Pharmacy Experiential Program (PEP)
Manual

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II. OVERVIEW

The Mission of the Presbyterian College School of Pharmacy:
The mission of Presbyterian College School of Pharmacy is to improve the health of South Carolinians and society in general by developing students with an unwavering ethical foundation who will positively impact the delivery of quality equitable pharmacy care; who will dedicate their lives to community service; and who will provide enlightened leadership in addressing the health care needs of a diverse patient population.

Accreditation

Presbyterian College School of Pharmacy's Doctor of Pharmacy program is accredited by the Accreditation Council for pharmacy Education, 135 South La Salle Street, Suite 4100, Chicago, IL 60503, 312-664-3575, website www.acpe-accredit.org

Purpose of the Pharmacy Experiential Program (PEP) Manual

This manual outlines policies and procedures relevant to the Presbyterian College School of Pharmacy's experiential program. Many of the policies are subject to and governed by our relationships with preceptors and experiential sites and are, thus, subject to change. Every effort will be made to notify students and preceptors of such changes and the manual itself will be updated on an annual basis.

The manual includes a number of appendices that contain information that is known to change from year to year, most notably calendars and schedules that are subject to the academic calendar and other sources such as the PCSP *Bulletin*, the student handbook.

Educational Responsibility

Experiential rotations are part of the students' educational experience. Although not in a typical classroom setting, preceptors and site staff are the instructors for the duration of each introductory or advanced pharmacy practice experience. Rotations are not simply "on the job training" and preceptors may assign projects for the student to work on outside of the normal experiential hours. The preceptor—not the School of Pharmacy—assigns the final grade for each experience based on the student's performance during the rotation.

The preceptor is the licensed pharmacist who makes the final patient care or pharmacy practice decisions. Although the student is expected to formulate treatment plans as part of the educational experience, the student is responsible for relaying these plans to the preceptor prior to making any recommendations to other health care professionals or patients. The preceptor is ultimately responsible for patient care and drug therapy decisions.

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III.   GENERAL POLICIES AND GUIDELINES

A. Definitions
1. Introductory Pharmacy Practice Experience (IPPE): A college-coordinated practical experience program, or *externship*, with the following characteristics:
   a. Conducted outside the classroom in a licensed community or institutional setting
   b. Supervised by a pharmacist or other health care professional preceptor
   c. Introduces students to the health care system and fosters a sense of community involvement
   d. Prepares pharmacy students to assume direct patient care responsibilities
   e. Scheduled in the spring of the P1 year and the fall and spring of the P2 and P3 years
   f. As a longitudinal experience, designed to allow for maximum integration with the didactic curriculum and appropriate reflection
   g. Provides 1-2 hours of academic credit per semester as a component of the pharmacy curriculum

2. Advanced Pharmacy Practice Experience (APPE): A college-coordinated practical experience program, or *externship*, with the following characteristics:
   a. Conducted outside the classroom in a licensed community, institutional or other clinical setting
   b. Supervised by a pharmacist or other health care professional preceptor
   c. Designed to build upon the IPPE in a variety of clinical settings; to develop, refine, and reinforce knowledge from the IPPEs and didactic coursework; and to provide opportunity to care for various types of patients and disease states that students are likely to encounter as a pharmacist
   d. Scheduled for 9 different month-long rotations during the P4 year, beginning in May after the P3 year and continuing through the following April
      (1) Four required rotations
          (a) Acute Care (PHRM 810x)
          (b) Advanced Community (PHRM 812x)
          (c) Advanced Institutional (PHRM 813x)
          (d) Ambulatory Care (PHRM 814x)
      (b) Five elective rotations in a variety of specialties (PHRM 816x-817x)
   e. Provides 4 hours of academic credit per month as a component of the pharmacy curriculum
   f. Required rotations must be supervised by a registered pharmacist although other licensed health care professionals may supervise rotations designated as elective

3. Preceptor: A preceptor is a pharmacist or other health care professional who serves as the educator for the student during the IPPE or APPE. Preceptors must have a current appropriate state license to practice in their profession and be in good standing with their respective boards. They are required to participate in an initial orientation that reviews the school's mission, curriculum, policies and procedures, and IPPE and APPE objectives. Preceptors are also encouraged to attend ongoing continuing education sessions offered through the Presbyterian

College School of Pharmacy (PCSP) Office of Experiential Education or in conjunction with other regional schools of pharmacy.

4. <u>Office of Experiential Education (OEE)</u>: The OEE is the department within the PCSP with the responsibility for the overall planning, institution, and oversight of the IPPE and APPE programs. In collaboration with adjunct faculty preceptors and an advisory committee, the OEE strives to ensure that their efforts meet ACPE standards as well as the goals and objectives of the school. The OEE reports directly to the Dean of the School of Pharmacy.
   a. Assistant Dean for Experiential Education is responsible for:
      (1) Oversight of all aspects of experiential education
      (2) Establishment and maintenance of good working relationships with health-system pharmacy directors, chain pharmacy representatives, independent pharmacists, practicing pharmacists throughout the state, AHEC personnel, the South Carolina Board of Pharmacy, SC Pharmacy Association (SCPhA), and SC Society for Health-System Pharmacists (SCSHP) in order to develop and maintain high quality experiential training programs
      (3) Coordination with the Assistant/Associate Dean for Academic Affairs, the Assistant/Associate Dean for Professional and Student Affairs, and the chairs of the Department of Pharmaceutical and Administrative Sciences and the Department of Pharmacy Practice in areas directly related to the development of the experiential program and its relationship to the admission and professional development of students, to the curriculum, and to the faculty

   b. Director of Experiential Education is responsible for:
      (1) Planning and implementation of the IPPE and APPE programs
      (2) Preceptor development
      (3) Monitoring of quality assurance of the pharmacy practice sites to ensure compliance with ACPE standards as well as the goals and objectives of the school's mission statement
      (4) Approval of service learning projects

   c. Assistant Director of Experiential Education is responsible for:
      (1) Overall management of the OEE to include logistics coordination, assessment management, and communication with preceptor faculty and students
      (2) Administration of E*Value, the web-based rotation management program for students and preceptors
      (3) Oversight of all IPPE and APPE schedules in conjunction with the Director of Experiential Education
      (4) Negotiation and execution of affiliation agreements for experiential sites

   d. Coordinator of Experiential Education is responsible for:
      (1) Monitoring of affiliation agreements to ensure the PCSP and students comply with the contracted requirements
      (2) Monitoring of other site requirements to ensure that IPPE and APPE students complete any pre-rotation requirements
      (3) Student compliance with immunization requirements and coordination of annual PPD testing, drug screens, background investigations, HIPAA and basic life support training, and similar programs

5. Internship versus Externship: In order to sit for the licensing examination in South Carolina, students must have completed 1500 hours under the supervision of a licensed pharmacist. Students will receive up to 1000 hours of practical experience credit upon completion of a PharmD degree program that requires 6 or more years of undergraduate and graduate studies. These hours, arranged by the school's Office of Experiential Education, are considered *externship* hours. The additional 500 hours of practical experience must be gained in retail or institutional pharmacy locations outside of the school curriculum. These hours are considered *internship* hours and do not fall under the purview of the school. A comparison of the two types of hours is depicted in the table below.

Table 1. Internship versus Externship Hours

	Internship Hours	Externship Hours
Assigned by the school of pharmacy		✓
Requires SC intern certificate	✓	✓
Employment set up by student	✓	
Course credit given		✓
Payment for services may be received	✓	
Intern certificate must be kept on hand	✓	✓
Requires student-purchased professional liability insurance	✓	✓
Covered under the school's liability insurance		✓
Requires Notification of Employment form*	✓	
Requires Affidavit of Practical Experience form*	✓	
Minimum of 500 hours required	✓	
Minimum of 1,000 hours required		✓
Hours earned are certified by the school of pharmacy		✓
Under direct supervision of a pharmacist	✓	✓

*All applications and forms are available at the South Carolina Board of Pharmacy website at http://www.llr.state.sc.us/pol/pharmacy/index.asp?file=pub.htm.

No later than mid-November of the first professional year, all pharmacy students must apply to the South Carolina Board of Pharmacy for a pharmacy student intern license. The student must have this document in his/her possession prior to the start of the first IPPE in the spring of that academic year. This document is to be maintained by the student and may be requested by the preceptor at any time while on an IPPE or APPE. This registration is not only important for South Carolina Board of Pharmacy regulatory compliance but will also be required for the student to gain hours toward licensure.

During the fourth professional year, students may be assigned to locations outside of the State of South Carolina. In such instances, it is the responsibility of the student to procure the appropriate license with the respective state board of pharmacy ideally prior to the start of the fourth professional year. Not complying with this policy can result in loss of hours toward licensure and in certain instances, regulatory action by that board of pharmacy. Failure to have an intern license prior to the start of an APPE will delay beginning the APPE and may result in the need to reschedule the APPE, thus affecting graduation.

B. Professionalism Policy (see current *PCSP Bulletin* for more information): Pharmacy students are expected to conduct all aspects of their lives with great intention, honor, respect, and integrity. This includes responsible actions towards themselves, others (fellow and future colleagues, faculty, staff, patients, and the college community), and the profession of pharmacy. Professionalism is a term that encompasses interpersonal, behavioral, and academic/scholastic expectations. Students are expected to conduct themselves at all times in a professional manner.

In the experiential setting, examples of professional conduct are:
1. Referring to your preceptor as Dr., Mr., Ms., or Mrs. as appropriate. Students are discouraged from calling their preceptors by their first names, especially in the presence of patients, other students, technicians, and other professionals.
2. Following the PCSP dress code and/or the site dress and appearance standards.
3. Not allowing personal issues and situations to adversely interfere with the successful completion of the goals of objectives of the rotation.
4. Respecting the preceptor's time and willingness to mentor the student (i.e., not requesting schedule changes or time off for personal reasons).
5. Following all site-specific policies and procedures as well as the rules and standards outlined in the *PCSP Bulletin* to include:
   a. The PCSP Honor Code
   b. The PCSP Code of Professional Conduct
   c. All other published policies, rules, and regulations of the PCSP (to include meeting deadlines set by the Office of Experiential Education)
   d. All federal, state, and local laws

Students will be held accountable for these standards, and professionalism is evaluated on each experiential rotation. Any student who violates any of the foregoing standards is subject to disciplinary action, which may include failure of an experiential course or expulsion, regardless of any action taken by federal and/or civil authorities.

The School of Pharmacy may impose discipline on a student when personal and professional conduct is deemed unbecoming and incompatible with the mission, value system, or expectations of the school, experiential sites, and the expectations of a future pharmacist.

C. The PC Honor Code (see current *PCSP Bulletin*):

"On my honor, I will abstain from all deceit. I will neither give nor receive unacknowledged aid in my academic work, nor will I permit such action by any member of this community. I will respect the persons and property of the community, and will not condone discourteous or dishonest treatment of these by my peers. In my every act, I will seek to maintain a high standard of honesty and truthfulness for myself and for the College."

Each student enrolled in the Presbyterian College School of Pharmacy is expected to be academically honest in his/her learning and presentation of information to School of Pharmacy faculty members and his/her peers. The expectation of being honest includes all aspects of academic work including, but not limited to, the completion of written and/or oral examinations, assignments, and presentations required by and conducted at the site of an experiential rotation.

Presbyterian College students pledge to abstain from all deceit and dishonorable conduct. In addition, such acts as lying, cheating, plagiarism, stealing, and failure to enforce the Honor Code are also considered dishonorable and are, therefore, in violation of the Honor Code.

A student found guilty of an Honor Code violation may receive a grade of "F" in the affected course, may be suspended for one academic year, and/or may be expelled from the college.

D. **E-Professionalism Policy (see current *PCSP Bulletin*):** The e-professionalism policy is designed to protect PCSP students from potentially adverse and long-term effects due to unprofessional behavior in electronic and social media. This policy—located in the *PCSP Bulletin*—extends to all areas related to experiential education. PCSP does not routinely monitor students' electronic communications or postings on social media sites. However, if a student violates the PCSP Code of Professional Conduct in his/her electronic communication or social media and it is brought to the attention of the school, appropriate disciplinary action may be taken. In addition to the general standards of all healthcare professionals and the legal requirements that apply to electronic communication and posting on social media sites, PCSP holds all students responsible for adherence to the PCSP Code of Professional Conduct, and accessible postings on social media, websites, or other electronic means are subject to the same professional standards as any other personal interaction.

1. Pharmacy students should refrain from participating in any of the following actions in emails; on social media sites that include but are not limited to Facebook, Twitter, Instagram, etc.; and in any other electronic media:
   a. "Friending" PCSP faculty and staff, preceptors, and site employees. Exception to this guideline would be the Facebook, Twitter, and other social media sites created for the explicit purpose of sharing information about the school or experiential education (examples: IPPE and APPE Facebook groups).
   b. Discussing issues or complaining about experiential sites, preceptors or other employees, even in general terms.
   c. Complaining about or disparaging patients, even in general terms. Students should keep in mind that simply avoiding the name of a patient may not be sufficient to avoid patient identification.
   d. Posting any content to social media that may reflect poorly upon the pharmacy profession, the school, or the student or that may undermine patient confidence in the care provided.
   e. Continually monitoring privacy settings in social media accounts to ensure the greatest degree of protection for personal information, keeping in mind that privacy settings are not perfect, that information posted online is likely permanent, and that social media sites frequently change their privacy policies.

2. To avoid legal ramifications, students should comply with the following when using social media:
   a. Take all precautions, such as those normally used in public forums, to maintain patient privacy
   b. Avoid online discussions of specific patients even if all identifying information is excluded.
   c. Never post photos of patients or patient body parts on social media without the specific written permission of the patient.
   d. Avoid giving medical advice to or interacting professionally with patients.

e. Never report another student's protected academic information including, but not limited to, course grades, evaluations, examination scores, honor council findings, judicial outcomes, or adverse academic actions.

3. The following actions will constitute a violation of the PCSP Code of Professional Conduct and appropriate disciplinary action may be taken:
   a. Inappropriate Use of Email: Email is considered an official means of communication with students by Presbyterian College faculty, staff, preceptors, and administrators, and the information sent may be important and/or time-sensitive. Thus, pharmacy students, regardless of their experiential location, are expected to check their email frequently and respond as appropriate.
   b. Inappropriate Use of Websites or Other Electronic Applications: Students must not utilize email, text, social media sites or other websites, or applications in a manner that interferes with work or academic commitments. This is especially true during an experiential rotation unless such use is directly related to the subject material presented and is expressly permitted by the preceptor.
   c. Inappropriate Use of Social Media to Communicate: Students should not use social media to communicate with preceptors or employees at experiential sites or PCSP faculty and staff.
   d. Misrepresentation: Students must not represent themselves as another person. In addition, students may not present themselves as an official representative or spokesperson for Presbyterian College or Presbyterian College School of Pharmacy and, instead, should refer members of media outlets to the college's public relations office. If speaking to news sources in an unofficial or casual capability, students should always indicate the views expressed are their own.
   e. Disrespect for Copyright and Other Laws: Students must show proper respect for the laws governing copyright and fair use or fair dealing of copyrighted material owned by others, including Presbyterian College's own copyrights and brands. Students should never quote more than short excerpts of someone else's work and should always attribute such work to the original author or source. Failure to appropriately reference another's work, or plagiarism, is also a violation of the PC Honor Code.
   f. Failure to Notify: When pharmacy students see content posted by colleagues that appears unprofessional, they have a responsibility to bring that content to the attention of the individual so that he/she can remove it and take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the student should report the matter to the PCSP Office of Professional and Student Affairs.

4. The following actions are strongly discouraged as these are considered unprofessional and reflect poorly on the individual, the pharmacy profession, the PCSP School of Pharmacy, and Presbyterian College:
   a. Unconcern for Others' Right to Privacy: Students should maintain the privacy of colleagues, faculty, and staff unless they have been given permission to use the person's likeness or name on their site.
   b. Display of vulgar language
   c. Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation
   d. Presentations or photographs that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual promiscuity

E. **Presbyterian Twelve Competencies:** The School of Pharmacy has 12 general outcomes, referred to as the Presbyterian Twelve Competencies. The PC12 apply to members of the Classes of 2014-2018. See Appendix 1 for a complete description of the PC12 competencies:

1. Communicate Effectively
2. Make Evidence-Based Decisions in the Practice of Pharmacy
3. Excel at Problem Prevention and Solving
4. Dispense Pharmaceuticals
5. Provide Pharmaceutical Care to Individual Patients
6. Provide Pharmaceutical Care to Patient Populations
7. Support Inter-professional Interaction and Teamwork
8. Exercise Good Ethical and Legal Judgment
9. Seek Personal and Professional Growth
10. Demonstrate Management Skills
11. Advance Pharmacy and Health Care
12. Promote Health and Public Welfare

F. **Presbyterian Ten Competencies:** Starting with the Class of 2019, the Presbyterian Ten Competencies will go into effect. See Appendix 2 for a complete description of the PC10 competencies.

1. Communication and Education
2. Evidence-Based Decisions and Problem-Solving
3. Dispensing of Pharmaceuticals
4. Providing Pharmaceutical Care to Patients
5. Interprofessional Interaction and Teamwork
6. Ethical and Legal Judgment
7. Personal and Professional Growth
8. Management Skills
9. Advancement of Pharmacy and Health Care
10. Promotion of Health, Wellness, and Public Welfare

G. **PCSP Experiential Courses:** See Appendix 3 for complete experiential course descriptions.
1. IPPE Courses: Introductory experiences begin in the spring semester of the P1 year. Other factors are illustrated in Table 2. For the current academic year IPPE/APPE schedule, see Appendix 4.

Table 2. Description of IPPE Rotations

	P1 Year	**P2 Year**	**P3 Year**
Semester	Spring	Fall and spring	Fall and spring
Course Designation (academic credit)	PHRM 5201, IPPE I (1)	PHRM 6101, IPPE II (2) PHRM 6201, IPPE III (2)	PHRM 7101, IPPE IV (1) PHRM 7201, IPPE V (2)
Grading	pass/fail	pass/fail	pass/fail
Typical Site	Community	institutional or community	institutional, community, or other*
Location	30 miles from PCSP or student's address	50 miles	70 miles
Session length	Two 6-week sessions	40-hour week-long session at the beginning of the fall term plus two 6-week sessions in both the fall and spring semesters	40-hour week-long session at the beginning of the fall term plus one 6-week session in both the fall and spring semesters**
Days of the Week	Tuesday, Wednesday, or Friday (student assigned to one of these days)	Tuesday or Thursday (student assigned to one of these days)	Thursday
Hours/Day***	4 hours, 1-5 pm	4 hours, 8 am-12 pm	8 hours, 8 am-5 pm
Total Hours	48 hours/semester	88 hours in the fall and 48 hours in the spring	88 hours in the fall and 48 hours in the spring

* "Other" includes a variety of sites including nuclear, dialysis, free medical clinic, home infusion, physician offices, etc.

** Two 6-week-long sessions are available; students are assigned to one session

*** The specific hours that a student is to be on site are set by the preceptor and may be different from the hours published on the academic schedule. Some sites, such as nuclear pharmacies, free medical clinics, and dialysis clinics, are only open during non-traditional hours so students should check E*Value and/or contact their preceptor for more specific information. The hours set by the preceptor should allow time for the student to travel to and from class.

2. APPE Courses: Each month-long APPE rotation carries 4 hours of academic credit and is graded with letter grades A-F. Required APPEs are conducted within a 200-mile radius of Clinton which ensures that the OEE can physically validate that the rotation meets ACPE standards as well as the goals and objectives of the school. Elective APPEs may be held outside of this area, including international sites, upon approval of the OEE.

   APPEs typically begin on the first weekday of the month and end on the last weekday of the month. However, the actual days are subject to preceptor availability and site schedules and may vary from month to month, rotation to rotation.

   The specific hours that a student is to be on site are set by the preceptor. For APPEs, students should anticipate working both traditional and non-traditional hours. Some rotations may involve second and third shift work as well as weekends. Students are expected to follow the schedule set by the preceptor and not ask for alternative shifts (example, four 10-hour days). If there are specific days or times that present an issue for the student, he/she should contact the OEE for assistance before asking the preceptor for time off of the rotation. This includes days for personal circumstances such as family events (including weddings and birth of children), residency interviews, conference attendance, or pre-rotation requirements for an upcoming rotation.

   The list of APPE courses are:
   a. PHRM 8101-8106, Acute Care Pharmacy Practice Experience I-VI
   b. PHRM 8121-8124, Advanced Community Pharmacy Practice Experience I-IV
   c. PHRM 8131-8134, Advanced Institutional Pharmacy Practice Experience I-IV
   d. PHRM 8141-8144, Ambulatory Care Pharmacy Practice Experience I-IV
   e. APPE Electives:
      (1) PHRM 8161-8162, Academic Pharmacy Practice Experience I-II
      (2) PHRM 8163-8165, Administrative Pharmacy Practice Experience I-III
      (3) PHRM 8166-8167, Long Term Care Pharmacy Practice Experience I-II
      (4) PHRM 8168-8169, Medication Use Policy & Informatics I-II
      (5) PHRM 8170-8171, Nuclear Pharmacy Practice Experience I-II
      (6) PHRM 8172-8173, Research Pharmacy Practice Experience I-II
      (7) PHRM 8174-8176, Specialty Pharmacy Practice Experience I-III
      (8) PHRM 8177, Drug Information Pharmacy Practice Experience

IV.   EXPERIENTIAL POLICES AND GUIDELINES

A. Experiential Placement at Employment Site: Under no circumstances may a student receive pay for his/her experiential time. Students may be placed in an IPPE or APPE in a pharmacy where they are employed as long as their experiential education and employee roles are clearly differentiated and do not

overlap. For example, a student may be employed by a health system in a specific capacity and/or in one area of the facility and be assigned to an IPPE or APPE in a clearly distinct capacity or area of the health system. If a problem arises with the preceptor-student relationship during the rotation, the student should notify the OEE to resolve the conflict.

B. Requests for IPPE/APPE Rotations: The availability of preceptors at many sites involves pharmacy directors, educational coordinators, district managers, and, for faculty preceptors, department chairs. Because of the often complex considerations that can affect a preceptor's schedule, students are prohibited from contacting preceptors—including faculty preceptors—to ask for IPPE/APPE rotations. Students are encouraged to seek the counsel of their faculty advisor or other faculty members regarding post-graduation plans and specific information about offered rotations but should not ask faculty and preceptors for specific rotations, including research rotations. Students will have an opportunity to enter preferences for specific preceptors, sites, and specialty APPE rotations as part of the assignments process.

C. Site Assignments:
    1. <u>IPPEs</u>:
        a. Assignments: Fall and spring sessions are assigned by the OEE with consideration given for previous work history and the student's local address. Students may/may not be allowed to select preferences for their IPPE assignments.
        b. Fall Week: Fall Week assignments are typically made using the same process followed for semester sessions. However, in some cases, students may request to complete their fall week IPPE at an out-of-area or out-of-state site. (Note: both out-of-area and out-of-state requests are labeled simply "out of area (OOA).") Guidelines for requesting OOA rotations are as follows:
           (1) The site cannot be a student's current place of employment.
           (2) The OOA site must accept the PCSP's standard affiliation agreement. Sites that require their own agreement may be denied.
           (3) For a site located <u>within South Carolina</u>, the student should contact the OEE to discuss sites that are within the general area desired. If the site is an established one, meaning that there is already an agreement in place, the OEE may contact the site to request a fall week rotation.
           (4) For sites located <u>outside of South Carolina</u> or for new sites that do not meet the criteria in paragraph (3) above, the student must submit the approved form ([Appendix 5](#)) to the OEE by the stated deadline. Requests made via email without the form will not be considered. The student must <u>complete and sign</u> the first page of the OOA form and the potential preceptor must <u>complete and sign</u> the second page. The student/preceptor may fax or email the form to the OEE but it must contain actual—not electronic—signatures. No action will be taken on the request until both pages are received. If both pages are not received by the deadline, the request may be denied.
           (5) The OEE will consider the request based on our ability to execute an affiliation agreement in a timely manner and the availability of other established sites in that area.
           (6) The student is responsible for completing all pre-rotation requirements with only minimal assistance from the OEE. This may include out-of-state internship licensure, physical examinations, additional immunizations, online orientation programs, etc.
           (7) Should a student fail to complete the requirements by the site's deadline, the student may be reassigned to a local site if one is available. If a site is not available, the student may be reassigned to a week-long rotation during the Christmas break. Although every effort

will be made to assign the student to a week-long rotation, the student will not be allowed to advance to the next year until the rotation has been satisfactorily completed.

    c. Changes to Assignments: Students may request to swap rotations with another student provided that the request is made by both students and within 3 business days of the schedule being published.

2. APPEs:

    a. Assignments: The OEE will begin working with students in their third year to prepare for their APPE year. The general time table as is shown in Table 3:

Table 3. Preparations for the APPE Year

Month	Action
September	OEE will survey the P3 students regarding post-graduation plans and areas of interest. This information will be used to develop new sites.
October (after Fall Break)	Any OOA forms will be due to OEE *(see paragraph xx below)*.
October-November	OEE will review and give tentative approval to appropriate OOA forms and will begin work on new affiliation agreements.
November	OEE will meet with P3 students to review optimization process of APPE assignments.
December	Students will enter preferences for their P4 rotations; preferences will close on/about Christmas. E*Value will run the optimization.
January	OEE will receive the first draft of the P4 schedule for review and to make necessary adjustments.
February	OEE will meet individually with each P3 student to review his/her schedule and make additional adjustments.
March	Schedules will be finalized and released to preceptors.
April	OEE will hold final meeting with P3 students.

    b. Out-of-Area (OOA) APPEs: APPE rotations are normally conducted within the State of South Carolina with some allowance for certain sites within North Carolina and Georgia that are within a reasonable driving distance—*approximately* 200 miles or a 3-hour radius—from the School of Pharmacy. This is considered our "local" area. For instances in which a location outside of this area offers a unique opportunity for which there is no similar experience available within our "local" area, the student may request assignment to this OOA site. Guidelines are as follows:

    (1) Student must contact the potential preceptor to determine willingness and availability.

    (2) Student must submit the approved form (Appendix 6) to the OEE by the stated deadline. Requests made via email without the form will not be considered. The student must complete and sign the first page of the OOA form and the potential preceptor must complete and sign the second page. The student/preceptor may fax or email the form to the OEE but it must contain actual—not electronic—signatures. No action will be taken on the request until both pages are received. If both pages are not received by the deadline, the request may be denied.

    (3) Student may not be employed at or receive any payment from the site during the rotation.

(4) The proposed preceptor must be currently affiliated with an ACPE-accredited school of pharmacy as an IPPE/APPE preceptor.

(5) The OOA rotation must be unique compared to experiences already approved and available geographically.

(6) Completing this process does not guarantee approval as other factors will be considered. These factors include, but are not limited to, the availability of similar experiences in the local area, the inability to execute an affiliation agreement in a timely manner, insurance or legal requirements of the site that cannot be mediated without additional costs to the college.

(7) The student is responsible for completing all pre-rotation requirements with only minimal assistance from the OEE. This may include out-of-state internship licensure, physical examinations, additional immunizations, online orientation programs, etc.

(8) Should a student fail to complete the requirements by the site's deadline, the student may be reassigned to a local site if one is available. If a site is not available, the student may be assigned to be off that month with subsequent changes made to future months. Although every effort will be made to rearrange the schedule to accommodate the loss of the OOA site, the OEE cannot guarantee that an appropriate site will be available and the student's graduation may be delayed.

c. Student Requests for Changes to Assignments: Once the APPE schedule is finalized and released to preceptors, only **one** student-initiated request will be allowed during the P4 academic year. The request must be submitted on the appropriate form (Appendix 7) at least **90 days** prior to the start of the rotation to ensure time to contact preceptors and complete pre-rotation requirements. Submitting a change request does not guarantee the request will be granted. The following requests will typically not be granted:

(1) Requests to add or drop an out-of-area rotation

(2) Requests to drop a faculty rotation

(3) Requests to drop/change assignments at Veterans Affairs, Greenville Health System, and certain other institutional sites

d. Other Assignment Changes: Changes initiated by the OEE generally do not count against the one student-initiated request allowed. Such changes include, but are not limited to, those made due to:

(1) The inability of a preceptor to accept a student in the previously assigned month

(2) The student's unsuccessful completion of a rotation for any reason (failing grade, medical leave, etc.)

D. Pre-Rotation Requirements: Students are expected to participate in and maintain current certifications in basic life support, HIPAA, and OSHA requirements governing bloodborne pathogens. Certification opportunities will be provided by the School of Pharmacy and each student is required to achieve a passing grade for each certification. In the event a student is unable to attend an offered workshop, he/she must schedule his/her own certification and must cover any required costs. Additional requirements such as online orientation training may be mandated by specific sites, and information about each site is found in E-Value. In many cases, this training is duplicative of that required by the school and by other experiential sites; however, the student must complete the training required by each site without regard to other requirements. The OEE will advise students of specific dates for training or tests as well as deadlines for submitting pre-rotation requirements. Current minimum requirements include:

1. Bloodborne Pathogens and Universal Precautions Training: At the beginning of each fall semester, P1-P3 students must complete the course in Moodle entitled "Bloodborne Pathogens for Healthcare Training," download a certificate of completion, and submit the certificate to the OEE as directed.

2. Patient Confidentiality: At the beginning of each fall semester, P1-P3 students must complete the course in Moodle entitled "HIPAA Training," download a certificate of completion, and submit the certificate to the OEE as directed.

3. Basic Life Support: The OEE will offer an American Heart Association course in basic life support at the beginning of each fall semester for P1 and P3 students. Certification is valid for two years. Students must be certified in basic life support (BLS) in order to take the APhA Immunization Delivery course offered in the P2 year. The $75 fee for the BLS course is added to the student's tuition/fee invoice upon registration for the appropriate lab courses. If a student does not pass any portion of the training, he/she will have to repeat that portion at his/her own expense.

4. Criminal Background Investigation: As part of the admissions process, students undergo a thorough criminal background check that covers all addresses for the seven years prior to matriculation. Annually, thereafter, the OEE will conduct an update in March or April of each year. The fee for the annual investigation is included in the student's general fee.

5. Drug Testing: At the direction of the OEE, students will undergo a 12-panel drug screening each year. Testing may be done at a specifically assigned time or randomly and is currently being handled by the local office of Accurate Diagnostics on site at the PCSP. The fee for the drug screen is included in the student's general fee.

6. Health Insurance: All students are required to have health insurance. Students are responsible for the costs of their own health insurance. Students will sign a statement at the beginning of each year, acknowledging their responsibility for health insurance.

7. Immunizations: Students are required to show proof of immunity (vaccination records and, in some cases, titers) for the immunizations listed below. See the *PCSP Bulletin* for specific information about the number of immunizations required and the age requirements.
   a. Measles (Rubeolla), Mumps, and Rubella (MMR): Many experiential sites are now requiring a Rubella titer regardless of immunization status; if assigned to such a site, the student must bear the cost of the titer.
   b. Polio (oral or injection). Although the polio vaccine is not typically given to people over the age of 18, the Centers for Disease Control recommend it be given to previously unvaccinated health care workers. Therefore, pharmacy students are required to have it.
   c. Tetanus, Reduced Diphtheria, and Acellular Pertussis (Tdap): Although most students received the diphtheria, tetanus, and pertussis (DPT) vaccine as children, a Tdap is required upon entry to pharmacy school. The Tdap is good for 7-10 years. If a student received a Tdap 7 or more years from their expected date of graduation, they must have a tetanus and diphtheria (Td) booster prior to matriculation.
   d. Varicella: Many experiential sites require a varicella titer regardless of history of disease or previous vaccinations. If a titer is required, the student must bear the cost.
   e. Hepatitis B: Any student who matriculates prior to completing the 3-vaccine series must complete the series by January 1 of the P1 year. If a student does not finish the series, he/she

should have a hepatitis B titer done. Depending on the results, the student may have to completely restart the series. In addition, many sites require proof of immunity in the form of a hepatitis B surface antibody (HBsAg) blood test. The student will bear all costs.

f. Influenza: The PCSP currently provides the vaccine to all students in the fall. If a student is unable to have the vaccine done at the school (typically, P4 students who are living or assigned outside of the immediate area), he/she must get the flu shot elsewhere at his/her own expense by November 1. All students are required to have the influenza vaccine unless written notification by a physician is provided to the OEE.

g. Tuberculosis: The students must be tested annually for tuberculosis (TB). This test can be done by any method appropriate to the student or recommended by the Centers for Disease Control. Because of the requirements of many affiliated sites, students who cannot take the PPD due to a history of the TB vaccine or a previous positive PPD must have a chest x-ray and TB assessment done annually. For some sites, students must have two PPDs prior to the start of the rotation. The PCSP currently provides this test to all students in the spring at no additional cost to the student. Students who cannot take the PPD and must undergo TB screening through other methods as well as students who are assigned to sites that require a second PPD will bear all costs.

8. Liability Insurance: Students enrolled in the School of Pharmacy have liability coverage provided by the college for those activities that are a direct result of student learning, such as participating in experiential learning. This coverage does not extend to outside employment, summer internships or internships independent of School of Pharmacy work, to include internships undertaken to satisfy the hours requirement of the state boards of pharmacy. However, students are strongly encouraged to have in effect at all times private professional liability coverage. In addition, some affiliation agreements may require both college- and student-provided insurance to be in force. The minimum insurance recommended is $1 million per occurrence and $3 million aggregate limit per policy period.

9. Pharmacy Intern License: All students must maintain a current South Carolina Board of Pharmacy internship license and must keep the pocket-sized license with them at all times during IPPEs and APPEs. Some out-of-state sites require that student also have that state's internship license. The student is responsible for applying and paying for this out-of-state licensure.

10. Online Orientation Training: Many sites require the student to complete specific online training programs prior to the start of a rotation. Many health care systems within the state participate in the SC Hospital Association Student Passport Initiative which utilizes the *careLearning* online training program. In addition, Greenville Health System uses a similar but separate online program called *HealthStream*. Students assigned to sites that use either of these programs will be required to complete all training modules on an annual basis. The PCSP bears the cost of enrollment in these two programs. Other rotation sites, such as Veterans Affairs, use similar systems.

11. Student Acknowledgement of Experiential Requirements (Appendix 8): Site affiliation agreements request the school to notify students of certain facts. Examples include advising the student that they are not employees of the site and that students must abide by the site's policies and procedures. Students must sign a statement each year, acknowledging these requirements. The form is updated annually to reflect the requirements of new agreements.

12. <u>Noncompliance with Pre-Rotation Requirements</u>: In the event a student does not meet any of the pre-rotation requirements outlined above or imposed by a site, he/she may encounter a variety of consequences, ranging from reassignment to expulsion from the pharmacy program. Specific examples include:

   a. Criminal Background Investigation: Students should be aware that unresolved arrests and charges—as well as convictions—may appear on their background report. Should an annual report identify an arrest or conviction not previously vetted by the PCSP Admissions Committee, the report will be sent to the PCSP Ethics and Professionalism Committee for review. If the committee feels that the charge is one that will prevent the student from being licensed as a pharmacist, the student may face dismissal from the program. If licensure is not adversely affected, the committee may consider the charge/conviction as a breach of professionalism and handle it as such. Even if the adverse finding will not affect licensure nor is considered a breach of professionalism, the OEE may be required to disclose the criminal background report to the experiential site or preceptor. The site reserves the right to reject a student based on findings on a criminal background report. If this occurs, a student will be reassigned based on availability. Any unexpected reassignment could prevent the student from completing all IPPE/APPE rotations in a timely manner and may delay advancement to the year and/or graduation. In addition, student must report to the OEE within seven calendar days any arrests and/or criminal charges or convictions filed subsequent to completion of the annual background report; failure to do so may result in dismissal from an IPPE/APPE as well as result in a professional misconduct investigation.

   b. Drug Testing:
      (1) Annual Drug Screen Done at the PCSP: Should a student's annual drug screen show a positive result for any test, the following procedures will be followed by the laboratory conducting the tests and the PCSP:
         (a) Upon confirmation of a positive test, the laboratory's medical review officer (MRO) will attempt to contact the student by telephone. The MRO will typically *not* leave a message. A student who has taken a recent drug screen, and especially one who has recently taken medications that might result in a positive test, are advised not to ignore unidentified calls.
         (b) Once the MRO is successful in contacting the student, he/she may request documentation from the student's physician or pharmacy related to the positive drug test.
         (c) If the supplied documentation supports the positive test, the lab will release the drug screen results to the school, showing *negative* results. Thus, the school is not privy to the positive findings or the student's medical history/condition.
         (d) If the MRO is unable to reach the student within a reasonable amount of time (which may vary per laboratory company) or if the documentation received does not support the positive findings, the lab will issue the report to the school, showing a *positive* result on one or more of the drugs screened.
         (e) Upon receipt of a positive report, the OEE will contact the student to determine if he/she has been in contact with the lab.
            (i) If not, the student will be given 10 business days to contact the lab and provide the requested documentation. As applicable, the OEE must receive a revised drug screen report with negative findings within this period of time.
            (ii) If the student confirms that he/she has been in touch with the lab, the OEE will then forward the positive drug report to the PCSP ethics committee for review and action.

(f) If the student is currently on an IPPE/APPE rotation at the time a final positive report is received, the OEE may be required to notify the site of the result. At the site's discretion, the student may be dismissed from the rotation which will typically result in failure of that IPPE/APPE course.

(2) Random or Other Drug Screens Completed at or for an Experiential Site: In some cases, students must undergo additional drug screens as part of pre-rotation requirements or during the course of an experiential rotation at the request of the facility. Positive results will likely cause immediate removal from that site and may adversely affect the student's continued participation in the pharmacy program.

c. Other Requirements: In the event a student does not satisfactorily comply with the requirements of the PCSP experiential education program or of an experiential site, he/she may require reassignment. For any situation that requires reassignment for any reason or cause, the OEE will make their best efforts to locate a new rotation within the time frame of the original assignment. Examples:

(1) Fall Week or Semester IPPE: If a student loses his/her fall week or semester IPPE assignment, he/she will typically be scheduled for a rotation in December after final exams. The duration of the assignment will depend on the session missed: 40 hours for fall week or 24-48 hours for one or both sessions, depending on student's class ranking.

(2) Spring Semester IPPE: If a student loses his/her spring semester IPPE assignment, he/she will typically be scheduled for a rotation in May. The duration of the assignment will be 24-48 hours for one or both sessions, depending on student's class ranking. Third-year students should understand that failure to complete all IPPE requirements and assignments by the end of April will delay the start of their P4 year until June at the earliest. A student in this situation will be considered "off" for the month of May.

(3) APPE: If a student loses an APPE assignment, the OEE will make every effort to locate a substitute assignment. However, it is possible that an appropriate rotation is not available in the months remaining in the P4 year. This could mean that the student would have to complete his/her final APPE in the months of May, June, or even July, delaying graduation until August. Although the student may be allowed to walk in the May graduation ceremony with his/her classmates, he/she will not receive a diploma and will not officially be graduated.

E. Preparations for an IPPE/APPE Rotation:

1. Preceptor Contact: A student should contact his/her preceptor prior to the start of the rotation for the following reasons:

   a. To ensure that the preceptor is expecting the student;
   b. To introduce oneself, providing background about previous, related employment; other experiences; and goals for the rotation (e.g., pre-rotation reflection);
   c. To ask for instructions for the first day such as time of arrival, parking or entered the workplace; lunch break (if applicable); and
   d. To inquire about any pre-rotation "homework" the preceptor would like the student to do such as researching particular topics or reading pertinent materials.

   IPPE students should contact their preceptor at least 2 weeks before the start of the rotation; APPE students, 30 days before the start of the rotation. If the preceptor has not responded after one week, the student should try to reach him/her by telephone. In this fashion, the student may at least confirm that he/she is expected and the arrival time. If the student is still unsuccessful in reaching the preceptor or receives information that suggests that the preceptor is not expecting a student, the student should contact the Director of Experiential Education immediately for further

assistance. The student should email the director, forwarding to her their original email(s) to the preceptor and advising her of the details of any telephone calls.

In most cases, the OEE will already have provided the student's pre-rotation materials to the preceptor and/or to the site's student education or human resources office. This information is usually sent anywhere from 14 to 60 days prior to the start date. But the student should be prepared to provide additional information such as proof of health insurance and the internship license to the preceptor upon arrival.

2. Pre-Rotation Reflection: A pre-rotation reflection—although optional—is a very good tool for the preceptor as it gives him/her some insight into the student's background and goals for a rotation. Topics to include in this reflection include:

a. Student's work or shadowing experience
b. Student's previous IPPE or APPE rotations
c. Expectations for the rotation
d. Interests related to the IPPE or APPE

F. P1 IPPE Activities: To further enhance the students' learning experience, the OEE has developed assignments for students to complete each week. Students are to print, complete, and take the assignments with them each week to review with their preceptor. The assignments are posted on Moodle at the beginning of each IPPE session.

These assignments are not intended to replace anything preceptors are already doing for the rotation but only to augment the IPPE and help meet the learning objectives, especially in regards to the top 200 medications and calculations. The activities will also assist in the assessment of the student's knowledge, motivation, and responsibility and communication skills. In addition, these assignments will provide material for the student to review with any pharmacist on duty if the preceptor of record is not at the site on the day of the rotation.

G. Absences and Attendance:

1. Absences: Students are expected to follow the school's mandated IPPE or APPE schedule as listed in the roster in E*Value. Except in the case of sickness, injury, or emergencies, a student should contact the OEE before contacting the preceptor to request time off or a change in the published schedule. The following types of absences may be encountered:

a. Scheduled Absence: A scheduled absence is one that is typically set by the PCSP. The school will notify the preceptor in advance. Although the *hours* do not typically have to be made up, the *work* missed may have to be completed outside of the rotation. Examples of scheduled absences include but are not limited to:

(1) The October P4 capstone presentation
(2) P1-P3 student attendance at the SCSHP Residency Showcase in the fall
(3) Student attendance at the Pharmacy Day at the Capitol in the spring

b. Excused Absence: To request permission to be away from an experiential site, the student should contact the OEE first and preferably before the start of the rotation. If the reason for the absence is sound, the OEE will allow the student to discuss the proposed absence with the preceptor. Typically, hours missed due to an excused absence must be made up at a day/time determined by and convenient to the preceptor. In the event of illness, injury, or emergency, the student should contact the preceptor first with an information email to the OEE. The

student will then coordinate the missed hours with the preceptor as soon as possible. **If a student must miss more than 2 days due to illness or injury, he/she must notify the OEE who will consult with the preceptor regarding the student's ability to make up the missed hours and to successfully complete the rotation.** Hours should be made up before the end of the semester and before the start of the next rotation, whichever comes first. Examples of excused absences include but are not limited to:

(1) Illness, injury, or emergency
(2) Travel to/from PCSP for capstone
(3) Participation in a PC-sponsored pharmacy career fair
(4) Conference attendance not associated with site activities (conference attendance associated with the IPPE is generally counted as regular IPPE hours)
(5) Residency interviews and travel time
(6) An unavoidable requirement to attend orientation training at a future site (this should be coordinated with the OEE)
(7) Attendance at commencement or other college events as a selected participant (e.g., commencement marshals)
(8) Bereavement leave
(9) Inclement weather at the school (for IPPEs) or the site (for both IPPEs and APPEs).

c. Unexcused Absence: Any absence not determined to be scheduled or excused would be considered an unexcused absence. Preceptors will be asked to notify the PCSP OEE immediately in the event a student does not show up for a rotation at the expected time and has not contacted the preceptor. If an absence is determined to be unexcused after a proper investigation, the student could face serious consequences to include reassignment, failure of the course, professionalism charges, and/or a delay in graduation. Examples include but are not limited to:

(1) Failure to report to work without valid explanation
(2) Away from site due to an unacceptable reason (friend's wedding, vacation, etc.)
(3) Sent home from the site due to violation of dress code, professionalism code, site policies, etc.
(4) Tardiness without valid reason

d. Other Absences: Students should not plan or request absences from their experiential site due to vacation, outside work obligations, homework assignments, or any other responsibilities. Pregnancies and absences due to child birth are subject to the above absence policy. If a pregnancy restricts the student's activities, she should contact the OEE immediately for further guidance.

2. Holidays: IPPE students will follow the holiday schedule of the school, and typically, IPPEs will be set up around school holidays. APPE students do not follow the holiday schedule of the PCSP nor do they automatically get time off for holidays. Instead, they take the holidays allowed by the preceptor based on the site's or the preceptor's schedule.

3. Inclement Weather Policy: Student safety is always paramount and in some cases the school and the site might not be affected by inclement weather but the student may be. In such cases, the student should remain where it is safe until weather conditions improve. Otherwise, the following guidelines apply to inclement weather situations.
   a. IPPEs: If inclement weather occurs when a student is to report to an IPPE and either the site or the school is closed, the student is excused from the rotation. The student should call the

site to determine the site's status and, in the case of a school closing, to inform his/her preceptor of the School's status. An absence due to inclement weather is considered excused and the hours should be made up at the discretion of the preceptor. If the start of school is delayed due to the weather, this delay would also apply to the IPPE within reason. For example, if the school is on a 2-hour delay with classes started at 10:00, the student should contact his/her preceptor and advise that he/she will arrive at 10:00 (road conditions permitting). Depending on the student's class schedule, he/she may be able to stay an extra hour or so to make up some of the lost time. On the other hand, a student who must drive 60 miles to the site would not make that drive only to leave again an hour later. Such delays should be considered on a case-by-case basis.

b. APPEs: If inclement weather occurs when a student is to report to a practice site for an APPE, the student should call the site to determine its status. Students are excused from an APPE only if the site is closed, regardless of the school's status. An absence due to inclement weather is considered excused and the hours should be made up at the discretion of the preceptor. In the event that a student is already at the site when severe weather arrives, the student should discuss the situation with the preceptor to determine if an early departure is necessary or if the student will have to remain in place until the conditions have improved.

H. Professional Attire Policy: Students should follow the professional attire policy outlined in Appendix 9 as well as any additional guidelines set by the site. Of particular note are the following:
1. Scrubs: Students should not wear scrubs unless specifically directed by the preceptor. Some sites may issue scrubs to students or some may allow the student to wear their own scrubs.

2. PCSP White Lab Coat: Students should always wear a clean, pressed PCSP-issued lab coat. P1 students receive a lab coat upon matriculation, and P3 students receive a new lab coat prior to the start of their P4 year. Students may have other opportunities to purchase additional lab costs through student organization fund-raisers, etc. All lab coats must conform to the standards established by PCSP with the correct logo on the right side and must the appropriate length for pharmacy students. In addition, lab coats should be worn buttoned when at an experiential site.

3. Identification: Students are required to wear the PC-issue identification card on their lab coats at all times when on an experiential rotation. Many sites also issue identification cards/badges and students should wear those only when at that site and along with—notin place of—their PC ID card. Students should not wear a site-issued badge at another site.

4. Class Lapel Pin: When on rotation, students should always wear their class lapel pin, affixed to their left lapel. The OEE will issue new pins at the end or beginning of each academic year, as appropriate. The first pin is provided at no charge to the student; students may purchase additional pins from OEE for $1.00.

Figure 1. Class Lapel Pins

5. Shoes: During many rotations, students are required to stand for several hours at a time. Therefore, they should wear comfortable shoes with low heels and closed toes.

6. Hair: Hair should always be styled in a manner that allows the student to appear professional. In some settings, long hair should be secured out of the way. Although facial hair is allowed at the PCSP, some sites do not allow any facial hair or have strict guidelines as to its appearance. For example, Publix allows mustaches that meet certain standards but does not allow beards at all. If a student is concerned that his/her hair style or facial hair might not be acceptable at a site, he/she should ask the preceptor if there are any restrictions.

I. E*Value Instructions for Students:
1. Site Information: Students can access assignments, preceptor contact information, site address, and pre-rotation requirements for each rotation in E*Value. As soon as assignments are released, students should review their rosters as well as site information. Before contacting the preceptor (see paragraph IID(1), Preparations for an IPPE/APPE Rotation), the student should always check E*Value first in the event of assignment changes and to be sure to review the most up-to-date site information. In addition, a student should refer to the site information before contacting the OEE to ask about pre-rotation requirements. See Appendix 10 for instructions on accessing the roster and locating preceptor and site information.

2. Student Biographical Data: Students should maintain updated biographical information in E*Value to include cell phone number and local address (specified as "Home Address" in E*Value).
   a. Home Address: The home address is where the student resides during the school year (Clinton and surrounding areas), the place from which students commute to/from their IPPE sites. The OEE uses home address to "geo-code" IPPE assignments, that is, to assign students to sites within a certain proximity of their home address (approximately 30 miles for P1 students, 50 miles for P2 students, and 70 miles for P3 students) of the site. A student who does not provide his/her home address or has outdated information in E*Value may be assigned to a site that is farther away than necessary. Such assignments often cannot be changed so it is important that the home address is up to date. See Appendix 11 for instructions on updating home address.

   Students should also keep updated their address information in Banner, the student academic system used by the registrar's office. To update address information, contact the Office of Professional and Student Affairs or the registrar's office. The information in E*Value does not automatically transfer to Banner.

   b. Work History: Likewise, the OEE refers to a student's work history when making IPPE assignments to avoid placing a student at a work site and/or with a company for which the student works. Example: a P1 student works at CVS #3357. The OEE will not assign the student to that particular CVS and will, if possible, not assign the student to any CVS. If the student's work history is not maintained, the student may miss a chance to experience new and different opportunities while on IPPEs. See Appendix 11 for instructions on updating work history.

   c. Other Biographical Data: A student is not able to change other information about him/herself in E*Value. If a student's name changes, he/she should provide legal evidence of the change

to the Office of Professional and Student Affairs. That office can update names in both E*Value and Banner as well as addresses in Banner.

3. <u>Time Tracking</u>:
    a. IPPE: IPPE students do not have to track their rotation time in E*Value.
    b. APPE: APPE students must enter all hours spent at the rotation site into E*Value's Time Tracking module (Appendix 12). Special projects—assigned above and beyond the normal requirements of an APPE—should also be recorded. An example of this would be an additional drug information assignment given to make up hours missed due to an excused absence. Homework needed to prepare for each's rotation should not be tracked. Students should also log hours for scheduled and excused absences. APPE rotations average 160 hours/month and it is the student's responsibility to ensure than he/she accumulates the appropriate amount of hours over the course of the fourth year. A student who may fall short of the hours requirement must notify the OEE immediately. Preceptors do not have to verify time. The student is on his/her honor to record his/her time accurately, and the OEE uses the information provided as a measure of quality assurance for sites and to ensure that students meet their hours.

V. GRADING POLICIES AND EVALUATIONS

A. Registration for Experiential Courses: Students are responsible for registering themselves for their IPPE courses as per the time table and procedures established by the registrar's office and the PCSP Office of Academic Affairs. However, the OEE will register students for their APPE courses. In order to be considered full time and eligible for financial aid, P4 students must be enrolled in at least two APPE courses in any given trimester.

B. Midpoint and Final Evaluations of the Student: Preceptors have the opportunity to evaluate students at the midpoint and at the end of each IPPE/APPE. Preceptors will receive an email from E*Value at the beginning of the rotation, notifying them that the midpoint evaluation is available for review and action. A subsequent email will be generated five days before the end of a rotation, alerting the preceptor that the final evaluation is now available. Preceptors can access their evaluations by selecting the Evaluations icon and clicking on "To Be Completed."

Figure 2. Accessing Evaluations
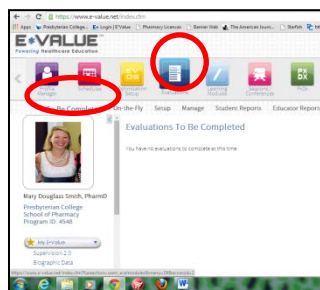
Although a formal midpoint evaluation is not mandatory, preceptors are encouraged to provide feedback in some form to the student throughout the rotation. If a student is not progressing as expected on a rotation, completion of a midpoint evaluation ensures that the OEE has proper documentation to address the issues with the student. The midpoint evaluation, if used, should be submitted by the fourth week of each six-week IPPE session and by the end of the second week of the month-long APPE rotation.

The preceptor should explain the evaluation comments and grade assignment to the student and, in the case of the midpoint evaluation, clarify the expectations for the remainder of the rotation. If the student is at risk of failing the rotation at the midpoint, the preceptor should alert the OEE if assistance is needed for remediation.

A final evaluation is required for both an IPPE and APPE, and the preceptor should complete it on the last day of the rotation in a face-to-face consultation with the student.

See Appendix 13 for current evaluation forms for both IPPEs and APPEs.

C. **Notifications to OEE:** If a student receives a 1 or 2 rating on any question on an IPPE evaluation of, E*Value will automatically send an email notification to the OEE. If a student receives a rating of 1 or 2 on the APPE evaluation for questions relating to knowledge or professionalism, E*Value will alert the OEE. The OEE will contact the student and/or preceptor if needed to discuss the student's performance and offer assistance.

D. **Due Dates for Evaluations:** Evaluations should be completed as follows:
   1. Evaluations Completed by Preceptor:
      a. IPPE Midpoint: fourth week of each six-week IPPE session
      b. IPPE Final: last day of the IPPE rotation but no later than five days after the end
      c. APPE Midpoint: end of the second week of the month-long APPE rotation
      d. APPE Final: last day of the APPE rotation but no later than five days after the end EXCEPT for April rotations: the evaluation *must* be completed **NLT one day** after the end in order to certify the student's academic record for graduation

   2. Evaluations Completed by Student: one week after the end of the rotation (see paragraph G below)

E. **Grading:** The evaluation will generate a grade for the IPPE or APPE. A student must achieve a satisfactory grade for all IPPEs in a semester or a grade of C or better for an APPE to pass the course. The grading scale, which is approved by the faculty of the PC School of Pharmacy, is as follows:

Table 4. IPPE Grading Scale

Rating	Result	Grade
70-100%	Satisfactory or Passing	S
< 70%	Unsatisfactory or Non-Passing	U

Table 5. APPE Grading Scale

Rating	Score	Result	Grade
4.65-5.00	93-100%	Passing	A
4.50-4.64	90-92%	Passing	A-
4.35-4.49	87-89%	Passing	B+
4.15-4.34	83-86%	Passing	B
4.00-4.14	80-82%	Passing	B-
3.85-3.99	77-79%	Passing	C+
3.50-3.84	70-76%	Passing	C
3.00-3.49	60-69%	Non-Passing	D
<3.00	<60%	Non-Passing	F

F. Grades Posted in Banner: The OEE will transfer the final grades from E*Value to Banner, the electronic student academic system at the end of each semester by the deadline set by the registrar's office.

G. Evaluations of the Site and Preceptor by the Student: The student should complete an evaluation of the site as well as a separate evaluation of the preceptor no later than one week after the end of each rotation. In the situation where more than one preceptor provided supervision and instruction, the student is encouraged to evaluation all preceptors but at the least should evaluate the primary preceptor. Evaluations are anonymous and not immediately seen by the preceptor, so candid comments and assessments are encouraged.

H. Appeals Process (see *PCSP Bulletin*): A student may appeal the final IPPE or APPE grade within three business days of the grade being posted in E*Value, following these procedures:
1. The student must first attempt to resolve the issues with the preceptor.
2. If the student and preceptor are unable to resolve the issue, the student must submit a written appeal to the Assistant Dean for Experiential Education within three business days of the grade being posted in E*Value.
3. The Assistant Dean will review the evaluation and interview the student and/or preceptor as needed and will provide his decision to the student in writing within three business days of receiving the appeal.
4. The student then has three business days to appeal the Assistant Dean's decision to the Dean of the School of Pharmacy.
5. The Dean will notify the student of his decision within three business days. The decision of the Dean is final.

If the final grade is determined to be an unsatisfactory one, the student must petition the Academic Standards Committee to request remediation of the IPPE course. If the course is an APPE, the Office of Experiential Education will work with the student to revise his/her P4 schedule to add the additional rotation. This 10th rotation may incur additional tuition/fee charges if it cannot be scheduled by the end of the spring semester. In the event a P4 student fails a second APPE, he/she must successfully petition the Academic Standards Committee before an 11th rotation will be assigned.

Revision Information:

Manual Created/Finalized, 05-01-15

Pharmacy Experiential Program Manual
Appendices

Pharmacy Experiential Program Manual
Appendix 1

Presbyterian Twelve Competencies

PC Twelve Competencies: The PC Twelve competencies are in affect for members of the Classes of 2014-2018.

1. **Communicate Effectively:** The student will demonstrate effective written and verbal communication skills.
2. **Make Evidence-Based Decisions in the Practice of Pharmacy:** The student will demonstrate competency in using drug information skills to promote evidence-based practices.
3. **Excel at Problem Prevention and Solving:** The student will effectively evaluate information and critically think through issues to provide appropriate solutions to drug-related problems.
4. **Dispense Pharmaceuticals:** The student will demonstrate the ability to assess and evaluate the patient's medication orders, effectively procure appropriate products, prepare, dispense, distribute, and if necessary administer medications in an effective manner which contributes to the healing of individual patients.
5. **Provide Pharmaceutical Care to Individual Patients:** The student will utilize appropriate clinical judgment to provide optimal pharmaceutical care to patients with common disease states.
6. **Provide Pharmaceutical Care to Patient Populations:** The student will demonstrate therapeutic guidance by responding to the many factors that influence health, disease and disability, besides those of a biological nature.
7. **Support Inter-professional Interaction and Teamwork:** The student will demonstrate effective interpersonal and team behaviors in a variety of social and professional situations and circumstances
8. **Exercise Good Ethical and Legal Judgment:** The student will recognize the ethical dimensions of pharmacy practice and health policy; identify alternatives in difficult ethical choices; systematically analyze the conflicting considerations supporting different alternatives; and formulate, defend, and effectively carry out a course of action that takes account of these ethical complexities.
9. **Seek Personal and Professional Growth:** The student will establish personal values and priorities in order to balance personal and professional commitments. The student will actively set clear learning goals, pursue them, and apply the knowledge gained to the practice of his/her profession.
10. **Demonstrate Management Skills:** The student will demonstrate the ability to manage human, financial and other resources related to the practice of pharmacy.
11. **Advance Pharmacy and Health Care:** The student will be able to identify issues of public, professional and institutional concern and works for the common good to bring resolution.
12. **Promote Health and Public Welfare:** The student will be involved in community and professional efforts to promote health for the public welfare.

Pharmacy Experiential Program Manual
Appendix 2

Presbyterian Ten Competencies

PC Ten Competencies: Starting with the Class of 2019, the PC Ten competencies will go into effect.

1. **Communication and Education:** The student will effectively communicate verbally and nonverbally when interacting with an individual, group, or organization.

   <u>Expected Outcomes:</u> In communication and education, each student will be able to:
   - Respect each patient as a person in order to build a trusting relationship
   - Assess a patient's health literacy and modify communication strategies to meet the patient's needs
   - Utilize effective patient education strategies, delivering information that is patient-specific and tailored to the individual's healthcare needs and values
   - Exhibit integrity, altruism, and cultural sensitivity
   - Value diverse opinions
   - Identify an appropriate interpreter to use as necessary
   - Display empathy
   - Maintain confidentiality
   - Tactfully and respectfully handle difficult patients and situations
   - Conform to professional ethical guidelines
   - Communicate and educate effectively in a professional setting with patients, families, peers, technicians, interns, pharmacy students, other health care professionals, and legislators
   - Identify a societal need for health education
   - Conduct a learning-needs assessment of constituents who would benefit from pharmacist-delivered education
   - Demonstrate the ability to coordinate educational efforts with other health care providers, when appropriate, to ensure a consistent, comprehensive, and team-based encounter
   - Ensure instructional content contains the most current information relevant and is adapted for delivery to the intended audience
   - Assess understanding of provided education and clarify as needed
   - Select the most effective and enduring strategies for providing written and/or oral communication and education
   - Listen attentively in order to comprehend what is being said while engaging in patient, active listening without bias
   - Read proficiently, being able to translate, comprehend and apply information

2. **Evidence-Based Decisions and Problem Solving:** The student will demonstrate competency in using drug information skills to promote evidence-based practice. The student will effectively evaluate information and critically think through issues to provide appropriate solutions to drug-related problems.

Expected Outcomes: In using evidenced-based decisions and problem-solving skills in the practice of pharmacy, the student will be able to:
- Critically evaluate relevant literature
- Assess appropriateness of methodologies and conclusions using the concepts and principles of scientific methodology
- Identify issues, opportunities, or problems relevant to current pharmacy practice in order to formulate research questions/hypotheses
- Critically evaluate research protocols as well as analyze and interpret data to reach conclusions about the subject matter
- Communicate results of research
- Exercise proper use of the problem-solving process
- Recognize a problem
- Frame the problem clearly and objectively
- Organize elements appropriately
- Focus on issues having the greatest impact
- Define severity and extent of problem
- Form potential solutions
- Apply prior knowledge to a new experience
- Identify new information required to solve the problem
- Recognize limitations of prior experience or knowledge
- Recognize assumptions and understand their uses, drawbacks, and implications
- Recall appropriate pharmaceutical data to support process
- Know and present indications for a given drug, its mechanism of action, its half-life and dosage, and therapeutic application in pharmacy practice situations
- Recognize potential drug interactions and side effects
- State dietary implications for specific interventions
- Collect and integrate necessary information
- Identify sources of information
- Efficiently use sources to obtain information
- Identify areas of need for research to generate new information when necessary or possible
- Integrate and interpret factual information
- Evaluate information with respect to potential recommendations
- Formulate a plan of action using creative decision making to solve a problem
- Utilize creative and innovative strategies to determine a solution
- Recognize internal and external factors influencing plan
- Identify potential barriers
- Anticipate opposition and develop alternative strategies
- Consider potential adverse and beneficial secondary effects of plan

- Implement a solution
- Communicate confidently and effectively
- Take action
- Utilize a "team approach" when appropriate
- Plan/carry out long-term follow up and reevaluation
- Ascertain effectiveness of an applied intervention
- Determine if process has been altered by therapy
- Employ concrete parameters and indicators of therapeutic success
- Recognize that continued reevaluation of the therapeutic process is necessary
- Practice application of content and process
- Communicate the rationale for the chosen therapy and expected outcomes

3. **Dispensing of Pharmaceuticals:** The student will demonstrate the ability to assess and evaluate a patient's medication orders; effectively procure appropriate products; and prepare, dispense, distribute, and, if necessary, administer medications in an effective manner in order to contribute to beneficial health outcomes and management. The student will provide accurate and appropriate counseling to a patient on the use of the medication.

   Expected Outcomes: In dispensing pharmaceuticals, the student will be able to:
   - Interpret the medication order
   - Verbally receive a prescription or drug order
   - Interpret information on a written or electronic prescription/medication order
   - Evaluate the medication order
   - Given a prescription or medication order or relevant information about a disease state, demonstrate the ability to make a professional judgment regarding whether the prescription or medication order should be dispensed
   - Screen patient database for drug allergies, adverse reactions, and/or contraindications
   - Complete and interpret patient medication record systems, utilizing manual and/or electronic systems
   - Identify and remedy interactions or contraindications with allergies; with genetic, environmental, or biosocial factors (e.g., alcoholic beverage consumption, smoking); with special diets/dietary practices; or in special patient populations (e.g., geriatric, pediatric, pregnant, post-surgical, ileostomy)
   - Identify a drug or product ingredient in a prescription/medication order by its generic, trade, and common name; usual dosage range; contraindications; and directions and cautions for use and storage requirements
   - Determine if the dose or dosage regimen prescribed is appropriate and accurate for the patient and the condition being treated to achieve the desired pharmacotherapeutic response
   - Use patient-specific data collected to make a professional judgment about filling or refilling a prescription
   - Interpret, question, clarify, verify, and validate all drug-related orders
   - Prepare prescription order

- Identify, select, and determine appropriate ingredients and equipment to extemporaneously prepare dosage forms
- Extemporaneously compound, using relevant physico-chemical and pharmaceutical principles, the following dosage forms:
  o Topical ointments, creams, lotions, and medicated sticks
  o Suspensions
  o Solutions (e.g. enteral, parenteral)
  o Suppositories
  o Oral solid dosage forms (e.g., capsules, powders, lozenges)
  o Intravenous preparations
- Prepare prescription labeling, including auxiliary labels and warnings, that meet legal and professional standards of administration directions
- Calculate the rate of administration of a drug when given appropriate data
- Counsel the patient, utilizing effective communication and education methods
- Explain the importance, nature, and scope of pharmacotherapeutic plans to a patient
- Advise a patient and/or caregiver on the appropriate administration, cautions, side effects, and storage requirements of his/her prescribed medication
- Advise a patient as to methods which enhance the therapeutic effectiveness of medications
- Demonstrate the use of special devices required to administer drugs, including parenterals

4. **Providing Pharmaceutical Care to Patients:** The student will exercise appropriate clinical judgment to provide optimal pharmaceutical care to patients with common disease states. The student will provide therapeutic guidance by responding to the many factors that influence health, disease, and disability, besides those of a biological nature. These factors include socio-cultural, familial, psychological, economic, environmental, legal, political, and spiritual aspects of health care seekers and of health care delivery. Through sensitivity to the interrelationships of individuals and their communities, the student will respond to the broader context of pharmacy practice.

   Expected Outcomes: In providing pharmaceutical care for the individual patient, the student will be able to:
   - Review the patient profile, medical chart, or records
   - Use the patient profile, chart, and records to identify information pertinent to decisions on desired therapeutic outcomes
   - Identify the types of information contained in the medical record/profile
   - Describe the location of types of information in varying formats used in profiles/records
   - Act legally and ethically to safeguard the confidentiality of patient information
   - Explain the legal guidelines for disclosing patient information contained in varying types of information systems
   - Discuss professional and ethical issues for pharmacists in safeguarding patient information
   - Identify potential threats to patient confidentiality and suggest systems approaches for minimizing these threats

- Determine legal and ethical issues related to patient data
- Explain the interrelationships of patient medical record data
- Identify categories of information to use in making drug therapy decisions
- Identify alternative sources of patient information
- Explain the relationships of categories of data pertinent to decisions about desired drug therapy outcomes
- Build a patient-specific database
- Identify the types of information the pharmacist needs for a patient-specific database (e.g.: specific information on demographics or administrative issues)
- Determine medical history
- Determine drug therapy
- Determine behavioral/lifestyle
- Determine social/economic background
- Recognize the difference between subjective and objective data
- Discriminate between reliable and unreliable patient information sources
- Describe the types of information provided by patients, care givers, other health care professionals
- Formulate an organized interview approach
- Describe points to consider when organizing an interview
- Use open- and closed-ended questions to elicit information
- Demonstrate probing techniques
- Use nonverbal communication skills appropriately
- Record and modify a patient-specific database
- Design and recommend pharmacist's care plan
- Identify a patient's health care needs
- Define health care needs
- Prioritize health care needs
- Determine desired outcomes of drug therapy:
  - Care of a patient's disease
  - Eliminate or reduce symptoms
  - Arrest or slow a disease process
  - Prevent a disease or symptomatology
- Classify medication-related problems:
  - Untreated indications
  - Improper drug selection
  - Failure to receive medication
  - Over dosage
  - Sub-therapeutic dosage
  - Adverse drug reactions
  - Drug interactions (e.g., drug-drug, drug-disease, drug-device, drug-lab test, drug-nutrient/food)
  - Medication use without indication
  - Therapeutic duplications
- Assess quality of life implications
- Identify and prioritize pharmacotherapeutic goals

- Recommend evidence-based therapy that takes into consideration social determinants of care
- Recommend therapy that appropriately incorporates the patient's cultural beliefs and practices
- Design a drug-therapy monitoring plan
- Identify and encourage the patient's role and responsibilities for his/her pharmaceutical care and health care needs
- Make a written recommendation utilizing effective communication and education skills
- Manage health care needs of patients during transitions of care
- Monitor the pharmacist's care plan
- Collect monitoring data and assess reliability and validity of collected data
- Document changes to the pharmacist's care plan in the patient medical record
- Design prevention, intervention, and educational strategies for individuals to manage chronic disease and improve health and wellness
- Describe systematic preventive care, using risk assessment, risk reduction, screening, education, and immunizations
- Provide prevention, intervention, and educational strategies for individuals to improve health and wellness

5. **Interprofessional Interaction and Teamwork:** The student will demonstrate effective interprofessional and team behaviors in a variety of social and professional situations and circumstances. The student will perform effectively on teams and in different team roles in a variety of settings.

Expected Outcomes:
- Describe a shared system of value and ethics that promotes professional interactions and behaviors that are essential for maximum personal effectiveness and interprofessionality
- Place the interests of patients and populations at the center of health care delivery
- Include the patient or his or her representative(s) as the central part of the interprofessional team
- Describe team development, along with the roles and practices of an effective team
- Identify individual strengths and weaknesses to promote effective teamwork
- Assess the appropriateness of personal interaction behaviors and those of others in interprofessional team-based care and leadership situations
- Demonstrate competence, confidence, and flexibility in professional interactions and group settings
- Respect a patient's dignity and privacy in the delivery of team-based care
- Maintain confidentiality during the delivery of team-based care
- Distinguish and respect the personal and cultural differences that exist with both patients and professionals
- Develop trusting relationships with members of the team
- Respond proactively and appropriately to ethical issues that arise
- Apply personal interaction behaviors within professional situations

- Explain the role and responsibility of each member of the team as well as one's own role to the team
- Engage the team to develop strategies to meet specific patient-care needs
- Utilize each team member's unique and complementary abilities to optimize patient care
- Use appropriate interpersonal and inter-group behaviors (such as listening actively and soliciting feedback) during professional interactions with patients, other health care providers, and the public
- Adapt interpersonal and inter-group behaviors to differing professional environments
- Contribute opinions, insights, and information confidently and persuasively during the health care team decision-making process while identifying one's own limitations
- Assume and apply active leadership positions and/or participate in community matters that involve human health and civic concerns that are not health-related
- Demonstrate confidence and initiative for implementing change when desired
- Continue to develop as a professional and as a member of an interprofessional team
- Function independently and collaborate effectively in interprofessional situations
- Use appropriate interaction behaviors (such as listening actively, soliciting feedback, and encouraging collaboration) in interpersonal and leadership situations
- Communicate one's knowledge to the team with confidence, clarity, and respect using common terminology easy for all members of the team to understand in a timely manner
- Maintain competence in and use effective communication skills in all avenues of communication such as technology, information systems, and face-to-face interactions
- Employ diverse opinions and feedback of the group to enhance personal effectiveness in interpersonal, inter-group, and leadership situations
- Contribute opinions, insights, information, and leadership confidently and persuasively during group decision-making situations
- Assume leadership positions and/or participate in community/campus matters that involve human health and concerns that are not health-related
- Be able to resolve conflict in ways which respect the values, opinions, and goals of the team and result in the optimal patient-centered care while maintaining the culture of a true interprofessional team
- Share accountability within the team and use quality improvement processes to improve upon failures

6. **Ethical and Legal Judgment:** The student will recognize the ethical dimensions of pharmacy practice and health policy; identify alternatives in difficult ethical choices; analyze systematically the conflicting considerations supporting different alternatives; and formulate, defend, and effectively carry out a course of action that takes account of these ethical complexities. The student will combine a willingness to recognize the nature of the value systems of patients and others with commitment to his/her own system and the ethical choices necessary to maintain his/her own ethical integrity.

- **Expected Outcomes:** In using the ethical judgment process, each student will be able to: Understand basic ethical concepts and applies them in moral reasoning in the pharmacy and health care context

- Recognize the ethical dimensions of pharmacy including:
  - Treatment of individual patients
  - Issues in health policy
  - Relations with other health care professionals
- Identify the conflicting ethical considerations in a particular ethical choice:
  - Values affected by alternative courses of action
  - Relevant ethical obligations or duties
  - Considerations of justice
  - Standards of ethical conduct and quality of care for team-based care
  - Patient's autonomy and ability to make decisions
- Systematically analyze and defend ethical choices in the treatment of an individual patient and/or patient population, including:
  - Alternative courses of action
  - Patient's treatment and care
  - Ethical values, obligations or duties, and rights implicated in the patient's treatment
- Articulate and analyze the ethical issues in health policy:
  - How institutional frameworks and practices affect patient care
  - Different ethical considerations bearing on particular health policy issues and choices
  - Responsibilities of health care professionals in health policy
- Articulate and analyze the ethical issues in relations with other health care professionals
- Recognize the ethical norms, rules, and guidelines developed by professional groups and societies
- Identify relevant federal and state pharmacy law affecting ethical issues and choices;
- Identify situations where ethics and law conflict
- Know the major variations between federal and state law governing health care
- Understand the responsibilities and duties the law imposes on health care professionals
- Implement skills necessary to implement ethical choices in pharmacy practice
- Demonstrate confident and effective communication skills
- Understand when other persons, expertise, or resources are needed in resolution of ethical choices
- Effectively integrate ethical skills in the care of patients, including the ability to:
  - Demonstrate integrity and trustworthiness in patient encounters
  - Assess a patient's competence
  - Obtain a valid consent or refusal of treatment
  - Determine how to proceed if the patient is incompetent
  - Decide when it is morally justified to withhold information from a patient
- Care for patients with a poor prognosis, including patients who are terminally ill, in a respectful and ethically sensitive manner
- Integrate considerations of equity into care of one's patients

7. **Personal and Professional Growth:** The student will approach the practice of pharmacy with awareness of his/her limits, strengths, weaknesses, and personal vulnerabilities. The student will establish personal values, priorities, and coping strategies in order to balance personal and professional commitments. The student will appropriately respond to

constructive criticism. The student will develop a lifelong interest in learning and will actively set clear learning goals, pursue them, and apply the knowledge gained to the practice of his/her profession.

Expected Outcomes: The student will demonstrate personal and professional growth as shown by their ability to:
- Recognize personal strengths and limitations relevant to his/her practice of pharmacy
- Identify preferred learning style
- Identify strengths and weakness in skills, knowledge, and abilities
- Reflect on performance as an individual and team member to improve performance
- Demonstrate help-seeking behaviors when necessary to enhance academic and professional excellence
- Develop new ideas and creative approaches to overcome barriers and advance the pharmacy profession
- Demonstrate responsibility for creating and achieving shared goals
- Recognize when group interactions may be beneficial or detrimental to individual performance
- Identify characteristics that reflect leadership
- Identify the history of a team (i.e., successes and failures) before implementing changes
- Develop relationships, value diverse opinions, and understand individual strengths and weaknesses to promote teamwork and improve health care and learning
- Persuasively communicate goals to a team to help build consensus
- Empower team members by actively listening, gathering input, and fostering collaboration
- Determine one's personal values and beliefs relevant to the practice of pharmacy
- Describe one's values and integrity concerning patient care and interactions
- State and explain personal views on controversial topics in medicine, e.g., the right to die, physician-assisted suicide, abortion, genetic testing, etc.
- Describe his/her view of a pharmacist's ideal relationship and interactions with other health professionals and the community
- Identify and address emotional, personal, and health-related problems that might affect the individual's health, well-being, or professional capabilities
- Respond appropriately and respectfully to constructive criticism from patients, peers, and supervisors
- Cope effectively with stresses likely to occur during pharmacy training and practice
- Describe one's own physical and behavioral responses to stress and acknowledge its onset or occurrence
- Demonstrate mature, constructive coping strategies for managing stress and conflict
- Identify interpersonal situations that are stressful and take alternative approaches to handling or avoiding them when possible
- Apply time management skills to the tasks of a student or pharmacist
- Develop an intellectual curiosity that will help the individual develop life-long learning habits
- Utilize metacognitive skills to understand the importance of learning and to develop one's personal learning abilities

- Identify sources of relevant pharmacy literature and develop a habit of keeping oneself updated of new resources
- Identify opportunities for further intellectual growth, professional, and/or interprofessional development, e.g., additional courses, continuing education programs, workshops
- Demonstrate initiative and accountability in maintaining one's skills which are necessary to contributing to the practice of pharmacy

8. **Management Skills:** The student will be able to effectively manage human, financial, technological, and physical resources related to the practice of pharmacy.

Expected Outcomes: In management, the student will be able to:
- Recognize when information is needed and be able to generate, locate, evaluate, and apply the needed necessary information effectively
- Use a systematic methodology for the collection, storage, retrieval, and dissemination of data (e.g., patient information, drug information, new prescriptions/medication orders, drug prices)
- Explain the importance of and procedures for maintaining and assuring the integrity and security of information systems
- Manage the practice environment
- Assess and reassess the needs of practice within its social, economic, and political context to keep practice relevant and consistent with current societal needs
- Apply the current concepts of quality assurance to pharmacy practice and/or assist in the development of a mission statement to provide guidance for the operation of the practice
- Establish goals and objectives to reflect a mission statement
- Develop an innovative business plan for a potential new business or service
- Identify how to obtain and manage resources needed to achieve organizational goals and objectives and know how to obtain and manage these resources
- Develop and/or refine marketing strategies
- Evaluate the use of various organizational, communication, and monitoring structures and policies, procedures, and processes that will impact a given type of pharmacy practice
- Describe characteristics of a practice site which complies with legal and regulatory requirements and professional ideals and standards (e.g., Americans with Disabilities Act, state board of pharmacy, Joint Commission on the Accreditation of Healthcare Organizations)
- Articulate and defend a plan to develop, implement, and maintain security and emergency management systems
- Efficiently direct professional support staff for effective professional practice
- Discuss current philosophies and the importance of appropriate training, supervising, and assessment of professional and support staff
- Identify potential occupational health and safety issues risks relating to personnel
- Explain the legislation and regulations relating to personnel management
- Appropriately manage financial aspects of the practice environment
- Explain the use of basic accounting documents

- Develop a basic budget plan
- Use quality and cost/benefit concepts to develop drug product selection guidelines for multisource products (e.g., generic substitutions)
- Utilize systems for third-party payments
- Describe policies and procedures for acquisition, payment, and return of pharmaceuticals, durable medical equipment, devices, and supplies
- Evaluate the principles of inventory control and the use of inventory control systems for pharmaceuticals, including controlled substances and investigational drugs, durable medical equipment, devices, and supplies in compliance with legal and regulatory requirements and professional standards
- Develop policies and procedures for the selection, preparing, packaging, dispensing, distribution, and quality assurance of pharmaceutical products, delivery devices, and supplies
- Compile a quality control plan for professional practice
- Recognize that errors occur within a practice environment
- Discuss why an environment that encourages error reporting and allows for growth and learning to develop from reported errors is beneficial to patient care
- Document and assess medication errors to determine root cause

9. **Advancement of Pharmacy and Health Care:** The student will be able to identify issues of public, professional, and institutional concern and will work for the common good to bring resolution.

   Expected Outcomes: In advancing the profession and promoting good health, the student will be able to:
   - Identify issues of public, professional, and institutional policy and potential personal or collaborative interventions to influence them
   - Demonstrate self-awareness of personal vested interests and values related to health care
   - Demonstrate awareness of societal values, public debate and power structures related to health care
   - Interpret and explain the relevance of public policy principles to pharmacy
   - Explain the policy development process including the roles and impact of interactions between public/institutional stakeholders
   - Outline core values, vested interests and attitudes shared by subsets of policy makers (for example: moral, economic, and ethical values such as human dignity, cultural sensitivity, equitable access to health care, and cost-analysis issues)
   - Explain the interactions among various groups and processes involved with creating/ influencing public and institutional policy
   - Contribute to the activities of the licensing body to enhance and support the self-regulatory aspects of the profession
   - Participate in the review and making of drug-use policy for the population served
   - Develop, implement, and manage a formulary and therapeutic exchange system (e.g., serve on pharmacy and therapeutics committees)
   - Develop criteria and procedures for conduct of drug-use evaluations

- Justify treatment/drug-use protocols in terms of ensuring optimal therapeutic effect and cost effectiveness
- Describe and validate a system by which adverse drug reactions are documented, analyzed, and evaluated

10. Promotion of Health, Wellness, and Public Welfare: The student will be involved in community and professional efforts to promote health, wellness, and public welfare. The student will provide guidance by responding to the social determinants of health. These factors include socio-cultural, familial, psychological, economic, environmental, legal, political, and spiritual aspects of health care seekers and of health care delivery. Through sensitivity to the interrelationships of individuals and their communities, the student will respond to the broader context of pharmacy practice.

<u>**Expected Outcomes:**</u> In promoting health, wellness, and public welfare, the student will be able to:
- Recognize ways to impact various levels of public health
- Assess the health care status and needs of a targeted patient population
- Develop and provide an evidence-based approach that considers the cost, care, access, and satisfaction needs of a targeted patient population
- Participate in population health management by evaluating personal, social, economic, and environmental conditions to maximize health and wellness
- Inquire about value systems and lifestyles in a non-judgmental fashion
- Attribute proper importance to identified socioeconomic and cultural issues of health care delivery
- Identify barriers to access of health care resources
- Become familiar with role of community resources (i.e.; home health, patient assistance programs, etc.) and services provided and communicate the availability of community resources to patients and their families
- Document value of pharmaceutical care in the managed care environment
- Act as an advocate for better health for patients and the community
- Appreciate the importance of the many non-biological factors that influence health, disease, disability, and access to care
- Comprehend appropriate teaching methods to meet the learning needs of individual clients, peers or health care providers and groups of clients or peers
- Know about basic group processes and technology to support learning
- Assess effectiveness and efficiency of techniques that monitor health care
- Demonstrate an attitude that is respectful of different cultures
- Utilize appropriate resources in the community that empower the patient and may provide support for reducing social causes of disease
- Match patients' needs to appropriate community resources
- Arrange referrals to community resources for patients and their families
- Cooperate with community resources through follow-up efforts and support
- Assist patients and their families in navigating through complex health care system
- Support community activities designed to improve health

- Support social and political activities to improve access to health care
- Place patient's and community's welfare above narrow self-interest
- Encourage actions designed to enhance the total well-being of individuals, families and communities

Pharmacy Experiential Program Manual
Appendix 3

Experiential Course Descriptions
(excerpt from the PCSP Bulletin)

Introductory Pharmacy Practice Experience (IPPE) Courses: The introductory courses are designed to introduce students to the health care system and foster a sense of community involvement. Early exposure to practice will make didactic instruction more relevant to civic involvement, humanistic care of patients, and social awareness of unmet medical needs. Unmet medical needs include: companionship, patient care, medication-related services, and screening for medical problems.

First Professional Year

PHRM 5201, IPPE I   Potential practice sites include retail chain or retail independent community pharmacy locations. This course carries one hour of academic credit and is graded as pass/fail. (Spring P1 year; one 4-hour day per week x 12 weeks during the semester)

Second Professional Year

PHRM 6101, IPPE II   Potential practice sites include hospitals and hospice facilities; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. This course carries two hours of academic credit and is graded as pass/fail. (Fall P2 year; 40 hours during the first week of the semester plus one 4-hour day per week x 12 weeks during the semester)

PHRM 6201, IPPE III   Potential practice sites include hospitals and hospice facilities; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. This course carries two hours of academic credit and is graded as pass/fail. (Spring P2 year; one 4-hour day per week x 12 weeks during the semester)

Third Professional Year

PHRM 7101, IPPE IV   Potential practice sites include hospitals and hospice facilities; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. This course carries two hours of academic credit and is graded as pass/fail. (Fall P3

year; 40 hours during the first week of the semester plus one 8-hour day per week x 6 weeks during the semester)

PHRM 7201, IPPE V   Potential practice sites include hospitals and hospice facilities; retail pharmacies; free clinics; specialty clinics such as oncology, dialysis, and pediatrics; and nursing homes. This course carries one hour of academic credit and is graded as pass/fail. (Spring P3 year; one 8-hour day per week x 6 weeks during the semester)

Advanced Pharmacy Practice Experience (APPE) Courses: The advanced courses are designed to build upon the IPPE in a variety of clinical settings; to develop, refine, and reinforce knowledge from the IPPEs and didactic coursework; and to provide opportunity to care for various types of patients and disease states that students are likely to encounter as a pharmacist. Each APPE course is a month-long experience and carries four hours of academic credit and is graded with letter grades A-F. Students must achieve a final grade of C and above to pass APPE courses.

Fourth Professional Year—Required Courses

PHRM 8101-8106, Acute Care I-VI   This required APPE provides clinical pharmacy activity on a variety of adult and pediatric medicine inpatient services. It exposes students to a variety of disease states, allowing them to actively participate in drug therapy monitoring and the therapeutic decision-making process. Additional P4 competencies to be achieved during this APPE include: (1) how to develop a problem list, (2) how to present a patient, (3) how to develop and implement a monitoring plan, (4) how to take a medication history, (5) how to respond to a drug information request, and (6) a review of the policies and procedures at the institution.   When students take more than one acute care course, the "required" course is designated at PHRM 8101. Acute care courses are subcategorized in E*Value as: general medicine, internal medicine, cardiology, critical care, emergency medicine, geriatrics, infectious disease, oncology, pediatrics, psychiatric, pulmonary, surgery. Because the patient population is limited, acute care pediatric and geriatric APPEs are "electives" only and do not meet the requirement for "required" rotations.

PHRM 8111-8112, Acute Care Pediatrics I-II   Not used; pediatric rotations are included in the courses above but, as noted, as electives only.

**PHRM 8121-8124, Advanced
Community I-IV**

This required APPE builds upon the introductory community experience, providing student exposure and involvement in a variety of community pharmacy practice settings. The emphasis is placed on patient counseling, other patient care activities, and/or compounding. When students take more than one advanced community course, the "required" course is designated at PHRM 8121. Advanced community courses are sub-categorized in E*Value as: advanced community, compounding, and retail management/administration. Because retail management courses typically does not include direct patient care opportunities, these APPEs are "electives" only and do not meet the requirement for "required" rotations.

**PHRM 8131-8134, Advanced
Institutional I-IV**

This required APPE builds upon the introductory institutional experience, providing student exposure and involvement in a variety of institutional pharmacy practice settings. Emphasis is placed on regulatory, human resource, patient care, and technology issues as well as drug distribution. When students take more than one advanced institutional course, the "required" course is designated at PHRM 8131.

**PHRM 8141-8144, Ambulatory
Care I-IV**

This required APPE involves the student in the provision of clinical pharmacy services in the ambulatory care setting. Responsibilities include providing drug therapy for disease states commonly encountered in the outpatient setting; providing drug regimen reviews; and interviewing patients to elicit drug histories, health status, and adherence to therapy. A significant aspect of this rotation will pertain to the long-term management of chronically ill patients. When students take more than one ambulatory care course, the "required" course is designated at PHRM 8141. Ambulatory care courses are sub-categorized in E*Value as: ambulatory care, family medicine, internal medicine, other primary care, pediatrics, and specialty medicine. Other primary care, pediatrics, and specialty medicine APPEs are "electives" only and do not meet the requirement for "required" rotations because the patient population is usually limited and

because preceptors in these courses are typically not pharmacists.

Fourth Professional Year—Elective Courses

PHRM 8161-8162, Academic I-II

This elective APPE provides the student with hands-on exposure to multiple facets of academia such as teaching, scholarship, service to the profession, administration, and clinical practice. This course includes APPEs that occur in the PCSP simulation lab.

PHRM 8163-8164, Administrative I-II

This elective APPE focuses on pharmacy facility administration and management. The student is introduced to the role of the pharmacy manager or director in the overall operational aspects of the APPE site. Student activities include reviewing pertinent literature, participating in management discussions, and working on assigned projects.

PHRM 8165, Investigational

Not in use

PHRM 8166-8167, Long Term Care I-II

This elective APPE allows the student to participate in daily chart reviews assessing pharmacotherapeutic plans for appropriateness and adherence to state and federal regulations. The student is exposed to a variety of disease states and medical conditions which pertain to elderly patients. Skills will be developed in monitoring drug therapy, patient outcomes, quality of life, and adverse effects in the elderly population.

PHRM 8168-8169, Medication Use Policy & Informatics I-II

This elective APPE focuses in the areas of drug information practice, informatics, and outcomes management. During this APPE, the student will be exposed to each of these areas. Students may elect to complete this rotation at an extramural site such as a pharmaceutical industry information center.

PHRM 8170-8171, Nuclear I-II

This elective APPE provides the student with a supervised, clinical experience in nuclear pharmacy with an emphasis on "authorized user" requirements; regulatory, technology and distribution issues; and the specialized skills used in a nuclear pharmacy practice setting.

PHRM 8172-8173, Research I-II

This elective APPE allows the student to obtain research experience in focused areas achievable during a one-month rotation. Research emphasis includes statistical application, pharmacokinetic computer modeling, analytical laboratory experience, scientific writing, and patient assessment.

PHRM 8174-8176, Specialty Pharmacy I-III

This elective APPE allows the student to explore a specific area of interest that may or may not be a traditional career path in pharmacy. Specialty areas will vary according to preceptor and site availability. Specialty pharmacy courses are sub-categorized in E*Value as: alternative/Oriental medicine, community engagement, entrepreneurism, home infusion, managed care, nutritional support, pharmaceutical industry, substance abuse, toxicology, and veterinary medicine. Other areas might include medical mission trips and international APPEs.

PHRM 8177, Drug Information

This elective APPE allows the student to provide drug information services to pharmacists and other healthcare professionals. Emphasis within the rotation is placed on how to properly receive requests for information, conduct a systematic information search, and assimilate the information obtained into an appropriate response form. The student will develop a working knowledge of information resources as well as develop the ability to critically evaluate such resources. The student may also have the opportunity to become involved with the evaluation of drugs for formulary inclusion, quality assurance/drug usage evaluation activities, news publications, and pharmacy and therapeutics committees.

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IPPE/APPE Calendar
2015-2016

Summer 2015				
Period	**P1**	**P2**	**P3**	**P4**
May-August				M-F 8+ hours/day 4+ weeks/month 4 months

Fall 2015				
Period	**P1**	**P2**	**P3**	**P4**
September-December				8+ hours/day 4+ weeks/month 4 months October 13: Capstone Course
Fall Week		August 17-21	August 17-21	
Fall-1		September 1-October 8 Tuesday or Thursday 4 hours/day in mornings	September 3-October 8 Thursday 8 hours/day	
Fall Break	October 12-13			
Fall-2		October 15-November 24 Tuesday or Thursday 4 hours/day in mornings	October 15-November 19 Thursday 8 hours/day	
Final Exams	December 7-11			

Spring 2016				
	P1	**P2**	**P3**	**P4**
January-April				8+ hours/day 4+ weeks/month 4 months
Spring-1	January 19-February 26 Tuesday, Wednesday or Friday 4 hours/day in afternoons	January 19-February 25 Tuesday or Thursday 4 hours/day in mornings	January 21-February 25 Thursday 8 hours/day	
Spring Break	February 29-March 4			
Spring-2	March 8-April 22* Tuesday, Wednesday or Friday 4 hours/day in afternoons	March 8-April 14 Tuesday or Thursday 4 hours/day in mornings	March 10-April 14 Thursday 8 hours/day	
Final Exams	P3: April 28-29 P1/P2: May 2-6			

*No P1 IPPE on Friday, March 25, due to Easter break

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2015 Fall Week IPPE Out-of-Area Request

Student Name: _____**Student ID#:** _____

During the first week of the fall term (**August 17-21, 2015**), **P2 STUDENTS** will participate in a 40-hour "fall week" IPPE rotation at a <u>community</u> (retail chain, independent pharmacy) or <u>institutional</u> (inpatient hospital, skilled nursing facility). Commonly used sites include those located within the upstate region of South Carolina, including the Greenwood, Greenville, Spartanburg, and Columbia areas. There are no preferences to select for fall week rotations, and students will be notified of their assignments in late July.

To request a fall week IPPE *outside* of our normal area (generally a 70-mile radius of the PC School of Pharmacy), please note the following:

1. ***The site cannot be your current place of employment.***
2. For a site located <u>within South Carolina</u>, you must contact Mrs. Carbonneau in the Office of Experiential Education (OEE) to discuss specific sites or sites within a general area (your hometown, for example). If we already have a relationship with that site or with sites in that area, we may be able to contact them on your behalf to determine their willingness and availability. If the site is a new one for us, you should submit this out-of-area (OOA) form, completed by both you and the potential preceptor. We will consider your request based on the following:
   a.   Our ability to execute our standard affiliation agreement in a timely manner; and/or
   b.   The availability of other established sites in your preferred area
   If there are no other established sites available in your area and if we approve your request, we will then contact the site to confirm availability, provide additional program information, and begin the affiliation agreement process.
3. If the site is located <u>outside of South Carolina</u>, you are responsible for contacting the potential preceptor to determine his/her willingness and availability. You must complete page 1 of this form and then present the form to the preceptor who must complete and sign page 2. Submit the completed form to the OEE in person, by fax, or as a scanned email attachment. The form must be signed by both you and the preceptor with actual, not computer-generated, signatures. Requests will not be considered or acted upon until the OEE receives both sides of this <u>*signed*</u> form. Please note that completing this process does not guarantee approval.
4. If a new affiliation agreement is needed, <u>the site must accept our standard agreement</u>. If they are not able to sign our agreement, your request will not be approved and you will be assigned to a site in our area.

Deadline to submit a fully completed, signed form
for an out-of-area site is June 1.

Student Statement: I understand the above requirements. If the site is outside of South Carolina, I have contacted the appropriate state's board of pharmacy regarding participation in this externship rotation, and I will have met any prerequisites required by this state board of pharmacy prior to the start of this scheduled experience.

Student Signature: _____ Date: _____

Fall Week: August 17-21, 2015
Introductory Pharmacy Practice Experience (IPPE)
Out-of-Area Request Form

Student Name: _____**Student ID#:** _____

Site/Preceptor Information: Please provide the following information for the site and preceptor:
Type of Rotation   ☐ Retail Chain   ☐ Independent Pharmacy
                        ☐ Other Community Site *(please specify type _____)*
                        ☐ Institutional Site *(please specify type _____)*
      Name of Preceptor _____ Credentials _____
      Preceptor email _____
      Full Name of Site _____
      Name of Site's Corporate Entity (if Different) _____
      Street Address/City/Zip of Site _____
      Mailing Address/City/Zip of Site _____
      Site Telephone _____ Site Fax _____

Preceptor Statement *(please check all applicable boxes)*:
☐   My state licensure status is current and without reprimand.
         State of issue: _____ License # _____

☐   I currently serve as an IPPE/APPE preceptor for _____.
                                  (Name of ACPE-accredited school of pharmacy)

☐   I have participated in preceptor development programs or activities offered by the aforementioned school. Most
         recent program was _____.
                  (Date of last program/activity)

Site Orientation: Students who are assigned to this site must complete a pre-rotation orientation that is:
      ☐ Completed online and/or prior to the start of the rotation
      ☐ Completed in person at the site
      The contact person (i.e., human resources or student education staff) for orientation and other pre-rotation
      requirements is
         *Name:*_____
         Email: _____
         Telephone: _____

Pharmacist/Preceptor Signature: _____ **Date:** _____

*By signing this form, you are confirming that you are willing to conduct this pharmacy experience for a 40-hour period from **August 17-21, 2015**. You further acknowledge that you agree to use the syllabus provided by and to work with the PCSP Office of Experiential Education (OEE) in adapting their syllabus to your practice. (OEE will send you a link to the appropriate syllabus template along with your login information when we have set you up in E*Value, our web-based rotation management system.) Finally, you understand that the PCSP does not pay for or provide any type of stipend for a fall week rotation.*

Upon receipt of this form and approval of the student's request, the PCSP Office of Experiential Education will contact the preceptor as needed to discuss program requirements, to coordinate the execution of our standard affiliation agreement, and/or to discuss the use of our fall week syllabus for community introductory pharmacy practice experiences.

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2016-2017 APPE Out-of-Area Request Form

Student Name: _____ **Student ID#:** _____

APPE rotations are normally conducted within the State of South Carolina with some allowance for certain sites within North Carolina and Georgia that are within a reasonable driving distance—approximately a three-hour radius—from the School of Pharmacy. This is considered our "local" area. For instances in which a location outside of this area offers a unique opportunity for which there is no similar experience available within our "local" area, the student may request assignment to this out-of-area (OOA) site. To request this rotation, a student is responsible for contacting the potential preceptor to determine his/her willingness and availability. The student must then complete page 1 of this form and must ask the preceptor to complete and sign page 2. The student will then submit the form to the Office of Experiential Education (OEE). The student may submit the completed form in person, via fax, or through a scanned email; however, the form must be signed by both the student and the potential preceptor.

Completing this process does not guarantee petition approval as other factors will need to be considered. Denial usually involves the availability of similar experiences in our local area, the inability of OEE & the rotation site to execute an affiliation agreement in a timely manner, and the applicability of the rotation to the student's post-graduation plans.

In addition:
- The student may not be employed at or receive any payment from the site during the rotation
- The OOA rotation must be unique compared to experiences already approved and available geographically
- The proposed preceptor must be currently affiliated with an ACPE-accredited school of pharmacy as an IPPE/APPE preceptor
- This form may also be used to request sites within our local area not previously used by the PCSP that also offer <u>unique</u> experiences
- **Deadline for submission of the completed & <u>signed</u> form ……………..October 14**

REQUIRED INFORMATION: Please provide the following information about the site and preceptor:
Type of Rotation ☐ Advanced Community ☐ Acute Care (Subspecialty _____)
☐ Advanced Institutional ☐ Ambulatory Care
☐ Elective_____
Name of Preceptor _____ Credentials _____
(PharmD, RPh, MD, NP, etc.)
Preceptor email _____
Full Name of Site _____
Name of Site's Corporate Entity (if site not privately owned) _____
Street Address/City/Zip of Site _____
Mailing Address/City/Zip of Site _____
Site Telephone _____ Site Fax _____

STUDENT STATEMENT: I understand the above requirements. In addition, I have contacted the appropriate state's board of pharmacy regarding participation in this clerkship rotation, and I will have met any prerequisites required by this state board of pharmacy prior to the start of this scheduled experience.

Student Signature: _____ **Date:** _____
(signature required for request to be considered)

PRECEPTOR STATEMENT

Student Name: _____ **Student ID#:** _____

Licensure and Experience:

☐ My state licensure status is current and without reprimand; license #_____
☐ I currently serve as an IPPE/APPE preceptor for _____
     Name of ACPE-accredited school of pharmacy

☐ I have participated in preceptor development programs or activities offered by the aforementioned school. Most recent program was _____

Course Syllabus:

☐ I have a course syllabus for my student rotations which I will provide to the PCSP Office of Experiential Education for review and approval; or

☐ I will use the PCSP syllabus and will customize it to my site/area of practice

Pre-Rotation Requirements: Students who are assigned to this site must complete a pre-rotation orientation that is:

☐ Completed online and/or prior to the start of the rotation
☐ Completed in person at the site

The contact person for orientation and other requirements is:

*Name:*_____
Email: _____
Telephone: _____

PRECEPTOR AVAILABILITY: I am willing to conduct this advanced pharmacy practice experience (APPE) during any of the month(s) indicated.

APPE rotations during the 2016-2017 academic year

(Please indicate the month(s) available; if you are willing to take additional students, please indicate that as well)

	Number of Students		Number of Students
☐ May 2-31, 2016	_____	☐ November 1-30, 2016	_____
☐ June 1-30, 2016	_____	☐ December 1-30, 2016	_____
☐ July 1-29, 2016	_____	☐ January 2-31, 2017	_____
☐ August 1-31, 2016	_____	☐ February 1-28, 2017	_____
☐ September 1-30, 2016	_____	☐ March 1-31, 2017	_____
☐ *October 3-31, 2016	_____		

Out-of-state rotations in October may be restricted since students must return to campus mid-month for their Capstone course presentations.

If you are willing to offer a rotation but currently do not know what month,
please indicate by checking this box and letting us know approximately when to check back with you.

☐ Please check back with me on/about _____

Pharmacist/Preceptor Name: _____

Pharmacist/Preceptor Signature: _____ **Date:** _____
(signature required for request to be considered)

For Internal Use Only:

Date site contacted by OEE: Telephone _____ and/or Email _____

Approved: ☐ yes ☐ no   Syllabus sent *(if using ours)* or requested *(if using theirs)*: ☐ yes ☐ no

Comments:

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APPE Change Request

Policy: Once the APPE schedule is finalized and released to preceptors, only **one** student-initiated request will be allowed during the P4 academic year. The request must be submitted at least **90 days** prior to the start of the rotation to ensure time to contact preceptors and complete pre-rotation requirements. Submitting a change request does not guarantee the request will be granted. The following requests will typically not be granted:

(1) Requests to add or drop an out-of-area rotation
(2) Requests to drop a faculty rotation
(3) Requests to drop/change assignments at Veterans Affairs, Greenville Health System, and other institutional sites

OEE-initiated or preceptor/site-initiated changes made for reasons aside from student requests will not count as the one student request. While student input on such changes may be sought, OEE reserves the right to implement such changes without consulting the affected student in advance.

Additional change requests initiated by the student due to extreme circumstances may be considered. Such circumstances may include illness or injury as well as certain unexpected/unplanned life events. However, change requests due to non-extreme situations beyond the one allowed—including professional interest changes—will typically not be considered.

Due to the complexity of rotation assignments, a student should not contact a preceptor directly about changing, adding, or removing an assigned rotation, and such action may be grounds for immediate rejection of the request.

Instructions: Complete this form and email it to Mrs. Carbonneau in the OEE at scarbo@presby.edu. After consideration by the OEE, Mrs. Carbonneau will notify you of the status of your request.

Student Name: _____

Date Submitted: _____ **Date Received by OEE:** _____
(date must be at least 90 days prior to the start of the month requested)

Change Requested for _____ *(month or range of months)*

Reason for Request *(check as appropriate)*:
____ Academic Issue   ____ Health Issue *(student or family)*
____ Change in Post-Graduation Goals/Plans   ____ Other _____
____ Hardship (transportation, housing, family, etc.)   _____

Description of Requested Change
(Include reason for change, type of rotation requested (critical care, internal medicine, ambulatory care, academia, etc.), any specific preceptor requested, etc. Provide a complete and honest rationale for making this request.)

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Student Acknowledgement of Experiential Requirements

Printed Student Name: _____, Class of _____ **PC ID:** _____

I hereby acknowledge the following requirements and understand….

1. That I must maintain medical insurance coverage at all times while a student at the PC School of Pharmacy. This insurance must, at a minimum, provide coverage for injury and illness (i.e., a "major medical" policy)
2. That the college has professional and/or general liability insurance that covers me while I am conducting myself within the parameters of the curriculum and the scope of practice for a student extern. However…
   - This coverage primarily protects the college;
   - This coverage does not cover me while working outside of the program as a paid employee of any entity or as an intern (paid or unpaid);
   - Some experiential sites require me to have my own, separate policy (in addition to the college's coverage); and
   - The School of Pharmacy recommends that I get individual professional liability coverage.
3. That I am required to keep all immunizations up to date. These immunizations include Hepatitis-B (series of 3 and/or titer), varicella (2 vaccines and/or titer), annual influenza vaccine, annual tuberculosis screening (PPD, chest x-ray, or lab test), Tdap and/or tetanus booster, and other immunizations that may be required. I further understand that some of these vaccines—but not necessarily all—may be provided to me at the PCSP free of charge and that if additional vaccines are needed for a specific site, that I may be responsible for associated costs.
4. That I am required to undergo annual drug screening and criminal background reporting (CBR) and that these results will be transmitted to the Office of Experiential Education (OEE) who may in turn provide this information to experiential site officials (preceptor, human resources, education office, etc.). I am aware that, in addition to local, state, and federal criminal databases, the background investigation will also include the following:
   - National Sex Offender Registry Database Search
   - Check of the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE)
   - Check of the General Services Administration (GSA) List of Excluded Individuals
5. That I must report within seven (7) calendar days to the OEE any arrests and/or criminal charges or convictions filed subsequent to completion of the annual CBR and that failure to do so may result in dismissal from my IPPE/APPE as well as result in a professional misconduct investigation.
6. That I may be required to undergo additional drug screens—random or otherwise—during the course of an experiential rotation at the request of the facility and that failing a drug screen (i.e., having any positive result) will likely cause immediate removal from that site and adversely affect my continued participation in the pharmacy program. The cost of additional drug screens required by the facility may be my responsibility.
7. That I must abide by each facility's policies, procedures, rules, and regulations during my assignment to that facility, including but not limited to the wearing of appropriate identification badges (provided by the PCSP and/or by the facility) in accordance with the Lewis Blackman Patient Safety Act of 2005.
8. That any ID badges issued by the facility must be returned at the end of the rotation.
9. That I must undergo annual Health Insurance Portability and Accountability Act (HIPAA) and Occupational Safety and Health Act (OSHA) training to ensure understanding and compliance with laws and policies regarding the release of protected health information of patients and those regarding exposure to bloodborne pathogens, respectively. I acknowledge that I will likely be required to undergo said training both at the PCSP and at multiple sites throughout the year.
10. That I may be required to participate in orientation at the experiential site in addition to completion of pre-rotation requirements as directed by the OEE and that many of these orientation/pre-rotation requirements are duplicative but mandatory.
11. That during each clinical rotation, I will be responsible for:
    - Keeping confidential all medical and health information pertaining to patients/clients, including their physical presence of that facility;
    - Disclosing only the minimal PHI when necessary to perform functions of the rotation; and
    - Not utilizing, disclosing, or reusing any information accessed via a site's electronic systems for any purpose other than the assigned rotation
12. That I may be removed from an experiential site for any reason as determined by the facility and that such removal will likely result in a failing grade for that IPPE or APPE course.
13. That I am not considered an employee or an agent of any facility nor will I be afforded any of the benefits of employees including, but not limited to, workers' compensation or liability insurance coverage, meals, and medical services.
14. That I may not be employed at a site during the dates of the rotation and that I am not otherwise allowed to receive any compensation for the activities in which I engage while at the site.
15. That, if I do receive medical services at the facility, I will be responsible for all expenses of such health care services—including emergency care.
16. That I am responsible for arranging housing, lodging, and transportation for myself.
17. That I must register with the appropriate board of pharmacy as a *student extern/intern*.
18. That I must cooperate in any inquiry or investigation conducted by the facility relating to my activities during the clerkship.
19. That I may be required to undergo a physical examination if required by a site at my own expense.
20. That I must abide by the dress code policies of the PC School of Pharmacy as well as those of the facility.
21. That I should not make personal plans (vacations, weddings, etc.) that will conflict with my IPPE/APPE schedule.
22. That I should consult with the OEE first before asking my preceptor to make any changes to my schedule.
23. That as a P4 student, I should not expect to be granted time off from my APPE due to holidays and that I should—until told differently by my preceptor—plan to report to my rotation on the first business day of the month regardless of the day of the week.
24. That my introductory and/or advanced pharmacy practice experiences are developed to meet the licensing requirements of the State of South Carolina and may not meet the requirements of other states and that I am responsible for compliance with the licensing requirements of other states.
25. That I am responsible for reviewing the OEE Student Manual and that I will agree to the terms therein.

_____
Signature   Date

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Professional Attire Policy
(excerpt from PCSP Bulletin)

The appropriate development of a pharmacy professional requires the creation and maintenance of a professional environment within the School of Pharmacy and is the responsibility of all members of the School of Pharmacy community. PCSP subscribes to a business casual attire requirement which must be adhered to by all members of the School of Pharmacy community. During curricular and co-curricular activities/events as a representative of the School of Pharmacy, the business casual attire requirement is in effect unless otherwise indicated (e.g. social events, approved School of Pharmacy Dress Down Days, etc.).

The following attire is considered unacceptable:
- Hats or caps (except headgear considered a part of religious or cultural dress and pre-approved by the Assistant/Associate Dean for Professional and Student Affairs)
- Denim pants of any color
- Shorts, culottes, or other pants above the knee
- Skirts shorter than 1" above the knee when standing
- Sweatpants, sweatshirts, spandex, or leggings
- Revealing clothing (e.g., tank tops, halter tops, midriffs, tube tops, swim tops, etc.)
- Scrubs (tops or pants) except when indicated for specific course activities
- Canvas sneakers, casual sandals/clogs (e.g. "Flip-Flops," "Birkenstocks," beach shoes, etc.), shoes with extremely high heels
- Buttons, large jewelry or accessories that could interfere with patient care or safety
- Exposed underwear or lack of appropriate undergarments
- Sunglasses worn indoors (except for medical reasons and pre-approved by the Assistant/Associate Dean for Professional and Student Affairs)

Adequate precautions should be taken to maintain good personal hygiene. These precautions include regular bathing, use of deodorants and regular dental hygiene. Personal care considerations include:
- Hair should be clean, neat, and styled out of the eyes. Hair may not be dyed any unnatural hair colors. If close contact with patients occurs (e.g. physical assessment procedures), hair longer than shoulder length should be secured. Beards and mustaches should be clean and well groomed.
- Cologne, perfume or aftershave is not recommended in the patient care setting due to patient allergies and sensitivities.
- Cosmetics should be used in moderation.
- Nails should be well groomed, manicured and of short to medium length to facilitate patient care activities. Artificial finger nails are prohibited on rotations where direct patient care is involved as they have been linked to infectious disease transmission.
- Jewelry and accessories should be non-distracting. Body piercing is permitted in ears only (no more than two earrings per ear); no other visible body piercing is permitted. (e.g., tongue, nose, eyebrows, chin, lips).
- No tattoos should be visible.

Students are expected to wear appropriate professional dress for all rotation and professional laboratory activities. This includes wearing a clean, neatly pressed, long-sleeved waist-length white lab coat with the Presbyterian College School of Pharmacy badge, student name tag, closed-toed professional shoes and clean, professionally styled clothing (i.e. dresses or skirts of medium length, non-denim tailored slacks, and appropriate tops for females and collared dress shirts with an appropriately knotted/secured necktie for males).

Individual practice sites may have a more rigorous dress code. Students should adhere to specific preceptor/site requirements. If you have questions regarding the site-specific dress code policy, please contact your preceptor. Students who fail to adhere to these guidelines will not be permitted to participate in rotation activities.

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E*Value Instructions—Accessing Rosters & Site Information

Log into E*Value.

Click on Schedules/Reports/Rosters (Fig 1).

Figure 1
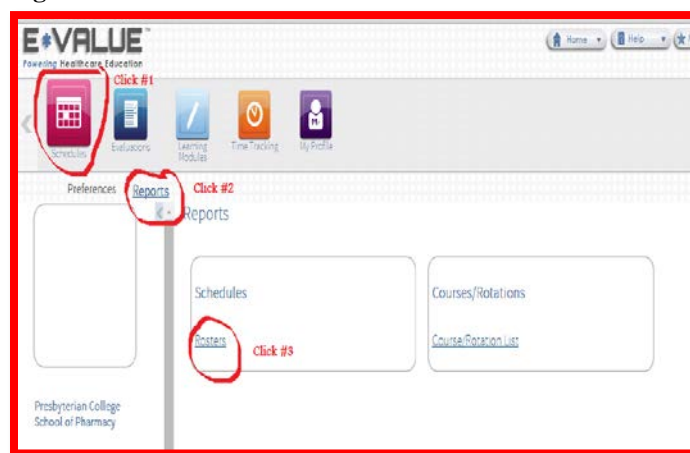
On the next screen (Fig 2), you can accept the default parameters and click on Next or you can change the parameters to narrow the results. If you accept the default parameters, the start/end dates will encompass a one-year period, starting today and the curriculum will include all PCSP classes and IPPE/APPE assignments within that period of time.

Figure 2

The next screen will be your schedule for the time period selected (Fig 3). If you click on the name of your preceptor, a box will pop up and provide you with contact information as well as any other information we have in E*Value about that preceptor. Then if you click on the name of the site, another box will pop up that takes you to the all-important site information screen where you will find a map, the phone number and any pre-rotation requirements (Fig 4). For the best viewing of the site screen, you should maximize the window. You generally have to scroll all the way to the bottom to see the pre-rotation/orientation information. Any site-required documents that have been uploaded will be located at the very bottom of the window.

Figure 3

Figure 4

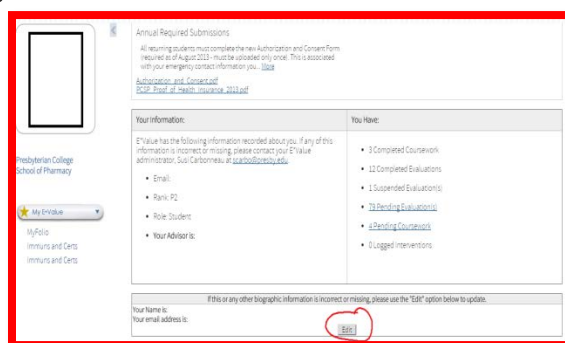# Pharmacy Experiential Program Manual
Appendix 11

E*Value Instructions—Updating Home Address & Work History

Log into E*Value.

Scroll to the very bottom of your home page (Fig 1) and click "edit."
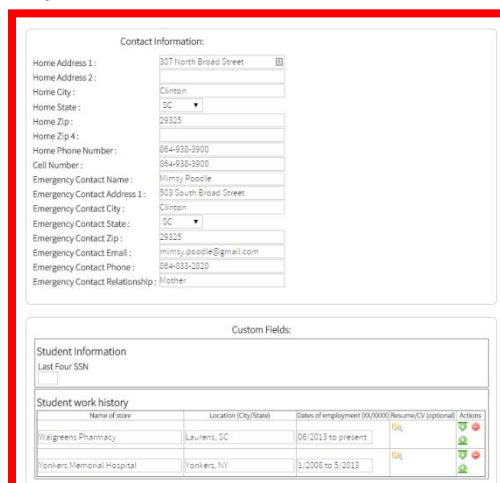
Figure 1, E*Value Home Page

On the next screen (Fig 2), enter your home address, home/cell number, and information about your emergency contact. Be sure to save your changes.

Typically, the OEE will not contact your emergency designee. In the event of an emergency (a student fails to arrive at an experiential site at the time expected), the OEE will generally notify the Office of Academic Affairs or Office of Professional and Student Affairs who will follow the proper procedures or go through certain channels that may/may not require them to contact your emergency person. However, the OEE may contact you via your cell phone when a situation warrants.

Figure 2, Address and Work History

Please update your **work history** in this same section (see above) as it changes throughout your time in pharmacy school. Like your home address, the OEE also refers to your work history when making experiential assignments.

Pharmacy Experiential Program Manual
Appendix 12

E*Value Instructions—APPE Time Tracking

Time tracking is used by the Office of Experiential Education as a means of quality assurance both for the number of hours that a P4 student logs each month and for the ability of a site to offer enough hours to support its use as an advanced experience site. Time tracking is not intended to be punitive for students, and students should enter accurate hours even if the total accumulated does not meet the requirement of 160/month.

Preceptors do not have to verify APPE hours. *(Note: IPPE students do not have to log their time.)*

Type of hours that should be logged include hours physically present at the assigned site, hours spent off site working on additional projects, hours spent on regular projects but off site at the preceptor's direction, etc. Hours that should not be logged include travel time to/from the site, time spent at home preparing for the next day's rotation (i.e., homework hours), etc.

Examples of how the OEE has used time tracking to assess the suitability of a site:
- A student accurately logged that she was at a site for 6 hours on Monday-Thursday and 4 hours on Friday mornings. These were the hours that the site was open to the public and the preceptor did not provide the student with additional projects to make up the shortage. At the end of the month, the student had only accumulated 112 hours. The OEE will not use that site again without discussing projects and other work that the student should be given to make up for the 48 hours she was short for the month.
- A student logged 4 hours/day physically present at a site. Then the preceptor sent her home every day to work additional hours on a web-based project. The student logged these hours as "special project time." The student accumulated over 160 hours for the month. The OEE monitored the rotation closely to be sure that the goals and objectives of the APPE were met despite this non-traditional setting.

To track APPE hours, log into E*Value and click on the Time Tracking icon.

Click on Log Hours.

Scroll to the month for which you want to track your hours, using either the small or the large calendar, and make the following selections:

Task: APPE Hours
Site: Select the appropriate site from the drop-down list
Course/Rotation: Select the appropriate course for that month's APPE
Supervisor: Select your preceptor
Start and End Time: Enter the start and end time. Select a time as close to your actual start/end time as possible. What is most important is that the total number of hours for each day is correct and the start/end times are as close to the actual times as possible. It is not necessary to carve out lunch or break times. APPEs are set up to default to 8 hours so when you enter your start time, E*Value will automatically select an end time that is 8 hours later. Adjust as needed.

Time Tracking Logging Overview PDF

Select Time Tracking detail, then click on day(s) in the small calendar to record time entry. [Required]

User:

Task:
APPE hours ▼

Site: ☑ scheduled sites only
Presbyterian College School of Pharmacy ▼

Course/Rotation: ☑ scheduled courses/rotations only
APPE 8161 Academia ▼

Choose a Supervisor:
Sease, Julie ▼

Enter a comment about the shift (optional):

Start and End Time:
9:00am ▼ to 5:00pm (8 hrs) ▼

‹		April 2015				›
Su	Mo	Tu	We	Th	Fr	Sa
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2

Example: You worked approximately 8.5 hours at a site, arriving at 7:35 a.m. and leaving at 5:10 p.m. You took an hour for lunch from 12:20-1:20 p.m. You should select 7:30 p.m. as your start time. E*Value will automatically use 3:30 p.m. for your departure time for a total of 8 hours. You should adjust your end time by 30 minutes in order to log your 8.5 hours. **You**

should NOT select 7:30-5:15 because you would be overstating your hours due to the time away for lunch.

Once you have set your start/end time, you can click on the multiple days on the small calendar to which those hours apply. For each day that you select, E*Value will automatically add your time based on your start/end times.

Make adjustments as needed. Here are examples of typical adjustments:
1. On Friday, you only worked 4 hours. Delete the entry on that Friday, change the start/end time, and then click on that Friday in the small calendar to post the corrected hours.
2. You are out sick on Monday. If any hours for that Monday were posted in advance, delete them. Then select "Illness" from the Task drop-down menu, enter your start/end time, and click on that Monday. Hours due to illness are not added into the total APPE hours.
3. Because you were out sick, your preceptor gave you an extra project to complete. You worked on it during the following weekend. After logging your sick time (#2 above), log the hours that you spent on this extra project. Select "Special Project Time (Hours Count)" from the Task drop-down menu, enter your start/end times, and click on the weekend days when you worked on this project. *Hint: Best practice suggests that you should enter a comment about the special project time……"Worked on special DI project as make up for being sick on the 6th."*
4. Your preceptor allowed you to be off on a holiday but asked you to prepare an extra presentation to be made on the next day back at your site. Select "Holiday" from the Task drop-down menu and enter an 8-hour start/end range on the holiday. Since you worked on your presentation that Sunday, enter those hours as "Special Project Time (Hours Count)." As in #3 above, you should enter a comment to explain that the special project was given as a substitute for the hours missed due to the holiday.
5. You come to campus for special events:
   a. Capstone: Add an entry for 8 hours for the day of the Capstone course. Although this is a scheduled absence and these hours do not technically need to be made up, any hours that you enter will *not* count toward your weekly/monthly total.
   b. Career Fair: This is an excused absence and hours missed should be made up at the discretion of your preceptor. Add an entry for these hours. Hours entered do not count toward your weekly/monthly total.

You will receive an email notification every 7 days if you have not logged hours; reminder emails will generate every 3 days thereafter. In addition, the OEE will also be notified if you have not logged hours each month.

List others who precepted this student and provided evaluation feedback: *(Question 1 of 25)*

Goal 1: The student demonstrates an acceptable level of professional maturity. (15% of final grade)

(Question 2 of 25 - Mandatory)

	Overall poor attitude, avoids responsibility and work. Resistive to feedback. Late on several occasions. Unexcused absence. Unacceptable attire. Does not respect patient confidentiality.	Generally poor attitude with little positive interaction with coworkers. Missed an important deadline or occasionally late. Does not handle criticism well. Occasionally dresses inappropriately. Does not always respect patient confidentiality.	Generally good attitude with some interaction with coworkers. Handles criticism constructively but does not always incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Generally good attitude and positive interaction with coworkers. Handles criticism constructively and occasionally attempts to incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Very motivated and enthusiastic, interacts well with coworkers. Handles criticism constructively and consistently incorporates feedback. Dresses appropriately. Respects patient confidentiality.
Evidence of Performance	○	○	○	○	○

(Question 3 of 25 - Mandatory)

	Speaks and acts on requests only; often refuses to participate	Limited self-motivation, But completes work if directed by preceptor	Establishes adequate relationships; participates if directed	Establishes good relationships; actively participates; team player	Establishes working relationships and proactively participates as an integral member; appropriately assertive
Relationships with Members of the Healthcare Team	○	○	○	○	○

Goal 1 - Comments: *(Question 4 of 25)*

Goal 2: The student demonstrates an appropriate initiative regarding clerkship activities. (15% of final grade)

(Question 5 of 25 - Mandatory)

	Speaks and acts on requests only; often refuses to participate	Limited self-motivation, But completes work if directed by preceptor	Generally motivated; appropriate time management skills	Works and makes decisions independently, discusses ideas and/or plan with preceptor	Consistently initiates activities; uses spare time wisely; Asks thoughtful questions; inquisitive/eager to learn
Motivation	◯	◯	◯	◯	◯

(Question 6 of 25 - Mandatory)

	Avoids responsibility; avoids tasks; ignores obvious issues	Assumes responsibility for selected issues; does not examine issues carefully	Appropriately assumes responsibility; most often examines issues carefully	Appropriately assumes responsibility; examines issue carefully; asks for help when necessary	Assists when needed without being asked; aware of limitations; takes responsibility for self-learning; consistently examines issues carefully
Responsibility	◯	◯	◯	◯	◯

Goal 2 - Comments: *(Question 7 of 25)*

[ ]

Goal 3: The student is reliable and conscientious with respect to clerkship responsibilities. (15% of final grade)

(Question 8 of 25 - Mandatory)

	Consistently disorganized. Fails to meet many deadlines and does not follow through with requests. Very poor problem solving and decision making skills. One unexcused absence or consistently tardy to activities	Occasionally unorganized and unprepared. Assignments done on time but poor problem-solving and decision making skills. Fails to follow through on several requests. Occasionally tardy to activities	Regularly attends all activities and work completed on time. Sufficient problem solving and decision making skills. Usually follows through on requests	Demonstrates advanced planning and/or completes some projects ahead of time. Well organized and punctual. Good problem-solving and decision making skills. Follows through on all requests	Consistently initiates activities; uses spare time wisely. Arrives early and stays late if necessary. Extremely organized. Completes all assignments in advance. Strong problem-solving and decision making skills. Follows through on all requests
Evidence of Performance	◯	◯	◯	◯	◯

Goal 3 - Comments: *(Question 9 of 25)*

>

Goal 4: The student demonstrates the ability to derive concise and accurate responses to drug information requests. (15% of final grade)

(Question 10 of 25 - Mandatory)

	Consistently unable to obtain proper information from proper sources	Collects some data, but omits several basic details	Usually collects obvious data with some detailed information from requestor	Usually collects obvious and also detailed data from requestor	Effectively obtains complete data for each problem
Evidence of Performance	○	○	○	○	○

Goal 4 - Comments: *(Question 11 of 25)*

>

Goal 5: The student displays verbal and written communication skills appropriate to this practice setting and is receptive to feedback. (15% of final grade)

(Question 12 of 25 - Mandatory)

	Appears arrogant; use of unclear language, incorrect info, offensive tone, slang or cursing; insensitive to surroundings	Impersonal and abrupt; generally provides correct info; does not always respect surroundings	Maintains a good proactive dialogue; respectful of surroundings	Directs conversation; allows others to easily provide or receive info; respectful of surroundings	Effective communication with all interactions; uses clear and correct language; sensitive to surroundings
Verbal Communication with Preceptor and Other Health-Care Professionals	○	○	○	○	○

(Question 13 of 25 - Mandatory)

	Assignments late, illegible and with grammatical spelling and organizational errors	Assignments completed on time but inarticulate, poorly cited; with some grammatical or spelling errors	Well-cited info; rare grammatical or spelling errors	Well-cited info with articulation; no writing or spelling errors	Critically presented, well cited info with articulation, clarity and insight
Written Communication	○	○	○	○	○

	Makes excuses and/or displaces blame; does not accept responsibility and/or resists feedback; appears defensive	Does not admit error; does not incorporate feedback	Admits errors; usually incorporates feedback	Admits errors; incorporates feedback	Self-evaluates; seeks and incorporates feedback
Feedback	○	○	○	○	○

Goal 5 - Comments: *(Question 15 of 25)*

[text box]

Goal 6: Dispensing Skills. (25% of final grade)

(Question 16 of 25 - Mandatory)

	Unable to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Unable to select proper drug. Inaccurately labels dispensed product	Usually unable to verify prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Does not usually select proper drug or accurately label dispensed product	Frequently needs help to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, and allergies. Usually selects proper drug and accurately labels dispensed product	Correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies most of the time. Selects proper drug and accurately labels dispensed product	Always correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies. Selects proper drug and accurately labels dispensed product
Dispensing and Prescription Order Interpretation	○	○	○	○	○

Goal 6 - Comments: *(Question 17 of 25)*

[text box]

Grading

Midpoint Grade: *(Question 18 of 25)*

Satisfactory:	Unsatisfactory:

70 – 100%	<70%
○	○

Midpoint - Comments: *(Question 19 of 25)*

```
[                                                                    ]
[                                                                    ]
[                                                                    ]
```

Final Grade   *(Question 20 of 25 - Mandatory)*

Satisfactory: 70 – 100%	Unsatisfactory: <70%
○	○

Final - Comments: *(Question 21 of 25)*

```
[                                                                    ]
[                                                                    ]
[                                                                    ]
```

Remediation Plan for Unsatisfactory Midpoint Evaluation

Briefly describe the reason for unsatisfactory midpoint student assessment.   *(Question 22 of 25)*

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[                                                                    ]
[                                                                    ]
[                                                                    ]
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Briefly outline remediation steps required for student to acquire a satisfactory assessment at final evaluation.   *(Question 23 of 25)*

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[                                                                    ]
[                                                                    ]
[                                                                    ]
```

At final evaluation, briefly explain why remediation steps were completed either successfully or unsuccessfully.   *(Question 24 of 25)*

[   ]

Did the student meet the goals and objectives outlined in the Remediation Plan?
(Question 25 of 25)

Yes	No
○	○

Review your answers in this evaluation. If you are satisfied with the evaluation, click the **SUBMIT** button below. Once submitted, evaluations are no longer available for you to make further changes.

| Save For Later | Submit |

List others who precepted this student and provided evaluation feedback: *(Question 1 of 19)*

[   ]

Goal 1: The student demonstrates an acceptable level of professional maturity. (15% of final grade)

(Question 2 of 19 - Mandatory)

	Overall poor attitude, avoids responsibility and work. Resistive to feedback. Late on several occasions. Unexcused absence. Unacceptable attire. Does not respect patient confidentiality.	Generally poor attitude with little positive interaction with coworkers. Missed an important deadline or occasionally late. Does not handle criticism well. Occasionally dresses inappropriately. Does not always respect patient confidentiality.	Generally good attitude with some interaction with coworkers. Handles criticism constructively but does not always incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Generally good attitude and positive interaction with coworkers. Handles criticism constructively and occasionally attempts to incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Very motivated and enthusiastic, interacts well with coworkers. Handles criticism constructively and consistently incorporates feedback. Dresses appropriately. Respects patient confidentiality.
Evidence of Performance	○	○	○	○	○

(Question 3 of 19 - Mandatory)

	Speaks and acts on requests only; often refuses to participate	Limited self-motivation, But completes work if directed by preceptor	Establishes adequate relationships; participates if directed	Establishes good relationships; actively participates; team player	Establishes working relationships and proactively participates as an integral member; appropriately assertive
Relationships with Members of the Healthcare Team	○	○	○	○	○

Goal 1 - Comments: *(Question 4 of 19)*

[   ]

Goal 2: The student demonstrates an appropriate initiative regarding clerkship activities. (15% of final grade)

(Question 5 of 19 - Mandatory)

	Speaks and acts on requests only; often refuses to participate	Limited self-motivation, But completes work if directed by preceptor	Generally motivated; appropriate time management skills	Works and makes decisions independently, discusses ideas and/or plan with preceptor	Consistently initiates activities; uses spare time wisely; Asks thoughtful questions; inquisitive/eager to learn
Motivation	○	○	○	○	○

(Question 6 of 19 - Mandatory)

	Avoids responsibility; avoids tasks; ignores obvious issues	Assumes responsibility for selected issues; does not examine issues carefully	Appropriately assumes responsibility; most often examines issues carefully	Appropriately assumes responsibility; examines issue carefully; asks for help when necessary	Assists when needed without being asked; aware of limitations; takes responsibility for self-learning; consistently examines issues carefully
Responsibility	○	○	○	○	○

Goal 2 - Comments: *(Question 7 of 19)*

[   ]

Goal 3: The student is reliable and conscientious with respect to clerkship responsibilities. (15% of final grade)

(Question 8 of 19 - Mandatory)

	Consistently disorganized. Fails to meet many deadlines and does not follow through with requests. Very poor problem solving and decision making skills. One unexcused absence or consistently tardy to activities	Occasionally unorganized and unprepared. Assignments done on time but poor problem-solving and decision making skills. Fails to follow through on several requests. Occasionally tardy to activities	Regularly attends all activities and work completed on time. Sufficient problem solving and decision making skills. Usually follows through on requests	Demonstrates advanced planning and/or completes some projects ahead of time. Well organized and punctual. Good problem-solving and decision making skills. Follows through on all requests	Consistently initiates activities; uses spare time wisely. Arrives early and stays late if necessary. Extremely organized. Completes all assignments in advance. Strong problem-solving and decision making skills. Follows through on all requests
Evidence of Performance	○	○	○	○	○

Goal 3 - Comments: *(Question 9 of 19)*

[ ]

Goal 4: The student demonstrates the ability to derive concise and accurate responses to drug information requests. (15% of final grade)

(Question 10 of 19 - Mandatory)

	Consistently unable to obtain proper information from proper sources	Collects some data, but omits several basic details	Usually collects obvious data with some detailed information from requestor	Usually collects obvious and also detailed data from requestor	Effectively obtains complete data for each problem
Evidence of Performance	○	○	○	○	○

Goal 4 - Comments: *(Question 11 of 19)*

[ ]

Goal 5: The student displays verbal and written communication skills appropriate to this practice setting and is receptive to feedback. (15% of final grade)

(Question 12 of 19 - Mandatory)

	Appears arrogant; use of unclear language, incorrect info, offensive tone, slang or cursing; insensitive to surroundings	Impersonal and abrupt; generally provides correct info; does not always respect surroundings	Maintains a good proactive dialogue; respectful of surroundings	Directs conversation; allows others to easily provide or receive info; respectful of surroundings	Effective communication with all interactions; uses clear and correct language; sensitive to surroundings
Verbal Communication with Preceptor and Other Health-Care Professionals	○	○	○	○	○

(Question 13 of 19 - Mandatory)

	Assignments late, illegible and with grammatical spelling and organizational errors	Assignments completed on time but inarticulate, poorly cited; with some grammatical or spelling errors	Well-cited info; rare grammatical or spelling errors	Well-cited info with articulation; no writing or spelling errors	Critically presented, well cited info with articulation, clarity and insight
Written Communication	○	○	○	○	○

(Question 14 of 19 - Mandatory)

	Makes excuses and/or displaces blame; does not accept responsibility and/or resists feedback; appears defensive	Does not admit error; does not incorporate feedback	Admits errors; usually incorporates feedback	Admits errors; incorporates feedback	Self-evaluates; seeks and incorporates feedback
Feedback	○	○	○	○	○

Goal 5 - Comments: *(Question 15 of 19)*

[ ]

Goal 6: Dispensing Skills. (25% of final grade)

(Question 16 of 19 - Mandatory)

	Unable to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Unable to select proper drug. Inaccurately labels dispensed product	Usually unable to verify prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Does not usually select proper drug or accurately label dispensed product	Frequently needs help to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, and allergies. Usually selects proper drug and accurately labels dispensed product	Correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies most of the time. Selects proper drug and accurately labels dispensed product	Always correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies. Selects proper drug and accurately labels dispensed product
Dispensing and Prescription Order Interpretation	○	○	○	○	○

Goal 6 - Comments: *(Question 17 of 19)*

[ ]

Final Grade   *(Question 18 of 19 - Mandatory)*

Satisfactory: 70 – 100%	Unsatisfactory: <70%
○	○

Final - Comments: *(Question 19 of 19)*

Review your answers in this evaluation. If you are satisfied with the evaluation, click the **SUBMIT** button below. Once submitted, evaluations are no longer available for you to make further changes.

| Save For Later | Submit |

Preceptors: Complete a course evaluation for each IPPE segment. Although a thorough evaluation of each student could be considered more of a challenge given the segmented IPPE format used by PCSP, Preceptors should still focus on identifying and elaborating upon the generally observed strengths and weaknesses as they pertain to aforementioned goals and objectives. Preceptors should complete and submit the final evaluation and grade before meeting with the student for the post-rotation reflection discussion.

Goal 1: The student demonstrates an acceptable level of professional maturity.

Relationships with Members of the Healthcare Team   *(Question 1 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Speaks and acts on requests only; often refuses to participate	Limited self-motivation, But completes work if directed by preceptor	Establishes adequate relationships; participates if directed	Establishes good relationships; actively participates; respects other professionals' opinions; team player	Establishes working relationships; appropriately assertive. Respects other professionals' opinions; proactively participates as an integral member

(Question 2 of 23)

Goal 1 Comments:

Goal 2: The student demonstrates an appropriate initiative regarding clerkship activities.

Motivation   *(Question 3 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Speaks and acts on requests only; often refuses to participate	Limited self motivation, But completes work if directed by preceptor	Generally motivated; appropriate time management skills	Works and makes decisions independently, discusses ideas and/or plan with preceptor	Consistently initiates activities; uses spare time wisely; Asks thoughtful questions; inquisitive/eager to learn

Responsibility   *(Question 4 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Avoids responsibility; avoids tasks; ignores obvious issues	Assumes responsibility for selected issues; does not examine issues carefully	Appropriately assumes responsibility; most often examines issues carefully	Appropriately assumes responsibility; examines issue carefully; asks for help when necessary	Assists when needed without being asked; aware of limitations; takes responsibility for self-learning; consistently examines issues carefully

Attitude   *(Question 5 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Overall poor attitude, avoids responsibility and work. Resistive to feedback. Late on several occasions. Unexcused absence. Unacceptable attire. Does not respect patient confidentiality.	Generally poor attitude with little positive interaction with coworkers. Missed an important deadline or occasionally late. Does not handle criticism well. Occasionally dresses inappropriately. Does not always respect patient confidentiality.	Generally good attitude with some interaction with coworkers. Handles criticism constructively but does not always incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Generally good attitude and positive interaction with coworkers. Handles criticism constructively and occasionally attempts to incorporate feedback. Dresses appropriately. Respects patient confidentiality.	Very motivated and enthusiastic, interacts well with coworkers. Handles criticism constructively and consistently incorporates feedback. Dresses appropriately. Respects patient confidentiality.

(Question 6 of 23)

Goal 2 Comments:

[text box]

Goal 3: The student demonstrates ability to derive concise and accurate responses for assignments.

New Drug Update   *(Question 7 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently requires extensive intervention; the Preceptor must complete the task	Requires consistent intervention; task is completed after directed questioning	Requires one to two interventions; task is completed	Requires no interventions; task is completed per proper format	Requires no interventions; task completed independently per proper format; Presented or written up and submitted to Preceptor (if requested)

Drug Information Requests   *(Question 8 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently requires extensive intervention; the Preceptor must complete task	Requires consistent intervention; task is completed after directed questioning.	Requires one to two interventions; task is completed.	Usually requires no interventions; task is completed	Requires no interventions; task completed independently; Properly or completely responds to requester.

Medication Reconciliation Encounters   *(Question 9 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently unable to complete any	Requires consistent intervention. Completes some encounters OR all	Requires one to two interventions. Encounters	Requires no interventions. Encounters	Requires no interventions. Encounters completed on time. Format is

	patient encounters	not completed on time OR all not acceptable	completed. Format is appropriate and complete.	completed on time. Format is appropriate and complete.	appropriate, thorough and well organized.

Patient Case Write Up   *(Question 10 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently unable to complete any patient case writeups	Requires consistent intervention.Problem list OR Assessment OR Plan OR Monitoring plan is unacceptable OR write up submitted late	Requires one to two interventions. Write up is complete, acceptable, and submitted on time.	Write up completed independently. Write up is complete, acceptable, and submitted on time.	Write up completed independently. Write up is complete, acceptable, and submitted on time. Student able to justify decisions.

Drug Monograph   *(Question 11 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently unable to complete any drug monographs	Requires consistent intervention. Formatting or Rationale unacceptable OR monograph submitted late	Requires one to two interventions. Formatting or rationale are acceptable.	Monograph completed independently. Formatting is correct and rationale is both pertinent to IPPE and to lecture.	Multiple monographs completed independently. Formatting is correct and rationale is both pertinent to IPPE and to lecture.

Medication Adherence   *(Question 12 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently unable to complete any medication adherence occurrences	Requires consistent intervention; task is completed after directed questioning	Requires one to two interventions; at least one occurrence completed; recommendations are appropriate.	Requires no interventions; occurrence(s) completed independently; recommendations are appropriate.	Requires no interventions; Prospective Med Adherence occurrence completed independently. ; Recommendations are appropriate.

(Question 13 of 23)

Goal 3 Comments	

Goal 4: The student is reliable and conscientious regarding clerkship responsibilities.

Evidence of Performance   *(Question 14 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○	○	○	○	○	○
	Consistently disorganized. Fails to meet many deadlines	Occasionally unorganized and	Regularly attends all activities and decision making skills. Usually	Demonstrates advanced planning and/or completes	Consistently examines issues rationally and logically; evaluates,

and does not follow through with requests. Very poor problem solving and decision making skills. One unexcused absence or consistently tardy to activities	unprepared. Assignments done on time but poor problem-solving and decision making skills. Fails to follow through on several requests. Occasionally tardy to activities	follows through on requests work completed on time. Sufficient problem solving and decision making skills. Usually follows through on requests	some projects ahead of time. Well organized and punctual. Good problem-solving and decision making skills. Follows through on all requests	analyzes and synthesizes information to resolve and prevent problems. Extremely organized. Completes all assignments in advance.. Follows through on all requests

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(Question 15 of 23)

Goal 4 Comments:	

Goal 5: The student displays verbal and written communication skills appropriate to this practice setting and is receptive to feedback.

Verbal Communication with Preceptor and Other Health Care Professionals   *(Question 16 of 23)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
	Appears arrogant; use of unclear language, incorrect info, offensive tone, slang or cursing; insensitive to surroundings	Impersonal and abrupt; generally provides correct info; does not always respect surroundings	Maintains a good proactive dialogue; respectful of surroundings	Directs conversation; listens and allows others to easily provide or receive info; respectful of surroundings	Effective communication with all interactions; uses clear and correct language; sensitive to surroundings and respectful of audience.

Written Communication   *(Question 17 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
	Assignments late, illegible and with grammatical spelling and organizational errors	Assignments completed on time but inarticulate, poorly cited; with some grammatical or spelling errors	Well-cited info; rare grammatical or spelling errors	Well-cited info with articulation; no writing or spelling errors	Critically presented, well cited info with articulation, relevance, clarity and insight

Feedback   *(Question 18 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
	Makes excuses and/or displaces blame; does not accept responsibility and/or resists feedback; appears defensive	Does not admit error; does not incorporate feedback	Admits errors; usually incorporates feedback	Admits errors; incorporates feedback	Self-evaluates; seeks and incorporates feedback

(Question 19 of 23)

Goal 5
Comments:

Goal 6: Dispensing Skills.

Dispensing and Prescription Order Interpretation   *(Question 20 of 23 - Mandatory)*

N/A	Unacceptable	Needs Development	Competent	Very Good	Excellent
○ ○	Unable to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Unable to select proper drug. Inaccurately labels dispensed product	Usually unable to verify prescription orders for amount per dose, frequency, duration of therapy, interactions, or allergies. Does not usually select proper drug or accurately label dispensed product	Frequently needs help to correctly interpret prescription orders for amount per dose, frequency, duration of therapy, interactions, and allergies. Usually selects proper drug and accurately labels dispensed product	Correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies most of the time. Selects proper drug and accurately labels dispensed product	Always correctly receives, interprets, and clarifies prescription orders for amount per dose, appropriate route, frequency, duration of therapy, interactions, and allergies. Selects proper drug and accurately labels dispensed product

(Question 21 of 23)

Goal 6
Comments:

Preceptors should complete online student evaluations in E*Value. Grade is calculated automatically. No midpoint evaluation is required for the 40-hour Summer Week (SW) immersive segment. Post-rotation reflection discussion with student should be done AFTER final grade has been submitted.

(Question 22 of 23)

	(S) Satisfactory 70% - 100%	(U) Unsatisfactory <70%
Final Grade	○	○

Comments: *(Question 23 of 23)*

Unprofessional student behavior is considered an Honor Code violation and mandates an automatic failure grade for any experience. Examples of such behavior include but are not limited to: lying; cheating; plagiarism; stealing; failure to enforce the Honor Code; HIPAA violation; inappropriate dress, behavior or attitude; or any situation which results in informal dismissal from an experience where the student is found to be at fault.

Review your answers in this evaluation. If you are satisfied with the evaluation, click the **SUBMIT** button below. Once submitted, evaluations are no longer available for you to make further changes.

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N/A	1	2	3	4	5
Not applicable to this practice setting	Remediation required or unacceptable performance	Needs significant development	Satisfactory	Competent	Excellent or exceeds expectations
	The student is unable to satisfactorily complete some or all basic and routine tasks despite directed questions and intervention. Remediation is necessary	The student requires guidance or extensive directed questioning to complete some or all basic and routine tasks. The student is unable to complete complex tasks.	The student requires guidance or directed questioning to complete some or all complex tasks; independently completes all basic and routine tasks.	The student requires limited prompting to complete some/most complex tasks; independently completes all basic and routine tasks.	The student independently and consistently completes most complex tasks and all routine tasks. Proficiency demonstrates readiness for entering the profession and becoming an independent practitioner.

(Question 1 of 34)

Competency I: Communication - Oral Communication	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Communicates relevant, concise, comprehensive and timely information about safe and appropriate medication use to patients, healthcare professionals, and members of the community using appropriate terminology and vocabulary for the intended audience.	0	1	2	3	4	5

(Question 2 of 34)

Written Communication:	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Communicates relevant, concise, comprehensive and timely information about safe and appropriate medication use to patients, healthcare professionals, and members of the community using appropriate terminology and vocabulary for the intended audience.	0	1	2	3	4	5

(Question 3 of 34)

Competency I: Communication	
Communication Evidence/Suggestions/Comments:	

(Question 4 of 34)

Competency II: Evidence-based decisions in pharmacy practice	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Conducts a systematic, efficient and thorough drug information search and derives concise and accurate responses to drug information requests, utilizes appropriate references throughout the drug information responses.	◯ 0	◯ 1	◯ 2	◯ 3	◯ 4	◯ 5

(Question 5 of 34)

Competency II: Evidence-based decisions in pharmacy practice	
Evidence-based decisions Evidence/Suggestions/Comments:	

(Question 6 of 34)

Competency III: Problem prevention and solving	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Examines issues rationally and logically; evaluates, analyzes, and synthesizes information and knowledge to resolve and prevent problems, but also makes sound decisions that may impact therapeutic outcomes.	◯ 0	◯ 1	◯ 2	◯ 3	◯ 4	◯ 5

(Question 7 of 34)

Competency III: Problem prevention and solving	
Problem prevention & solving Evidence/Suggestions/Comments:	

(Question 8 of 34)

Competency IV: Dispensing of pharmaceuticals	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Demonstrates the ability to accurately assess and evaluate the patient's medication orders; procures appropriate products to prepare, dispense, distribute, and, if necessary, administer medications; identifies and describes common medication errors; participates in the management of formulary, purchasing and inventory control systems.	◯ 0	◯ 1	◯ 2	◯ 3	◯ 4	◯ 5

(Question 9 of 34)

Competency IV: Dispensing of pharmaceuticals	
Dispensing of pharmaceuticals Evidence/Suggestions/Comments:	

(Question 10 of 34)

Competency V: Providing pharmaceutical care to individual patients	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Organizes essential patient information; identifies and prioritizes medication-related problems; establishes appropriate patient-specific pharmacotherapeutic goals.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5
2. Formulates and recommends patient-specific medication treatment plans; assesses the therapeutic effectiveness and progress toward therapeutic goals and modifies the treatment plan if needed; documents each patient care intervention or encounter.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

Note: A score of 1 or 2 for "Knowledge" alerts the OEE regarding student's performance.

(Question 11 of 34)

Competency V: Providing pharmaceutical care to individual patients - Knowledge	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Identifies pathophysiology and clinical presentations of common disease states; explains drug mechanisms, pharmacokinetic principles, common adverse effects and clinical uses of medications.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

(Question 12 of 34)

Competency V: Providing pharmaceutical care to individual patients	
Pharmaceutical Care to patients Evidence/Suggestions/Comments:	

(Question 13 of 34)

Competency VI: Providing pharmaceutical care to patient populations	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Accesses, interprets, and applies population-specific literature and data related to drug use outcomes, economics and quality of life to formulate and recommend drug use policies; develops disease and medication therapy guidelines, protocols, and practice agreements in collaboration with other health professionals;	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

interprets and applies epidemiologic and pharmacoeconomic data relevant to common diseases and their management.						

(Question 14 of 34)

Competency VI: Providing pharmaceutical care to patient populations	
Pharmaceutical Care to Populations Evidence/Suggestions/Comments:	

(Question 15 of 34)

Competency VII: Inter-professional interaction and teamwork	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Integrates into an interdisciplinary team or other professional group and actively and effectively participates.	◯ 0	◯ 1	◯ 2	◯ 3	◯ 4	◯ 5

(Question 16 of 34)

Competency VII: Inter-professional interaction and teamwork	
Inter-professional Interaction Evidence/Suggestions/Comments:	

(Question 17 of 34)

Competency VIII: Ethical and legal judgment	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Recognizes the ethical dimensions of pharmacy practice and health policy; identifies alternatives in difficult ethical choices and systematically analyzes them; formulates, defends and effectively carries out a course of action for ethical complexities.	◯ 0	◯ 1	◯ 2	◯ 3	◯ 4	◯ 5

(Question 18 of 34)

Competency VIII: Ethical and legal judgment	
Ethical & legal judgment Evidence/Suggestions/Comments:	

Note: A score of 1 or 2 alerts the OEE regarding student's performance.

(Question 19 of 34)

Competency IX: Personal and professional growth	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Demonstrates an appropriate initiative regarding required activities; demonstrates an appropriate level of professional maturity; incorporates feedback provided to attain goals and meet objectives; shows reliability and dependability throughout the experience.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

(Question 20 of 34)

Competency IX: Personal and professional growth	
Personal & professional growth Evidence/Suggestions/Comments:	

(Question 21 of 34)

Competency X: Management skills	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Demonstrate the ability to manage human, financial and other resources related to the practice of pharmacy; uses time and resources effectively and efficiently.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

(Question 22 of 34)

Competency X: Management skills	
Management skills Evidence/Suggestions/Comments:	

(Question 23 of 34)

Competency XI: Advancement of pharmacy and heath care	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Identifies issues of public, professional and institutional concern and works for the common good to bring resolution.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

(Question 24 of 34)

Competency XI: Advancement of pharmacy and heath care	

Advancement of pharmacy & heath care Evidence/Suggestions/Comments:	

(Question 25 of 34)

Competency XII: Promotion of health and public welfare	N/A	1 Remediation required or unacceptable performance	2 Needs significant development	3 Satisfactory	4 Competent	5 Excellent or exceeds expectations
1. Actively participates in community and professional efforts to promote health for the public welfare.	○ 0	○ 1	○ 2	○ 3	○ 4	○ 5

(Question 26 of 34)

Competency XII: Promotion of health and public welfare	
Promotion of health & public welfare Evidence/Suggestions/Comments:	

(Question 27 of 34)

Other activities (site specific):	
Optional Activity 1 Description:	
Optional Activity 2 Description:	
Optional Activity 3 Description:	

(Question 28 of 34)

	Exact Score (0-5):
Optional Activity 1 Score:	
Optional Activity 2 Score:	
Optional Activity 3 Score:	

(Question 29 of 34)

Activity 1 Evidence/Suggestions/Comments:	
Activity 2 Evidence/Suggestions/Comments:	

Activity 3 Evidence/Suggestions/Comments:	

(Question 30 of 34)

	Nominate
Merck Academic Excellence Award *Nominees should demonstrate scholastic achievement and excellence in clinical interventions.*	☐
Facts and Comparisons Award of Excellence in Clinical Communication *Nominees should have excelled in verbal and written communications skills.*	☐
Mylan Excellence in Pharmacy Award *Nominees should intend to enter practice upon graduation and demonstrate high personal motivation and possess a unique ability to communicate drug information.*	☐
Natural Medicines Comprehensive Database Graduation Award *Nominees should have excelled in nonprescription studies, recommendations or interventions.*	☐

(Question 31 of 34)

Student Award Nominations:	
Additional Comments:	

(Question 32 of 34)

Note: A "no" answer alerts the OEE regarding student's performance.	Yes	No
Did the student successfully complete all requirements of the rotation (including attendance, promptness, Code of Professionalism and Honor Code)	○	○

(Question 33 of 34)

Student's Average Score (based on the scaled answers selected above)	

Grading Scale		
4.65-5	93-100%	A
4.5-4.64	90-92%	A-
4.35-4.49	87-89%	B+
4.15-4.34	83-86%	B
4.0-4.14	80-82%	B-
3.85-3.99	77-79%	C+
3.5-3.84	70-76%	C
<3.5	<70%	Non-passing

Student's Grade	

Review your answers in this evaluation. If you are satisfied with the evaluation, click the **SUBMIT** button below. Once submitted, evaluations are no longer available for you to make further changes.

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