

Hospital Pharmacy Practice

6-week Hospital Rotation

MANUAL 4

STRUCTURED PRACTICE EXPERIENCE PROGRAM

This program was adapted from the Dalhousie University College of Pharmacy Community Rotation Manuals and used with permission.

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Practice Direction Reminder for Pharmacist Preceptors & Interns IMPORTANT PRACTICE DIRECTION REMINDERS:

Interns and preceptors are reminded that while on structured practice experience program rotations, interns must be under the appropriate direction of their pharmacist preceptor. The pharmacist preceptor is professionally responsible for the pharmacy intern.

Interns and preceptors must review at the start of the rotation the strategy that will be followed to achieve the appropriate level of direction to meet the pharmacy legislation requirements.

Interns must clearly identify themselves as interns when in practice.

It is an expectation of the Nova Scotia College of Pharmacists (NSCP) that interns are supervised by preceptors in a manner that maximizes opportunities for regular formative and summative feedback and the provision of safe and effective patient care at all times; and that satisfies the legal requirements for pharmacy practice in Nova Scotia.

Interns must be registered with NSCP and must hold personal professional liability insurance. The requirements for an International Pharmacy Graduate (IPG) to become licensed as a pharmacist in Nova Scotia can be found on the Nova Scotia College of Pharmacists website.

Information on SPEP Rotations

Welcome to the Structured Practice Experience Program (SPEP) for Nova Scotia. The program is comprised of 5 rotations.

Before beginning any rotations, a Preceptor and Site Approval Form <u>application</u> must be submitted and approved. Please submit to <u>registrations@nspharmacists.ca</u> and expect to hear back within 10 working days. Do not begin your rotation until you have received written approval of your application from the NSCP. While all pharmacy staff can help the intern during their rotation, there must be <u>ONE</u> designated preceptor for each rotation. This would be the name submitted on the application. A separate application must be received for each designated preceptor and site.

Interns must complete the 20-week (800 hour) SPEP as one step towards licensing as a pharmacist in Nova Scotia. The Nova Scotia College of Pharmacists (NSCP) has been given permission to use the Dalhousie University College of Pharmacy Practice Experience Rotation Manuals and acknowledges Dalhousie University as the developer of these manuals. The 20-week (800 hour) program consists of 5 manuals:

Manual 1 -Introduction to Community Pharmacy Practice (2 weeks – 80 hours)

Manual 2 -Introduction to Hospital Pharmacy Practice (2 weeks- 80 hours)

Manual 3 – Community Practice (4 weeks -160 hours)

Manual 4- Hospital Practice (6 weeks -240 hours)

Manual 5 -Community Practice (6 weeks -240 hours)

An intern must complete Manuals 1, 2 and 3 in chronological order however Manual 4 and 5 do not have to be done in chronological order.

For example, interns can complete manuals in the following order: Manual 1, 2, 3, 4 and 5 or Manual 1, 2, 3, 5, 4

There is an option for interns to complete the entire 20 weeks in community practice as it is sometimes difficult to secure hospital placements. If an intern is unable to secure a hospital placement, they can complete the entire 20 weeks in community practice by completing Manuals 1 and 5 twice (and omitting Manuals 2 and 4).

For example, complete the manuals in following order: Manual 1, 1, 3, 5, 5

If the intern choses to complete the SPEP **only in community**, when completing Manual 1 twice it must be completed in two different practice sites/pharmacies and when completing Manual 5 twice it also must be completed in two different practice sites/pharmacies.

For example, complete the manuals in the following order: Manual 1 (pharmacy A), 1 (pharmacy B), 3 (pharmacy A or B), 5 (pharmacy A) and 5 (pharmacy B).

Please note, the intern can also choose to complete all of the manuals at different practice sites/pharmacies which would give them a more robust experience, but this is not required.

Requirements for completion of the SPEP rotations

Interns must:

- a. meet all of the rotation requirements
- b. spend at least the minimum time at the practice site

The number of **hours** given to complete each manual is the **MINIMUM** amount of time that interns are required to be at the practice site. All of the required tasks for the rotation must also be completed before an intern is able to move to the next manual. If the manual is not able to be completed in the minimum amount of time, the intern must continue working at the practice site **until all requirements** are **met.**

We recommend that interns commit 40 hours per week for their rotations to get the best experience. However, if this is not possible an intern must submit a request to the NSCP to commit to less hours per week. The request must indicate the number of hours per week which are intended to be completed and justification for requesting to reduce the weekly amount. The minimum an intern may complete is 20 hours per week and the maximum is 40 hours per week while on rotation.

Submissions to Nova Scotia College of Pharmacists (NSCP)

The intern must submit the <u>completed self-evaluation form</u> and the preceptor must submit the <u>completed assessment form</u> to <u>registrations@nspharmacists.ca</u> upon finishing <u>each</u> manual. Forms must be submitted as a PDF by email. (Free apps, such as TurboScan can be used to scan documents and convert them to PDF).

Please note: do not send other documents from the manual to NSCP.

Interns must wait for an email confirmation that the forms are complete before moving to their next Manual. Submission of incomplete forms can delay the process of completing the SPEP in a timely manner.

PLEASE review each form to ensure ALL documentation is complete and ALL requirements have been met. You cannot move to the next manual if the previous manual is not completed.

Communication

Interns and preceptors can expect the NSCP to check-in with them upon completion and prior to the start of each manual. If there are any questions during the rotation, intern and preceptors can contact the NSCP by email at registrations@nspharmacists.ca

Next Step

Once the intern completes the SPEP, they can complete the Competency Based Assessment (CBA). The CBA cannot begin until all SPE assessments have been received and approved. The NSCP will notify the intern when they can begin the CBA.

THANK YOU TO PRECEPTORS:

Thank you to the hospital pharmacist preceptors and pharmacy team members who have worked tirelessly during uncertain times to provide care to Canadians as front-line primary health care providers.

Thank you for taking on the critical role of being a preceptor during these uncertain times.

Working in pharmacy is a busy and challenging job. The Nova Scotia College of Pharmacists thanks you for taking the time to participate as a SPEP preceptor. Preceptors, you are the heart of the practice experience program and your dedication to the pharmacy profession is valued and appreciated.

Please feel to reach out to the NSCP at any time if you have a question at registrations@nspharmacists.ca

COVID-19 Resources and Guidance for Interns

As COVID-19 information continues to evolve, interns are reminded to consult provincial and national Public Health resources for the most up-to-date information. Interns should discuss with their preceptor(s)the public health, safety and security protocols and procedures that are in place at their rotation site. Interns should strategize with preceptors about ways to complete the rotation activities while protecting your health and safety and the health and safety of patients as well as the pharmacy team. NSCP understands that some activities may need to be modified in order to accommodate Public Health restrictions.

AFPC EDUCATIONAL OUTCOMES: EXECUTIVE SUMMARY

The Association of Faculties of Pharmacy of Canada (AFPC) Educational Outcomes (EOs) focus on what graduates are able to do at the end of a Baccalaureate or Doctorate program that is the first professional degree in pharmacy (i.e., entry-to-practice pharmacy degree programs). They signal curricular priorities and a framework for curriculum design without being overly prescriptive. The Educational Outcomes focus attention on outcomes that matter to patients, the profession of pharmacy and Canadian society. They aim to advance pharmacy education so that pharmacy graduates are prepared to meet the changing expectations of the communities they serve.

The APFC Task Force on Educational Outcomes was struck by the AFPC Council of Faculties in mid-2016 to revise the 2010 version and they completed their work in spring 2017. The result was the development of a revised set of educational outcomes for all entry-to-practice pharmacy programs in Canada, regardless of the degree offered (Bachelor of Science in Pharmacy or PharmD). The work was informed by feedback from focus group discussions with representatives from faculties of pharmacy in Canada and literature from pharmacy and the other health professions. The Task Force sought feedback on the draft documents from all pharmacy faculties across Canada, national and provincial pharmacy organizations and external stakeholders. The final document includes modifications based on the recommendations from these groups.

The 2017 version of the AFPC Educational Outcomes retains CanMEDS terminology (Royal College of Physicians and Surgeons of Canada) and draws from several concepts in CanMEDS 2015 role statements. It also draws upon concepts described in other sources. The 2017 Educational Outcomes represent a conceptual shift since publication of the 2010 EOs. In the 2010 version, the expression of each role was independent of and had no particular relationship to one another. In the 2017 version, the relationship of the roles to one another is based on provision of patient care (Care Provider), which is at the heart (core) of the discipline of pharmacy in Canada. To meet the expectations of patients and society, graduates must take an appropriate approach to the core of the discipline, which is pharmacy care. To provide the quality of pharmacy care required, graduates are able to approach pharmacy practice by skilfully integrating Communicator, Collaborator, Leader-Manager, Scholar and Health Advocate roles in their Care Provider role. In addition, graduates are educated to fulfill roles beyond those required of pharmacists, acknowledging that the goal of university education extends beyond solely preparing graduates to enter into pharmacy practice. AFPC believes that pharmacy graduates must be grounded in a professional identity when being a Care Provider. Accordingly, the conceptual shift is that the Professional role is not one among many roles; rather it is the overarching ethos of the discipline of pharmacy - the spirit that guides graduates' practice and their approach to practice regardless of the type of practice in the field of pharmacy.

The 2017 Educational Outcomes are significantly different from previous ones in organizing structure. The EOs comprises multiple Role Statements: Care Provider, Communicator, Collaborator, Leader-Manager, Health

Advocate, Scholar and Professional. Within each Role Statement, the Key Competencies define what graduates need to achieve by the end of the program. These competencies focus on measurable behaviours that are the end product of the program. They reflect the expectation that there will be use or application of knowledge and skill acquired during the program. Enabling Competencies delineate specific sub-components of competencies that graduates need to achieve in order to attain the competency required at the end of the program. A complete listing of Concepts that underlie the EOs 2017 is available in each Role Statement. To support the EOs 2017, several documents are included in an Educational Outcomes 2017 User Manual: Orientation Resource – Conceptual Framework for Educational Outcomes for Canadian First Professional Degree Programs in Pharmacy; Crosswalk to Canadian Interprofessional Health Collaborative (CIHC) National Interprofessional Competency Framework; Sample Learning Objectives; and Glossary of Terms.

AFPC Educational Outcomes 2017 – Executive Summary © Association of Faculties of Pharmacy of Canada – June 2017

ROLE	DEFINITION	KEY COMPETENCIES – Pharmacy Graduates are able to:
CARE PROVIDER (CP)	As Care Providers, pharmacy graduates provide patient-centred 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.	CP1: Practise within the pharmacist scope of practice and expertise. CP2: Provide patient-centred care. CP3: Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety.
COMMUNICATOR (CM)	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.	CM1: Communicate in a responsible and responsive manner that encourages trust and confidence. CM2: Communicate in a manner that supports a team approach to health promotion and health care.
COLLABORATOR (CL)	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.	CL1: Work effectively with members of the health team including patients, pharmacy colleagues and individuals from other professions. CL2: Hand over the care of a patient to other pharmacy team members and non-pharmacy team members to facilitate continuity of safe patient care.
LEADER-MANAGER (LM)	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.	LM1: Contribute to optimizing health care delivery and pharmacy services. LM2: Contribute to the stewardship of resources in health care systems. LM3: Demonstrate leadership skills. LM4: Demonstrate management skills.
HEALTH ADVOCATE (HA)	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.	HA1: Respond to an individual patient's health needs by advocating with the patient within and beyond the patient care environment. HA2: Respond to the needs of communities or populations they serve by advocating with them for system-level change in a socially accountable manner.
SCHOLAR (SC)	As Scholars , pharmacy graduates take responsibility for excellence by applying medication therapy expertise, learning continuously, creating new knowledge and disseminating knowledge when teaching others.	SC1: Apply medication therapy expertise to optimize pharmacy care pharmacy services and health care delivery. SC2: Integrate best available evidence into pharmacy practice. SC3: Contribute to the creation of knowledge or practices in the field of pharmacy. SC4: Teach other pharmacy team members, the public and other health care professionals including students.
PROFESSIONAL (PR)	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 behaviour that are expected of self-regulated professionals. The Professional role is the overarching ethos of the discipline of pharmacy.	PR1: Committed to apply best practices and adhere to high ethical standards in the delivery of pharmacy care. PR2: Able to recognize and respond to societal expectations of regulated health care professionals. PR3: Committed to self-awareness in the management of personal and professional well being.

AFPC Educational Outcomes 2017 – Executive Summary ©Association of Faculties of Pharmacy of Canada – June 2017

FOR REVIEW AT START OF ROTATION

(Intern Communication Profile)

Adapted from Grey-Bruce Regional Health Centre/D'Youville College Student Placement Profile/Dalhousie School of Physiotherapy

Interns, please complete this Intern Communication Profile and review the contents with your preceptor at the start of the rotation.

Intern, please review the rotation orientation checklist in this manual with your preceptor at the start of the rotation. Please discuss with your preceptor the COVID-19 policy and procedures at your specific rotation site so that you will be prepared for your first day.

INTERN NAME:
INTERN EMAIL:
CONTACT NUMBER DURING ROTATION:
ROTATION DATES:
Is there anything your preceptor should be aware of that might affect your ability to perform on this clinical rotation?
What are your personal learning objectives for this clinical rotation and explain how you intend to achiev them?
What are your clinical, interpersonal and professional strengths?
What other clinical, interpersonal and professional skills would you like to improve during this rotation? Are there any specific disease states or patient populations you wish to have an opportunity to work with and learn from during this rotation?

INTERN TRAVEL TO THE SITE

Please provide your travel/commuting plans to your site each day. Please review storm day plans/communication during the Winter.

ILLNESS/SICK DAYS DURING ROTATIONS

If you have any COVID-19-like symptoms, please visit the Public Health online COVID-19 assessment tool for Nova Scotia. It is important to protect your health and the health of those around you. Please contact your preceptor should your COVID-19 screening require you to self-isolate due to travel, illness, testing or other public health protocols.

You must communicate any absence with your preceptor.

Is there anything else you wish to discuss with your preceptor at the start of your rotation?

Please continue on and review the orientation checklist that starts on the next page.

TO REVIEW: Rotation Orientation Checklist Please complete during the first 48 hours of your rotation.

Intern & Site-Specific Information to Review

In	ern & Sue-Specific Information to Keview
	Intern is registered with the Nova Scotia College of Pharmacists and holds <u>valid personal professional</u> <u>liability insurance prior to the start of the rotation</u>
	Preceptor and intern have discussed whether the intern can continue to work at another practice site e.g.,
	part-time job, during this rotation. In some situations, due to COVID-19 levels in the community the rotation site may request that the intern limit their patient care activities to the rotation site only. This is
	the decision of the practice site.
	Important intern professional direction reminder provided in this manual reviewed and discussed.
	Intern prepared to identify as a Pharmacy Intern during all professional interactions e.g., with patients, prescribers.
	Resume and letter of introduction received and reviewed by preceptor.
	Intern communication profile reviewed.
	Intern pre-rotation self-assessment completed & reviewed.
	Intern emergency contact sheet completed and provided to preceptor.
	Review patient care documentation procedures followed at site.
	Review patient care documentation style and strategy followed by pharmacists at the site and what is expected to be followed by the intern including any co-signing procedures
	expected to be followed by the intern including any co-signing procedures
_	
Ro	tation Scheduling and Planning
Ro	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc.
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc.
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms:
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms:
 - - - -	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending:
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending:
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending: portant/Frequently Used Numbers Pharmacy department phone number:
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending: **Portant/Frequently Used Numbers** Pharmacy department phone number: Pharmacy department fax number:
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending: portant/Frequently Used Numbers Pharmacy department phone number: Pharmacy department fax number: How to access and save voice mail (if applicable):
	Daily schedule reviewed e.g., arrival, lunch, breaks, departure etc. Tentative rotation schedule reviewed for the 6 weeks Tentative date for mid-point course assessment using onsite assessment forms: Tentative date for final course assessment using onsite assessment forms: Upcoming CE events (virtual/online) intern may consider attending: **Portant/Frequently Used Numbers** Pharmacy department phone number: Pharmacy department fax number: How to access and save voice mail (if applicable): Hospital paging service number:

Int	troductions & Review
	Pharmacy Staff/Team Introductions
	Management
	Healthcare team members
	Patients
	Review of pharmacy practice services offered at the site and how intern will be engaged Review, if available, the provincial Drug Information System (DIS) or equivalent online e-Health portal that connects health care professionals to patient's medication and health records including (if available) lab values and privacy protocols
	Review pharmacy privacy protocols
	Orientation and discussion about pharmacy safety and security protocols and procedures COVID-19 workplace health and safety protocols, shift scheduling of teams to avoid illness outbreaks, site-specific requirements for appropriate PPE
	Other:
Sit	e Resources
	Coat and boot storage
	Coat and boot storage Personal area to work, store books and other materials
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources Internet access
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources Internet access Parking
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources Internet access Parking Public transit locations
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources Internet access Parking
	Coat and boot storage Personal area to work, store books and other materials Lunch/Staff Room/Microwave & Fridge for food: COVID-19 protocols for meals/breaks Pharmacy department and unit/floor layout Washrooms for staff Drug information resources Internet access Parking Public transit locations
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Tec	hnology Information
	Review of site computer use policy
	If applicable: Complete any required modules/privacy forms for provincial Drug Information Systems
	(DIS) or SHARE
	Review of telephone protocols e.g. protocol when answering the phone, leaving a message etc.
	Review of telephone system/answering machine
	Location of computers for patient information
	Review of site's computer software for patient management, prescribing, documentation of full scope of practice services, prescribing assessment and documentation procedures and medication distribution.
	If applicable, location of computer for word processing, e-mail, online searching etc.
	If applicable, passwords assigned for computer access
	Review of site's policy re: handheld electronic devices e.g. cell phones, wireless internet access etc.
	Other:
Нес	ulth and Safety
	Handwashing stations and site policy on handwashing reviewed
	Site PPE requirements reviewed, location of PPE supplies
	Procedure to follow at the site if an intern receives a sharps injury or any other type of injury while at the site.
	Person to contact should an intern become ill at the site or at home during the rotation
	Procedure to follow should the intern call in sick or have a personal emergency
	Procedure to follow if there is a storm and travel and/or public transport is impacted to or from the site
	Procedure to follow if late arriving to the site e.g., who to contact
	Procedure to follow if there is a fire alarm or lock-down Site specific health & safetyand infectious disease updates (or other pandemic, disease outbreak
	information)
	Review of hospital overhead paging codes, call security, or emergency assistance to pharmacy/or patient
	room.
	Information re: neighbourhood safety e.g., late-night departure
	Other:

Patient Safety
□ Introduction to site's medication incident policy
□ Introduction to quality assurance/medication safety programs followed by the pharmacy
□ Adverse drug reaction reporting to Health Canada
Dress Code
□ Intern wearing an ID badge that clearly identifies them as a pharmacy intern
□ Review of site's dress code policy (including footwear)
Privacy Policy
☐ Site's privacy policy reviewed (PHIA or related provincial/federal privacy policies and procedures)
□ Process to access patient records/charts in pharmacy department and on unit/floors
□ Privacy policy re: patient consent for patient case write ups and presentations e.g. does site require
documentation in patient chart?
Other

Pharmacy Intern Emergency Contact Information

Interns prior to starting your rotation: Please discuss with your preceptor the COVID-19 policy and procedures at your specific rotation site so that you will be prepared for your first day. Please complete this form and provide to your preceptor on the first day of your Practice Experience Program rotation.

Intern Name:	
In case of emergency please notify the fo	ollowing person:
Name:	
Address:	
Daytime Phone Number: Area Code: ()
Evening Phone Number : Area Code: ()
Relationship to intern:	

SPEP Rotat	tion Planning					
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1						
Week 2						
Week 3						
Week 4						
Week 5						
Week 6						

Unit 1: Professional and Interpersonal Skills

This unit involves a fulfillment of objectives as a continuum over the course of all structured practice experience program (SPEP) rotations. SPEP rotations provide opportunities for interns to continue to develop professional and interpersonal skills in clinical practice settings. The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

The concept of professional and interpersonal skill development is not unique to SPEP rotation activities. Proof of continuing professional competency is a standard licensing requirement for pharmacists in Canada. Professional and personal self-assessment is a skill required of all professionals throughout their careers.

Due to the COVID-19 pandemic, patient care activities may need to be adapted while ensuring that safety and pharmacy standards of practice are maintained.

References:

- 1. Professional Competencies for Canadian Pharmacists at Entry to Practice, NAPRA, March 2014
- 2. Nova Scotia College of Pharmacists Pharmacist's Code of Ethics: http://www.nspharmacists.ca/?page=codeofethics
- New Brunswick College of Pharmacists Code of Ethics: https://www.nbpharmacists.ca/site/codeofethics
 PEI College of Pharmacists – Code of Ethics:
 http://pei.in1touch.org/uploaded/web/PEICP%20COE%20Final%20March%202017.pdf
- 4. Model Standards of Practice for Canadian Pharmacists, NAPRA, March 2009

Unit 1 Learning Objectives

Upon completion of the rotation, interns are expected to be able to:

- a. Demonstrate effective verbal, non-verbal, listening and written communication skills (Communicator);
- b. Communicate effectively in diverse practice settings or patient situations (Communicator);
- c. Demonstrate professionalism during all pharmacy practice activities (Professional);
- d. Demonstrate skills of self-reflection, self-assessment and self-improvement (Professional);
- e. Demonstrate skills of self-motivation and initiative (Professional);

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Activities:

- a. Review with your preceptor the types of activities they complete each year to meet the continuing professional competency portion of their professional license e.g., continuing education (CE) credits, learning portfolio Should an opportunity arise during your rotation, ask to attend a CE event with your preceptor.
- b. Review with your preceptor the types of educational programs and/or studies they may have completed to assist them with engaging with the full scope of pharmacy practice in the province of your rotation and/or further develop their clinical practice skills.

Intern Self-Assessment/Assessment Criteria Professional and Interpersonal Skills:

Self-Assessment/Assessment Criteria:

- Registered as a Pharmacy Intern with NSCP and obtained personal professional liability insurance
- Is approachable and accessible to patients, family members, caregivers, and pharmacy team members.
- Demonstrates commitment to each patient regardless of race, religion, sex, gender, gender identity, gender expression, sexual orientation, age, health, cultural, educational background, or economic status.
- Displays a helping ethic when interacting with patients, family members, caregivers, and pharmacy team members.
- Shows respect for the dignity of the patient.
- Presents in a professional manner; always identifies as a pharmacy intern.
- Displays appropriate verbal, non-verbal communication, writing and listening skills for pharmacy practice.
- Able to adapt communication to the needs of the patient, family member, caregiver, pharmacy team member or health care professional.
- Displays sensitivity, compassion, respect and empathy to patient concerns.
- Follows required dress code.
- Is reliable, punctual and follows agreed upon schedule.
- Completes tasks carefully and thoroughly.
- Respects patient confidentiality.
- Displays a positive attitude toward pharmacy practice.
- Shows interest and takes initiative.
- Demonstrates critical thinking, analysis, and action that are based on ethical and legal principles.
- Demonstrates good organizational and time management skills.
- Maintains appropriate professional boundaries.
- Acknowledges own professional limits and abilities.
- Accepts responsibility for actions and decisions.
- Practices time-management, stress-management, and adaptive skills.
- Strives to continuously improve professional performance and knowledge.
- Uses feedback to improve performance.
 - Completes extra readings or assignments when suggested or needed.

Unit 2: Patient Care

Pharmaceutical care as a professional practice, originated in 1978¹, and since then the ideas and concepts associated with pharmaceutical care have continued to evolve.

Through the practice of pharmaceutical care, a pharmacist "...takes responsibility for a patient's drug-related needs and is held accountable for this commitment. In the course of this practice, responsible drug therapy is provided for the purpose of achieving positive patient outcomes."²

Interns should familiarize themselves with the Pharmaceutical Care Process. SPEP rotations allow interns a chance to practice and reflect upon the provision of patient-focused pharmacy care.

For six-week rotations, interns are required to practice patient-focused pharmacy care and engage in the full scope of pharmacy practice in Nova Scotia. Interns must complete and document <u>a minimum of FIVE different</u> patient workups during the 6-week rotation.

Due to the COVID-19 pandemic, patient care activities may need to be adapted while ensuring that pharmacy standards of practice are maintained.

References:

- 1. Cipolle R.J., Strand L.M., and Morley P.C. (2004). *Pharmaceutical Care Practice: The Clinician's Guide*. New York: McGraw-Hill Companies Ltd.
- 2. Cipolle R.J., Strand L.M., and Morley P.C. (2012) *Pharmaceutical Care Practice: The Patient Centered Approach to Medication Management*. New York: McGraw-Hill Companies Ltd.

Unit 2 Learning Objectives

Upon completion of the rotation interns are expected to be able to:

- Develop and maintain effective professional relationships with patients in order to provide patient-focused pharmacy care to a minimum of FIVE different patients (Professional, Care Provider);
- Develop effective professional relationships with other health care professionals in order to provide patient-focused pharmacy care (Collaborator);
- Collect, synthesize and interpret relevant patient, drug, laboratory and disease information to provide optimal patient care (Care Provider);
- Identify, prioritize, resolve and/or prevent drug therapy problems (DTP) (Care Provider);
- Develop appropriate care plan(s)/recommendations to address each DTP identified (Care Provider);
- Provide appropriate monitoring, follow-up and documentation during the provision of patient-focused pharmacy care (Care Provider);
- Provide patient-focused pharmacy care to multiple patients with a variety of common and diverse health care needs (Care Provider);

• When possible and appropriate for the practice setting: provide full scope of pharmacy practice services under the appropriate direction of the pharmacist preceptor e.g., pharmacist prescribing, prescription adaptation and minor ailment assessment depending on the services provided in the practice area (Care Provider)

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Activities

Following an introduction and orientation to the practice site, review the pharmacist's patient care
process with your preceptor.

Review, with your preceptor, how the pharmacist's patient care process is used at the rotation
site.

- Identify patient care documentation tools (electronic or paper) that you will use to help gather and organize patient information. Interns may wish to design their own patient work-up tool or use one available at the site.
- Arrange to meet with your preceptor at the start of the rotation to review plans to identify a minimum of five different patients suitable for patient care workups. Patients may be pre-selected by the preceptor in advance of the intern's arrival, or they may be selected together during the early part of the rotation. Ensure with the help of your preceptor that any site privacy and patient consent policies are adhered to when completing patient cases for learning and/or presentation.

Interns should be selecting patient cases that provide them with a challenging and thought-provoking learning opportunity. Patients with the following characteristics may provide good learning opportunities:

- Multiple medications (four or more medications)
- Multiple medical conditions requiring drug therapy
- Newly diagnosed medical condition requiring multiple drug therapies
- Uncommon medical condition requiring drug therapy
- Referral from a prescriber/health care team member

Additional Important Patient Selection Criteria

- Interns should be selecting <u>complex patients</u>.
 - The patient selected for each case work-up must:
 - o not be a relative, family member or close friend of the intern or preceptor
 - o be taking some type of medication (prescription, nonprescription, natural health products, etc.)
 - o be a patient of the rotation site (hospital, institution, or affiliated clinics)
 - o be willing to work with the intern and be agreeable to the intern contacting prescriber(s)
 - MUST provide the intern with an opportunity to identify, prioritize and manage DTPs

Conduct <u>a minim</u>	um of FIVI	E different	patient	workups	during tl	ne rotation u	nder the	appropri	ate
direction of your	pharmacist p	receptor.	Review	each stag	ge of the	process with	your pi	receptor, f	for

□ If interns plan to communicate with prescribers, they should review their plans with the preceptor (whether the plan is to communicate verbally or in writing to the prescriber) to ensure organized, accurate and appropriate interprofessional communication. Communication with prescribers and patients should always be done under the appropriate direction of the pharmacist preceptor.

□ Prepare one patient case for presentation during the rotation. If site privacy policy allows, the audience may be other pharmacists, pharmacy staff, students, or other health professionals involved in the care of the patient. If site privacy policy does not permit case presentations, intern

Depending on the situation with the COVID-19 pandemic, in-person presentations may not be possible. Please discuss with your preceptor the best method to complete this unit. The NSCP supports your creativity in delivering this presentation.

should review their case with their preceptor(s). Consult with your preceptor and choose a presentation scenario that works best for your preceptor and site. **Please see Unit 5 for further**

PLEASE NOTE: If an intern is not able to complete at least FIVE detailed patient workups during the rotation, the NSCP must be notified as soon as this situation is identified (registrations@nspharmacists.ca).

Preceptors and Interns

details.

PLEASE NOTE: Completing FIVE patient cases are set as a minimum. If interns complete FIVE cases before the end of their rotation time, they should continue to work on more patient cases. Interns should be actively engaged in and contributing to patient care throughout the entire rotation.

Examples of patient care activities that interns could be involved in during the rotation include (there are many others and vary by site and practice area):

- Any interprofessional education activities
- Patient care rounds
- Grand rounds
- o Reviewing and assessing lab values as needed for patient care
- Medication history taking
- Medication reconciliation activities
- o Attending CE events on or off site
- Chart reviews
- o Monitoring of patients receiving medication therapy
- o Regular pharmacy patient care activities

- o Communication regarding patient care with other health professionals
- o Scheduled therapeutic discussions
- Journal club
- o Regular monitoring and follow-up of patients as part of the health care team
- O Patient safety initiatives within the pharmacy department and hospital
- o Helping to prepare/communicate adverse drug reaction reports

Intern Self-Assessment/Assessment Criteria:

- Demonstrates knowledge of appropriate drug therapy, pathophysiology
- Has an organized and focused system for gathering accurate and complete patient information
- Interprets patient information gathered to effectively identify, prioritize, solve and/or prevent drug therapy problems
- Reviews any cultural, social, and economic issues that may impact the management of a patient's drug therapy problem(s)
- Able to prioritize identified drug therapy problems in a patient-focused manner
- Able to establish goals of therapy that are sensitive to the patient's needs and concerns, clinically sound, observable, and measurable
- Able to apply best available evidence to the patient's situation
- Recommends non-drug therapy options when appropriate
- As the rotation progresses, the intern can provide concurrent patient care to multiple patients on an ongoing basis under the appropriate direction of a preceptor and at an appropriate level for intern less than 6 months away from entry to independent practice
- Monitors, follows up and documents care provided to patients
- Refers to or consults with other health care providers when appropriate, able to function and contribute as a health care team member to ensure optimal patient care outcomes
- Completes at least FIVE different patient care work ups
- Demonstrates an industrious work ethic towards patient care
- Actively engages in and contributes to quality patient care throughout the rotation

Unit 3: Reflection on Ethical, Moral and Social Controversies/Dilemmas

Ethical, moral, and social controversies and dilemmas are often encountered in pharmacy practice during the provision of patient care. Issues to discuss for this unit could arise from the intern's patient care activities. Issues to discuss could also be self-identified by the preceptor from their own practice experience. The decision about whether an issue is an ethical or moral one is not the focus of this unit. Rather it is the analysis and recommended action that is required.

Unit 3 Learning Objectives

Upon completion of the rotation, interns are expected to be able to:

- Recognize ethical, moral and social controversies and dilemmas as they arise during the provision of health care (Professional);
- Analyze and discuss controversies and dilemmas with the preceptor and/or site related ethical support person (Professional);

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Intern Self-Assessment/Assessment Criteria

- Problem-solved ethical, moral, and social controversies and dilemmas as they occurred in practice (Professional, Care Provider).
- Gathered advice from preceptor(s), colleagues and ethical support services when needed to help manage and resolve ethical, moral, and social controversies and dilemmas as experienced in practice (Professional).

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Activities:

Adapted with permission from the Structured Practice Experience Program, Faculty of Pharmacy, University of Toronto

- □ Locate the *Code of Ethics for Pharmacists* from the NSCP. Review the *Code of Ethics* with your preceptor and discuss how this document impacts your/their practice.
- □ Identify issues of controversy, in provision of patient care, which in your opinion pose an ethical, moral, or social dilemma.
- ☐ Gather the facts of the dilemma.
- ☐ Apply the appropriate ethical principles for each situation.
- □ Propose viable options for the resolution of the situation.
- □ Analyze your findings and discuss with your preceptor.
- Initiate resolution of the dilemma, where appropriate, and with the help and guidance of your preceptor.
- □ Preceptors are encouraged to share and discuss past ethical, moral and social controversies/dilemmas that they have experienced with the intern.
- During the rotation, did the intern come across a situation that poses an ethical, moral or social dilemma? If so, how was this resolved with the preceptor's guidance?

Unit 4: Drug Information

For six-week rotations, interns are expected to serve as knowledgeable providers of drug information (DI) for the health care team. DI questions should be answered as they arise throughout the rotation. Questions should be researched and answered using the principles of evidence-based patient care. The quantity of DI questions and length of response is entirely reflective of the needs and issues that develop from the interns' patient care process. Interns should use available and appropriate references, DI services, and experts as needed.

Interns should expect that required research for drug information questions may need to take place outside regular patient care hours.

Unit 4 Learning Objective:

Upon completion of the rotation interns must demonstrate they are able to:

• Provide accurate, evidence-based, timely and appropriate drug information that meets patient care needs (Scholar, Care Provider);

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Activity:

Interns are expected to be active participants during their rotations in researching and providing drug information as required throughout the entire rotation. The number of questions answered is determined by the patient care needs of the site. Interns should expect that research time outside of regularly scheduled pharmacy rotation practice time will be required.

Unit 5: Presentations

Interns are required to complete **two presentations**: <u>one health professional in-service</u> and <u>one patient case presentation</u>. The audiences available to attend these presentations will vary from site to site. The most important component of this unit is that interns are given an opportunity to communicate patient and health related information to a health professional audience.

Please discuss with your preceptor the best method to complete this unit with Covid-19 Public Health rules in mind. NSCP supports your creativity in completing this activity.

<u>Please note</u>: For professional liability insurance reasons a pharmacist preceptor or delegated pharmacist preceptor must be present during intern presentations.

Points to Consider When Assessing Intern Performance for Presentations:

- Communicates facts and ideas in an organized, clear, and concise manner.
- Demonstrates an ability to communicate the best available evidence as it applies to the patient case or information presented.
- Displays appropriate verbal and non-verbal communication skills.
- Integrates audio-visual aids effectively (if applicable).
- Interprets questions effectively and provides appropriate answers.
- Maintains eye contact, avoids distracting mannerisms, and uses appropriate gestures.
- Complies with time and topic limitations during presentation.
- Designs and distributes a presentation feedback form at the end of the presentation (can use an electronic form/survey tool).
- Evaluates the results of the presentation through formal and informal feedback.
- Utilizes feedback to improve future performance.

Health Professional In-Service

This presentation is intended for a health professional audience and should focus on a patient care topic and the sharing of evidence-informed information. The presentation should be 20 to 30 minutes in length with 10 to 15 minutes at the end for questions. Interns should decide their topic in consultation with their preceptor.

Please discuss with your preceptor the best method to complete this unit with Covid-19 Public Health rules in mind.

Unit 5 Learning Objectives

Upon completion of this unit interns should be able to:

- Educate a health professional group on a selected patient care topic (Communicator);
- Promote and define the pharmacist's role in patient care as it relates to the topic presented (Health Advocate);
- Promote and demonstrate the role of the pharmacist as an educator (Health Advocate);

- Demonstrate professionally appropriate public speaking and communication skills (Communicator);
- Design an appropriate presentation feedback form to gather audience feedback (Professional);
- Review, reflect on, and plan (if applicable) to apply the feedback received to future presentations (Professional);

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Patient Case Presentations

Interns are required during their six-week hospital rotation to work up a minimum of FIVE different patient cases (please see Unit 2). At least one patient case must to be presented to an audience of peers and health care professionals. There are many options available for this type of presentation. The type of audience and amount of time available for this activity will vary from site to site. If site privacy policy does not permit case presentations, interns should review their case with their preceptor(s).

Please discuss with your preceptor the best method to complete this unit with Covid-19 Public Health rules in mind. The NSCP supports your creativity in completing this activity.

Preceptors are encouraged to communicate any specific expectations they have for interns presentations early in the rotation so that the intern is provided adequate direction and time to prepare and address any questions.

Unit 5 Learning Objective

Upon completion of this unit interns should be able to:

• Demonstrate the ability to educate peers and colleagues (students, pharmacists, health care practitioners) on the findings of at least one pharmacy patient care work-up (Care Provider);

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

Activity:

- a. Prepare <u>one</u> formal case presentation. Select a style and format for the case presentation that is agreeable to both intern and preceptor and meets site privacy and Covid-19 Public Health rules.
- b. If presenting to an audience, the pharmacy intern is required to design a presentation feedback form to be distributed to the audience at the end of the presentation. The feedback received from the audience must be reviewed with your preceptor. **OR** If presenting to the preceptor(s) the intern should receive feedback from their preceptor(s) on the case presentation.

Points to consider when assessing intern's performance:

- Utilizes an effective patient case format to communicate the results of a patient work-up
- Demonstrates an ability to communicate the best available evidence as it applies to the patient case presented
- Answers questions appropriately and accurately from the audience
- Utilizes feedback received to improve future performance

$Assessment \& \ Evaluation \ Checklist \ for \ Interns \ \& \ Preceptors$

	Intern Self-Assessment Checklist
	PRIOR TO START: Intern self-assessment tool completed within this manual prior to start of the rotation
	ON-SITE: Intern & preceptor review self-assessment at the beginning of rotation.
	ON-SITE: Mid-point intern self-assessment/preceptor evaluation meeting booked:
	ON-SITE: Intern mid-point self-assessment tool completed within this manual.
	ON-SITE: Intern & preceptor meet to review mid-point intern self-assessment & preceptor evaluation of intern (please keep copies for your records)
	ON-SITE: Intern final self-assessment tool completed within this manual.
	ON-SITE: Intern meets with preceptor to review final intern self-assessment and preceptor evaluation.
	Please submit completed self-assessment form (in PDF) to registrations@nspharmacists.ca
	Preceptor Assessment/Evaluation Checklist
	ON-SITE: Review intern's self-assessment with intern at the beginning of rotation.
	ON-SITE: Review intern's mid-point self-assessment and your mid-point evaluation of the intern.
	ON-SITE: Review intern's final self-assessment and your final evaluation of the intern
	Please submit completed preceptor assessment form (in PDF) to registrations@nspharmacists.ca
l	

Intern Name (please print):	
Preceptor Name (please prin	nt):
Practice Site:	
Rotation Start Date:	
Rotation End Date:	

INTERN SELF-ASSESSMENT NSCP 6-week Hospital Rotation

Please take a moment to complete this self-assessment prior to your arrival on site for your hospital pharmacy rotation. Read each statement on the left of the chart and select a description from the scale that best reflects how prepared you feel to practice the skill(s) described. If you are not able to assess the described skill(s) please use the notation "NA".

When completing your initial self-assessment remember to consider your past pharmacy work experiences. Review your initial self-assessment with your preceptor at the start of the rotation. The information shared will help you and your preceptor tailor the rotation to best suit your learning needs.

If at any time a preceptor has identified that an intern may not successfully complete the rotation, NSCP must be contacted.

Self-Assessment Scale*:

1 =Unprepared for Practice; 2 =Needs Improvement for Practice; 3 =Prepared for Practice; 4 = Well Prepared for Practice 5 = Exceptionally Well Prepared for Practice

<u>or</u>

"NA" = Not Able to Self-Assess or Not Applicable to practice site

An Intern must complete two six-week rotations. Interns at the end of their second six-week rotation would be expected to be assessed at a higher level of performance than when they started their first six-week rotation. Any intern performance or attendance concerns identified by preceptors should be communicated to NSCP for guidance as soon as the potential for concern is identified.

^{*}Descriptors for the self-assessment scale ratings can be found on the following page.

Intern Self-Assessment Scale with Descriptors

1	2	3	4	
Unprepared for Practice	Needs Improvement	Prepared for Practice	Well Prepared for	
	for Practice	•	Practice	
For a pharmacy intern 6	months or less away from entry	to practice as a pharmac	ist.*	
 Intern is not able to engage in activity or demonstrate skill(s) even with prompting and intervention from preceptor. Completes the activity incorrectly. Displays unsafe professional decision making in relation to the activity or skill(s) described. The intern needs to acquire significantly more knowledge and understanding before re-attempting the task. The intern is not able to follow the SPEP attendance policy. This is a failing grade and the NSCP should be contacted for guidance as soon as the potential for this grade becomes obvious. 	> Intern completes activity or demonstrates skill(s) described with extensive or regular prompting and intervention from the preceptor. > The intern is not able to follow the SPEP attendance policy. > This level of assessment is of concern and the NSCP should be contacted for guidance as soon as the potential for the grade becomes obvious.	 ➢ Intern completes activity or demonstrates skill(s) with limited or no prompting** or intervention from the preceptor. ***As the intern makes their way through the rotation prompting should decline ➢ Makes safe patient care choices. ➢ Knows when to research further before providing information or advice. ➢ Is able to self-reflect on patient care experiences. 	 Intern completes activity or demonstrates skill(s) without prompting or intervention from the preceptor. Highly motivated and functions above expectations for a intern Intern is ready to approach the activity with more complexity. 	

"5" = Exceptionally Well Prepared for Practice: May be used to recognize exceptional performance demonstrated by the pharmacy intern during the rotation

* An Intern must complete two six-week rotations. Interns at the end of their second six-week rotation would be expected to be assessed at a higher level of performance than when they started their first six-week rotation. Any intern performance or attendance concerns identified by preceptors should be communicated to the NSCP for guidance as soon as the potential for concern is identified.

Not Able to Assess/Self-Assess (NA) could be used if:

- Skill(s) described not applicable to this practice site. **OR**
- Intern has not had an opportunity to demonstrate the skill(s) described.

Adapated from: Koenigsfeld CF, Tice AL, Organizing a Community Pharmacy Advanced Practice Experience. Amer J Pharm Ed 2006; 70(1) Article 22 and the University of Manitoba Fourth Year Rotation Manuals 2010-2011.

Intern Name (please print):
Preceptor Name (please print):
Practice Site:
Rotation Start Date:
Rotation End Date:

INTERN SELF-ASSESSMENT NSCP 6-week Hospital Rotation

UNIT 1: PROFESSIONAL AND INTERPERSONAL SKILL DEVELOPMENT

Topics to review with your preceptor:

Intern is registered as a pharmacy intern prior to the start of the rotation ☐ YES ☐ NO

Intern has obtained personal professional liability insurance prior to the start of the rotation \(\subseteq \text{YES} \) \(\subseteq \text{NO} \)

Intern has obtained personal professional liability insurance prior to t			IES LINO
Points to Consider when Self-Assessing Performance	Initial	Mid-Point	Final
Professional and Interpersonal Skills			
Is approachable and accessible to patients.			
Displays appropriate verbal, non-verbal, writing and listening			
skills for pharmacy practice.			
Demonstrates commitment to each patient regardless of age, race,			
color, religion, creed, sex, sexual orientation, gender identity,			
gender expression, physical disability or mental disability, ethical,			
national or indigenous origin, family status, marital status,			
cultural, or educational background or economic status.			
Displays a helping ethic when interacting with patients, family			
members, caregivers, and pharmacy team members.			
Shows respect for the dignity of the patient.			
Able to adapt communication to the needs of the patients, family			
members, caregivers, pharmacy team members and other			
members of the health care team			
Displays sensitivity, compassion, respect, and empathy to patient			
concerns.			
Presents in a professional manner at all times, and always			
identifies as a Pharmacy Intern.		I	
Follows required dress code.	YES	NO	
Is reliable and punctual <u>ALL</u> absences from SPEP rotations	YES YES	NO NO	
Is reliable and punctual <u>ALL</u> absences from SPEP rotations must be reported to the NSCP.			
Is reliable and punctual <u>ALL</u> absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality.			
Is reliable and punctual <u>ALL</u> absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive skills.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive skills. Strives to continuously improve professional performance and knowledge.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive skills. Strives to continuously improve professional performance and knowledge. Uses feedback to improve performance.			
Is reliable and punctual ALL absences from SPEP rotations must be reported to the NSCP. Completes tasks carefully and thoroughly. Respects patient confidentiality. Displays a positive attitude toward pharmacy practice. Shows interest and takes initiative. Demonstrates critical thinking, analysis, and action which are based on ethical and legal principles. Demonstrates good organization and time management skills. Maintains appropriate professional boundaries. Acknowledges own professional limits and abilities. Accepts responsibility for actions and decisions. Practices time-management, stress-management, and adaptive skills. Strives to continuously improve professional performance and knowledge.			

UNIT 2: PATIENT CARE

Topics to review with your preceptor:

Points to Consider when Self-Assessing Performance	Initial	Mid-Point	Final
The Pharmacist's Patient Care Process			
Demonstrates knowledge of appropriate drug therapy and			
pathophysiology.			
Has an organized and focused system for gathering accurate			
and complete patient information.			
Interprets patient information gathered to effectively identify,			
solve and/or prevent drug therapy problems.			
Reviews any cultural, social, and economic issues that may			
impact the management of drug therapy problems.			
Able to identify, prioritize, resolve and/or prevent drug			
therapy problems			
Able to establish goals of therapy that are:			
 sensitive to the patient's needs and concerns 			
clinically sound			
 observable and measurable 			
Able to apply best available evidence to patient's situation.			
Recommends non-drug therapy options when appropriate.			
Able to develop appropriate care plan(s)/recommendations to			
address each identified DTP(s).			
As the rotation progresses is able to effectively provide			
concurrent patient care to multiple patients on an ongoing			
basis under the appropriate direction of a preceptor and at an			
appropriate level for intern less than 6 months away from			
entry to independent practice.			
Monitors, follows up and documents care provided to			
patients.			
Refers, consults, and/or collaborates with other healthcare			
providers, and pharmacy team members when appropriate to			
provide optimal patient care.			

Intern Name:	Precentor Name	

Successfully completes <u>at least</u> FIVE different detailed patient care workups during the rotation.	YES NO If no, please contact NSCP
Patient Care Workups	Therapeutic Topics Covered
PC Work-Up #1	
FC WOIK-OP#1	
PC Work-Up #2	
PC Work-Up #3	
PC Work-Up #4	
PC Work-Up #5	
Able to provide or offer full scope of pharmacy practice services as appropriate for the patient's needs.	
Participates in full scope of pharmacy practice patient c	are
services that are reimbursed by government or private insurance plans or billed directly to patients.	
Demonstrates an industrious work ethic towards patients	care.
Actively engages in and contributes to quality patient contributes to quality patient contributes and contributes to quality patient contributes are quality patient contributes.	
TYPES OF FULL SCOPE ACTIVITIES ENCOUN list):	TERED DURING THE ROTATION (please
Intern Name: Pr	receptor Name:

UNIT 3: REFLECTION ON ETHICAL, MORAL AND SOCIAL CONTROVERSIES/DILEMMAS

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ш	onics	to	review	with	voiir	nrecei	ntore
-	opics	··	1 0 1 10 11	****	Juli	prece	D.COI.

Points to Consider when Self-Assessing Performance	Initial	Mid-Point	Final
Ethical, Moral and Social Controversies/Dilemmas			
☐ Code of Ethics reviewed with preceptor			
Identifies ethical, moral and social controversies and			
dilemmas as they occur in practice and seeks advice from			
preceptor(s), colleagues, and ethical support services when			
needed.			

Comments:	
Intern Name: Preceptor Name:	· · · · · · · · · · · · · · · · · · ·

UNIT 4: DRUG INFORMATION

Topics to review	with your	r preceptor:
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Points to Consider when Self-Assessing Performance	Initial	Mid-Point	Final
Drug Information			
Provides accurate, timely and appropriate drug and disease			
information that meets patient care needs.			

Intern Name: _____ Preceptor Name: _____

UNIT 5: PRESENTATIONS

Topics to review with your preceptor:

	esen	tation)	
Completes and presents at least one patient case presentation (adhering to site privacy policy & Covid-19 Public Health rules).		YES	□ NO
Creates audience feedback form and reviews audience feedback with preceptor and/or receives case feedback from preceptor.		YES	□ NO
Health Professional In-Service (to be completed after	r th	e in-servi	ice)
Organizes and presents one health professional in-service.		YES	□NO
Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.		YES	□ NO
Dates of Assessment:			
Initial: Mid-Point:		Final:	
Initial: Mid-Point: Intern Name: Intern Signature: Preceptor Name: Preceptor Signature:		_ Final:	

Please submit completed assessment form (in PDF) to registrations@nspharmacists.ca

Intern Name (please print):	
Preceptor Name (please print):_	
Practice Site:	
Rotation Start Date:	
Rotation End Date:	

PRECEPTOR ASSESSMENT OF THE INTERN NSCP 6-week Hospital Rotation

Please take a moment to complete this assessment of the intern after reviewing and discussing the intern's mid-point and final self-assessments. Read each statement on the left of the chart and select a description from the assessment scale that best reflects how prepared you have observed the intern to be to practice the skill(s) described. If you are not able to assess the described skill(s) please use the notation "NA". Intern assessments are intended to be a constructive dialogue on strengths, weaknesses and areas for improvement.

The expected level of competence displayed for an intern should be consistent with someone who has completed a pharmacist education program and is ready for entry to practice as a pharmacist.

For preceptors the column marked "Initial" is blocked out. The intern will review their initial self-assessment at the start of the rotation with the preceptor. The intern's initial self-assessment will reflect their past pharmacy work experiences. A review of the intern's initial self-assessment will provide information that allows the rotation to be tailored to suit the learning needs of the intern. Preceptors will assign a grade of PASS or FAIL at the conclusion of the rotation.

If at any time a preceptor has identified that an intern may not successfully complete the rotation the NSCP must be contacted as soon as this potential situation is identified.

ASSESSMENT SCALE*

1 =Unprepared for Practice; 2 =Needs Improvement for Practice; 3 =Prepared for Practice; 4 =
Well Prepared for Practice; 5 = Exceptionally Well Prepared for Practice or
"NA" = Not Able to Assess or Not Applicable to practice site
An Intern must complete two six-week rotations. Interns at the end of their second six-week
rotation would be expected to be assessed at a higher level of performance than when they started
their first six-week rotation. Any intern performance or attendance concerns identified by
preceptors should be communicated to SPEP Coordinator for guidance as soon as the potential for
concern is identified.

PLEASE KEEP A COPY OF THESE COMPLETED FORMS FOR YOUR RECORDS *Descriptions of the assessment scale ratings can be found on the following page.

Assessment Scale with Descriptors

	Assessment Scale with D		1
1	2	3	4
Unprepared for Practice	Needs Improvement	Prepared for Practice	Well Prepared for
	for Practice		Practice
For a interns 6 months or less	away from entry to practice a	is a pharmacist.*	
 Intern is not able to engage in activity or demonstrate skill(s) even with prompting and intervention from preceptor. Completes the activity incorrectly. Displays unsafe professional decision making in relation to the activity or skill(s) described. The intern needs to acquire significantly more knowledge and understanding before re- 	 Intern completes activity or demonstrates skill(s) described with extensive or regular prompting and intervention from the preceptor. The intern is not able to follow the SPEP attendance policy. This level of assessment is of concern and the NSCP should be 	➤ Intern completes activity or demonstrates skill(s) with limited or no prompting**or intervention from the preceptor. **As the intern makes their way through the rotation prompting should decline ➤ Makes safe patient care choices. ➤ Knows when to research further before providing	 Intern completes activity or demonstrates skill(s) without prompting or intervention from the preceptor. Highly motivated and functions above expectations for a intern. Intern is ready to approach the activity with more complexity.
attempting the task. The intern is not able to follow the SPEP attendance policy. This is a failing grade and the NSCO should be contacted for guidance as soon as the potential for this grade becomes obvious. "5" = Exceptionally Well Pre	contacted for guidance as soon as the potential for the grade becomes obvious.	information or advice. > Is able to self-reflect on patient care experiences.	onal performance

"5" = Exceptionally Well Prepared for Practice: May be used to recognize exceptional performance demonstrated by the pharmacy intern during the rotation

*An Intern must complete two six-week rotations. Interns at the end of their second six-week rotation would be expected to be assessed at a higher level of performance than when they started their first six-week rotation. Any intern performance or attendance concerns identified by preceptors should be communicated to NSCP for guidance as soon as the potential for concern is identified.

Not Able to Assess/Self-Assess (NA) could be used if:

- Skill(s) described not applicable to this practice site. **OR**
- Intern has not had an opportunity to demonstrate the skill(s) described.

Adapated from: Koenigsfeld CF, Tice AL, Organizing a Community Pharmacy Advanced Practice Experience. Amer J Pharm Ed 2006; 70(1) Article 22 and the University of Manitoba Fourth Year Rotation Manuals 2010-2011.

PRECEPTOR ASSESSMENT OF THE INTERN **NSCP 6-week Hospital Rotation**

UNIT 1: PROFESSIONAL AND INTERPERSONAL SKILL DEVELOPMENT

Intern is registered as a pharmacy intern prior to the start of the rotation ☐ YES ☐ NO

Intern has obtained personal professional liability insurance prior to the start of the rotation ☐ YES ☐ NO Mid-Point Final Points to Consider when Assessing Intern Performance Initial

Professional and Interpersonal Skills			
Is approachable and accessible to patients.			
Displays appropriate verbal, non-verbal, writing and listening			
skills for pharmacy practice.			
Demonstrates commitment to each patient regardless of age,			
race, color, religion, creed, sex, sexual orientation, gender			
identity, gender expression, physical disability, or mental			
disability, ethical, national, or indigenous origin, family			
status, marital status, cultural, or educational background or			
economic status.			
Displays a helping ethic when interacting with patients,			
family members, caregivers, and pharmacy team members.			
Shows respect for the dignity of the patient.			
Able to adapt communication to the needs of the patients,			
family members, caregivers, and pharmacy team members.			
Displays sensitivity, compassion, respect, and empathy to			
patient concerns.			
Presents in a professional manner at all times, and always			
identifies as a Pharmacy Intern.			
Follows required dress code.		YES	NO
			110
Is reliable and punctual <u>ALL</u> absences from SPEP rotations		YES	NO
must be reported to the NSCP			
Completes tasks carefully and thoroughly.			
Respects patient confidentiality.			
Displays a positive attitude toward pharmacy practice.			
Shows interest and takes initiative.			
Demonstrates critical thinking, analysis, and action which are			
based on ethical and legal principles.			
Demonstrates good organization and time management skills.			
Maintains appropriate professional boundaries.			
Acknowledges own professional limits and abilities.			
Accepts responsibility for actions and decisions.			
Practices time-management, stress-management, and adaptive			
skills.			
Strives to continuously improve professional performance			
and knowledge.			
und knowledge.			1
Uses feedback to improve performance.			
	_		

Preceptor's Midpoint Comments:	
Preceptor's Final Comments:	
Intern Name:	Preceptor Name:

UNIT 2: PATIENT CARE

Points to Consider when	Assessing Intern Performance	Initial	Mid-Point	Final
The Pharmacist's Patien				
Demonstrates knowledge	of appropriate drug therapy and			
pathophysiology.				
	used system for gathering accurate			
and complete patient infor	rmation.			
Interprets patient informat	tion gathered to effectively identify,			
solve and/or prevent drug	therapy problems.			
Reviews any cultural, soci	ial, and economic issues that may			
impact the management of	f drug therapy problems.			
Able to identify, prioritize	e, resolve and/or prevent drug			
therapy problems.				
Able to establish goals of	therapy that are:			
 sensitive to the pa 	tient's needs and concerns			
 clinically sound 				
 observable and m 	easurable			
	le evidence to patient's situation.			
	erapy options when appropriate.			
	ate care plan(s)/recommendations to			
address each identified DI				
	intern is able to effectively provide			
1 0	multiple patients on an ongoing			
	e direction of a preceptor and at an			
	n less than 6 months away from			
entry to independent pract				
	documents care provided to			
patients.	1			
	ollaborates with other healthcare			
	te to provide optimal patient care.			
	least FIVE different detailed		YES	NO
patient care work ups duri			If no, please c	ontact
			NSCP	
Patient Care Work-Ups	Therapeutic	Topics Cov	ered	
PC Work-Up #1				
•				
PC Work-Up #2				
1				
PC Work-Up #3				
1				
PC Work-Up #4				
1				
PC Work-Up #5				
r				
L				
Intern Name:	Preceptor Nam	e:		

Able to provide or offer full scope of pharmacy practice			
services as appropriate for the patient's needs.			
Participates in full scope of pharmacy practice patient care			
services that are reimbursed by government or private			
insurance plans or billed directly to patients.			
Demonstrates an industrious work ethic towards patient care.			
Actively engages in and contributes to quality patient care.			
Preceptor's Midpoint Comments (please comment on intern's activities):	s engageme	nt with full sc	ope
Preceptor's Final Comments (please comment on intern's eng	gagement w	ith full scope :	activities):

Intern Name: _____ Preceptor Name: ____

UNIT 3: REFLECTION ON ETHICAL, MORAL AND SOCIAL **CONTROVERSIES/DILEMMAS**

Points to Consider when Assessing Intern Performance	Initial	Mid-Point	Final
Ethical, Moral and Social Controversies/Dilemmas			
□ Reviewed and discussed Pharmacist's Code of Ethics for province of rotation			
Identifies ethical, moral, and social controversies and			
dilemmas as they occur in practice and seeks advice from			
preceptor(s), colleagues, and ethical support services when			
needed.			
	•		•

Points to Consider when Assessing Intern Performance	Initial	Mid_Point	Final
UNIT 4: DRUG INFORMATION			
Preceptor's Final Comments:			
Preceptor's Mid-Point Comments:			
needed.			
preceptor(s), colleagues, and ethical support services when needed.			
dilemmas as they occur in practice and seeks advice from			
Identifies ethical, moral, and social controversies and			
☐ Reviewed and discussed Pharmacist's Code of Ethics for pro	vince of rota	ition	

Points to Consider when Assessing Intern Performance	Initial	Mid-Point	Final
Drug Information			
Provides accurate, timely and appropriate drug and disease			
information that meets patient care needs.			

information that meets patient care needs.	ug and disease		
Preceptor Mid-Point Comments:			
Preceptor Final Comments:			
Intern Name:	Precentor Name:		

UNIT 5: PRESENTATIONS

Case Presentation (to be completed after the case present	tation	1)	
Completes and presents at least one patient case presentation (adhering to site privacy policy & Covid-19 Public Health rules).		YES	□ NO
Creates audience feedback form and reviews audience feedback with preceptor and/or receives case feedback from preceptor.	_ ·	YES	□NO
Preceptor's comments:			
Health Professional In-Service (assessment to be completed)		ter the ir	n-service presentation)
Title: Audience	e:		•
Title: Audience Organizes and presents one health professional in-service.	e:	ter the in	n-service presentation)
Title: Audience	e:		•
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO
Title: Audience Organizes and presents one health professional in-service. Creates audience feedback form (if applicable) and reviews audience feedback with preceptor and/or reviews preceptor feedback.	e:	YES	□ NO

Preceptor Name:	Name:		
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	Preceptor Name:		

site:
Einel Comments Designed with Intern.
Final Comments Reviewed with Intern:
I declare that I understand that I must receive email approval from the NSCP that this assessment and the <i>Preceptor/Site Approval Application</i> for the next rotation have been received and approved prior to starting my next rotation.
I understand that any structured practice completed prior to receiving these approvals will not be counted
toward the qualification requirements in Section 7 for all applicants for registration and licensing as a pharmacist.
Intern's Signature:
Mid-Point Assessment Review Date:
Final Assessment Review Date: Preceptor Name:
Preceptor's Signature:
Intern's Name: Intern's Signature:
□ PASS □ FAIL
Please submit completed assessment form (in PDE) to registrations@nenharmenists as

Please submit completed assessment form (in PDF) to registrations@nspharmacists.ca