



THE UNIVERSITY OF BRITISH COLUMBIA

Office of Experiential Education
Faculty of Pharmaceutical Sciences



FLEX PHARMD PROGRAM

DIRECT AND NON-DIRECT PATIENT CARE PRACTICUMS HANDBOOK FOR STUDENTS AND PRACTICE EDUCATORS PHRM 491-496

Effective March 2021

INNOVATIVE LEADERS OF EXCELLENCE IN PHARMACY EXPERIENTIAL EDUCATION

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Acknowledgement

UBC's Point Grey Campus is located on the traditional, ancestral, and unceded territory of the xwməθkwəyəm (Musqueam) people. The land it is situated on has always been a place of learning for the Musqueam people, who for millennia have passed on in their culture, history, and traditions from one generation to the next on this site. We would also like to acknowledge that our students and practice educators are from many places, near and far, and acknowledge the traditional owners and caretakers of those lands.

The Office of Experiential Education would like to thank the many individuals who have generously permitted the adaptation of their materials in the revision of our student handbooks and policies, with individual recognition to Ann Thompson, Andrea Cameron, Harriet Davies and Doreen Leong. We would also like to recognize Marguerite Yee, Amin Bardai, Rosemin Kassam and Angela Kim-Sing for their past contributions to our program.

We acknowledge and thank the following groups for their ongoing collaboration and sharing of ideas:

College of Pharmacists of British Columbia

British Columbia Pharmacy Association

Canadian Society of Hospital Pharmacists

Drug and Poison Information Centre

Association of Faculties of Pharmacy of Canada

Pharmacy Experiential Programs of Canada

Introduction

The mission of the Office of Experiential Education is to create and facilitate the structured learning opportunities necessary for students to develop the knowledge, skills and professional attributes required for direct-patient care roles and innovative pharmacy practice upon graduation. The Office of Experiential Education is responsible for the facilitation of over 1000 placements each year for our Entry-to-Practice and Flexible PharmD programs and the Canadian Pharmacy Practice Program (CP3) for our international pharmacy graduates. Working closely with our experiential education sites and partners, we aim to provide students with valuable hands-on experience within a variety of pharmacy practice settings under the supervision and guidance of our qualified practice educators.

Experiential education is an integral component of student learning. We strive to provide diverse opportunities for our Flexible PharmD students to continue to build on and advance their knowledge and skills in the provision of evidence-based patient-centered care within a variety of health care settings. By the completion of their program, we strive for our students to have the enhanced competence and confidence in their expanding role as valued and collaborative members of the health care team.

The Faculty is grateful to the many dedicated practice educators that enthusiastically welcome our students to their practice sites each year. Without their unwavering commitment and dedication, our experiential education program would not be possible. We thank each of our practice educators for their ongoing collaboration with the Faculty and their valued contributions to the clinical education of our students.

Kind regards,

A handwritten signature in black ink that reads "Janice Yeung". The script is fluid and cursive, with the first letters of each word being capitalized and larger than the rest of the letters.

Dr. Janice Yeung, BSc.(Pharm), ACPR, Pharm D
Director, Office of Experiential Education

SECTION 1 – PRACTICUM OVERVIEW

1.1 Course Descriptions

Practice Setting	Course #	Course Name	Course Description
Direct Patient Care (DPC)	PHRM 491	Advanced Pharmacy Practice Experience – Outpatient	<ul style="list-style-type: none"> Advanced pharmacy practice experience 160 hours (4 weeks) continuous Direct patient care practicums with emphasis on application of knowledge, comprehension, and skills at a Competent performance level in moderate-complexity patient scenarios
	PHRM 492	Advanced Pharmacy Practice Experience – Inpatient	
	PHRM 493	Advanced Pharmacy Practice Experience – Specialized Outpatient	
	PHRM 494	Advanced Pharmacy Practice Experience – Ambulatory/Primary Care	
	PHRM 495	Advanced Pharmacy Practice Experience – Selected Direct Patient Care (Outpatient/ Inpatient)	
Direct Patient Care or Non-Direct Patient Care (NDPC)	PHRM 496	Advanced Pharmacy Practice Experience – Selected Direct Patient Care or Non-Direct Patient Care	<ul style="list-style-type: none"> Advanced pharmacy practice experience 240 hours (6 weeks) continuous Direct patient care practicum in a selection of diverse practice areas (e.g. outpatient/inpatient), with emphasis on application of knowledge, comprehension, and skills at a Competent performance level in moderate-complexity patient scenarios or; Non-direct patient care practicum in areas such as research, health policy, education, and leadership, with emphasis on the Communicator, Collaborator, Leader- Manager, Scholar, and Professional AFPC role domains.

1.2 Educational Outcomes

The Flex PharmD Program is designed to provide students with up-to-date knowledge and skills required to excel in professional practice in a wide range of pharmacy settings. It also imparts students with knowledge and skills in leadership, communication, management, and innovative practice roles.

The experiential educational outcomes for this program are structured around the seven key pharmacist roles articulated by the Association of Faculties of Pharmacy of Canada (AFPC) 1:

- 1) **Care Provider:** As Care Providers, pharmacy graduates provide patient-centered pharmacy care by using their knowledge, skills and professional judgement to facilitate management of a patient's medication and overall health needs across the care continuum. Care Provider is the core of the discipline of pharmacy.
- 2) **Communicator:** As Communicators, pharmacy graduates communicate effectively in lay and professional language, using a variety of strategies that take into account the situation, intended outcomes of the communication and diverse audiences.
- 3) **Collaborator:** As Collaborators, pharmacy graduates work collaboratively with patients and intra- and inter-professional teams to provide safe, effective, efficient health care, thus fulfilling the needs of the community and society at large.
- 4) **Leader-Manager:** As Leaders and Managers, pharmacy graduates engage with others to optimize the safety, effectiveness and efficiency of health care and contribute to a vision of a high-quality health care system.
- 5) **Health Advocate:** As Health Advocates, pharmacy graduates demonstrate care for individual patients, communities and populations by using pharmacy expertise to understand health needs and advance health and well-being of others.
- 6) **Scholar:** As Scholars, pharmacy graduates take responsibility for excellence by applying medication therapy expertise, learning continuously, creating new knowledge and disseminating knowledge when teaching others.
- 7) **Professional:** As Professionals, pharmacy graduates take responsibility and accountability for delivering pharmacy care to patients, communities and society through ethical practice and the high standards of behavior that are expected of self-regulated professionals. The Professional role is the overarching ethos of the discipline of pharmacy.

Flex PharmD students should also recognize the four domains of the **Model of Practice for Canadian Pharmacists (MSOP)** developed by the National Association of Pharmacy Regulatory Authorities (NAPRA)². These domains encompass standards against which pharmacists' performance can be evaluated when the pharmacists are undertaking the activities imperative for safe and effective practice in their daily work.

The Four Domains of MSOP for Canadian Pharmacists are:

- 1) Expertise in medications and medication-use
- 2) Collaboration
- 3) Safety and Quality
- 4) Professionalism and Ethics

For your reference:

¹AFPC Educational Outcomes for First Professional Degree Programs in Pharmacy in Canada 2017.

Available at: http://www.afpc.info/system/files/public/AFPC-Educational%20Outcomes%202017_final%20Jun2017.pdf

²NAPRA Professional Competencies for Canadian Pharmacists at Entry to Practice.

Available at: http://napra.ca/sites/default/files/2017-08/Comp_for_Cdn_PHARMACISTS_at_EntrytoPractice_March2014_b.pdf

³NAPRA Model Standards of Practice for Canadian Pharmacists.

Available at: https://napra.ca/sites/default/files/2017-09/Model_Standards_of_Prac_for_Cdn_Pharm_March09_layout2017_Final.pdf

1.3 Direct Patient Care Practicum Goals and Learning Objectives

The overarching goal of the direct patient care practicums of the UBC Flex PharmD program is to ensure that graduates have the **knowledge, skills** and **professional attributes** necessary to provide exemplary patient care.

Below are the overall goals and learning objectives for all direct patient care (DPC) practicums within the UBC Flex PharmD program. Students will be expected to achieve these learning objectives, at the expected level of performance outlined in the **Direct Patient Care Practice Educator Assessment of Student** form.

1.3.a Knowledge

Goal

Develop, integrate and apply the knowledge necessary to provide patient-centered pharmacy care to facilitate management of a patient's medication and overall health needs across the care continuum.

Learning Objectives

By the end of this course, students will be able to:	AFPC Reference	NAPRA Reference
1) Apply knowledge of the following to patient-specific clinical findings to make appropriate, patient-specific drug therapy recommendations: a. Pathophysiology, risk factors, etiology, and clinical presentation of medical conditions, including symptoms, physical assessment, relevant diagnostics, and laboratory findings b. Pharmacology, pharmacokinetics, pharmaceuticals, and evidence-based therapeutics	CP 1.1, SC1, SC2	
2) Apply knowledge of safe medication practices to optimize medication use for patients and health care delivery	CP3, LM1	
3) Apply knowledge of regulations and ethical principles through practice in accordance with the laws, ethical codes, and regulatory requirements (e.g. bylaws, professional standards, policies and/or guidelines) that govern pharmacy practice within their jurisdiction	CP1, CP3.2	1.1, 1.2, 1.4, 1.5

1.3.b Skills (Provision of Pharmaceutical Care)

Goal

Develop and demonstrate the clinical skills and professional judgement necessary to provide patient-centered pharmacy care to facilitate management of a patient's medication and overall health needs across the care continuum.

Learning Objectives

By the end of this course, students will be able to:	AFPC Reference	NAPRA Reference
4) Prioritize assigned work, identifying patients who are most likely to experience drug therapy problems and setting priorities to manage and balance patient care, workflow and practice requirements	LM 2.2, LM 4.2, PR 3.1	
5) Establish and maintain a respectful, professional, and ethical relationship with the patient and/or their caregivers centered on the patient's needs, values, desired level of care and health goals	CL1, CM1, CM2	2.1
6) Gather, interpret and assess relevant history from the patient, his/her health records, caregivers, and other healthcare professionals including: <ul style="list-style-type: none">a. Patient demographicsb. Chief complaint/reason for encounterc. History of present illnessd. Past medical historye. Family historyf. Functional historyg. Social historyh. Nutritional status, dietary restrictions/needs, and exercisei. Review of systems utilizing a head-to-toe approach (e.g. signs/symptoms, physical exam, labs, diagnostics, imaging, microbiology)j. Health care team members involved in the care of thek. patient	CP2.1, SC1	2.2, 2.3
7) Gather, interpret and assess a best possible medication history (BPMH), including: <ul style="list-style-type: none">a. Allergy historyb. Adverse drug reactionsc. Current medications/medications prior to admission	CP 2.1, SC 1	2.2, 2.3

<ul style="list-style-type: none"> a. Past medication history b. Non-prescription medication history c. Immunization history d. Social drug history e. Medication experience and adherence 		
8) Develop a prioritized medical problem list, identifying both the patient's active and chronic issues	CP 2.2, SC1	2.3
9) Identify and justify a prioritized list of all actual and potential patient-specific drug therapy problems	CP2.2, HA1, SC1, SC2	2.3, 2.4
10) Determine the desired outcomes and patient-specific medication-related and non-pharmacological goals of therapy, specifying measurable endpoints, target values and associated timeframes	CL 1.1, CL 1.3, CM 1, CM 2.1, CM 2.4, CP 1.4, CP 2.3, HA1, SC1, SC2	2.5.1
11) Identify a prioritized list of all viable therapeutic alternatives through integration of relevant patient data, best available evidence and comparing and contrasting the pros and cons of each alternative, including assessment of efficacy, safety, patient factors, administration issues and cost	CP1.5, CP2.3, SC1, SC2	2.5.2, 2.5.3
12) Identify, justify and defend a list of appropriate, patient-specific recommendations for identified drug therapy problems	CP2.3, SC1, SC2	2.5.4, 6.1
13) Create and implement a care plan in collaboration with the patient and healthcare team members through communication means as appropriate, including, but not limited to: <ul style="list-style-type: none"> a. Obtaining consent b. Making appropriate patient-specific therapeutic recommendations c. Making a referral and/or consulting others d. Adapting, initiating, discontinuing, dispensing or administering medication as authorized e. Engaging the patient or caregiver through education and counselling, empowerment and self-management f. Communicating the rationale for the care plan within the circle of care 	CL1, CL2, CM1, CM2, CP2.4, HA1, LM1.4, SC1, SC2, SC4	2.5, 2.6, 2.7, 3.1, 6.1, 7.1, 7.2, 8.1, 8.2, 8.3, 8.4
14) Develop an appropriate, patient-specific monitoring plan and/or plans for continuity of care, specifying efficacy and safety	CL2, CP2.5	2.5.8

endpoints, target values, frequency and timeframes for monitoring		
15) Provide follow up evaluation and assessment of effectiveness, safety and patient adherence and tolerance to drug therapy	CP 2.5, SC1, SC2	2.8
16) Proactively document patient-related healthcare issues, care plans and medication orders/clarifications in a clear, concise, and organized manner, fulfilling professional and legal requirements	CM1, CM2, CL2.3, LM 1.4	1.5
17) Effectively respond to medication- and practice-related questions and educate others in a timely manner, utilizing systematic literature search, critical appraisal skills, and appropriate means of communication (verbal or written, as appropriate)	CM1, CM2, SC1, SC2, SC4	6.1, 6.2, 7.1, 7.2.1, 7.2.3, 7.3
18) Advocate for the health and wellness of patients and the community, promoting disease prevention and facilitating patient access to the health care system and required services	LM 1.1, LM3.1, HA 1, HA2	5.1, 5.2

1.3.c Attitudes and Behaviours(Professionalism)

Goal

Demonstrate the attitudes and high standards of behaviour expected of self-regulated professionals for delivering pharmacy care to patients, communities and society through ethical practice.

Learning Objectives

By the end of this course, the student will consistently:	AFPC Reference	NAPRA Reference
19) Demonstrate the attitudes, qualities, ethical principles, commitment, and characteristics of a professional as expected by patients, other pharmacists, regulatory bodies, and other healthcare professionals including demonstration of, but not limited to: <ul style="list-style-type: none"> a. Accountability b. Attire and appearance c. Confidentiality d. Honesty and integrity e. Punctuality 	PR1, PR2	1.4
20) Demonstrate responsibility and commitment to their own learning and the ongoing refinement and advancement of critical	LM3, PR3	1.4

<p>thinking, scientific reasoning, problem-solving and decision- making skills through the demonstration of, but not limited to:</p> <ul style="list-style-type: none"> a. Self-directed learning b. Self-evaluation c. Personal reflection d. Receptiveness to feedback e. Adaptability and openness to change 		
<p>21) Demonstrate an understanding of the role of the pharmacist within the healthcare team, practicing within their scope of practice and all legal and ethical requirements</p>	<p>CP1, PR1, PR2</p>	<p>1.1, 1.2</p>

1.4 Non-Direct Patient Care Practicum Goals & Learning Objectives

The following section describes the overall goals and learning objectives for NDPC practicums within the Flex PharmD program. Students will be expected to achieve these learning objectives, at the expected level of performance as outlined in the **Non-Direct Patient Care Practice Educator Assessment of Student** form.

Specific practicum objectives and outcomes will largely depend on the nature of the practicum and may vary between practice site/settings. Specific practicum expectations and activities are detailed in the **Practicum Specific Manuals** associated with each specific practice site/setting.

1.4.a Skills

Goal

Demonstrate and develop the knowledge, skills, and behaviors associated with AFPC Educational Outcomes including but not limited to the Communicator, Collaborator, Leader-Manager, and Scholar role domains.

Learning Objectives

By the end of this course, the student will be able to:	AFPC Reference	NAPRA Reference
1) Demonstrate the ability to communicate appropriately verbally, non-verbally, in writing, or via communication technology with students, patients, clients, pharmacy colleagues, health care providers, and/or community partners in lay and/or professional language as appropriate	CM1.1, CM1.5, CM 2.1	7.1-7.3
2) Demonstrate the ability to collaborate effectively with various stakeholders, including fellow students, pharmacy colleagues, community partners and other health care providers as appropriate	CL1, CM1, CM2	8.1-8.3
3) Demonstrate the application of leadership and management skills by: a. Contributing to and/or advancing the goals and objectives of the practice setting and/or profession and, b. Managing time efficiently, prioritizing assigned activities/projects, and meeting assigned activity/project deadlines within expected timeframes	LM2, LM3, LM4	1.4, 9.1, 9.2
4) Provide evidence-supported decisions, and/or respond effectively to practice-related questions and educate others in a timely manner, utilizing systematic literature search, critical appraisal	CM1, CM2, SC1, SC2, SC4	6.1, 6.2, 7.1, 7.2, 7.3

skills, and appropriate means of communication (verbal or written, as appropriate)		
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1.4.b Attitudes and Behaviours (Professionalism)

Goal

Demonstrate the attitudes and high standards of behaviour expected of self-regulated professionals for delivering care to patients, communities and society through ethical practice, in a variety of practice settings.

Learning Objectives

By the end of this course, the student will consistently:	AFPC Reference	NAPRA Reference
Demonstrate the attitudes, qualities, ethical principles, commitment, and characteristics of a professional as expected by patients, other pharmacists, regulatory bodies, and other healthcare professionals including demonstration of, but not limited to: Accountability Attire and appearance Confidentiality Honesty and integrity Punctuality	PR1, PR2	1.4
Demonstrate responsibility and commitment to their own learning and the ongoing refinement and advancement of critical thinking, scientific reasoning, problem-solving and decision- making skills through the demonstration of, but not limited to: Self-directed learning Self-evaluation Personal reflection Receptiveness to feedback Adaptability and openness to change	LM3, PR3	1.4
Demonstrate an understanding of the role of the pharmacist within the healthcare team, practicing within their scope of practice and all legal and ethical requirements	CP1, PR1, PR2	1.1, 1.2

1.5 Expected Level of Performance

1.5.a Direct Patient Care Practicums

For each direct patient care practicum, students must meet the expected level of performance outlined in the table below for ALL elements described within the Knowledge and Skills domains of the Direct Patient Care Goals and Learning Objectives, while consistently exhibiting all elements within the Professionalism domain.

The table also provides guidance on patient complexity and characteristics; however, the practice educator and/or designated pharmacist will determine if the expectations on "patient complexity" for course activities are met. This may or may not be within the "patient characteristics" parameters that are suggested below, as a number of other factors may contribute to complexity, including: psychological (e.g. cognitive impairment), social (e.g. affordability of treatment), biological (e.g. organs affected, degree of dysfunction), health-care system related (e.g. number of involved health care providers). These dimensions should also be taken into account when assessing the student's level of performance in the care of their patients.

Practicum Course	Expected Level of Performance	Student Characteristics ³	Expected Patient Complexity	Patient Characteristics
PHRM 491–495, 496 (DPC)	COMPETENT	<ul style="list-style-type: none">• Has good working and background understanding• Now sees actions at least partially in terms of longer-term goals• Copes with complex situations through deliberate analysis and planning• Able to work independently to a standard that is acceptable though may lack refinement• Able to achieve most tasks using own judgement	MODERATE	Medical Conditions: 5-7 Number of medications: 7+

1.5.b Non-Direct Patient Care Practicums

For each non-direct patient care practicum, students must meet the expected level of performance outlined in the table below for ALL elements described within the Skills domain of the Non-Direct Patient Care Goals and Learning Objectives, while consistently exhibiting all elements within the Professionalism domain.

Practicum Course	Expected Level of Performance	Student Characteristics
PHRM 496 (NDPC)	<u>MEETS</u> Expected Level of Performance	Takes initiative readily, uses judgement appropriately, and requires intervention by the practice educator infrequently.

1.6 Student and Practice Educator Practicum Activities Summary Checklist

1.6.a Required Activities for all Practicums

The table below describes the required activities for all practicums.

Practicum Activity and Student Role	Practice Educator (PE) Role	Deadline
Student Introduction and Orientation: <input type="checkbox"/> Student to complete UBC Pharmacy Student Health and Safety Orientation (HSO) form required by WorkSafeBC, and review with the practice educator within the first 24 hours of the practicum. <input type="checkbox"/> Use the 72-Hour Checklist to guide orientation to the practice site.	Orient student to practice site within the first 24 hours of the practicum, using the 72-Hour Checklist to guide this, as well as reviewing HSO form with student No verification required on E*Value	Upload completed, scanned HSO form as a PDF to Canvas within the first 72 hours of the practicum No submission for 72-Hour checklist
Student Introduction Resume: <input type="checkbox"/> Student to complete the Student Introduction Resume	<input type="checkbox"/> Review resume with student and discuss their skills and experiences to date within the first 72 hours of the practicum Verify completion on Practicum Activities E*Value Coursework	Student to share resume as a PDF with practice educator one week before practicum begins Document completion of activity on Practicum Activities E*Value coursework. Submission by 11:55pm on the last OEE scheduled practicum day
Learning Contract: <input type="checkbox"/> Student to complete each section, Plan-Act-Reflect, at the appropriate interval of time on the respective E*Value Coursework forms PLAN : identifying learning goals and reviewing these with practice educator, within 72 hours of start of practicum ACT and REFLECT : during and at the end of the practicum, assessing progress towards attaining the set goals.	<input type="checkbox"/> Review and verify Learning Contract - PLAN ACT and REFLECT form on E*Value with student. PE is encouraged to help clarify and articulate student's learning goals. PE may also suggest modifications to the goals to ensure they are appropriate and attainable.	Learning Contract - PLAN form is due within the first 72 hours of the practicum Learning Contract – ACT and REFLECT form is due 11:55pm on the last OEE scheduled practicum day

Midpoint Assessment: <input type="checkbox"/> Student to develop action plan as required to address midpoint assessment and notify OEE of any scores below the expected level of performance.	<input type="checkbox"/> Complete the Practice Educator Assessment of Student form and review with student	4-week practicum: By the end of Week 2 6-week practicum: By the end of Week 3
Self-Assessment: <input type="checkbox"/> Complete the Self-Assessment form on E*Value Coursework. Students will reflect on progress made as well as develop actionable steps going forward for improvement.	<input type="checkbox"/> PE to review and discuss Self-Assessment E*Value Coursework form with student Verify completion on Practicum Activities E*Value Coursework	4-week practicum: By the end of Week 2 on E*Value 6-week practicum: By the end of Week 3 on E*Value
Self-Assessment: <input type="checkbox"/> Complete the Self-Assessment form on E*Value Coursework. Students will reflect on progress made as well as develop actionable steps going forward for improvement.	<input type="checkbox"/> PE to review and discuss Self-Assessment E*Value Coursework form with student Verify completion on Practicum Activities E*Value Coursework	4-week practicum: By the end of Week 2 on E*Value 6-week practicum: By the end of Week 3 on E*Value
Final Assessment: <input type="checkbox"/> Student to notify OEE of any scores below the expected level of performance.	<input type="checkbox"/> Complete the Practice Educator Assessment of Student form and review with student	11:55pm on the last OEE scheduled practicum day
Giving Feedback to the Practice Educator: <input type="checkbox"/> Provide constructive feedback to PE at regular intervals throughout practicum <input type="checkbox"/> Complete the Student Evaluation of the Practice Educator and Practice Site on E*Value	PE to participate in feedback sessions with student Verify completion on Practicum Activities E*Value Coursework	11:55pm on the last OEE scheduled practicum day
OEE Practicum Evaluations: <input type="checkbox"/> Complete the Student Evaluation of the OEE Course on E*Value	<i>No action required</i>	11:55pm on the last OEE scheduled practicum day

1.6.b Suggested Activities for Direct Patient Care Practicums

The table below describes the suggested activities for direct patient care (DPC) practicums. Students are expected to provide care to as many patients as possible during the practicum.

Practicum Activities & Student Role	Practice Educator (PE) Role	Deadline
Patient Work Up and Care Plan: <input type="checkbox"/> Provide full pharmaceutical care by completing patient work-ups and developing and implementing care plans, including follow up evaluations	The PE will review all completed patient care activities (e.g. patient work-ups, recommendations, documentations, presentations, etc.) with the student when deemed necessary and appropriate.	Document on Practicum Activities E*Value Coursework by 11:55pm on the last OEE scheduled practicum day
Drug Information Response: <input type="checkbox"/> Answer drug information requests as they arise in day-to-day practice		
Presentation: <input type="checkbox"/> Prepare and deliver presentations (e.g. journal club, in-service, cases etc.) to meet the learning needs of a specific audience		
Service: <input type="checkbox"/> Deliver service activity as required by the practice educator and/or to meet any site need. Examples may include: Professional and Specialty Services (e.g. Medication reviews, prescription adaptations, injection services); Health promotion; Day-to-day pharmacy practice and patient care activities (e.g. Counseling, inventory management, prescription entry, medication reconciliation and follow-ups); involvement in any new initiative or project undertaken by the site. Refer to Section 3.4. for more examples.	Documentation requirements may vary between sites and will be determined by the PE. Documentation should comply with all professional and legal requirements. Verify completion on Practicum Activities E*Value Coursework	

1.6.c Required Activities for Non-Direct Patient Care Practicums

The table below describes the documentation of the practicum-specific activities for non-direct patient care practicums.

Practicum Activities & Student Role	Practice Educator (PE) Role	Deadline
Practicum Specific Activities: <input type="checkbox"/> Complete practicum specific activities as agreed upon with the practice educator and as outlined in the Practicum Specific Manual on Canvas	<p>The PE will supervise all practicum specific activities conducted by the student when deemed necessary and appropriate.</p> <p>Documentation requirements may vary between sites and will be determined by the PE.</p> <p>Documentation should comply with all professional and legal requirements.</p> <p>Verify completion on Practicum Activities E*Value Coursework</p>	<p>Document on Practicum Activities E*Value Coursework by 11:55pm on the last OEE scheduled practicum day</p>

1.7 E*Value Submissions

E*Value is an online tool to be utilized by practice educators and students to capture the completion of various practicum activities and evaluations as outlined in this handbook.

Students will be required to be familiar with the use of E*Value prior to the start of their practicums. Detailed instructions for using E*Value are posted on Canvas for students and on the OEE Practice Educator Resource Center <https://courses.cpe.ubc.ca/browse/ubcv/pharmaceutical-sciences-cpe/programs/oee> for practice educators.

Note: E*Value can only be accessed at the following URL: <https://ca.e-value.net/>. Please note that searching E*Value on the internet may result in finding the U.S. website for E*Value, which is incorrect.

Students must ensure that all required course activities and assignments, as described in this course handbook, are completed and verified by the practice educator as being completed satisfactorily and safely. The required submission to demonstrate evidence of learning for each of the required course activities must be completed online in E*Value by the specified deadline for submission, **which is on the last OEE scheduled practicum block date at 11:55pm.**

In addition to documentation of activity completion on E*Value, students will be required to complete additional documentation for some course activities. This will be described under each specific course activity section of the handbook and/or as determined between the student and the practice educator (e.g. site-specific patient care plans, follow-up evaluations, etc.). It is the student's responsibility to ensure all completed documentation is shared with their practice educator. Students are responsible for tracking these documents, which may be requested by the practice educator(s) on site and/or the OEE for review at any time. Students must ensure the confidentiality of all patient and practice site information in their documentation.

Resource(s) on Canvas

- E*Value Coursework instructions

SECTION 2 – COURSE ACTIVITIES

2.1 Student Introduction Resume

Purpose

Maintaining an up-to-date resume is an important activity for working professionals. Students will develop and maintain a comprehensive resume for each of their practicum experiences. Students will use their resume as an opportunity to introduce their accomplishments (e.g. academic achievements, awards), experiences (e.g. work experience, practicums, volunteering, teaching), community involvement (e.g. committees), and relevant skills to the practice educator prior to the start of the practicum. In discussing their resume with their practice educator, students will have the opportunity to share their skills and experiences as part of their practice site orientation. (DPC Learning Objectives: 19-21; see Section 1.2)

Process

1. Two to four weeks prior to the start of the practicum, the student is required to create, edit, and/or update their resume. The student should accurately and comprehensively identify their education, work experiences, publications and posters, presentations, scholarships, certifications, awards, and/or professional associations. An OEE Resume Template is provided to students, however students can use any appropriate template of their preference.
2. One-week prior to the start of the practicum, the student must share their resume in PDF format with their practice educator via email for their review. An alternate method of sharing the resume (e.g. uploading to E*Value) is acceptable if preferred by the practice educator.
3. Within the first 72 hours of the practicum, the student and practice educator should meet to review the resume and discuss the student's skills and experiences to date.

Activity Deadline

Student to share resume as a PDF with practice educator one week before practicum begins

Resource(s) on Canvas

- OEE Resume Template
- E*Value Student Introduction Resume Instructions for Uploading Resume
- UBC Student Services: <https://students.ubc.ca/career/career-resources/resumes-cover-letters-curricula-vitae>

2.2 Learning Contract

Purpose

Given the unique and diverse range of professional background and experiences of students, it is important that each student develops a practicum-specific learning contract that furthers their own personal learning goals. The learning goals should enhance and guide the student's learning process and practicum experience throughout the onsite activities.⁶ Central to this process is an initial dialogue between the practice educator and student to establish mutually agreed upon learning goals and a plan to achieve these goals by the end of the practicum. (Learning Objectives: DPC 19-21 and NDPC 5-7. See Sections 1.3 and 1.4.)

Process

During the first 72 hours of the practicum, the student is to identify at minimum three personal, practicum-specific learning goals and document and submit these on the Learning Contract - Plan form on E*Value Coursework.

- 1) Review the Learning Contract - Plan form with the practice educator and/or designated pharmacist.
 - a. Practice educators are encouraged to help clarify and articulate the student's learning goals, as well as assist in identifying activities or resources to support the attainment of these proposed goals.
 - b. The practice educator may also suggest modifications to the learning goals to ensure they are appropriate and attainable by the completion of the practicum.
 - c. Upon mutual agreement of the learning goals, the practice educator will verify completion of the form on E*Value.
- 2) Throughout the practicum, the student is encouraged to review their progress towards attaining their learning goals with the practice educator.
- 3) During the last week of the practicum, the student is required to complete the Learning Contract - Act and Reflect form on E*Value and review and discuss this with the practice educator as needed.

Activity Deadline

- Within the first 72 hours, student is to submit completed Learning Contract - Plan form on E*Value Coursework.
- By the end of the practicum, student is to submit completed Learning Contract - Act and Reflect form on E*Value Coursework.

Resource(s) on Canvas

- REVISE Bloom's Taxonomy Action Verbs - Anderson, L. W., & Krathwohl, D. R. (2001). A taxonomy for learning, teaching, and assessing, Abridged Edition. Boston, MA: Allyn and Bacon.
- Learning Objective Examples

2.3 Self-Assessment

Purpose

Students will be required to self-assess their knowledge, skills, and professional attributes while on practicum. Students will reflect on progress made as well as develop actionable steps going forward for improvement. The student is expected to involve their practice educator in this process to ensure their self-assessment is aligned with the expectations of the site and practice educator. The practice educator is encouraged to provide guidance and support to the student as needed. This activity will create an opportunity for continual self-evaluation, which is an important skill required of all pharmacists.

(Learning Objectives: DPC 19-21 and NDPC 5-7. See Sections 1.3 and 1.4)

Process

- 1) The student is encouraged to review the **Practice Educator Assessment of Student*** form and self-reflect on their performance on practicum, comparing it to the expected level of performance and areas outlined on the assessment form.
- 2) The student should discuss with their practice educator the following domains as they complete the self-assessment activity at midpoint:

a. Knowledge* & Skills

Within the "Knowledge" and the "Skills" domain categories on the **Practice Educator Assessment of Student** form, where do you believe your performance stands? Briefly provide examples of how you came to this assessment. What did you do well? What was most challenging?

What do you plan to work on during the remainder of your practicum? How are you going to make improvements (e.g., your specific action plan)? How will you know if your action plan was successful?

*Note: "Knowledge" domain section is excluded from the Self-Assessment form for PHRM 496 NDPC practicums

b. Professionalism

Within the "Professionalism" domain categories on the **Practice Educator Assessment of Student form**, in what ways did you demonstrate the attributes of professional behaviour? Briefly provide examples of this.

What is your specific action plan to ensure you continue to consistently demonstrate the attributes of professional behavior?

Activity Deadline

- 4-Week Practicum: By the end of week 2, student to submit the completed Self-Assessment form on E*Value Coursework.
- 6-Week Practicum: By the end of week 3, student to submit the completed Self-Assessment form on E*Value Coursework.

Resource(s) on Canvas

- Practice Educator Assessment of Student form (available on Canvas for student reference)
- Self-Assessment Example

2.4 Giving Feedback to the Practice Educator

Purpose

Providing feedback is a critical skill for pharmacists and is an essential element in any productive workplace environment. An effective student-practice educator partnership begins with an open dialogue, including respectful, professional, and constructive communication throughout the practicum. Students are required to take an active role in the feedback process as timely and constructive feedback will assist the practice educator(s) in enhancing the student's learning experience on-site. (Learning Objectives: DPC 19-21 and NDPC 5-7. See Sections 1.3 and 1.4)

Process

- 1) On the first day of the practicum, the student and practice educator should establish a commitment to feedback conversations at regular intervals (e.g. five minute daily feedback sessions at the end of each day with your practice educator). The student is encouraged to seek permission from the practice educator to provide feedback to them. This establishes mutual respect at the outset of the practicum.
- 2) Throughout the practicum, the student will reflect on what the practice educator is doing well and how the practice educator can better facilitate the student's learning on-site. The student should consider learning opportunities that are realistic and available at the practice site.
- 3) The student will provide this feedback to their practice educator. The student is also encouraged to seek feedback on their own performance during these conversations (e.g. what went well that day, what could be improved on).
- 4) At the end of the practicum, as a summative evaluation for the practice educator, the student will complete the **Student Evaluation of the Practice Educator and Practice Site** on E*Value and discuss this with the practice educator and/or designated pharmacist.

Note: This evaluation is not anonymous and responses are visible to the practice educator(s) and the OEE.

Activity Deadline

By 11:55 pm on the last scheduled day of the practicum, student to submit the **Student Evaluation of Practice Educator and Practice Site** on E*Value.

Resource(s) on Canvas

- Giving Feedback Part 1 Video⁷

SECTION 3 – SUGGESTED DIRECT PATIENT CARE PRACTICUM ACTIVITIES

The following section highlights descriptors for activities (listed below) commonly encountered in direct patient care practicum settings. Depending on the practice site, student's learning goals, patient needs and practice educator preferences, students will be involved in a variety of patient care activities (e.g. new and refill assessments, medication reconciliation, patient follow-ups, etc.). Students are expected to provide care to as many patients as possible during their practicum.

- Patient work up and care plan development
- Drug information responses
- Presentations
- Service activities

3.1 Patient Work Up and Care Plan

Purpose

Pharmaceutical care is the fundamental focus of all direct patient care practicum activities. Students are expected to take responsibility for and participate in the role of a pharmaceutical care practitioner through the integration of both cognitive (pharmacotherapy workup) and physical work (implementation of patient care process through collaboration with the patient, caregivers, and interdisciplinary team).^{8,9} (Learning Objectives: DPC 1-21; See Section 1.3)

Process

- 1) In completing patient work-ups and care plans, the student should:
 - Conduct patient assessments (including, but not limited to, gathering patient specific information, performing medication reconciliations or BMPHs, conducting patient interviews and allergy assessments etc.) to identify and prioritize drug therapy problems,
 - Develop and implement care plans that address the desired patient specific outcomes,
 - Follow-up with relevant health care providers within circle of care,
 - Complete follow-up evaluations with the patient, where feasible,
 - Provide education and counselling, and
 - Maintain seamless care through any transitions in care providers (e.g. transferring wards/services, discharges, etc.)
- 2) Care provided should be consistent with the principles of pharmaceutical care described in the program curriculum and in Cipolle RJ, Strand LM, Morley PC *Pharmaceutical Care Practice: The Patient Centered Approach to Medication Management*, McGraw Hill, 2012.
- 3) Unless otherwise established or determined by the practice educator, the student must report their patient workup and all recommendations, including all documentation completed, to their practice educator prior to discussing with the patient/caregiver, physician, or other health care provider. Documentation requirements may vary between sites and will be determined by the practice educator and should be in compliance with all professional and legal requirements.

Resource(s) on Canvas

- Care Plan Documentation Tips
- *Suggested for outpatient settings:*
 - Patient Care Assessment Process and DTP Categories
 - Pharmacotherapy Work-up Notes – Assessment^{10,11}
 - Patient Assessment Form
 - Care Plan Form
 - Allergy Assessment Form
 - Requirements Checklist for Best Possible Medication History (BPMH) Interview

- Requirements Checklist for Allergy Assessment
 - Requirements Checklist for Care Plans
- *Suggested for health authority settings (inpatient & outpatient):*
 - Requirements Checklist for Inpatient Presentation to Practice Educator
 - Inpatient Work-Up and Monitoring Form
 - Work-Up and Care Plan Guide (Inpatient Setting) – A Student Guide
 - Medication Reconciliation in the Inpatient Setting
 - Pharmacist Approach to a Surgical Patient
- *Follow Up Evaluation:*
 - Follow Up Evaluation Form
 - Requirements Checklist for Follow Up Evaluation

3.2 Drug Information Response

Purpose

This activity allows students to respond to drug information questions or requests that pharmacists encounter on a daily basis. Drug information responses must be comprehensive, organized, accurate and timely. (Learning Objectives: DPC 1, 4, 6, 7, 10-12, 14-21; See Section 1.3)

Process

- 1) The student is encouraged to identify and discuss with the practice educator and/or designated pharmacist resources and references available at the practice site to assist in the provision of drug information.
 - In completing drug information responses as they arise in day-to-day practice at the site or as assigned by the practice educator, the student should:
 - Clearly define the specific question being asked and time frame for which the response is being requested.
 - Use the **Drug Information Request and Response form**, or an appropriate site-specific documentation tool, gather appropriate background information relating to the drug information request.
 - Use additional support documents, such as the **Inpatient Work Up Form** or **Pharmacotherapy Workup Notes** – Assessment^{11,12}, to assist in gathering pertinent patient information if the DIR is patient specific.
 - Compose an evidence-based written response to the drug information request, using Vancouver Style Referencing and scientific-writing skills.
- 2) Unless otherwise established or determined by the practice educator, the student must review their drug information request response, including all documentation completed, with the practice educator prior to discussing with the patient/caregiver, physician, or other health care provider.

Resource(s) on Canvas

- Requirements Checklist for Drug Information Response
- Drug Information Request and Response Form
- “How to Perform a Literature Search” video¹³
- Vancouver Style Referencing Drug Information Example
- UBC Library: Pharmacy Literature Search Skills Tutorial

- *Suggested for outpatient settings:*
 - Pharmacotherapy Workup Notes – Assessment 11,12
- *Suggested for health authority and primary care settings*
 - Inpatient Work-Up and Monitoring Form

3.3 Presentation

Purpose

Presentations enable students to develop their skills as scholars and communicators and share their therapeutic knowledge. Students are encouraged to seek opportunities to prepare and deliver presentations designed to meet the learning needs of a specific audience. (Learning Objectives: DPC 17-21; See Section 1.3)

Process

- 1) The student is encouraged to participate in presentation activities throughout their practicum. The presentation topic and format should be determined with the practice educator and may be:
 - a. Education, practice, or research-related
 - b. In any format (e.g. formal case presentation, journal club, in-service, drug category presentation, research/project presentation, etc.)
 - c. Presented to any audience (e.g. health practitioners, patients, care providers, students, pharmacy staff) as determined by the practice educator
 - d. Presented with another student and/or learner on site
- 2) Following completion of a presentation, the student should seek feedback from the practice educator and/or designated pharmacists to identify what worked well and what might require improvement. The **Presentation Evaluation form** is a tool that can be provided to practice educators to collect feedback.

Resource(s) on Canvas

- Requirements Checklist for Presentation
- Formal Patient Case Presentation – Overview & Tips for Success
- Case Presentation Map
- Nursing In-Service Map
- NERD Critical Appraisal Tools

3.4 Service

Purpose

In all settings, pharmacists are responsible for ensuring that the care, services, and medications provided meet patient needs and students are expected to actively participate in these activities during their practicums. These activities may be in the context of professional services and/or operational activities such as applying for special authority, submitting reports, counseling, arranging medications on discharge, and dispensing medications to patients or an activity that the student may be unfamiliar with. (Learning Objectives: DPC 1-21; See Section 1.3)

Process

1. During the first week of the practicum, the student will clarify and review with the practice educator, the site-specific policies and procedures required in order to engage in specific service activities. The student is encouraged to observe and ask questions to clarify the process for each service activity as needed.
2. Examples of workflow and service activities in daily practice may include, but are not limited to:
 - Conducting medication review/reconciliation
 - Prescription adaptations
 - Planning and delivering a clinic or workshop for staff or patients (e.g. or other health promotion project)
 - Medication counseling
 - Clarifying prescriber orders
 - Adverse drug reaction reporting
 - Drug use evaluation
 - Chart reviews
 - Patient Safety and Learning System (PSLS) reporting
 - Allergy assessments
 - Drug distribution and associated activities
 - Any other clinical activities and services offered by and/or unique to the practicum site

Resource(s) on Canvas

- College of Pharmacist of BC: Professional Practice Policies and Guides
- Government of BC: Pharmacy Fees and Services
- *Suggested for outpatient settings:*
 - BC Ministry of Health: Information for Pharmacies

- BC Pharmacy Association: Resource Centre (Membership Required) Requirements Checklist for Counseling
- *Suggested for health authority settings and ambulatory care settings:*
 - Medication Reconciliation in the Inpatient Setting – A Student Guide
 - Best Possible Medication History Interview – Student Guide
 - Best Possible Medication Discharge Plan (BPMDP) Student Worksheet
 - Best Possible Medication Discharge Plan (BPMDP) Counseling Student Guide
 - Medication Schedule Worksheet

SECTION 4 – NON-DIRECT PATIENT CARE ACTIVITIES

4.1 Practicum Specific Activities

For each NDPC practicum, specific practicum expectations and activities are to be discussed on/prior to the first day of the practicum. Individual **Practicum Specific Manuals** have been developed to further outline additional practicum-specific information such as expectations, learning goals and objectives, and activities. These manuals supplement the content outlined in **this Handbook**. Students should seek clarification immediately if they have any questions, with the practice educator and/or course coordinator.

Should practice educators/OEE provide a Practicum Specific Manual, students must familiarize themselves with the content in the **Practicum Specific Manual** for their specific practice site/setting, as students are required to understand and apply all information contained within.

Students will be expected to complete the required course activities as outlined in this **Flex PharmD Practicum Handbook**, in addition to the practicum specific activities outlined by their practice educator and/or articulated within the **Practicum Specific Manual**. Should any further clarification be required, please contact the course coordinator at the Office of Experiential Education.

SECTION 5 – ASSESSMENT PROCESSES

5.1 Assessment Processes

All assessments are guided by the programmatic assessment model for the E2P PharmD Program under the leadership of the Director of Student Assessment. The course assignments and activities are based on the course objectives, AFPC educational outcomes, and are in accordance with the UBC E2P PharmD Program's Cognitive Model.

Feedback is a critical component of a student's growth and learning throughout their practicums. Practice educators are encouraged to provide verbal feedback and assessment of performance to the student on a daily basis.

There are two types of assessment:

- **Formative** assessment is ongoing and progressive in nature and conducted throughout the learning process. It is intended to inform both the student and practice educator on the student's progress in achieving the learning objectives of the course or practicum. Formative assessment can be provided as verbal or written feedback throughout the course of the practicum and identifies what the student is doing well, what they have learned, and what they still need to learn. It creates opportunities for action to assist the student in closing gaps between their current performance and the performance level expected by the completion of the course or practicum. With frequent and regular practice educator feedback, the student is expected to self-reflect, make corrections and develop a strategy or learning plan, utilizing the feedback provided to improve in the specified areas.
- **Summative** assessment is conducted at the end of a course or practicum and is intended to evaluate student learning and achievement of the intended learning objectives. It involves making a judgment about a student's performance by comparing the observations of student performance to a specified rubric. A rubric is an assessment tool that provides a defined set of criteria and descriptions of levels of student performance. Summative assessments are utilized to ensure students achieve program-level outcomes, are able to meet established professional requirements and expectations upon graduation and inform the Faculty in making decisions about student advancement and promotion.

A formal formative assessment using the online **Practice Educator Assessment of Student*** form is completed by the practice educator at the midpoint of the practicum. This assessment reflects the practice educator's observation and assessment of the student's performance based on the criterion, and the rubrics and expectations of the University. The practice educator and student are expected to meet at the midpoint to formally discuss the student's progress and review the completed formative assessment form.

A formal summative assessment is completed at the end of the practicum using the same online **Practice Educator Assessment of Student*** form. The practice educator should consider all sources of information to assess overall student performance throughout the course of the practicum including, but not limited to, completed presentations, care plans, education and counseling, collaboration with team members, etc. By the end of the practicum, the student's overall level of performance must be commensurate with their year level, as previously outlined. The practice educator and student are expected to meet on the last day of the practicum to formally discuss the student's progress and review the completed summative assessment form.

All assessment forms are to be completed online on E*Value and are electronically submitted directly to the OEE upon completion.

The practice educator and/or designated pharmacist that is completing the assessment component of the course should have sufficient and multiple opportunities to interact with the student and observe their interactions to appropriately determine their level of performance in completing the course activities and learning objectives for the practicum. Depending on the practice environment and practicum itself, a student may regularly interact or be supervised by multiple pharmacists while onsite. In this case, there may be a designated practice educator who will complete the formal midpoint and/or final assessment of the student and provide feedback after reviewing the course work and consulting with other pharmacists who have observed or interacted with the student as necessary.

*Note: The Practice Educator Assessment of Student form varies depending on the course. The table below outlines the OEE Practice Educator Assessment of Student Forms used in each course and the frequency of formal assessment:

Course	Assessment Form	Frequency/Type
PHRM 491 PHRM 492 PHRM 493 PHRM 494 PHRM 495 PHRM 496 (DPC)	Direct Patient Care (DPC) Practice Educator Assessment of Flex PharmD Student	Midpoint Final
PHRM 496 (NDPC)	Non-Direct Patient Care (NDPC) Practice Educator Assessment of Flex PharmD Student	Midpoint Final

Practice educators are strongly encouraged to review the **Assessment of Student Learning – A Guidebook for Practice Educators** for further information on the assessment processes for the practicum courses.

It is the responsibility of the student to immediately contact the course coordinator and alert them to any assessment scores below the expected level of performance at any point during the practicum to ensure appropriate support and guidance can be provide

SECTION 6 – ADDITIONAL INFORMATION

6.1 Course Schedule

There is no standard course schedule or timetable for Flex PharmD experiential courses. Learning activities are scheduled by individual practice educators and practice sites, according to practice setting and practice site needs.

Once set by the practice educator, students must adhere to the daily schedule, daily activities, and practicum hours as required in the **Flex PharmD Program Practicum Policies, Procedures, and Guidelines**.

The following examples of course schedules may be used as a starting point to plan out weekly activities.

6.1.a Example 4-Week Course Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<input type="checkbox"/> Complete the UBC Pharmacy Student Health and Safety Orientation <input type="checkbox"/> Orientation to practice site, staff, & services	<input type="checkbox"/> Review completed Student Introduction Resume and 72-hour Checklist with practice educator <input type="checkbox"/> Ensure practice educator can access E*Value <input type="checkbox"/> Review Learning Contract - PLAN form with practice educator and submit to E*Value			<input type="checkbox"/> Reflect on activities completed and develop a plan for Week 2
	<input type="checkbox"/> Establish expectations and mechanism for communicating with and reporting to practice educator or designated pharmacist <input type="checkbox"/> Work on practicum activities as per the Practicum Handbook and as directed by your practice educator or designated pharmacist (e.g. patient counselling, compounding, medication reconciliation, professional and clinical services, new and refill prescription assessment, etc.) <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals				
Week 2	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook and as directed by your practice educator or designated pharmacist (e.g. patient follow up, presentations, patient work ups, etc.) <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals				<input type="checkbox"/> Complete Self-Assessment E*Value Coursework for Week 2 <input type="checkbox"/> MIDPOINT ASSESSMENT <input type="checkbox"/> Reflect on activities completed and develop a plan for Week 3
Week 3	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook and as directed by your practice educator or designated pharmacist (e.g. drug information questions, medication reviews, medical device demonstration, medication reconciliation, etc.) <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals				

Week 4	<input type="checkbox"/> Revisit Learning Contract and complete and submit ACT and REFLECT form <input type="checkbox"/> Work on practicum activities as per the Practicum Handbook and as directed by your practice educator or designated pharmacist (e.g. interprofessional activity, health promotion project, discharge counselling, etc.) <input type="checkbox"/> Discuss feedback provided to practice educator in Student Evaluation of the Practice Educator and Practice site	<input type="checkbox"/> FINAL ASSESSMENT <input type="checkbox"/> Complete Student Evaluation of OEE Course on E*Value by deadline <input type="checkbox"/> Complete Student Evaluation of Practice Educator and Practice Site on E*Value by deadline
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6.1.b Example 6-Week Course Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	<input type="checkbox"/> Complete the UBC Pharmacy Student Health and Safety Orientation <input type="checkbox"/> Orientation to practice site, staff, & services	<input type="checkbox"/> Review completed Student Introduction Resume and 72-hour Checklist with practice educator <input type="checkbox"/> Ensure practice educator can access E*Value <input type="checkbox"/> Review Learning Contract - PLAN form with practice educator and submit to E*Value			<input type="checkbox"/> Reflect on activities completed and develop a plan for Week 2
	<input type="checkbox"/> Establish expectations and mechanism for communicating with and reporting to practice educator <input type="checkbox"/> Work on practicum activities as per Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and/or as directed by your practice educator or designated pharmacist <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals				
Week 2	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and as directed by your practice educator or designated pharmacist <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals				<input type="checkbox"/> Reflect on activities completed and develop a plan for Week 4
Week 3	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and as directed by your practice educator or designated pharmacist <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals			<input type="checkbox"/> MIDPOINT ASSESSMENT <input type="checkbox"/> Reflect on activities completed and develop a plan for Week 4 <input type="checkbox"/> Complete Self-Assessment E*Value Coursework for Week 3	
Week 4	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and as directed by your practice educator or designated pharmacist <input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals			<input type="checkbox"/> Reflect on activities completed and develop a plan for Week 5	
Week 5	<input type="checkbox"/> Work on practicum activities as per the Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and as directed by your practice educator or designated pharmacist			<input type="checkbox"/> Reflect on activities completed and	

	<input type="checkbox"/> Provide feedback to practice educator at agreed-upon times/intervals	develop a plan for Week 6
Week 6	<input type="checkbox"/> Revisit Learning Contract and complete and submit ACT and REFLECT form <input type="checkbox"/> Work on practicum activities as per the Practicum Handbook, Practicum Specific Manual (applicable to NDPC only), and as directed by your practice educator or designated pharmacist <input type="checkbox"/> Discuss feedback provided to practice educator in Student Evaluation of the Practice Educator and Practice site	<input type="checkbox"/> FINAL ASSESSMENT <input type="checkbox"/> Complete Student Evaluation of OEE Course on E*Value by deadline <input type="checkbox"/> Complete Student Evaluation of Practice Educator and Practice Site on E*Value by deadline

6.2 Office of Experiential Education Contact Information

Dr. Janice Yeung Director
(604) 827 4846
janice.yeung@ubc.ca

Ms. Tricia Murray
Program Administrative Manager (604) 827
0183
tricia.murray@ubc.ca

Faculty Course Coordinator

Mr. Paulo Tchen (604) 827 0173
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Dr. Asal Taheri (604) 822 6107
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Dr. Penny Bring (Interim for Ms. Gabriella
Wong)
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Dr. Penny Bring (Interim for Dr. Neelam
Dhaliwal)
Penny.bring@ubc.ca

Course Number, Description

PHRM 491 Advanced Pharmacy Practice
Experience (APPE) – Outpatient
PHRM 493 Advanced Pharmacy Practice
Experience (APPE) – Specialized Outpatient

PHRM 492 Advanced Pharmacy Practice
Experience (APPE) – Inpatient

PHRM 494 Advanced Pharmacy Practice
Experience (APPE) – Ambulatory/Primary Care

PHRM 495 Advanced Pharmacy Practice
Experience (APPE) – Selected Direct Patient Care
PHRM 496 Advanced Pharmacy Practice
Experience (APPE) – Selected Direct Patient Care
or Non-Direct Patient Care Settings

Faculty members provide support to practicum sites, practice educators, and students for any issues related to:

- Course syllabi
- Practicum-associated assignments and activities
- Student assessment and evaluation
- Student performance
- Student absences
- Personal injury or major illness of students on practicum
- Any confidential issues related to the practicum

Should students have any questions or issues requiring discussion with a faculty member, please contact the front desk to schedule an appointment. Appointments are available Monday to Thursday, 8:30am to 3pm, Fridays 8:30am to 12 noon.

Administrative Support Team

Mr. Flavio Mikami
Senior Program Assistant (604)
822 0433
flavio.mikami@ubc.ca

Ms. Jane Lee
Senior Program Assistant (604)
822 3216
j.lee@ubc.ca

Ms. Vicky Lai Front Desk (604) 822
8077
phar.oe@ubc.ca

The administrative staff provides support to practicum sites, practice educators and students for:

- General enquiries
- Practicum scheduling and placements
- Practice educator or student contact information
- E*Value access
- Tracking
- Mailings, forms etc.
- UBC Cards

Off-Hours Issues

If you have immediate safety concerns for yourself or others, please call 911.

Crisis and After-Hours Contacts

- Vancouver Crisis Line | 1 800 SUICIDE (784 2433)
- Vancouver General Hospital | 604 875 4111
- Campus Security | 604 822 2222
- Crisis Centre BC | <http://crisiscentre.bc.ca/>
- Victim Link | 1 800 563 0808 (services in 110 languages)
- UBC Counselling Services | 604 822 3811
- On-campus support Monday to Friday, 8.30am-4.30pm | <https://students.ubc.ca/health-wellness/mental-health-support-counselling-services>

6.3 Policies

Please refer to the **Flex PharmD Program Practicum Policies, Procedures & Guidelines**.

Students are also expected to review the **UBC Flex PharmD Program Policies and Procedures** as outlined on the OEE Flex PharmD Practicums course on Canvas.

REFERENCES

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