary-com.ezproxy.rosalindfranklin.edu/doi/full/10.21019/ALE.2000.93 April 29, 2019.
6. Reist JC, Development a Monitoring Plan. Active Learning Exercises. In the American Pharmacist Association Pharmacy Library. The University of Iowa College of Pharmacy, Department of Pharmacy Practice and Science, American Pharmacist's Association Washington DC © 2016. https://pharmacylibrary-com.ezproxy.rosalindfranklin.edu/doi/full/10.21019/ALE.2000.110 Accessed on April 29, 2019.
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8. Sheehan AH, Jordan, JK. Drug Information: Formulating effective response and recommendations: A structured approach. A Guide for Pharmacists**,** In. Malone P*, Drug Information: A Guide for Pharmacists 6e.* New York, NY: McGraw-Hill; 2018. https://accesspharmacy-mhmedical-com.ezproxy.rosalindfranklin.edu/content.aspx?bookid=2275&sectionid=177197497 Accessed April 29, 2019
9. Take a Patient Medication History 3rd Ed. American Pharmacist's Association Washington DC © 2016. https://pharmacylibrary-com.ezproxy.rosalindfranklin.edu/doi/abs/10.21019/ALE.2000.34 Accessed April 29, 2019.
10. Bennett MS, Kliethermes MA, How to Implement the Pharmacists' Patient care Process, In the American Pharmacist's Association Pharmacy Library Washington DC © 2016. https://pharmacylibrary-com.ezproxy.rosalindfranklin.edu/doi/full/10.21019/9781582122564.ch3 Accessed April 29, 2019.
11. Fravel MA, Starry MJ, Reist JC. Multi-Focus SOAP Note Writing: Independent Video Activity – Hypertryglyceridemia and Gout Active Learning Exercises. In the American Pharmacist Association Pharmacy Library. The University of Iowa College of Pharmacy, Department of Pharmacy Practice and Science, American Pharmacist's Association Washington DC © 2018 https://pharmacylibrary-com.ezproxy.rosalindfranklin.edu/doi/full/10.21019/ALE.2000.15 Accessed on April 29, 2019.
12. Angelo, LB, Cerulli , How to Conduct a Comprehensive Medication Review: A Guidebook for Pharmacists, In American Pharmacists Association, Washington DC © 2018 https://doi-org.ezproxy.rosalindfranklin.edu/10.21019/9781582122168 Accessed on April 29, 2019.
13. Rosalind Franklin University of Medicine and Sciences (RFUMS) College of Pharmacy 2019 Electronic Resources Guide, Found in home page of E*value. Accessed April 29, 2019.

METHODS OF EVALUATION

Assessment Policy

Upon completion of each APPE, students will receive a letter grade: A, B, C, F. In order to successfully complete the APPE professional year, students must receive a "C" or better in each of the six-week experiences. For APPE's, the final grade will be based on the preceptor's evaluation and completion of any graded assignments during the rotation. The final grade will be based on the preceptor's evaluation, completion of any graded assignments during the rotation, and an end of block assessment that is administered at the college when applicable. The course director in the OEE assigns final grades.

Assessments

A variety of assessments are used in this course. These serve to provide feedback to the students, preceptors, and course director regarding student progress and course activities.

Midpoint Evaluation

The midpoint evaluation includes the preceptor's evaluation of the student, the student's self-evaluation, and the student's evaluation of the rotation. It is expected that the preceptor and student will meet to discuss these evaluations and address areas for improvement during the remainder of the course. The midpoint evaluation is documented on paper and not in the E*value system.

Final Evaluation

The final evaluation includes the preceptor's evaluation of the student, the student's self-evaluation, and the student's evaluation of the preceptor and site. The preceptor and student should also meet to discuss these evaluations.

The preceptor's final evaluation of the student as well as professionalism points will factor into the student's final grade as noted in the grading policy in the Experiential Education Manual.

To protect student confidentiality, the students' preceptor evaluations will be compiled and reported back to the preceptor in aggregate with all student identifiers removed after the completion of the academic year. Sample evaluation forms are located in E*Value.

Required Return to Campus Visits

Students will be required to return to campus on the last day of each block during the APPE year regardless if they are scheduled in an OFF block in order to meet the requirements of YPHP 800 Practical Approaches to Professional Development. Please refer to the YPHP 800 syllabus for full details.

Grading Rubric

Refer to the respective course syllabi for specific learning objectives and assignments required of each experience.
The rating scale used on the evaluation form consists of:

- No opportunity for activity – not factored into point calculation
- Exceeds competency – 4 points
- Meets competency – 3 points
- Does Not Meet– 2 point

4 **Exceeds Competency**	**3** **Meets Competency**	**2** **Does Not Meet Competency**	**N/A** **(Not Applicable)**
Student performs above the minimum competency for a typical P4 student at this point in time; requires minimal guidance or coaching	Student performs at a level that would be expected for a minimally competent P4 student at this point in time; requires some guidance and coaching	Student is unable to perform independently; requires constant guidance and coaching	Activity did not occur or there was no opportunity to assess the activity

The rotation evaluation includes 5 sections, which are weighted.
Refer to the respective syllabi for the specific weighting scheme as they may differ.

- Section I. Professionalism and Communication Expectations *
- Section II. Knowledge
- Section III. Patient Care
- Section IV. Collaboration and Leadership
- Section V. Projects and Activities

*A rating of "Does Not Meet" in Professionalism & Communications Section will result in a failing grade for the rotation.
Allocation of a letter grade will be based on the weighted averages and calculations for each section according to the

following (weighted averages vary by rotation):

Final Rotation Grade			
Section I average =	X [weight for rotation**]=20%	X 100 =	Section total
Section II average =	X [weight for rotation**]=25%	X 100 =	Section total
Section III average =	X [weight for rotation**]=25%	X 100 =	Section total
Section IV average =	X [weight for rotation**]=15%	X 100 =	Section total
Section V average =	X [weight for rotation**]=15%	X 100 =	Section total
Section Totals Added Up			Evaluation Point Total out of Total Possible Points
A 90-100%*	B 80-89.9%*	C 70-79.9%*	F 0-69.9%*
*The total points possible are adjusted automatically for sections rated as N/A.			
**Weights may vary slightly depending on rotation. See specific APPE course syllabus			

APPE Course Failures

If a student fails an experiential rotation, the following will occur: The student will be notified of their failure by the course director. A copy of the student's final evaluation detailing the student's deficiencies will be forwarded to the Chair of Pharmacy Practice and the Chair of the Student and Chair of the Student Promotions, Evaluation and Awards Committee (SPEAC).

Documentation on Transcript

A student who fails an APPE will be required to repeat the block. The grade achieved in the subsequent APPE block will be entered in the students' transcript; however, the original 'F' will remain on the transcript.

Repeat Failures

A student with a repeat failure of the same APPE, or who fails two APPE's, will be considered for dismissal.
A student who fails two APPEs will have an altered schedule and will be required to pass a competency assessment prior to returning to the APPE program.

COURSE GRADE APPEAL

Please refer to the Student Progression, Evaluation and Awards Committee (SPEAC) guidelines regarding the course grade appeal process.

COURSE FEEDBACK

Students will have the opportunity to provide the course director(s) and other faculty/instructor(s) with feedback in several ways:

- Periodic reflective comments
- Scheduled appointment with the course director(s)
- Formal course evaluation process

ATTENDANCE POLICY

1. Successful completion of the APPE requires a minimum of 240 hours.
2. Any hours missed must be made up.
3. Hours are to be completed on-site, unless alternative arrangements are made with the preceptor and documented in an email to the Office of Experiential Education
4. Please refer to the Experiential Attendance Policy in the Experiential Manual for full description and

details.

For additional information refer to the Experiential Education Manual Attendance Policy.

PARTICIPATION AND PROFESSIONALISM

Participation

It is expected that students will engage in each experience by:

- Demonstrating active listening skills (i.e., making eye contact, asking appropriate questions, giving their undivided attention, responding to questions when appropriate.)
- Actively participating in discussions and group activities (i.e., verbally sharing thoughts, opinions, and ideas and functioning as an effective and equally contributory team member.)

These aspects will be observed and assessed by the course director(s) and faculty on an ongoing basis. Periodic feedback will be given to students when necessary.

Professionalism

Students are expected to perform and behave as professionals. They will demonstrate respect for the preceptor(s), other faculty, their peers, and themselves. Students will participate in all course activities with purpose and a positive attitude.

Professionalism & Communication Expectations

To behave professionally, the student must:

- Demonstrate knowledge of and sensitivity towards the unique characteristics of each patient.
- Comply with all federal, state, and local laws related to pharmacy practice.
- Demonstrate ethical and professional behavior in all practice activities**.**
- Maintain ethical behavior by being honest, ensuring patient confidentiality, responding to and preventing errors in patient care and avoiding professional misconduct (including plagiarism).
- Make and defend rational and ethical decisions within the context of personal and professional values.
- Maintain a clean, orderly, and safe workspace.
- Display appropriate dress, grooming, and hygiene that is professional in appearance (e.g., defined by site policy and/or procedures, preceptor, instructor and/or professional etiquette or culture).
- Complete assignments on time.
- Arrive on time and avoids absences when possible.
- Call and notify preceptor in advance of any planned absences or when unable to meet a deadline or arrive on time.
- Prepare for assigned activities as designated (e.g., workbook, homework etc.)
- Complete designated activities during allotted rotation hours or class time.
- Accept accountability and responsibility for patient care without repeated reminders.
- Show a sincere desire to learn.
- Demonstrate willingness and flexibility to contribute to the well-being of others.
- Apply knowledge, experience, and skills to the best of his/her ability.
- Seek help from the preceptor or instructor when necessary.
- Never be hesitant to admit that he/she does not know something, but should seek help and ask questions whenever necessary.
- Not make decisions without the knowledge of the preceptor, particularly in regard to prescription dispensing.

To communicate effectively, the student must:

- Demonstrate effective communication abilities in interactions with patients, their families and caregivers, and other health care providers.

- Communicate clearly, respectfully, and effectively through active listening using appropriate verbal, non-verbal, and written communication skills at a level appropriate for caregivers, health care providers, and the general public.
- Introduce self at first encounter and make appropriate eye contact.
- Greet patients and/or other health care professionals with a smile and/or positive inflection in voice (e.g., not condescending or sarcastic).
- Demonstrate appropriate self-awareness, assertiveness and confidence (e.g., not meek or overly assertive, even under stress).
- Work as an active team member with patients, peers, and other health care professionals (e.g., contributes relevant information).
- Accept and use constructive feedback to improve performance.
- Not publicly question the advice or directions given by the preceptor or staff, but is encouraged to discuss issues or ask questions in private.

Per the OEE Professionalism Policy, professionalism infractions may negatively impact the APPE grade or result in a request to appear before the Student Promotion, Evaluation, and Awards Committee (SPEAC). Once the APPE rotations have been assigned to students, their professionalism points will be reset to 100. Unless the infraction is related to a specific rotation, an infraction prior to the start of rotations or during an off block may result in the student appearing before the SPEAC. Infractions related to, or that occur during, a specific rotation will be counted toward the grade for that rotation. The nature of the consequence for failing to comply with the professionalism expectations during the P4 year will be at the discretion of the course director. However, as a general rule, a loss of 15 points during a block will result in a grade reduction and/or request to appear before the SPEAC. A loss of professionalism points in more than one block may result in a request to appear before the SPEAC. Professionalism points may be deducted by either the course director or preceptor, depending on the type of infraction.

Unprofessional Behavior

Inappropriate or unprofessional comments, remarks, and attitudes may result in dismissal from the site. Disruptive activity during site attendance will not be tolerated.

Academic Integrity

This course will adhere to the Rosalind Franklin University of Medicine and Science *Standards of Student Conduct*, which can be found in the Rosalind Franklin University of Medicine and Science Student Handbook. Please refer to this document for policies on cheating, plagiarism, academic dishonesty, abuse of academic materials, stealing, and lying.

Participation

It is expected that students will engage in each experience by:

- Demonstrating active listening skills (i.e., making eye contact with lecturers, asking appropriate questions, giving the preceptors their undivided attention, responding to questions when appropriate.)
- Actively participating in discussions and group activities (i.e., verbally sharing thoughts, opinions, and ideas and functioning as an effective and equally contributory team member.)

These aspects will be observed and assessed by the course director(s) and preceptors on an ongoing basis. Periodic feedback will be given to students when necessary.

OTHER COURSE INFORMATION

REQUIRED EQUIPMENT

Students must bring to the practice site the following items:

- White RFU-issued lab coat and nametag unless prohibited by the site.

ACCOMMODATIONS FOR DISABILITIES

Rosalind Franklin University of Medicine and Science is committed to providing equal access to learning opportunities for students with documented disabilities. To ensure access to this class and your program, please contact the ADA Coordinator at 847.578.8354 or ada.coordinator@rosalindfranklin.edu to engage in a confidential conversation about the process for requesting accommodations in the classroom and clinical settings.

Accommodations are not provided retroactively. Students are encouraged to register with the ADA Coordinator as soon as they begin their program. Rosalind Franklin University of Medicine and Science encourages students to access all resources available. More information can be found on the Academic Support InSite page or by contacting the ADA Coordinator.

DIGITAL TECHNOLOGY

Course content, including class sessions, delivered through the use of digital technology may be audio visually recorded by the University for educational purposes, consistent with the exercise of academic judgment of the faculty. Any such recordings would then be used and maintained in a manner consistent with the university's nonprofit educational mission.

COURSE MAPPING TO NATIONAL STANDARDS AND OUTCOMES

This course includes the following components from nationally recognized standards and expected outcomes for accredited pharmacy programs.

List of CAPE, EPA, IP, and PPCP (link)

ACPE Standards-Appendix 1

	B01 Biochemistry	X	S01 Cultural Awareness		C01 Clinical Pharmacokinetics
	B02 Biostatistics		S02 Ethics	X	C02 Health Informatics
	B03 Human Anatomy	X	S03 Healthcare Systems	X	C03 Health Info Retrieval and Eval
	B04 Human Physiology		S04 History of Pharmacy	X	C04 Med Dispens, Distrib and Admin
	B05 Immunology	X	S05 Pharmacoeconomics	X	C05 Nat Prod and Alt & Comp Therapies
X	B06 Medical Microbiology		S06 Pharmacoepidemiology	X	C06 Patient Assessment
	B07 Pathology/Pathophysiology	X	S07 Pharm Law and Reg Affairs	X	C07 Patient Safety
	P01 Clinical Chemistry	X	S08 Practice Management		C08 Pharmacotherapy
X	P02 Extemporaneous Compounding	X	S09 Professional Communication	X	C09 Public Health
	P03 Medicinal Chemistry		S10 PD/Social and Behavioral Aspect of Pract	X	C10 Self-Care Pharmacotherapy
X	P04 Pharmaceutical Calculations	X	S11 Research Design		
	P05 Pharmaceutics/Biopharmaceutics				
	P06 Pharmacogenomics/genetics				

	P07 Pharmacokinetics
	P08 Pharmacology
	P09 Toxicology

CAPE		EPA		PPCP	
X	1.1 Learner (Learner)	X	EPA1 Patient Provider	X	Collect
X	2.1 Patient-centered care (Caregiver)	X	EPA2 Patient Provider	X	Assess
X	2.2 Medicine use systems management (Manager)	X	EPA3 Patient Provider	X	Plan
X	2.3 Health and wellness (Promoter)	X	EPA4 Patient Provider	X	Implement
X	2.4 Population-based care (Provider)	X	EPA5 Patient Provider	X	Follow-Up: Monitor & Evaluate
X	3.1 Problem Solving (Problem Solver)	X	EPA6 Interprofessional Team Member		
X	3.2 Educator (Educator)	X	EPA7 Population Health Promoter	**IP**	
X	3.3 Patient Advocacy (Advocate)	X	EPA8 Population Health Promoter	X	Domain 1: Values/Ethics for IP Practice
X	3.4 Interprofessional Collaboration (Collaborator)	X	EPA9 Population Health Promoter	X	Domain 2: Roles/Responsibilities
X	3.5 Cultural Sensitivity (Includer)	X	EPA10 Population Health Promoter	X	Domain 3: IP Communication
X	3.6 Communication (Communicator)	X	EPA11 Population Health Promoter (RFU only)	X	Domain 4: Teams and Teamwork
X	4.1 Self-Awareness (Self-aware)	X	EPA12 Information Master		
X	4.2 Leadership (Leader)	X	EPA13 Information Master		
X	4.3 Innovation and Entrepreneurship (Innovator)		EPA14 Practice Manager		
X	4.4 Professionalism (Professional)		EPA15 Practice Manager		
		X	EPA16 Self-developer		

Abbreviations: ACPE=Accreditation Council for Pharmacy Education, CAPE=Center for the Advancement of Pharmacy Education, EPA=Entrustable Professional Activities, PPCP=Pharmacist Patient Care Process, IP= Interprofessional

COURSE SCHEDULE

Please refer to the following website or the E*value Home Page:

https://www.rosalindfranklin.edu/academics/college-of-pharmacy/doctor-of-pharmacy-pharmd/experiential-education/

YPHP 804 – HEALTH SYSTEMS PHARMACY PRACTICE ABILITIES CHECKLIST

Listed below are required and optional activities.

- This form is a part of the FINAL Evaluation in E*value.
- Students must complete all required activities listed and any optional activities by checking the appropriate boxes.
- All activities performed must comply with site-specific policies and procedures.
- **Assessment forms** and assignment instructions are in the syllabus pages that follow.
- If the activity is **required** for a grade, it is also indicated below.

Assessment Form Syllabus Page	Required Activities	Required for Grade	Complete	Incomplete
13-14	Discuss midpoint and final evaluations with preceptor	**YES**	☐	☐
15	Leads a topic discussion with pharmacist(s)	**YES**	☐	☐
16-17	Drug Information Response: Respond to a question related to a drug	**YES**	☐	☐
18-21	Discuss the Core Professional Activities in this experience	**YES**	☐	☐
	Review drug distribution policies and procedures for health-system and participate in performing drug distribution		☐	☐
	Assist in responding to telephone requests from nursing and physician staff		☐	☐
	Review process for dispensing controlled substances including prevention of diversion, procedures for disposal/handling of expired or partially used products.		☐	☐
	Stock crash cart / emergency response medication storage		☐	☐
	Prepare intravenous medications using aseptic technique		☐	☐
	Assist pharmacy buyer in receiving order and review order placement and procedures for drug recalls, shortages.		☐	☐
	Observe registered nurse administer medications		☐	☐
	Perform quality audits (e.g. expiration dating, unit inspections, temperature monitoring, IV room cleaning audits)		☐	☐
	Review/ document a medication error or adverse drug event using health-system form		☐	☐
	Review pharmacy manager workflow (e.g. scheduling, financial reports, pharmacy supervision, hiring, human resource, conflict resolution and evaluations)		☐	☐
22	Perform medication history on patient admission(s)		☐	☐
23	Reconcile patient's medication record(s)		☐	☐
24	Counsel patient(s) getting discharged from health-system		☐	☐
	Optional Activities			
	Attend a pharmacy department, interprofessional committee meeting, including but not limited to Pharmacy &Therapeutics Committee and document a reflection		☐	☐
25	Document activity in patient chart (SOAP note)		☐	☐
26	Provide an in-service for other health care professionals		☐	☐
	Review national and/or hospital-specific quality measures with pharmacist (e.g. Joint Commission standards or patient safety goals, National Hospital Quality Measures, HEDIS, HCAHPS, etc.)		☐	☐
	Perform clinical audits or patient charts related to national and/or hospital-specific quality measures (e.g. Joint Commission standards or patient safety goals, National Hospital Quality Measures, HEDIS, HCAHPS, etc.)		☐	☐
	Review investigational drug policies & procedures and participate in dispensing as applicable.		☐	☐
	Write an article in a pharmacy department newsletter		☐	☐
	Assist in performing a drug use evaluation		☐	☐
	Update existing health-system pharmacy policy based on evidence-based medicine.		☐	☐

Comments regarding activities:

Student name: _____ Signature:_____

Preceptor name: _____ Signature: _____

Midpoint Preceptor Assessment Form

Preceptors should use this form to provide formative feedback to the student.

Student Pharmacist Name:_____ Date: _____

Evaluator Name:_____

1. What objectives, if any, remain to be met?

2. Based on the objectives and rotation requirements, what skills or competencies could be improved?

3. How will such improvements be made during the remainder of the rotation block?

1. Based on the objectives and rotation requirements, in what areas is the student doing well or exceeding expectations?

2. Rate the student's overall ability at the midpoint. **If you rate the student" Does Not Meet"- please contact the Office of Experiential Education immediately to discuss further action: 847-578-8782.**

☐ **Exceeds Expectations** **90-100%**	☐ **Meets Expectations** **70-89%**	☐ **Does not Meet Expectations** **Less than 70%**

Student Pharmacist Signature _____

Preceptor Signature _____

Midpoint Student Evaluation Form

Students should review your midpoint evaluation with your preceptor.
Use this opportunity to provide feedback to your preceptor regarding your experience thus far:

1. What objectives, if any, remain to be met?

2. Based on the objectives and rotation requirements, what skills or competencies could be improved?

3. How will such improvements be made during the remainder of the rotation block?

4. Based on the objectives and rotation requirements, identify your strengths and what areas are you doing well or exceeding expectations?

5. What has been the best part of the rotation so far?

6. What comments or suggestions do you have for improving the rotation?

7. Rate your overall ability at the midpoint. **If you rate the student" Does Not Meet"- please contact the Office of Experiential Education immediately to discuss further action: 847-578-8782.**

☐ **Exceeds Expectations** **90-100%**	☐ **Meets Expectations** **70-89%**	☐ **Does not Meet Expectations** **Less than 70%**

Student Pharmacist Signature _____

Preceptor Signature _____

General Presentation Evaluation Form

Student Name:_____ Date: _____

Evaluator Name:_____

Evaluator Role: Role: ☐ Preceptor ☐ Faculty ☐ Student ☐Resident

Topic: _____ Evaluator: _____

Assessment Scale:

2 = Exceeds Competency 1 =Meets Competency 0 = Does not Meet Competency

Criteria	Assessment (circle one)			Comments
Topic relevant to position/audience	0	1	2	
Appropriate analysis of information	0	1	2	
Organized and balanced	0	1	2	
Rate, tone, and volume, with minimal distractors	0	1	2	
Eye contact and interaction with audience	0	1	2	
Body language, mannerisms, and poise	0	1	2	
Handouts and audio-visual aids were appropriate	0	1	2	
Demonstrated in-depth knowledge of topic	0	1	2	
Referenced all sources appropriately	0	1	2	
Answered questions effectively	0	1	2	
Column Totals				**Overall Assessment Score**

☐ Exceeds	☐ Meets	☐ Does not Meet
90-100%	70-89%	Less than 70%
18-20 points	14-17 points	Less than 14 points

Drug Information Request Documentation Form

Drug Information Request Form

Requester Information

Name:	Email:
Date Received:	Time Received: AM/PM

Internal:	*External:*	*How Received:*	*Priority:*
☐ MD/DO	☐ MD/DO	☐ Phone	☐ Urgent
☐ DDS	☐ DDS	☐ Voice Mail	☐ High priority
☐ RN	☐ RN	☐ Email	☐ Routine
☐ Pharmacist	☐ Pharmacist	☐ In person	☐ Low priority
☐ PA/NP	☐ PA/NP	☐ Referred by:	
☐ Other:	☐ Other:		
	☐ General public:		

Original Question/Request

Classification of Request

☐ Administration (route/methods)	☐ Drug standards/legal/ regulatory	☐ Pharmacokinetics
☐ Adverse effects/intolerances	☐ Drug use in special populations	☐ Physiochemical properties
☐ Allergy/cross reactivity	☐ Pharmacokinetics	☐ Poisoning/toxicology
☐ Alternative medicine	☐ Pharmacology	☐ Pregnancy/lactation/ teratogenicity/fertility
☐ Biotechnology/gene therapy	☐ Pharmacodynamics	☐ Product availability/status
☐ Clinical nutrition/ metabolic support	☐ Excipients/compounding/ formulations	☐ Product identification
☐ Compatibility/storage/ stability	☐ Investigational products	☐ Product information
☐ Contraindications/ precautions	☐ Lab test interferences	☐ Study design/protocol development
☐ Cost/ pharmacoeconomics	☐ Monitoring parameters	☐ Other:
☐ Dosing	☐ Lab test interferences	
☐ Drug delivery/devices	☐ Monitoring parameters	
☐ Drug interactions	☐ Nonprescription products	
☐ Drug of choice/therapeutic alternatives/ therapeutic use	☐ Patient education	

Response (referenced)

References (numbered)

Tracking/Follow-Up

Request Received By:	Response Formulated By:	Time Required to Answer:
☐ Literature Provided	☐ Verbal Response	☐ Written Response

Outcome/Follow Up

Drug Information Request Evaluation Form

Drug Information Request Form			
Preceptor Assessment of Drug Information Request: **Student Name_____ Evaluator Name_____**			
Requestor	**Yes**	**No**	**Comments**
Did the student obtain complete demographic information for the person asking the question?	1	0	
Background information:			
Thorough	1	0	
Appropriate to the request	1	0	
Search Strategy References			
Appropriate references used	1	0	
Search was sufficiently comprehensive	1	0	
Is search strategy clearly documented	1	0	
Response was			
Appropriate for situation	1	0	
Sufficient to answer the question	1	0	
Provided in a timely manner	1	0	
Integrated with available patient data	1	0	
Supported by appropriate materials	1	0	
If complete response could not be provided within timeframe requested, was the requestor advised as to the status of the re1uest and the anticipated delivery of the final response?	1	0	
Final GRADE	**/12**	**Overall Comments**	

Adapted from: Malone PM, Kier KL, Stanovich JE, Malone MJ. Appendix 14–4 Evaluation Form for Drug Information Response. In: Malone PM, Kier KL, Stanovich JE, Malone MJ. eds. *Drug Information: A Guide for Pharmacists 5e.* New Yor

☐ **Exceeds** **90-100%** **10-12 points**	☐ **Meets** **70-89%** **8-9 points**	☐ **Does not Meet** **Less than 70%** **Less than 8 points**

Patient-Centered Care

Pharmacists' Patient Care Process (PCPP) and Core Entrustable Professional Activities (EPA) Exercise

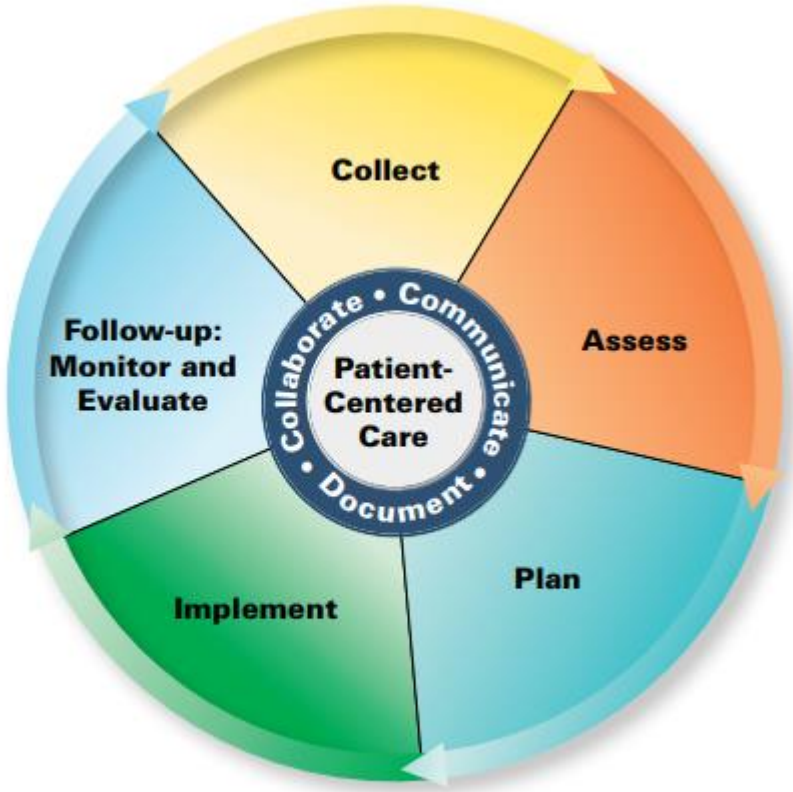

Figure 1: Pharmacists' patient care process

Pharmacists' Patient Care Process

Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes.

Using principles of evidence-based practice, pharmacists:

Collect
The pharmacist assures the collection of the necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient.

Assess
The pharmacist assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care.

Plan
The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.

Implement
The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.

Follow-up: Monitor and Evaluate
The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

Patient-Centered Care

ACTIVITY: This form is now part of the FINAL Evaluation in E*value. For each of the following domains, complete if you *performed* or *observed* and how well it was performed.

DOMAIN		Example Supporting Task	Performed	Observed	How well was this skill performed?			
					BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	MASTERY LEVEL
COLLECT	Collect information to identify a patient's medication-related problems and health-related needs.	•Collect a medical history from a patient or caregiver.						
		•Collect a medication history from a patient or caregiver.						
		•Discuss a patient's experience with medication.						
		•Determine a patient's medication adherence.						
		•Use health records to determine a patient's health-related needs relevant to setting of care and the purpose of the encounter.						
ASSESS	Assess/analyze information to determine the effects of medication therapy, identify medication-related problems, and prioritize health-related needs.	•Assess a patient's signs and symptoms to determine whether the patient can be treated within the scope of practice or requires a referral.						
		•Measure an adult patient's vital signs and interpret the results (e.g., body temperature, pulse rate, respiration rate, and blood pressure).						
		•Interpret laboratory test results.						
		•Identify drug interactions.						
		•Perform a comprehensive medication review for a patient.						
		•Assess a patient's health literacy using a validated screening tool.						
		•Compile a prioritized health-related problem list for a patient.						
		•Evaluate an existing drug therapy regimen.						
PLAN	Establish patient-centered goals and create a care plan for a patient in collaboration with the patient, caregiver(s), and other health professionals that is evidence-based and cost-effective.	•Follow an evidence-based disease management protocol.						
		•Develop a treatment plan with a patient.						
		•Manage drug interactions.						
		•Select monitoring parameters to determine the therapeutic and adverse effects related to the treatment plan.						
		•Determine the appropriate time interval(s) to collect monitoring data.						
		•Create a patient-specific education plan.						
IMPLEMENT	Implement a care plan in collaboration with the patient, caregivers, and other health professionals.	•Write a note that documents the findings, recommendations, and plan from a patient encounter.						
		•Educate a patient regarding the appropriate use of a new medication, device to administer a medication, or self-monitoring test.						
		•Educate a patient on the use of medication adherence aids.						
		•Assist a patient with a behavior change (e.g., use shared decision making and motivational strategies).						
FOLLOW-UP MONITOR & EVALU	Follow-up and monitor a care plan	•Collect monitoring data at the appropriate time interval(s).						
		•Evaluate the selected monitoring parameters to determine the therapeutic and adverse effects related to the treatment plan.						

DOMAIN		Example Supporting Task	Performed	Observed	How well was this skill performed? BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	MASTERY LEVEL
		•Recommend modifications or adjustments to an existing medication therapy regimen based on a patient's response.						
		•Present a patient case to a colleague during a handoff or transition of care.						
INTERPROFESSIONAL TEAM	Collaborate as a member of an interprofessional team.	•Contribute medication-related expertise to the team's work						
		•Evaluate the selected monitoring parameters to determine the therapeutic and adverse effects related to the treatment plan.						
		.• Explain to a patient, caregiver, or professional colleague each team member's role and responsibilities.						
		• Communicate a patient's medication-related problem(s) to another health professional.						
		• Use setting appropriate communication skills when interacting with others						
		• Use consensus building strategies to develop a shared plan of action.						
PPOPULATION HEALTH PROMOTER	Identify patients at risk for prevalent diseases in a population	• Perform a screening assessment to identify patients at risk for prevalent diseases in a population (e.g., hypertension, diabetes, depression).						
	Minimize adverse drug events and medication errors.	• Assist in the identification of underlying system-associated causes of errors. • Report adverse drug events and medication errors to stakeholders.						
	Maximize the appropriate use of medications in a population.	• Perform a medication use evaluation. • Apply cost-benefit, formulary, and/or epidemiology principles to medication related decisions.						
	Ensure that patients have been immunized against vaccine preventable diseases.	• Determine whether a patient is eligible for and has received CDC-recommended immunizations. • Administer and document CDC-recommended immunizations to an adult patient. • Perform basic life support.						
INFORMATION MASTER	Educate patients and professional colleagues regarding the appropriate use of medications.	• Lead a discussion regarding a recently published research manuscript and its application to patient care. • Develop and deliver a brief (less than 1 hour) educational program regarding medication therapy to health professional(s) or lay audience.						
	Use evidence-based information to advance patient care	• Retrieve and analyze scientific literature to make a patient-specific recommendation. • Retrieve and analyze scientific						

DOMAIN		Example Supporting Task	Performed	Observed	How well was this skill performed?			
					BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	MASTERY LEVEL
PRACTICE MANAGER	Oversee the pharmacy operations for an assigned work shift.	Implement pharmacy policies and procedures. • Supervise and coordinate the activities of pharmacy technicians and other support staff. • Assist in training pharmacy technicians and other support staff. • Assist in the evaluation of pharmacy technicians and other support staff. • Identify pharmacy service problems and/or medication safety issues. • Maintain the pharmacy inventory. • Assist in the management of a pharmacy budget. • Interpret pharmacy quality and productivity indicators using continuous improvement quality techniques. • Assist in the preparation for regulatory visits and inspections.						
	Fulfill a medication order.	Enter patient-specific information into an electronic health or pharmacy record system. • Prepare commonly prescribed medications that require basic sterile compounding or basic non-sterile compounding prior to patient use. • Determine if a medication is contraindicated for a patient. • Identify and manage drug interactions. • Determine the patient co-pay or price for a prescription. • Ensure that formulary preferred medications are used when clinically appropriate. • Obtain authorization for a non-preferred medication when clinically appropriate. • Assist a patient to acquire medication(s) through support programs.						
SELF DEVELOPER	Create a written plan for continuous professional development.	• Create and update curriculum vitae, resume, and/or professional portfolio. • Perform a self-evaluation to identify professional strengths and weaknesses.						

•Adapted from: Pharmacists/ Patient Care Process. May 29, 2014 Joint Commission of Pharmacy Practitioners *https://jcpp.net/wp-content/uploads/2016/03/PatientCareProcess-with-supporting-organizations.pdf* Accessed April 2020.
•Adapted from: Core Entrustable Professional Activities for New Pharmacy Graduates *https://www.aacp.org/sites/default/files/2017-10/Appendix1CoreEntrustableProfessionalActivities* Accessed April 2020

Patient Medication History Documentation Form

Patient Name: _____**Patient Date of Birth**:_____

Patient's Pharmacy / Contact: _____

Patient's Physician / Contact Physician: _____

Allergies to Medications: _____

Adherence:

Prescription Medication Name	Dose	Route	Frequency	Last dose date/time	Continue Medication	
					Y	N
					Y	N
					Y	N
					Y	N
					Y	N
					Y	N
Over-the-Counter Medication Name	**Dose**	**Route**	**Frequency**	**Last dose date/time**	**Continue Medication**	
					Y	N
					Y	N
					Y	N
					Y	N
					Y	N
					Y	N

DOCUMENT THE LIST OF MEDICATIONS THE PATIENT IS TAKING AT HOME

Medication Name	Dose	Route	Frequency

List the discrepancies in medications (differences) between the sources of information provided during the simulation. Sources include patient, EMR and retail pharmacy profile:

EMR	PATIENT	MEDICATION PROFILE

Medication Reconciliation Evaluation Form and Student Script

Student: _____ Evaluator: _____

Communication Skills (Check all that apply)

☐ Hello my name is XXX I am a XXX-year pharmacy student?	0.5
☐ I am here to talk to you about your medications, is it ok to talk for a few minutes?	0.5
☐ What is your name and date of birth or address?	0.5
☐ Do you have a list of medications or any bottles with you?	0.5
☐ Which pharmacy do you go to and is it ok to contact them I need to?	0.5
☐ Can you tell me the name of your primary care doctor? Is it ok to contact them if I need to?	0.5
Total Points	/3 points

Comments:

Professional Competence (Check all that apply)

☐ Do you have any allergies to medications?	1
☐ What prescription medications do you take?	1
☐ For each medication, how do you take the medication? ☐ (What dose do you take, what strength, how frequently do you take it). When was your last dose?	1
☐ What do you take the medication for?	1
☐ What over-the-counter medications do you take? (dose, strength, how frequent & last dose?) ☐ What over counter mediations do you take for pain? (e.g. acetaminophen or ibuprofen etc.)	1
☐ Do you take any injections, inhalers, nasal sprays, drops for eyes ears, creams patches lotions or samples	1
☐ What vitamins or herbal supplements do you take?	1
☐ Has your doctor changed or started any new medications recently?	1
☐ Can you describe how frequently you have trouble remembering to take your medications?	1
☐ Do you have any questions for me?	1
Total Points	/10

Comments:

General Communication (Check all that apply)

☐ Requested information in a logical order	0.5
☐ Used words and terms that were easy to understand	0.5
☐ Maintained eye contact with patient	0.5
☐ Asked open-ended questions when appropriate	0.5
☐ Voice was clear and at an appropriate volume	0.5
☐ Seemed friendly and empathetic	0.5
☐ Responded to question's appropriately	0.5
Total Points	/3.5

Comments:

Communication Assessment Overall, I felt the student communicated effectively during the encounter**.**				
☐ **Strongly Disagree (0 Points)**	☐ **Disagree (0 Points)**	☐ **Somewhat Agree (0.5 Points)**	☐ **Agree (1 Point)**	☐ **Strongly Agree (1.5 Points)+**
English Proficiency: Based on the student's spoken English proficiency, I felt confident that we clearly understood one another during the encounter *(i.e., Pronounced words in a way that could be understood; Choice of words was appropriate - this does not pertain to use of medical jargon, but rather to use and context of spoken English/ grammar; Use of sentence structure and phasing was appropriate)***.**				
☐ **NO (0 Points)**		☐ **YES (2 Points)**		

TOTAL POINTS: /20

Comments

☐ **Exceeds** **90-100%** **18-20 points**	☐ **Meets** **70-89%** **14-17 points**	☐ **Does not Meet** **Less than 70%** **Less than 14 points**	1

Patient Counseling Assessment Form

Student Name:_____ Date: _____

Evaluator Name:_____

Evaluator Role: Role: ☐ Preceptor ☐ Faculty ☐ Student ☐Resident

Medication dispensed: _____

CONSULTATION:

Which of the following did the student pharmacist discuss with the patient? *Check all that apply.*

- ☐ Product/ingredient name and intended use
- ☐ Directions for use
- ☐ Adverse effects
- ☐ Drug interactions
- ☐ Duration of use
- ☐ Special precautions
- ☐ Proper storage
- ☐ Self-monitoring of effectiveness
- ☐ Expectations of treatment/When to contact health care provider
- ☐ Nonpharmacologic treatment options

Consultation Assessment (check one):

How well was the medication information communicated to the patient?

☐ Inadequate ☐ Needs Improvement ☐ Satisfactory ☐ Excellent

ASSESSMENT OF INTERACTION AND COMMUNICATION SKILLS: *Check all that apply.*

- ☐ Introduces self
- ☐ Verifies patient and correct prescription
- ☐ Maintained eye contact with the patient
- ☐ Asked open-ended questions when appropriate
- ☐ Clearly communicated information to patient
- ☐ Used terminology appropriate to the patient's level of understanding
- ☐ All important counseling points and key messages were covered
- ☐ Seemed friendly and empathetic
- ☐ Demonstrated an organized approach
- ☐ Gave patient an opportunity to ask questions
- ☐ Adequately assessed patient understanding

Communication Skills (check one):

Exceeds 90-100% 9- 11 items checked	Meets 70-89% 8-10 items checked	Does not Meet Less than 70% Less than 7 items checked

Feedback for the Student Pharmacist:

SOAP Note Assessment Form

SOAP Note Assessment Form		
Student Name	**Evaluator Name**	**Date**

Overall Assessment:	**Yes**	**No**	**N/A**
Note is dated. – 1 point			
Author of note identified. – 1 point			
Chief complaint or reason for encounter listed. – 1 point			
PMH, complete medication list, AND basic demographics included (**ALL** must be present). – 1 point			
Information in Subjective belongs in the subjective section. – 1 point			
Information in Objective belongs in the objective section. – 1 point			
Information in Assessment belongs in the assessment section. – 1 point			
Information in Plan and Follow-Up belongs in the plan and follow-up section. – 1 point			
Information presented is restricted to what is relevant to the diseases or problems addressed below. – 1 point			
Total Points (1 point for each "Yes" or "N/A")			

Disease or Issue (Drug Therapy Problem) Addressed:_____	**Yes**	**No**	**N/A**
Subjective section presents all supportive information relevant to this disease or issue – 1 point			
Objective section presents all supportive information relevant to this disease or issue – 1 point			
Assessment is based on the subjective and objective information – 1 point			
Assessment contains sufficient detail to support the hypothesis – 1 point			
Assessment is therapeutically accurate – 3 points			
Plan is therapeutically accurate – 3 points			
Follow-up is therapeutically accurate – 3 points			
Plan and follow-up completely address the issue or problem – 1 point			
Total Points (full points earned for each "Yes" or "N/A")			

Disease or Issue (Drug Therapy Problem) Addressed:_____	**Yes**	**No**	**N/A**
Subjective section presents all supportive information relevant to this disease or issue – 1 point			
Objective section presents all supportive information relevant to this disease or issue – 1 point			
Assessment is based on the subjective and objective information – 1 point			
Assessment contains sufficient detail to support the hypothesis – 1 point			
Assessment is therapeutically accurate – 3 points			
Plan is therapeutically accurate – 3 points			
Follow-up is therapeutically accurate – 3 points			
Plan and follow-up completely address the issue or problem – 1 point			
Total Points (full points earned for each "Yes" or "N/A")			

Disease or Issue (Drug Therapy Problem) Addressed:_____	**Yes**	**No**	**N/A**
Subjective section presents all supportive information relevant to this disease or issue – 1 point			
Objective section presents all supportive information relevant to this disease or issue – 1 point			
Assessment is based on the subjective and objective information – 1 point			
Assessment contains sufficient detail to support the hypothesis – 1 point			
Assessment is therapeutically accurate – 3 points			
Plan is therapeutically accurate – 3 points			
Follow-up is therapeutically accurate – 3 points			
Plan and follow-up completely address the issue or problem – 1 point			
Total Points (full points earned for each "Yes" or "N/A")			

Comments:

Total Points Earned/Total Points Available: ____/__51___

Adapted from: Fravel MA, Starry MJ, Reist JC. Multi-Focus SOAP Note Writing: Independent Video Activity – Hypertryglyceridemia and Gout Active Learning Exercises. In the American Pharmacist Association Pharmacy Library. The University of Iowa College of Pharmacy, Department of Pharmacy Practice and Science, American Pharmacist's Association Washington DC © 2013 http://www.pharmacylibrary.com.ezproxy.rosalindfranklin.edu:2048/activeLearning/content.aspx?aid=718622 Accessed on May 20, 2015.

☐ **Exceeds** **90-100%** **45-51 points**	☐ **Meets** **70-89%** **35-44 points**	☐ **Does not Meet** **Less than 70%** **35 points**

General Presentation Evaluation Form

Student Name:_____ Date: _____

Evaluator Name:_____

Evaluator Role: Role: ☐ Preceptor ☐ Faculty ☐ Student ☐Resident

Topic: _____ Evaluator: _____

Assessment Scale:

2 = Exceeds Competency 1 =Meets Competency 0 = Does not Meet Competency

Criteria	Assessment (circle one)			Comments
Topic relevant to position/audience	0	1	2	
Appropriate analysis of information	0	1	2	
Organized and balanced	0	1	2	
Rate, tone, and volume, with minimal distractors	0	1	2	
Eye contact and interaction with audience	0	1	2	
Body language, mannerisms, and poise	0	1	2	
Handouts and audio-visual aids were appropriate	0	1	2	
Demonstrated in-depth knowledge of topic	0	1	2	
Referenced all sources appropriately	0	1	2	
Answered questions effectively	0	1	2	
Column Totals				**Overall Assessment Score**

☐ Exceeds	☐ Meets	☐ Does not Meet
90-100%	**70-89%**	**Less than 70%**
18-20 points	**14-17 points**	**Less than 14 points**