

Introductory Pharmacy Practice Experiences Manual 2024-2025

PhPr 71063 P1

Community

PhPr 72034 P2 Institutional

PhPr 7307 P3 Longitudinal IPPE



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DEPARTMENT OF PHARMACY PRACTICE

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Overview of the UAMS College of Pharmacy Experiential Program

The fundamental goal of the experiential pharmacy education program is to provide structured, practical, and closely supervised professional program experiences that enable the student to develop and apply skills and information previously presented in formal course work in order to better assume their future role as a competent pharmacist. The student is expected to integrate their basic sciences and clinical background into an actual practice setting under the preceptor's guidance and instruction. This includes giving the student the opportunity to further refine professional judgment, practice competency, and technical skills.

Introductory Pharmacy Practice Experiences (IPPEs)

Doctor of Pharmacy candidates spend 300+ hours in introductory pharmacy practice experiences (IPPEs) in a variety of settings during the first three years of the professional program. During the Community (P1) and Institutional (P2) IPPEs, students observe/discuss the role of community and health-system pharmacists and actively participate in daily operations that focus on the distributive aspects of practice. The IPPE of the third professional year is a longitudinal, self-directed experience designed to provide multiple opportunities to perform patient-centered care activities in a variety of settings. A summary of the types and timing of UAMS IPPEs as well as the number of contact hours provided during each is outlined below.

Experience	Location	Timing	Hours
Community P1	Community retail pharmacy – independent or chain	3 weeks in May or June following P1 Spring semester	120
Institutional P2	Hospital or Health-system pharmacy	4 weeks in May, June, or July following the P2 Spring semester	160
Longitudinal P3	Health screenings, shadowing experiences, free clinics, brown bags, medication reviews, teaching assistance, etc.	May (P2 Spring) through April (P3 Spring) excluding P2 IPPE assignment	40
Total IPPE hours			320

PhPr 71063 Community Introductory Pharmacy Practice Experience (120 hours)

This course will provide structured, practical, professional experience in a community pharmacy setting. Students are assigned a three-week experience at the end of the P1 Spring semester in May or June. To enter this course, a student must be eligible for advancement to the P2 year. This is a three-credit hour, pass/fail course.

PhPr 72034 Institutional Introductory Pharmacy Practice Experience (160 hours)

This course will provide structured, practical, professional experience in an institutional pharmacy setting. Students are assigned a four-week practice experience at the end of the P2 Spring semester in May, June, or July. To enter this course, a student must be eligible for advancement to the P3 year. This is a four-credit hour, pass/fail course.

PhPr 7307 P3 Longitudinal IPPE (40 hours)

This course is a longitudinal, self-directed experience designed to provide multiple opportunities to perform patient-centered care activities in a variety of settings. Each student is responsible for accumulating 40 hours of IPPEs over approximately one year (completion of P2 Spring through April of P3 Spring) excluding the month during the assigned P2 Institutional IPPE. The P3 IPPE provides an opportunity for students to explore/develop personal interests as well as broaden their perspective of pharmacy practice. Longitudinal exposures should expand on the experience gained in the previously completed Community and Institutional IPPEs. Activities appropriate for P3 IPPE hours may include, but are not limited to shadowing of pharmacy practitioners, providing patient services and/or education at health fairs or screenings, conducting medication reviews, volunteering at free medical clinics, participating in medical mission trips or student pharmacy exchange programs, or other pharmacy-based activities with prior approval from the course coordinator. This is a one-credit hour, pass/fail course.

Suggested P1 IPPE Community Experience Framework

Student Name:

Location:

Contact Information:

Day One: Orientation (Time, ex. 8AM-5PM)

Scheduling/Calendar if applicable
Inquire on student's interest and prior experience
List goals of the rotation
Pharmacy tour
Notify the student if they will be rotating amongst other pharmacists

Week One (Time)

Observe the pharmacist and their duties along with the rest of the team
Assist in medication filling/dispensing
Pull medications from the shelves
Answer the phone to help with patients and their requests

Week Two (Time)

Understand how to enter a prescription correctly
Enter a patient's insurance information
Assist in transferring a prescription
Longitudinal: dispensing

Week Three (Time)

Provide a patient with immunization
Counsel at least 3 patients
See narcotic order and discuss how to file it
Final evaluation
Longitudinal: dispensing, data entry, telephone calls, and transfers

Daily Activities

- Pull medications from the shelves
- Dispense medications

Considerations

- Draft a list of medications that students could counsel on at your pharmacy
- Suggested topic discussions - insurance, overhead costs, PBMs, Medicare/Medicaid, etc.
- Advancement in the IPPE experience can be necessary if a student has prior experience in the above and is able to move forward in discussion of ordering, business model, etc.

Suggested P2 IPPE Institutional Experience Framework

Student Name:

Location:

Contact Information:

Day One: Orientation

Scheduling/Calendar if applicable
Inquire on student's interest and prior experience
List goals of the rotation
Pharmacy tour
Notify the student if they will be rotating amongst other pharmacists

Week One (Time)

Assist in compounding sterile IV products
Review USP 797/800 guidelines
Observe and assist with the IV room cleaning routine
Overview of pyxis/carousel

Week Two (Time)

Understand how to load and correct mistakes in pyxis
Pull medications from pyxis
Cart fill
Midpoint evaluation
<i>Longitudinal: IV compounding</i> <i>*Any of the above activities may be performed throughout the rotation</i>

Week Three (Time)

Observe/participate in order entry
Medication reconciliation/Discharge counseling
TPN
Clinical pharmacy exposure
<i>Longitudinal: IV compounding and pyxis</i> <i>*Any of the above activities may be performed throughout the rotation</i>

Week Four (Time)

Narcotic reports and inventory review
Final evaluation
<i>Longitudinal: IV compounding, pyxis, medication reconciliation, and TPN</i> <i>*Any of the above activities may be performed throughout the rotation</i>

Daily Activities

- Restock medications
- Pull labels and medications for IV compounding
- Load crash carts
- Check and research ADR reports
- Refill anesthesia trays
- Round with a clinical pharmacist- PRN

Considerations

- *Informal continuous feedback on a weekly basis*
- *Participation with audit preparation*
- *Interact with an interdisciplinary team*
- *Observe procedures in the institution*
- *Advancement in the IPPE experience can be necessary if a student has prior experience in the above and is able to move forward*

Pharmacists' Patient Care Process



Source: http://www.pharmacist.com/sites/default/files/JCPP_Pharmacists_Patient_Care_Process.pdf

Pharmacists' Patient Care Process

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

Using principles of evidence-based practice, pharmacists:

Collect

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

Assess

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

Plan

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

Implement

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

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

The pharmacists' patient care process is a tool used within the College of Pharmacy and on rotations to help the student properly learn the process to provide patient-centered care. Students must be able to collect information from the patient, assess and analyze the information collected, create and implement an individualized plan, and then monitor and evaluate the effectiveness of the plan. This process should be practiced throughout rotations with preceptors to identify any areas where the student needs improvement. For example, the student may be able to collect all the necessary information, but unable to access it properly to be able to form a plan. This process is used on midpoint and final evaluations as well.

UAMS College of Pharmacy Vision, Mission, and Core Values

Transforming healthcare throughout Arkansas and beyond is the **Vision** of the UAMS College of Pharmacy.

The College's **Mission** is to improve health of culturally diverse populations by educating pharmacy leaders to address community health needs, advancing scientific discovery to produce innovations in healthcare, and fostering progressive pharmacy practice through service to the profession.

The UAMS **Core Values** serve as a foundation to facilitate achievement of the College's Vision and Mission.

- **Integrity** – We foster, encourage, and expect honesty and the highest ethical standards in all that we do.
- **Respect** – We embrace a culture of professionalism with respect for the dignity of all persons, honoring the unique contributions provided by a diversity of perspectives and cultures.
- **Teamwork** – We seek to create interdisciplinary, synergistic, and collegial relationships characterized by collaboration, inclusiveness, and flexibility.
- **Creativity** – We encourage and support innovation, imagination, ingenuity, resourcefulness, and vision.
- **Excellence** – We strive to achieve, through continuous improvement and adherence to institutional policies and best practices, the highest quality, and standards in all our endeavors.

UAMS College of Pharmacy proudly maintains a reputation for providing quality experiential learning opportunities that fulfill the standards established by the Accreditation Council for Pharmacy Education (ACPE) and prepare graduates to serve as ambassadors for the profession of pharmacy in Arkansas and abroad. The educational outcomes of the ACPE and the Center for the Advancement of Pharmaceutical Education (CAPE) were used in the development of the College's educational outcome performance goals.

The ACPE Professional Competencies and Outcome Expectations that must be achieved through the professional degree program include the ability to:

- “Provide patient care in cooperation with patients, prescribers, and other members of an interprofessional healthcare team based upon sound therapeutic principles and evidence-based data, taking into account relevant legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.”
- “Manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.”
- “Promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of healthcare providers.”

The full version of the Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree, Version 2.0 is available at <https://www.acpe-accredit.org/pdf/Standards2016FINAL.pdf>

University of Arkansas for Medical Sciences College of Pharmacy
Competency Statements

Approved 12-18-06, revised 04-10-2012 & 10-06-2015

Domain 1: Patient Care- Ensuring Appropriate Pharmacotherapy and Therapeutic Outcomes

The graduate will provide patient-centered care through shared decision-making with patients, prescribers, and other members of an interprofessional healthcare team based upon sound pharmacotherapy principles and evidence incorporating social and cultural factors.

- 1.1 Evaluate patient data and make an assessment:
 - a. Identify and collect information from profiles, pharmacy and medical records, and patient/caretaker history that will influence optimal drug choice and dosage,
 - b. Obtain a medical history (e.g., chief complaint, medical, medication management, financial, social, cultural, review of systems),
 - c. Conduct physical assessment, and
 - d. Assess patient's quality of life.

- 1.2 Conduct a systematic review of the patient prior to recommending any drug or non-drug therapy:
 - a. Identify drug-related problems including adverse drug reactions, drug interactions, and/or suboptimal treatment,
 - b. Recognize common signs or symptoms indicative of disease control issues or drug-related problems,
 - c. Ascertain levels of chronic disease control,
 - d. Assess and address barriers to health care, and
 - e. Collaborate with the patient or patient advocate to prioritize problems.

- 1.3 Design and implement an individual patient-centered treatment plan to maximize desired effects and minimize undesired effects:
 - a. Conduct a focused evidence-based review of the necessary literature to determine the best evidence to support pharmacotherapy recommendations, applying pharmaceutical science principles,
 - b. Select prescription or non-prescription medications (including doses and dosage schedules), applying both pharmaceutical science and therapeutic principles,
 - c. Evaluate and address patient factors that are relevant to developing a treatment plan (e.g., sex, age, race, ethnicity, culture, literacy, sexual orientation, disability, health beliefs, health literacy, and genetics),
 - d. Define treatment goals and plan to monitor pharmacotherapy for safety and effectiveness,
 - e. Consider non-drug therapy, therapeutic lifestyle changes, and preventive care issues,
 - f. Conduct patient education including verification of patient understanding of the treatment plan,
 - g. Implement interventions to prevent or remedy non-adherence, and
 - h. Implement interventions to resolve drug-related problems and unintended drug consequences.

- 1.4 Document patient care activities:
 - a. Document assessment and pharmacotherapy plan for individual patient encounters,
 - b. Record actions taken to achieve desired therapeutic outcomes, and
 - c. Document patient and provider education activities.

Domain 2: Dispensing and Pharmacy Resource Management

The graduate will manage and use resources of the healthcare system, through shared decision-making with patients, prescribers, other members of an interprofessional healthcare team, and administrative and supportive personnel to promote health and to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution.

- 2.1 Demonstrate accurate, safe, and time-sensitive preparation, dispensing, and administration of pharmaceuticals:
 - a. Accurately transcribe verbal and written prescriptions and ensure appropriateness of these drug orders,
 - b. Accurately and safely compound and package drugs for distribution in appropriate dosage forms,
 - c. Select appropriate drug product, with respect to patient preference, manufacturing source, generic availability, and third-party reimbursement, and
 - d. Apply appropriate labeling, including patient-specific auxiliary labels.
- 2.2 Manage pharmacy resources to optimize pharmacotherapy outcomes for individual patients and/or populations:
 - a. Employ principles of personnel management to the operation of a pharmacy,
 - b. Use principles of fiscal resource management,
 - c. Employ medication distribution and control systems to operate the pharmacy efficiently, and
 - d. Evaluate and use appropriate automation and information technology to optimize medication dispensing and patient care.
- 2.3 Educate patients and healthcare providers about requirements for effective therapy:
 - a. Establish rapport with patients and other healthcare professionals to promote a team approach to patient care,
 - b. Counsel patients regarding purposes of their medications, potential adverse drug reactions, and other required information, and
 - c. Provide medication information to patients and health care providers to promote rational drug therapy.

Domain 3: Health Improvement, Wellness, and Disease Prevention

The graduate will promote improved health, wellness, and disease prevention for individual patients and/or populations through shared decision-making with patients, prescribers, and other members of an interprofessional healthcare team.

- 3.1 Demonstrate skills needed to participate in or provide preventive services:
 - a. Participate in disease prevention,
 - b. Provide lifestyle and wellness counseling,
 - c. Provide drug therapy evaluation and monitor for medication safety,
 - d. Participate in public health education programs, and
 - e. Neutralize social and cultural barriers, to effective application of skills in preventive services.
- 3.2 Apply research processes to inform pharmaceutical policy:
 - a. Demonstrate the ability to conduct drug literature evaluations,
 - b. Design quality improvement projects to improve medication use,
 - c. Apply evidence-based principles when making pharmaceutical policy recommendations, including drug benefit design recommendations, and
 - d. Apply principles of Pharmacoeconomics and outcome assessment.

Domain 4: Personal and Professional Development

The graduate will demonstrate commitment to self-awareness, leadership, innovation, entrepreneurship, and professionalism.

- 4.1 Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivations, and emotions that could enhance or limit personal and professional growth.
- 4.2 Demonstrate responsibility for creating and achieving shared goals, regardless of position.
- 4.3 Engage in innovative activities by using creative thinking to envision better ways of accomplishing goals.
- 4.4 To demonstrate professional citizenship in the delivery of patient care, distribution of medications, and promotion of wellness and disease prevention:
 - a. Collaborate with patients, providers, personnel, and other stakeholders to obtain and share pertinent patient information and pharmacotherapy recommendations, provide accurate and safe medication dispensing and resource management, and advance public health issues and pharmaceutical policy,
 - b. Perform duties in accordance with legal, ethical, social, economic, and professional guidelines, and
 - c. Maintain professional competence by identifying and analyzing emerging issues, products, and services that may impact patient care, medication distribution, and the pharmacy business, and may improve disease prevention and wellness and inform pharmaceutical policies.

College of Pharmacy Policies and Procedures

All Pharmacy students in the experiential program at any practice site must accept and adhere to the Policies and Procedures of that site. This may include, but is not limited to, random drug testing and background checks. According to the policies of the College of Pharmacy, all students must fulfill each of the following criteria for experiential activities:

1. The student must have a valid and current *Intern License* issued by the Arkansas State Board of Pharmacy. If the student participates in an experience outside of Arkansas, the student must comply with intern license requirements from that state as well.
2. The student is required to have a current health insurance policy.
3. The student must hold a current professional liability insurance policy (minimum insurance limits of \$1,000,000/\$3,000,000). Insurance is provided through Pharmacists Mutual insurance and is paid by student fees collected at Fall registration.
4. The student must possess a current American Heart Association (AHA) Healthcare Provider Cardiopulmonary Resuscitation (CPR) Certification. A copy of the CPR card must be on file with the Office of Experiential Education.
5. Students are required to complete Occupational Health and Safety Bloodborne Pathogens training. An annual update is also required. The online module is located on Workday Learning <https://wd5.myworkday.com/wday/authgw/uasys/login.html?redirect=n> The student must have a physical examination and current immunization record on file with the UAMS Employee Health/Student Preventive Health Service (EH/SPHS). The following vaccinations, history of illness, and/or titers are required for enrollment: Tetanus-diphtheria-pertussis (Tdap), Measles-Mumps-Rubella (MMR), Hepatitis B, and Varicella. The student may be required to provide proof of physical examination and current immunization records depending on experiential site. Copies may be obtained by calling the Health Center at 686-6565.
6. The student must adhere to the guidelines of the College of Pharmacy and to the assigned experiential site as to dress, responsibility, confidentiality, and conduct.
7. The student may not receive monetary compensation from any Preceptor or Experiential Site.
8. The student must have evidence of negative tuberculosis skin tests within twelve months or evidence of compliance with tuberculosis screening per CDC guidelines on file with the UAMS EH/SPHS prior to starting the clinical training program; if there is a positive PPD history or screening, a negative chest x-ray must be documented. The student must also adhere to the UAMS monitoring protocol. The full policy detailing UAMS TB screening requirements is available at http://www.uams.edu/adminguide/PDFs/4_5_18_Employment_Medical_Screening.pdf. Search for TB Testing.
9. Students who receive needle sticks or other sharp injuries or certain body fluid exposures will, on many occasions, need laboratory monitoring for a period of time. Additionally, the student may be offered appropriate medication therapy as in the case of HIV exposure. The cost of this monitoring will be paid by the institution and student insurance, not the student. This monitoring and the appropriate billing will be handled through SPHS. Students should contact SPHS immediately after such an injury occurs (or contact the Emergency Room if SPHS is not open). The Incident/Injury Reporting policy is available on the UAMS Administrative Guide at <http://www.uams.edu/adminGuide/#11.4%20General%20and>. Search for Injury Reporting.
10. The use or possession of any illicit drug by any student while on University property or on a University affiliated assignment will not be tolerated as described by the campus drug-free workplace policy.¹ Any College of Pharmacy student who illegally uses, gives, sells or in any way transfers a controlled substance to another person, or manufacturers a controlled substance while involved in an Experiential Program rotation will be subject to immediate dismissal from the rotation and may also result in additional disciplinary action as deemed necessary by the College of Pharmacy. In some cases, rotation sites may require random and/or mandatory drug screening. Students should anticipate that requests for participation in site-specific screening may be made, and students on rotation at those sites will be expected to comply.
11. Students must participate in an orientation process prior to the initiation of IPPEs/APPEs to:
 - a. Outline the purpose, organization, and assessment of the experience,
 - b. Explain the achievement-based assessment process, and
 - c. Review the procedure by which academic progress will be monitored.

Failure to comply with these policies can result in dismissal from the College of Pharmacy.

¹ University of Arkansas for Medical Sciences Administrative Guide Policy on the Drug Free Workplace (4.4.05)

Health Insurance Portability and Accountability Act (HIPAA)

Training of all UAMS employees and students on the HIPAA regulations and related policies and procedures to protect the confidentiality of patient information is mandatory. Students are required to complete an online module with a post-test on the regulations and related policies. An annual update of HIPAA training is also required. These modules are located on Workday Learning at <https://wd5.myworkday.com/wday/authgwy/uasys/login.html?redirect=n>. Various experiential sites may also require site-specific HIPAA training to be completed at each individual location.

Code Black

In the event of a violent occurrence on Campus, special procedures are needed to ensure maximum safety and prevention of injury/loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening, and other scenarios not depicted here. While this is primarily a law enforcement operation, incident management, sheltering in place, and crisis communications are integral to the safety and security of the Campus. The UAMS Code Black Plan is outlined in the COP Catalog and Student Handbook. During orientation to an experiential site, students should make every effort to be informed as to site-specific policies and procedures regarding violent events.

CORE

The Experiential Education Office uses CORE ELMS, the Experiential Learning Management System to track students' experiences throughout their academic careers. CORE allows our office to manage student and preceptor placement, monitor evaluations and other reports, as well as track site requirements, immunizations, and certifications. In addition, we use the system as a tool to communicate with our students and preceptors. CORE can be accessed at <https://www.corehighered.com/login-elms.php>. If you have misplaced your login information or need your password reset, please contact Karin Walker.

Policy for Interaction

Students should contact the Preceptor via their office phone or email. If unable to reach the individual, students should contact the Experiential Office for assistance.

Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the Preceptor, Experiential Education Director (EED) or Associate Dean for Experiential Education (ADEE), and finally the Dean's office.

The course syllabus is a general plan for the course; the syllabus may be modified at any point during the semester. Any changes to the syllabus will be communicated to the class at the earliest possible class meeting as well as electronically through electronic mail distribution.

Attendance

There are **no excused absences** and **no recognized student holidays** for experiential course work. In some instances, experiential hours will be scheduled to conform to site activities (e.g., weekends, early morning, and late afternoon). In case of illness, students must: a) call the Dean's Office (501) 686-5557 **AND** b) call the preceptor as early as possible on the day that will be missed. If a student anticipates a request to be absent from the experience on a specific date (e.g., job/residency interview, college sponsored meeting/function during rotation hours, etc.), they must make arrangements with the preceptor prior to that date. A minimum of 120 hours is required for the P1 IPPE, 160 hours for the P2 IPPE, 40 hours for the P3 IPPE, and 160 hours for each APPE; therefore, it is the student's responsibility to reschedule hours missed with the preceptor's approval. If a student is sick or absent for more than one fourth of any rotation, they may complete the rotation only with permission of the preceptor and the EED/ADEE.

Immunization Certification

The student must earn a certificate of achievement for the American Pharmacists Association Pharmacy-Based Immunization Delivery Program. Students must participate in and complete all program requirements. Successful completion of this program entails the following:

- Completion of the self-study prior to the live seminar
- Achievement of a passing grade on the self-study assessment prior to the live seminar
- Attendance at the entire live seminar
- Completion of the skills assessment
- Completion of the post seminar activities (exam and evaluation)

Requirements of the program must be completed as designated by the American Pharmacists Association. Please note that according to APhA, you have 2 opportunities to take and pass the self-assessments associated with this course. You **MUST** pass the examinations within one of your two attempts. If you fail the self-assessment after the self-study twice, you will **NOT** be permitted to complete the live seminar. If you fail the post seminar assessment after the live seminar and skills assessment twice, you will **NOT** be issued a certificate for the program. Any questions regarding this program should be directed to Dr. Michelle Balli and Dr. Lanita White.

Failure to obtain this certificate may delay your participation in the community IPPE. You will also need to have proof of BLS/CPR certification prior to giving immunizations. This is a requirement for the College of Pharmacy as well.

Inclement Weather

During inclement weather conditions (regardless of activation of the UAMS inclement weather policy), the student should contact their assigned experiential preceptor to receive information about site hours of operation and function. If the student is unable to travel during inclement weather, any absence requires that the student contact their preceptor and the Experiential Education Office.

Emergency

In the case of an emergency, the student should **call** the ADEE immediately at (501) 551-8193. This does not include absence for routine illness, job interviews, flat tires, etc. These issues are addressed in the Attendance Policy above.

Grading

The preceptor is a member of the faculty of the College of Pharmacy (COP). Preceptors are expected to assess student performance of the outlined practice competencies using the COP Introductory and Advanced Pharmacy Practice Experience Evaluation Rubrics. **At the middle (excluding P1 IPPE) and end of the experience, the preceptor will use the evaluation rubric in the CORE online grading system to assess the student's performance. Mid-way through the rotation, deficiencies are to be discussed with the student. Every effort should be made to correct any deficiencies before a student completes the assigned experience. Evaluation rubrics will automatically become available in CORE at the appropriate times.** The preceptor's evaluation constitutes 100% of the assessment of competency.

Experiential Proficiency Scores

***please refer to the comprehensive academic rules in the student handbook for more information

- 5 – Exceeds expectations
- 4 – Meets expectations
- 3 – Progressing
- 2 – Needs significant improvement
- 1 – Does not meet expectations
- 0 – Though opportunities existed, student did not engage in requirement; therefore, not able to assess NA
- Not applicable to experience or not observed

Global Assessment (overall performance):

- Clear Pass
- Borderline Pass
- Clear Failure

For successful completion of IPPEs, students must achieve a proficiency score of 3 or higher for each item on the IPPE achievement-based assessment. Students must also fulfill the IPPE course requirements and complete all other required documentation prior to receiving credit for the IPPE.

A student may fail an IPPE for violation of patient confidentiality, tardiness/failure to show up for a rotation, cheating on exams, quizzes or other assignments, plagiarism, or other action which, in the opinion of the preceptor and the EED and/or ADEE, is unprofessional conduct damaging to the reputation of the COP and/or the experiential site.

Grading for the P3 IPPE is described in the P3 Longitudinal IPPE Guidelines.

Incomplete Grade

A grade of “I” (incomplete) is assigned when a student, for reasons sufficient to the preceptor, has not been able to complete some vital portion of the experience (IPPE or APPE). The student must finish the requirements of the experience at the same practice site and at the discretion of the preceptor. If the work is not completed by the designated time, the grade will become an “F” unless the Dean, in conjunction with the preceptor and the appropriate experiential course coordinator, grants an extension of time. For IPPEs, all work must be completed before the day of registration for the upcoming Fall semester. APPEs must be successfully completed within no more than two calendar years.

Failing Grade

Students will fail an experience if a preceptor indicates “Clear Failure” at the end of an experience. The student must repeat and pass that type of experience (Community or Institutional). No experience may be attempted more than twice. **In the event that a student receives a “Clear Failure” at the end of an IPPE, the EED/ADEE may develop an Individualized Educational Plan (IEP) and forward this to the Scholastic Standing Committee.** The Scholastic Standing Committee will review the recommended IEP for approval or modification. **For students who are not awarded Credit for an IPPE, failure to successfully complete an IEP will result in an “F” and will be viewed as the student’s second attempt to complete the experience.** If a student successfully remediates an IPPE and fails a second IPPE experience or successfully remediates an APPE and fails a second APPE, they will be dismissed from the College.

Borderline Pass

Students who receive a “Borderline Pass” and/or competency score of 0,1, or 2 at the end of an IPPE clerkship will be required to attend a Formal Planning Conference with the ADEE and/or EED

Withdrawal

1. Preceptors may request that a student be removed from a practice site as a result of behavior or performance. Students who are removed from a site at the request of a preceptor will be required to undergo remediation prior to reentering experiential coursework. Remediation will be outlined in an IEP. Students who are removed from an IPPE/APPE will receive a "WF" (withdraw failing) and will have to repeat the experience.
2. A student who withdraws at any time during an experience (IPPE or APPE) and is failing at the time of the withdrawal will be given a "WF". The "WF" will be regarded as a failing grade. If the student receives a second "WF" or "F" grade in any experience, they will be dismissed from the College of Pharmacy. A student may repeat only one experience to remove a grade of "F" or "WF".
3. If a student withdraws at any time during an experience (IPPE or APPE) and at that time has a passing grade as judged by the preceptor, they will receive a grade of "WP" (withdraw passing). At the discretion of the appropriate experiential course coordinator, the student may repeat the experience in which the "WP" was received, some part of that experience as designated by the preceptor, or another experience so long as the student meets the experiential requirements for graduation.

Remediation of a Free-Standing Experience

For remediation of an "F" or "WF" grade in an experience, the following rules will be applied:

1. A student who fails an experience will be required to complete the same type of experience. The practice site and scheduled time for the repeat experience will be scheduled at the discretion of the appropriate coordinator and the College according to availability.
2. A student may repeat an IPPE as a summer course at the discretion of the EED provided that the second attempt in the IPPE will be completed before the day of registration for the fall semester of the upcoming Professional Year. IPPEs must be successfully completed before the student can progress to the next academic year. APPEs must be successfully completed within no more than two calendar years.
3. Tuition may be charged for additional or repeated IPPE/APPE courses and/or remediation.

Academic Dishonesty

Students are expected to abide by the Pledge of Professionalism and Honor Code. These documents can be found in Appendix A of the student handbook at https://pharmacy.uams.edu/wp-content/uploads/2023/08/COP-Student-Handbook-2023-2024_FINAL.pdf. Students who commit academic dishonesty or professional misconduct during an IPPE/APPE may be removed and given an "F" for the experience in which the violation occurred. Examples of academic dishonesty include but are not limited to plagiarism or cheating as described in the student handbook.

The **Scholastic Rules for Experiential Course Work** are outlined in the UAMS College of Pharmacy Catalog and Student Handbook. This document is available at https://pharmacy.uams.edu/wp-content/uploads/2023/08/COP-Student-Handbook-2023-2024_FINAL.pdf. Students are encouraged to review the full handbook available on the COP website for additional information.

Academic Calendar 2023-2024

For the most up-to-date version, refer to the College's website available at <https://pharmacy.uams.edu/current-students/academics/>

Professionalism in the Experiential Learning Environment

Preceptors offer their pharmacy and time to teach students how to practice pharmacy. While the student is in the pharmacy, patients and other health professionals will recognize him or her as a part of that pharmacy; the student's conduct and actions will reflect upon the pharmacy. Students are expected to conduct themselves as professionals. The student will respect the operating procedures of the institution and the instructions of the preceptor.

Professional Attire

The student must be neat in appearance and maintain professional decorum while on rotation. The student is required to be professionally attired at all times while on site, including a name tag, required identification and their pharmacy jacket, unless instructed otherwise by the preceptor. Although the term “professionally attired” can be interpreted differently, the following general guidelines should be followed:

- Contact your preceptor 1 week prior for UAMS preceptors and 2 weeks prior for non-UAMS preceptors. When contacting the preceptor prior to beginning the experience, students should ask if there is a dress code. If the site has a specific dress code, students are expected to abide by it. If a student does not abide by the site’s dress code, the preceptor may require the student to leave and change into more professional attire before returning. The student is expected to make up any time lost. If there is not a specific dress code at the site, the student should use the preceptor’s attire as a guide.
- If uncertain about a site’s dress code (e.g., the first day), a safe attire would be slacks, dress shirt, and necktie for males and dress or slacks/skirt and appropriate top for females.
- Clothing should always be neat and clean.

Social Media

Social Media, like Facebook, Linked-In, Twitter, etc., are great places to share “the human experience” with friends and family. Some professors and preceptors in the College also enjoy using these media sites; however, there are a couple of situations where student pharmacists can get into big trouble, including:

- Posting patient information. It is easy to make a mistake and release identifiable patient information even when you don’t think you are doing so. Posting that someone picked up a particular medication at a certain pharmacy during a certain period of time may be enough to identify the patient. Date of service is legally a “patient identifier” under HIPAA, as is the city the patient lives in, the name of the patient’s employer, and other data elements that you may not realize. Putting patient information on any media site is grounds for dismissal from the College and possible criminal prosecution.
- Posting unprofessional content on social media. Many employers will take a list of applicants and check each one on Facebook to see if there is anything unprofessional. Remember, pharmacy is a small world. Many of the faculty and staff or preceptors will not “friend” students and residents in the College, just to avoid any issues of favoritism or conflicts of interest. Don’t be offended if your “friend request” isn’t reciprocated. The official UAMS COP policy on using social media can be found at https://pharmacy.uams.edu/wp-content/uploads/2023/08/COP-Student-Handbook-2023-2024_FINAL.pdf .

Confidentiality: *The Pharmacy*

The student will learn certain aspects of the pharmacy that should be kept confidential including pricing procedures and other aspects of operation. The preceptor is placing significant trust in the student by taking him or her into their pharmacy. During this time, the student should feel as a part of the organization. **Violation of these confidences is grounds for immediate dismissal from the Experiential Program and may also result in additional disciplinary action as deemed necessary by the College.** (See the College of Pharmacy Catalog and Student Handbook- UAMS Confidentiality Policy for more details.)

Confidentiality: *The Patient*

The student must keep confidential all information pertaining to the patient's health and any other information of a personal nature, which may be learned in the externship program. Discussion of any patient-specific information must only be done in a professional manner and in an appropriate environment. **Violation of patient confidentiality is grounds for immediate dismissal from the Experiential Program and may also result in additional disciplinary action as deemed necessary by the College.** (See the COP Catalog and Student Handbook- UAMS Confidentiality Policy for more details.)

Guidelines for Students

1. All students must attend the orientation to rotations offered by the Experiential Education Office prior to beginning the Introductory and Advanced Pharmacy Practice Experiences.
2. Students are responsible for regularly monitoring their UAMS email messages, as this is the primary means of communicating important information in a timely manner. Students are responsible for maintaining a current UAMS email password throughout their academic experiences. If the password expires, the student must call the UAMS Technical Support Center at 501-686-8555.
3. If a student believes there is a personality conflict with the preceptor, or other problems with the experience which could affect the final grade, they should contact the ADEE or IPPE Director immediately.
4. Students who observe or are asked to do something that is ethically questionable should immediately contact the Experiential Education Office for guidance. If it is in fact unethical, the Office will have the student contact the Arkansas State Board of Pharmacy. Students who observe or are asked to do something that is illegal or has the potential to cause immediate patient harm, have a responsibility to directly contact the Arkansas State Board of Pharmacy immediately.
5. **Students are encouraged** to get all evaluations and grades from the preceptor, including mid-term evaluation by the preceptor.
6. Students may be placed in a P1 or P2 IPPE in a pharmacy where they are employed as long as their experiential education and employee roles are clearly differentiated and do not overlap. For example, a student may be employed by a health system in a specific capacity and/or in one area of the facility and be assigned to an IPPE in a clearly distinct capacity or area of the health system.
7. The general policy of the UAMS College of Pharmacy is for students to complete all rotations within the State of Arkansas. Out-of-state rotations may be done only with approval from the Experiential Education Office. Students participating in out-of-state rotations must have and are responsible for obtaining an intern license from that state. Students should apply for the out-of-state intern license at least 6 months before the start of the rotation. Students are responsible for all expenses (travel, lodging, additional rotation fees, etc) for any rotation site, unless provided for by the rotation site (e.g. UAMS Regional Centers housing, I.H.S. rotations).

Student Requirements

Students must complete **Midpoint (P2 IPPE and APPEs) and Final self-assessments** using the **IPPE/APPE Evaluation Rubric** to enhance feedback discussions regarding student performance. These self-assessments must be submitted in CORE.

Students must complete the **Preceptor and Site Evaluation** located in CORE as the items relate to the individual preceptor and experiential site. It is important that this evaluation be completed within **five** business days of the last day of participation in the experience. **Failure** to submit a completed evaluation within five business days may result in a grade of **Incomplete (see Incomplete Grade)**. Results from preceptor and site evaluations will be aggregated and forwarded to preceptors at the end of the academic year without individual identification.

In addition to meeting the expectations set forth in this manual, students must comply with the **College of Pharmacy Policies and Procedures Governing Students in the Experiential Program**.

Guidelines for Sites

Practice sites, in general, should fulfill these criteria and responsibilities.

1. Be clean, organized, and well managed.
2. Meet all state and federal laws related to the practice of pharmacy.
3. Conduct patient care and business in an ethical manner.
4. Possess sufficient work volume to facilitate learning.
5. Provide an adequate patient population to support the learning objectives for the rotation.
6. Display a commitment to the education of pharmacy students.
7. Display a commitment by management that is supportive of staff involvement in educational activities offered at the site.
8. Ensure support staff are receptive and cooperative in interactions with students.
9. Enable student activities and experiences that meet the learning objectives of the IPPE and/or APPE courses.
10. Allow access to appropriate medical, nursing, and pharmacy records to support the learning objectives and activities for the rotation.
11. Provide access to resources and conditions that support accomplishment of the behavioral and knowledge objectives of the rotation.
12. Ensure the student has daily contact with the preceptor or a qualified designee to receive feedback and have opportunities to ask questions.
13. Provide technology needed to reflect contemporary practice and to support learning objectives.
14. Ensure the student does not receive monetary compensation for academic requirements completed at the site.
15. Execute a written affiliation agreement with the UAMS College of Pharmacy.

All experiential practice sites must be approved by the Experiential Education Office.

Guidelines for Preceptors

The preceptor is an integral and vital part of the educational experience. This role cannot be overemphasized. In assuming the responsibility for training and educating students, the preceptor displays to the public, their peers, and other health professionals a commitment to the advancement of the profession through the provision of quality pharmaceutical care.

In assuming this role of teacher/mentor, the preceptor must foster the development of a strong sense of mutual admiration and professional courtesy. While working on a one-to-one basis, the preceptor assumes much more than a teacher or pharmacist role model. The preceptor must identify the student's strengths and weaknesses, while concomitantly providing an atmosphere whereby the student may grow intellectually as well as professionally. The preceptor must recognize that the student's greatest deficiency is inexperience, while the preceptor's greatest asset is knowledge through experience. The student may be able to share with the preceptor newly acquired clinical and scientific knowledge and, in turn, the preceptor will guide the student through the application of that knowledge to daily professional practice. The preceptor may therefore not only teach but learn as well.

Matching the student's duties with their education and experience is an important task for both learning and public safety. Depending on the student's knowledge and experience, competencies may range from technical to highly professional functions. For the purpose of supervision and instruction of the experiential portion of the UAMS COP curriculum, the range of learning activities/responsibilities is divided into **basic, intermediate, and advanced**. Preceptors should arrange learning experiences systematically into these levels as listed. Care should be taken to avoid assignment of complex practice tasks to the beginning student. Conversely, inhibiting systematic progress based on previous accomplishments and demonstrated competencies from one level to the next are contradictory to good education practice. **The levels of competency represent a conceptual framework and serve as guidelines to the preceptor and are not meant as finite categories. For IPPEs it is expected, at minimum, that students perform at an expected level for basic activities/responsibilities with exposure to the intermediate level. For APPEs, students are expected to achieve competency appropriate for an entry-level pharmacist for all advanced practice competency items.** The goal of the experiential program is to allow each student to perform at the highest level they are capable of throughout the entire program.

Preceptors should, in general, fulfill these criteria and responsibilities:

1. Possess current pharmacist license in good standing.
2. Maintain professional competency, observe the law, uphold the dignity and honor of the profession, and accept its moral and ethical principles.
3. Demonstrate excellent character and an attitude appropriate to the presence of students.
4. Display a desire to educate patients, care givers, pharmacy learners, and other health care professionals.
5. Have a minimum of one year of practice experience in their specific area.
6. Provide a high-quality practice that is well received by other health care professionals and patients.
7. Employ clinical and scientific literature to support an evidence-based practice.
8. Participate in preceptor training programs supported by UAMS.
9. Be committed to the profession through organization membership.
10. Communicate effectively with students including delivery of constructive criticism in a professional manner as well as praise for outstanding achievements.
11. Contribute to the mission of UAMS College of Pharmacy.
12. Organize the student's experiences and plan one-on-one time with the student.
13. Not enter into any personal or professional relationship with a student that would jeopardize or interfere with objectivity or effective teaching.
14. Not reimburse the student for services rendered, either directly or indirectly.

15. Prepare for a student's contact one month prior to the start of the rotation to:
 - a. Introduce themselves.
 - b. Identify any documentation and/or processes required to begin the first day of the rotation (drug screen, background check, health insurance, immunization requirements, etc).
 - c. Obtain specific instructions for the first day of the rotation (dress code, arrival time, meeting location, etc).
16. On the first day of each rotation the preceptor will:
 - a. Orient the student to the site, practice, and staff and review, in detail, expectations for the student with respect to appearance, attitude, site-specific processes of medication processing, and patient care responsibilities. (The primary preceptor may delegate some of these responsibilities to other qualified persons.)
 - b. Review the learning objectives and activities for the rotation.
 - c. Review the student's work, IPPE and/or APPE experiences, as applicable, and rotation syllabus, in order to adapt the experience to the student's needs, interests, and experiences to date where possible.
 - d. Review a planned schedule of rotation hours with the student and discuss expectations and due dates for special projects, reports, presentations, meetings, etc.
 - e. Identify an alternate supervisor for instances when the primary preceptor is unavailable.
17. Throughout the rotation the preceptor will:
 - a. Allow adequate time for communication and be willing to discuss all aspects of professional practice in accordance with ethical, moral, and legal standards.
 - b. Provide support systems to allow an atmosphere of maximal/optimal learning for the student.
 - c. Provide ongoing feedback to identify activities and skills that are performed successfully and those that need improvement.
 - d. Supervise the student's recommendations.
 - e. Ensure that the minimum requirement of experiential hours for the rotation is completed as guided by the Preceptor's due diligence and the school's attendance policies.
18. Complete formal evaluations of the student's performance guided by the IPPE/APPE rubric, as applicable, at the midpoint and end of the rotation.
19. Require the student to complete midpoint and final self-evaluations of their performance for incorporation into the midpoint and end of rotation evaluation discussions.
20. Meet with the student to discuss the midpoint and final evaluations of the student and the student's self-evaluations and make recommendations for the student's continuing development of competencies and professionalism.
21. Submit the completed midpoint and final evaluations in CORE within requested timeline parameters. All assessments should be documented by the last day of the experience.
22. If a difficult situation with a student arises, the preceptor will:
 - a. Discuss the situation with the student immediately.
 - b. Maintain detailed documentation.
 - c. Contact the Office of Experiential Education for consultation if needed.

Preceptor Requirements – New Preceptors

All new preceptors should complete preceptor training prior to accepting students at their practice site. Experienced preceptors are encouraged to participate in preceptor training opportunities as well. Preceptor training supports development of a consistent approach to delivery of learning experiences and supports development of the preceptor's teaching and evaluation skills. Preceptor training includes:

1. Orientation to the UAMS College of Pharmacy mission statement, goals, and values.
2. Outcomes expected of students, preceptors, and the school.
3. Learning objectives and activities for experiential coursework.
4. Methods and resources to support evaluation of student knowledge, behaviors, and performance.
5. Review of the UAMS Longitudinal Achievement Based Assessment process and evaluation forms.
6. UAMS policies, procedures, and resources available to preceptors.
7. Encourage 1 hour of preceptor development per year.

Specific Criteria for New Preceptors includes:

- New Preceptor Training with a representative of the Office of Experiential Education
- Membership in at least 1 professional organization
- Practice experience of at least 1 year in the practice setting
- Pharmacist license in good standing

The Office of Experiential Education will determine which course aligns with the activities the student will experience with the preceptor as determined from the Preceptor Information Form and quality assurance documentation completed by the Office of Experiential Education in coordination with preceptor input and site review. Please contact the Office of Experiential Education at 501-686-6494 with any questions.

Preceptor Requirements – Ongoing Requirements

- Completion of one hour of continuing education focused on preceptor development annually. Programs that meet this requirement are available online through the Collaborative Education Institute website. Annual live programming is delivered at the Arkansas Pharmacists Association Annual Meeting and the Arkansas Association of Health-System Pharmacists Fall Seminar. Additional preceptor development opportunities are available through the UAMS College of Pharmacy Continuing Education Department and APhA, ASHP, and other professional organization regional and national meetings.
- Membership in at least 1 professional organization
- Pharmacist license in good standing

Professional Practice Benefits for Preceptors

1. **Faculty Recognition** - Preceptors can be formally recognized for their contributions to pharmacy experiential education through designations by the appropriate academic rank modified by the prefix *Clinical*. These designations are designed to recognize individual pharmacists' contributions to pharmacy education. The appropriate title will be determined by the Dean of the College of Pharmacy and the Chairman of the Department of Pharmacy Practice on an annual basis.
2. **Program materials** - The College of Pharmacy Catalog and Student Handbook details information for the professional program and is available on the College's website at <https://pharmacy.uams.edu/current-students/academic-programs/policies-procedures/>. Preceptors will receive the Pharmacy Practice Experience Manual annually.
3. **Collaborative Education Institute (CEI)** - CEI is easy to access from the CORE website. Once logged in to CORE ELMS, click on the "External Resources" tab located on the bottom-left of the screen. Below this tab, click "CEI." Directions for accessing CEI will be on the page.
4. **Library Access** - Preceptors have access to the UAMS library. This package expands preceptor access to UAMS library's on-line resources including PubMed with full-text articles from journals in the library's collection and information databases such as Lexi-Comp on-line access and DynaMed.

- **Procedure**

Please fill out the "Non-Employee Information Sheet" found on the UAMS Experiential website at <https://pharmacy.uams.edu/current-students/academic-programs/experiential-education/preceptor-development/preceptor-benefits/> or found on Core under Document library. Then fill out the Confidentiality Agreement at <https://apps.uams.edu/confidentialityagreement/InternalForms/>. For the Confidentiality Agreement, put Seth Heldenbrand as the supervisor with 501-686-6494 as the phone number. **Save both forms** and email them to Karin Walker in the Experiential Education at kawalker2@uams.edu. Contact IT at 501-686-8555 for help setting up a login and password. Preceptors must maintain an active Preceptor Agreement and Availability Form with the Office of Experiential Education to utilize this resource.

- **UAMS Regional Centers**

All health care professionals are eligible to use the collections of the UAMS Regional Centers and to request interlibrary loans of articles for journals not located in their Regional Center's library. Check with the UAMS Regional Center library for the terms for interlibrary loans as some provide this service without charge for health care professionals and students.

- **Free Assistance and Training from the UAMS Librarians**

The UAMS librarians will provide assistance via phone, email, in person, and/or meet with groups of five or more health care professionals and provide training at no charge. Preceptors are encouraged to utilize the expertise available for questions that arise at their practice site. Preceptors are invited to be active participants in the educational program and share ideas at every opportunity.

For further information or questions regarding Preceptor requirements or benefits, please contact:

Karin Walker
Program Coordinator, Experiential Education
Phone: (501) 686-6494
Fax: (501) 686-8104
KAWalker2@uams.edu



Introductory Pharmacy Practice Experience Syllabus

PhPr 71063 P1 Community IPPE (120 hours)



Director of Community Pharmacy Practice Experiences: Seth Heldenbrand, Pharm.D.

Phone: (501) 686-6392 **Office:** ED II 6/137A **Office Hours:** Please call or email to schedule to make an appointment

Course Meeting Time and Location: Determined by rotation site and preceptor

The following are required components of course syllabi. It is at the Course Coordinator's discretion how these components are arranged in the syllabus.

Course Description and Format

At the end of the P1 Spring semester, students are assigned a three-week experience at select community pharmacies to be completed in May or June. Through participation in daily operations and following competency-based objectives, students will develop a professional attitude, judgement, applicable skills, and an appreciation for the profession in the community setting. To enter this three-credit hour, pass/fail course, students must be eligible for advancement to the P2 year.

Resources

The College of Pharmacy Catalog and Student Handbook details information for the professional program and is available on the College's website at <https://pharmacy.uams.edu/current-students/academics/handbook/> Resources also include UAMS library access (including Lexicomp, UpToDate, PubMed, etc.). CORE Higher Education serves as a resource regarding rotation schedules, evaluations, requirements, etc. and is available at <https://corehighered.com/login-elms>

Course Goals and Objectives

The community pharmacy IPPE is an integral element of training in view of the significant number of pharmacy practitioners who choose this field as a career path. The goals and objectives of the P1 Community IPPE are to:

- Process prescriptions and acquire knowledge in the specialty of community pharmacy,
- Develop a concern for the patient's health and welfare,
- Develop an appreciation for the impact of the community pharmacist in the healthcare system through the provision of services to meet the expanded public health responsibilities of pharmacy,
- Foster an appreciation for patient education regarding health and drug-related matters, and
- Provide a variety of exposures to the basics of pharmacy operation and to different practitioner philosophies and problem-solving skills.

Course Functions

The student will be introduced to and given instruction for the following community pharmacy practice functions.

- **Dispensing of Prescriptions:** Students will participate in receiving, verifying, checking for errors, selecting drug, filling, recording, filing and deliver of prescriptions to the patient. This includes interpretation of written orders, handling of patient records and understanding laws related to drug type, pricing and completing third party medical reimbursement. Students may be exposed to prescription compounding depending on the environment.
- **Patient Interactions:** Students will obtain correct information from patients concerning an accurate and complete drug history, advise the patient as to proper use of storage of prescription drugs and assist in proper selection of over-the-counter medications. The most important aspect of community pharmacy is the patient.
- **Drug and Product Information:** There should be time for the student to identify/evaluate information about both prescription and nonprescription drugs. Each student will be expected to gain knowledge of general drug information, generic and trade names, common dosage forms, indications, side effects, interactions, and patient counseling for the Top 200 drugs dispensed.

Overview of the UAMS College of Pharmacy Experiential Program

The fundamental goal of the experiential pharmacy education program is to provide structured, practical, and closely supervised, professional program experiences that enable the student to develop and apply skills and information previously presented in formal coursework in order to better assume their future role as a competent pharmacist. The student is expected to integrate their basic sciences and clinical background into an actual practice setting under the preceptor's guidance and instruction. This includes giving the student the opportunity to further refine professional judgement, practice competency, and technical skills.

Attendance

There are **no excused absences** and **no recognized student holidays** for experiential course work. In some instances, experiential hours will be scheduled to conform to site activities (e.g., weekends, early morning, and late afternoon). In case of illness, students must: a) call the Dean's Office (501) 686-5557 **AND** b) call the preceptor as early as possible on the day that will be missed. If a student anticipates a request to be absent from the experience on a specific date (e.g., job/residency interview, college sponsored meeting/function during rotation hours, etc.), they must make arrangements with the preceptor prior to that date. A *minimum* of 120 hours is required for the P1 IPPE, 160 hours for the P2 IPPE, 40 hours for the P3 IPPE, and 160 hours for each APPE; therefore, it is the student's responsibility to reschedule hours missed with the preceptor's approval. If a student is sick or absent for more than one fourth of any rotation, they may complete the rotation only with permission of the preceptor and the EED/ADEE.

Emergency

In the case of an emergency, the student should call the ADEE immediately at (501) 551-8193. This does not include absence for routine illness, job interviews, flat tires, etc. These issues are addressed in the Attendance Policy above.

Inclement Weather

During inclement weather conditions (regardless of activation of the UAMS inclement weather policy), the student should contact their assigned experiential preceptor to receive information about site hours of operation and function. If the student is unable to travel during inclement weather, any absence requires that the student contact their preceptor and the Experiential Education Office.

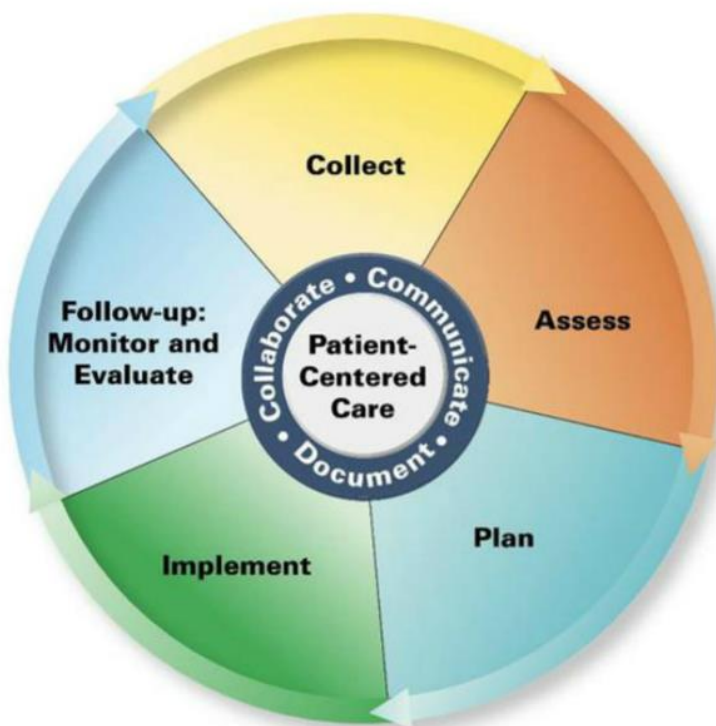
Policy for Interaction

Students should contact the preceptor via their office phone or email. If unable to reach the individual, students should contact the Experiential Office for assistance. Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the preceptor, EED, or ADEE, and finally the Dean's office. The course syllabus is a general plan for the course; the syllabus may be modified at any point during the semester and deviations communicated to the class. Any changes to the syllabus will be communicated at the earliest possible class meeting as well as electronically through electronic mail distribution.

Code Black

In the event of a violent occurrence on campus, special procedures are needed to ensure maximum safety and prevention of injury/loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening, and other scenarios not depicted here. While this is primarily a law enforcement operation, incident management, sheltering in place, and crisis communications are integral to the safety and security of the campus. The UAMS Code Black Plan is outlined in the COP Catalog and Student Handbook. During orientation to an experiential site, students should make every effort to be informed as to site-specific policies and procedures regarding violent events.

Pharmacists' Patient Care Process



Source: http://www.pharmacist.com/sites/default/files/JCPP_Pharmacists_Patient_Care_Process.pdf

Pharmacists' Patient Care Process

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

Using principles of evidence-based practice, pharmacists:

Collect

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

Assess

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

Plan

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

Implement

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

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

The pharmacists' patient care process is a tool used within the College of Pharmacy and on rotations to help the student properly learn the process to provide patient-centered care. Students must be able to collect information from the patient, assess and analyze the information collected, create and implement an individualized plan, and then monitor and evaluate the effectiveness of the plan. The process should be practiced throughout rotations with preceptors to identify any areas where the student needs improvement. For example, the student may be able to collect all the necessary information, but unable to assess it properly to be able to form a plan. This process is used on midpoint and final evaluations as well.

Grading

The preceptor is a member of the faculty of the College of Pharmacy (COP). Preceptors are expected to assess student performance of the outlined practice competencies using the COP Introductory and Advanced Pharmacy Practice Experience Evaluation Rubrics. **At the end of the experience, the preceptor will use the evaluation rubric in the CORE online grading system to assess the student's performance. Mid-way through the rotation, deficiencies are to be discussed with the student. Every effort should be made to correct any deficiencies before a student completes the assigned experience. Evaluation rubrics will automatically become available in CORE at the appropriate times.** The preceptor's evaluation constitutes 100% of the assessment of competency.

Experiential Proficiency Scores	Global Assessment
5 – Exceeds expectations	<input type="checkbox"/> Clear Pass <input type="checkbox"/> Borderline Pass <input type="checkbox"/> Clear Failure
4 – Meets expectations	
3 – Progressing	
2 – Needs significant improvement	
1 – Does not meet expectation	
0 – Though opportunities existed, student did not engage in requirement; therefore, not able to assess	
NA – Not applicable to experience or not observed	

*** Please refer to the comprehensive academic rules in the student handbook for more information

Incomplete Grade

A grade of “I” (incomplete) is assigned when a student, for reasons sufficient to the preceptor, has not been able to complete some vital portion of the experience. The student must finish the requirements of the experience at the same practice site and at the discretion of the preceptor. If the work is not completed by the designated time, the grade will become an “F” unless the Dean, in conjunction with the preceptor and the appropriate experiential course coordinator, grants an extension of time. For IPPEs, all work must be completed before the day of registration for the upcoming Fall semester.

Failing Grade

Students will fail an experience if a preceptor indicates “Clear Failure” at the end of an experience. The student must repeat and pass that type of experience (Community of Institutional). No experience may be attempted more than twice. **In the event that a student receives a “Clear Failure” at the end of an IPPE, the EED/ADEE may develop an Individualized Educational Plan (IEP) and forward this to the Scholastic Standing Committee.** The Scholastic Standing Committee will review the recommended IEP for approval or modification. **For students who are not awarded Credit for an IPPE, failure to successfully complete an IEP will result in an “F” and will be viewed as the student’s second attempt to complete the experience.** If a student successfully remediates an IPPE and fails a second IPPE experience, they will be dismissed from the College.

Borderline Pass

Students who receive a “Borderline Pass” and/or competency score of 0, 1, or 2 at the end of an IPPE experience will be required to attend a Formal Planning Conference with the ADEE and/or EED.

Withdrawal

1. Preceptors may request that a student be removed from a practice site as a result of behavior or performance. Students who are removed from a site at the request of a preceptor will be required to undergo remediation prior to reentering experiential coursework. Remediation will be outlined in an EIP. Students who are removed from an IPPE will receive a “WF” (withdraw failing) and will have to repeat the experience.
2. A student who withdraws at any time during an IPPE experience and is failing at the time of withdrawal will be given a “WF”. The “WF” will be regarded as a failing grade. If the student receives a second “WF” or “F” grade in any experience, they will be dismissed from the College of Pharmacy. A student may repeat only one experience to remove a grade of “F” or “WF”.
3. If a student withdraws at any time during an IPPE experience and at that time has a passing grade as judged by the preceptor, they will receive a grade of “WP” (withdraw passing). At the discretion of the appropriate experiential course coordinator, the student may repeat the experience in which the “WP” was received, some part of that experience as designated by the preceptor, or another experience so long as the student meets the experiential requirements for graduation.

Academic Dishonesty

Students are expected to abide by the Pledge of Professionalism and Honor Code. These documents can be found in Appendix A in the student handbook at https://pharmacy.uams.edu/wp-content/uploads/2023/08/COP-Student-Handbook-2023-2024_FINAL.pdf Students who commit academic dishonesty or professional misconduct during an IPPE/APPE may be removed and given an “F” for the experience in which the violation occurred. Examples of academic dishonesty include but are not limited to plagiarism or cheating as described in the student handbook.

The Scholastic Rules for Experiential Course Work are outlined in the COP Catalog and Student Handbook. This document is available at <https://pharmacy.uams.edu/current-students/academics/handbook/> Students are encouraged to review the full handbook available on the COP website for additional information.

Academic Calendar: For the most up-to-date version, refer to the College’s website available at <https://pharmacy.uams.edu/current-students/academics/>.

Professional Attire

The student must be neat in appearance and maintain professional decorum while on rotation. The student is required to be professionally attired at all times while on site, including a name tag, required identification and their pharmacy jacket, unless instructed otherwise by the preceptor. Although the term “professionally attired” can be interpreted differently, the following general guidelines should be followed.

- Contact your preceptor 1 week prior for UAMS preceptors and 2 weeks prior for non-UAMS preceptors. When contacting the preceptor prior to beginning the experience, students should ask if there is a dress code. If the site has a specific dress code, students are expected to abide by it. If a student does not abide by the site’s dress code, the preceptor may require the student to leave and change into more professional attire before returning. The student is expected to make up any time lost. If there is not a specific dress code at the site, the student should use the preceptor’s attire as a guide.
- If uncertain about a site’s dress code (e.g., the first day), a safe attire would be slacks, dress shirt, and necktie for males and dress or slacks/skirt and appropriate top for females.
- Clothing should always be neat and clean.

Social Media and Technology

Students should exercise caution when posting on social media and should avoid posting patient information. It can be easy to make a mistake and release identifiable patient information (e.g., posting that someone picked up a particular medication at a particular pharmacy during a certain time period may be enough to identify a patient). Date of service is legally a “patient identifier” under HIPAA, as is the city the patient lives in, the name of the patient’s employer, and other data elements. Putting patient information on any media site is grounds for dismissal from the College and possible criminal persecution. Students are advised to not post unprofessional content on social media. Many employers check applicants’ social media pages. Remember, pharmacy is a small world. Many faculty, staff, and preceptors will not “friend” students and residents in the College to avoid any issues of favoritism or conflicts of interest. Do not be offended if your “friend request” is not reciprocated. Students are to maintain professionalism regarding personal technology use (cell phone, text messaging, internet, social media, etc.).

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Overall Competencies

The student will be exposed to the following competencies over the course of the experience.

- 1.1 Evaluate patient data and make an assessment:
 - a. Identify and collect information from profiles, pharmacy and medical records, and patient (caretaker) history that will influence optimal drug choice and dosage,
 - b. Obtain a medical history (e.g., chief complaint, medical, medication management, financial, social, cultural, review of systems),
 - c. Conduct physical assessment, and
 - d. Assess patient's quality of life.
- 1.2 Conduct a systematic review of the patient prior to recommending any drug or non-drug therapy:
 - a. Identify drug-related problems including adverse drug reactions, drug interactions, and/or suboptimal treatment,
 - b. Recognize common signs or symptoms indicative of disease control issues or drug-related problems,
 - c. Ascertain levels of chronic disease control,
 - d. Assess and address barriers to health care,
 - e. Collaborate with the patient or patient advocate to prioritize problems.
- 1.3 Design and implement an individual patient-centered treatment plan to maximize desired effects and minimize undesired effects:
 - b. Select prescription or non-prescription medications (including doses and dosage schedules), applying both pharmaceutical science and therapeutic principles,
 - c. Evaluate and address patient factors that are relevant to developing a treatment plan (e.g., sex, age, race, ethnicity, culture, literacy, sexual orientation, disability, health beliefs, health literacy, and genetics),
 - d. Define treatment goals and plan to monitor pharmacotherapy for safety and effectiveness,
 - e. Consider non-drug therapy, therapeutic lifestyle changes, and preventive care issues,
 - f. Conduct patient education including verification of patient understanding of the treatment plan, and
 - g. Implement interventions to prevent or remedy non-adherence.
- 1.4 Document patient care activities:
 - b. Record actions taken to achieve desired therapeutic outcomes, and
 - c. Document patient and provider education activities.
- 2.1 Demonstrate accurate, safe, and time-sensitive preparation, dispensing, and administration of pharmaceuticals:
 - a. Accurately transcribe verbal and written prescriptions and ensure appropriateness of these drug orders,
 - b. Accurately and safely compound and package drugs for distribution in appropriate dosage forms,
 - c. Select appropriate drug product, with respect to patient preference, manufacturing source, generic availability, and third-party reimbursement, and
 - d. Apply appropriate labeling, including patient-specific auxiliary labels.
- 2.2 Manage pharmacy resources to optimize pharmacotherapy outcomes for individual patients and/or populations:
 - a. Employ principles of personnel management to the operation of a pharmacy,
 - b. Use principles of fiscal resource management,
 - c. Employ medication distribution and control systems to operate the pharmacy efficiently, and
 - d. Evaluate and use appropriate automation and information technology to optimize medication dispensing and patient care.

2.3 Educate patients and healthcare providers about requirements for effective therapy:

- a. Establish rapport with patients and other healthcare professionals to promote a team approach to patient care,
- b. Counsel patients regarding purposes of their medications, potential adverse drug reactions, and other required information, and
- c. Provide medication information to patients and healthcare providers to promote rational drug therapy.

3.1 Demonstrate skills needed to participate in or provide preventive services:

- a. Participate in disease prevention,
- b. Provide lifestyle and wellness counseling,
- c. Provide drug-therapy evaluation and monitor for medication safety,
- d. Participate in public health education programs, and
- e. Neutralize social and cultural barriers to effective application of skills in preventive services.

3.2 Apply research processes to inform pharmaceutical policy:

- a. Demonstrate the ability to conduct drug literature evaluations,
- b. Design quality improvement projects to improve medication use,
- c. Apply evidence-based principles when making pharmaceutical policy recommendations, including drug benefit design recommendations, and
- d. Apply principles of Pharmacoeconomics and outcome assessment.

4.1 Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivations, and emotions that could enhance or limit personal and professional growth.

4.2 Demonstrate responsibility for creating and achieving shared goals, regardless of position.

4.3 Engage in innovative activities by using creative thinking to envision better ways of accomplishing goals.

4.4 To demonstrate professional citizenship in the delivery of patient care, distribution of medications, and promotion of wellness and disease prevention:

- a. Collaborate with patients, providers, personnel, and other stakeholders to obtain and share pertinent patient information and pharmacotherapy recommendations, provide accurate and safe medication dispensing and resource management, and advance public health issues and pharmaceutical policy,
- b. Perform duties in accordance with legal, ethical, social, economic, and professional guidelines, and
- c. Maintain professional competence by identifying and analyzing emerging issues, products, and services that may impact patient care, medication distribution and the pharmacy business, and may improve disease prevention and wellness and inform pharmaceutical policies.

Suggested P1 IPPE Community Experience Framework

Student Name:

Location:

Contact Information:

Day One: Orientation (Time, ex: 8 AM – 5 PM)

Scheduling/Calendar if possible
Inquire on student's interest and prior experience
List goals of the rotation
Pharmacy tour
Notify the student if they will be rotating amongst other pharmacists

Week One (Time)

Observe the pharmacist and their duties along with the rest of the team
Assist in medication filling/dispensing
Pull medications from the shelves
Answer the phone to help with patients and their requests

Week Two (Time)

Understand how to enter a prescription correctly
Enter a patient's insurance information
Assist in transferring a prescription
Longitudinal: dispensing

Week Three (Time)

Provide a patient with immunization
Counsel at least 3 patients
See narcotic order and discuss how to file it
Final evaluation
Longitudinal: dispensing, data entry, telephone calls, and transfers

Daily Activities

- Pull medications from shelves
- Dispense medications

Considerations

- Draft a list of medications that students could counsel on at your pharmacy
- Suggested topic discussions: insurance, overhead costs, PBMs, Medicare/Medicaid, etc.
- Advancement in the IPPE experience can be necessary if a student has prior experience in the above and is able to move forward in discussion or ordering, business model, etc.



Introductory Pharmacy Practice Experience Syllabus

PhPr 72034 P2 Institutional IPPE (160 hours)



Director of Health-System Pharmacy Practice Experiences: Lindsey Dayer, PharmD, BCACP

Phone: (501) 526-4211 **Office:** ED II 6/137A **Office Hours:** Please call or email to schedule to make an appointment

Course Meeting Time and Location: Determined by rotation site and preceptor

The following are required components of course syllabi. It is at the Course Coordinator's discretion how these components are arranged in the syllabus.

Course Description and Format

At the end of the P2 Spring semester, students are assigned a four-week experience at select hospital/institutional pharmacies to be completed in May, June, or July. Through participation in daily operations and following competency-based objectives, students will develop a professional attitude, judgment, applicable skills, and an appreciation for the profession in the institutional setting. To enter this four-credit hour, pass/fail course, students must be eligible for advancement to the P3 year.

Resources

The College of Pharmacy Catalog and Student Handbook details information for the professional program and is available on the College's website at <https://pharmacy.uams.edu/current-students/academics/handbook/> Resources also include UAMS library access (including Lexicomp, UpToDate, PubMed, etc.). CORE Higher Education serves as a resource regarding rotation schedules, evaluations, requirements, etc. and is available at <https://corehighered.com/login-elms>

Course Goals and Objectives

The institutional IPPE is an integral element of pharmacy training in view of the significant number of pharmacy practitioners who choose this field as a career path. The goals and objectives of the P2 Institutional IPPE are to:

- Process prescriptions in a manner compatible with state-of-the-art hospital pharmacy practice,
- Develop a concern for the patient's health and welfare,
- Develop an appreciation for the impact of hospital pharmacy practice on the healthcare system and public health,
- Foster the development of a responsible professional attitude and judgement,
- Foster an appreciation for patient education regarding health and drug-related matters,
- Provide a variety of exposures to pharmacy operation and different practitioner philosophies and problem-solving skills,
- Foster the application of didactic information to the hospitalized patient,
- Provide practical experience in the operation and drug distribution systems of the hospital/institutional pharmacy practice stie, and
- Aid the student in the development of communication skills with the patients and healthcare professionals.

Course Functions

The student will be introduced to and given instruction regarding the following institutional pharmacy practice functions.

- **Dispensing of Prescriptions:** Students will participate in receiving, verifying, checking for errors, selecting drug, filling, recording, filing and delivery of prescriptions to the patient. This includes interpretation of written orders, handling of patient records, and understanding the application of pharmacy law.
- **Compounding:** Students will participate in preparation of different types of intravenous products (i.e., IV bag/admixture, syringe, or piggyback) and development of appropriate aseptic technique.
- **Use of Technology:** Students gain an appreciation for the technology used in the pharmacy for dispensing, compounding, etc.
- **Drug and Product Information:** There should be time for the student to identify/evaluate information about both prescription and nonprescription drugs. Each student will be expected to gain knowledge of general drug information, generic and trade names, common dosage forms, indications, side effects, interactions, and patient counseling for the Top 200 drugs dispensed.

Overview of the UAMS College of Pharmacy Experiential Program

The fundamental goal of the experiential pharmacy education program is to provide structured, practical, and closely supervised, professional program experiences that enable the student to develop and apply skills and information previously presented in formal coursework in order to better assume their future role as a competent pharmacist. The student is expected to integrate their basic sciences and clinical background into an actual practice setting under the preceptor's guidance and instruction. This includes giving the student the opportunity to further refine professional judgement, practice competency, and technical skills.

Attendance

There are **no excused absences** and **no recognized student holidays** for experiential course work. In some instances, experiential hours will be scheduled to conform to site activities (e.g., weekends, early morning, and late afternoon). In case of illness, students must: a) call the Dean's Office (501) 686-5557 **AND** b) call the preceptor as early as possible on the day that will be missed. If a student anticipates a request to be absent from the experience on a specific date (e.g., job/residency interview, college sponsored meeting/function during rotation hours, etc.), they must make arrangements with the preceptor prior to that date. A *minimum* of 120 hours is required for the P1 IPPE, 160 hours for the P2 IPPE, 40 hours for the P3 IPPE, and 160 hours for each APPE; therefore, it is the student's responsibility to reschedule hours missed with the preceptor's approval. If a student is sick or absent for more than one fourth of any rotation, they may complete the rotation only with permission of the preceptor and the Experiential Education Director (EED)/Associate Dean for Experiential Education (ADEE).

Emergency

In the case of an emergency, the student should call the ADEE immediately at (501) 551-8193. This does not include absence for routine illness, job interviews, flat tires, etc. These issues are addressed in the Attendance Policy above.

Inclement Weather

During inclement weather conditions (regardless of activation of the UAMS inclement weather policy), the student should contact their assigned experiential preceptor to receive information about site hours of operation and function. If the student is unable to travel during inclement weather, any absence requires that the student contact their preceptor and the Experiential Education Office.

Policy for Interaction

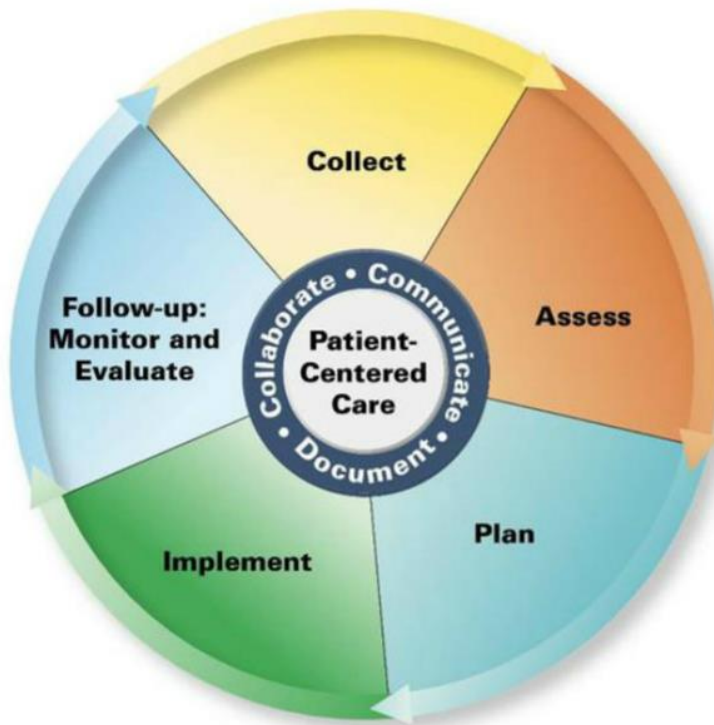
Students should contact the preceptor via their office phone or email. If unable to reach the individual, students should contact the Experiential Office for assistance. Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the preceptor, EED or ADEE, and finally the Dean's office.

The course syllabus is a general plan for the course; the syllabus may be modified at any point during the semester and deviations communicated to the class. Any changes to the syllabus will be communicated at the earliest possible class meeting as well as electronically through electronic mail distribution.

Code Black

In the event of a violent occurrence on campus, special procedures are needed to ensure maximum safety and prevention of injury/loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening, and other scenarios not depicted here. While this is primarily a law enforcement operation, incident management, sheltering in place, and crisis communications are integral to the safety and security of the campus. The UAMS Code Black Plan is outlined in the COP Catalog and Student Handbook. During orientation to an experiential site, students should make every effort to be informed as to site-specific policies and procedures regarding violent events.

Pharmacists' Patient Care Process



Source: http://www.pharmacist.com/sites/default/files/JCPP_Pharmacists_Patient_Care_Process.pdf

Pharmacists' Patient Care Process

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

Using principles of evidence-based practice, pharmacists:

Collect

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

Assess

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

Plan

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

Implement

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

Follow-up: Monitor and Evaluate

The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

The pharmacists' patient care process is a tool used within the College of Pharmacy and on rotations to help the student properly learn the process to provide patient-centered care. Students must be able to collect information from the patient, assess and analyze the information collected, create and implement an individualized plan, and then monitor and evaluate the effectiveness of the plan. The process should be practiced throughout rotations with preceptors to identify any areas where the student needs improvement. For example, the student may be able to collect all the necessary information, but unable to assess it properly to be able to form a plan. This process is used on midpoint and final evaluations as well.

Grading

The preceptor is a member of the faculty of the College of Pharmacy (COP). Preceptors are expected to assess student performance of the outlined practice competencies using the COP Introductory and Advanced Pharmacy Practice Experience Evaluation Rubrics. **At the middle and end of the experience, the preceptor will use the evaluation rubric in the CORE online grading system to assess the student's performance. Mid-way through the rotation, deficiencies are to be discussed with the student. Every effort should be made to correct any deficiencies before a student completes the assigned experience. Evaluation rubrics will automatically become available in CORE at the appropriate times.** The preceptor's evaluation constitutes 100% of the assessment of competency.

Experiential Proficiency Scores	Global Assessment
5 – Exceeds expectations	[] Clear Pass [] Borderline Pass [] Clear Failure
4 – Meets expectations	
3 – Progressing	
2 – Needs significant improvement	
1 – Does not meet expectation	
0 – Though opportunities existed, student did not engage in requirement; therefore, not able to assess	
NA – Not applicable to experience or not observed	

**** Please refer to the comprehensive academic rules in the student handbook for more information*

For successful completion of IPPEs, students must achieve a proficiency score of 3 or higher for each item on the IPPE achievement-based assessment. Students must also fulfill the IPPE course requirements and complete all other required documentation prior to receiving credit for the IPPE. A student may fail an IPPE for violation of patient confidentiality, tardiness/failure to show up for a rotation, cheating on exams, quizzes or other assignments, plagiarism, or other action which, in the opinion of the preceptor and the EED and/or ADEE, is unprofessional conduct damaging to the reputation of the COP and/or the experiential site.

Incomplete Grade

A grade of "I" (incomplete) is assigned when a student, for reasons sufficient to the preceptor, has not been able to complete some vital portion of the experience. The student must finish the requirements of the experience at the same practice site and at the discretion of the preceptor. If the work is not completed by the designated time, the grade will become an "F" unless the Dean, in conjunction with the preceptor and the appropriate experiential course coordinator, grants an extension of time. For IPPEs, all work must be completed before the day of registration for the upcoming Fall semester.

Failing Grade

Students will fail an experience if a preceptor indicates "Clear Failure" at the end of an experience. The student must repeat and pass that type of experience (Community of Institutional). No experience may be attempted more than twice. **In the event that a student receives a "Clear Failure" at the end of an IPPE, the EED/ADEE may develop an Individualized Educational Plan (IEP) and forward this to the Scholastic Standing Committee.** The Scholastic Standing Committee will review the recommended IEP for approval or modification. **For students who are not awarded Credit for an IPPE, failure to successfully complete an IEP will result in an "F" and will be viewed as the student's second attempt to complete the experience.** If a student successfully remediates an IPPE and fails a second IPPE experience, they will be dismissed from the College.

Borderline Pass

Students who receive a "Borderline Pass" and/or competency score of 0, 1, or 2 at the end of an IPPE experience will be required to attend a Formal Planning Conference with the ADEE and/or EED.

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Professionalism

Preceptors offer their pharmacy and time to teach students how to practice pharmacy. During the time the student is in the pharmacy, patients and other healthcare professionals will recognize him/her as a member of that pharmacy. The student’s conduct and actions will reflect upon the pharmacy. Students are expected to conduct themselves as professionals. Students will respect and follow operating procedures of the site and instructions of the preceptor.

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The student must be neat in appearance and maintain professional decorum while on rotation. The student is required to be professionally attired at all times while on site, including a name tag, required identification and their UAMS pharmacy white coat, unless instructed otherwise by the preceptor. Although the term “professionally attired” can be interpreted differently, the following general guidelines should be followed.

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- e. Collaborate with the patient or patient advocate to prioritize problems.

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- b. Select prescription or non-prescription medications (including doses and dosage schedules), applying both pharmaceutical science and therapeutic principles,
- c. Evaluate and address patient factors that are relevant to developing a treatment plan (e.g., sex, age, race, ethnicity, culture, literacy, sexual orientation, disability, health beliefs, health literacy, and genetics),
- d. Define treatment goals and plan to monitor pharmacotherapy for safety and effectiveness,
- e. Consider non-drug therapy, therapeutic lifestyle changes, and preventive care issues,
- f. Conduct patient education including verification of patient understanding of the treatment plan, and
- g. Implement interventions to prevent or remedy non-adherence.

1.4 Document patient care activities:

- b. Record actions taken to achieve desired therapeutic outcomes, and
- c. Document patient and provider education activities.

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- a. Accurately transcribe verbal and written prescriptions and ensure appropriateness of these drug orders,
- b. Accurately and safely compound and package drugs for distribution in appropriate dosage forms,
- c. Select appropriate drug product, with respect to patient preference, manufacturing source, generic availability, and third-party reimbursement, and
- d. Apply appropriate labeling, including patient-specific auxiliary labels.

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- a. Employ principles of personnel management to the operation of a pharmacy,
- b. Use principles of fiscal resource management,
- c. Employ medication distribution and control systems to operate the pharmacy efficiently, and
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 - b. Design quality improvement projects to improve medication use,
 - c. Apply evidence-based principles when making pharmaceutical policy recommendations, including drug benefit design recommendations, and
 - d. Apply principles of Pharmacoeconomics and outcome assessment.
- 4.1 Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivations, and emotions that could enhance or limit personal and professional growth.
- 4.2 Demonstrate responsibility for creating and achieving shared goals, regardless of position.
- 4.3 Engage in innovative activities by using creative thinking to envision better ways of accomplishing goals.
- 4.4 To demonstrate professional citizenship in the delivery of patient care, distribution of medications, and promotion of wellness and disease prevention:
- a. Collaborate with patients, providers, personnel, and other stakeholders to obtain and share pertinent patient information and pharmacotherapy recommendations, provide accurate and safe medication dispensing and resource management, and advance public health issues and pharmaceutical policy,
 - b. Perform duties in accordance with legal, ethical, social, economic, and professional guidelines, and
 - c. Maintain professional competence by identifying and analyzing emerging issues, products, and services that may impact patient care, medication distribution and the pharmacy business, and may improve disease prevention and wellness and inform pharmaceutical policies.

Suggested P2 IPPE Institutional Experience Framework

Student Name:

Location:

Contact Information:

Day One: Orientation (Time, ex: 8 AM – 5 PM)

Scheduling/Calendar if possible
Inquire on student's interest and prior experience
List goals of the rotation
Pharmacy tour
Notify the student if they will be rotating amongst other pharmacists

Week One (Time)

Assist in compounding sterile IV products
Review USP 797/800 guidelines
Observe and assist with the IV room cleaning routine
Overview of pyxis/carousel

Week Two (Time)

Understand how to load and correct mistakes in pyxis
Pull medications from pyxis
Cart fill
Midpoint Evaluation
Longitudinal: IV compounding
* Any of the above activities may be performed throughout the rotation

Week Three (Time)

Observe/participate in order entry
Medication reconciliation/discharge counseling
TPN
Clinical pharmacy exposure
Longitudinal: IV compounding and pyxis
* Any of the above activities may be performed throughout the rotation

Week Four (Time)

Narcotic reports and inventory review
Final Evaluation
Longitudinal: IV compounding, pyxis, medication reconciliation, and TPN
* Any of the above activities may be performed throughout the rotation

Daily Activities

- Restock medications
- Pull labels and medications for IV compounding
- Load crash carts
- Check and research ADR reports
- Refill anesthesia trays
- Round with a clinical pharmacist- PRN

Considerations

- Informal continuous feedback on a weekly basis
- Participation with audit preparation
- Interact with an interdisciplinary team
- Observe procedures in the institution

- Advancement in the IPPE experience can be necessary if a student has prior experience in the above and is able to move forward



Introductory Pharmacy Practice Experience Syllabus

PhPr 7307 P3 Longitudinal IPPE (40 hours)



Director of Introductory Pharmacy Practice Experiences: Lindsey Dayer, PharmD, BCACP

Phone: (501) 526-4211 **Office:** ED II 6/137A **Office Hours:** Please call or email to schedule to make an appointment

Course Meeting Time and Location: Determined by rotation site and preceptor

The following are required components of course syllabi. It is at the Course Coordinator's discretion how these components are arranged in the syllabus.

Course Description and Format

At the end of the P2 Spring semester, students are assigned a longitudinal, self-directed experience to be completed over approximately one year (completion of P2 Spring through April of P3 Spring, excluding the month during the assigned P2 Institutional IPPE). It is designed to provide multiple opportunities to observe/perform patient-centered care activities in a variety of settings. This is a one-credit hour, pass/fail course.

Resources

The College of Pharmacy Catalog and Student Handbook details information for the professional program and is available on the College's website at <https://pharmacy.uams.edu/current-students/academics/handbook/>. Resources also include UAMS library access (including Lexicomp, UpToDate, PubMed, etc.). CORE Higher Education serves as a resource regarding rotation schedules, evaluations, requirements, etc. and is available at <https://corehighered.com/login-elms>.

Course Goals and Objectives

The goals and objectives of the P3 longitudinal IPPE are to:

- Participate in pharmacy practice experiences designed to develop areas of personal interest,
- Provide point-of-care and patient-centered services,
- Refine communication skills with patients and healthcare professionals,
- Apply principles of scientific knowledge to the practice of pharmacy, and
- Participate in programs designed to promote health and wellness.

IPPE Hour Requirements

Each student is required to complete 40 hours over approximately one year (completion of P2 Spring through April of P3 Spring). It is required that the student participates in a **minimum of 3 of the 5 main experiences and at least a 4-hour interprofessional experience at either 12th Street Clinic (LR) or North Street Clinic (NW) or other pre-approved experience. The maximum for ANY experience (including the other category) is limited to 20 hours.** The core experiences appropriate for P3 IPPE hours may include but are not limited to:

- Shadowing of pharmacy practitioners,
- Providing patient services and/or education at health fairs or screenings,
- Conducting in MTM (Medication Therapy Management) and/or medication reviews,
- Volunteering at free medical clinics, and
- Participating in immunization clinics.

IPPE experiences may accrue 1 to 6-hour time blocks. You must communicate with the pharmacist providing the experience what the optimal time block is for them to complete the experience. No experience may exceed 6 hours without prior approval from the IPPE Director or Associate Dean for Experiential Education (ADEE). Shadowing experiences are limited to 6 hours with any one pharmacist for any type of activity unless approved by the IPPE Director. Shadowing a dispensing pharmacist in a community or institutional setting **does not** meet requirements for this IPPE.

Supporting Documents

Supporting documents for health fairs and screenings can be located on the COP website in the Student Organization and Class Officer Guidebook. Follow the following link and select the guidebook from the left-hand toolbar.

<https://pharmacy.uams.edu/current-students/academic-programs/experiential-education/manuals/>

Supervising Pharmacists

All IPPE activities must be supervised by a pharmacist licensed by the Arkansas State Board of Pharmacy. Students may not do an IPPE at a pharmacy site where they have received intern credit or have worked before or during pharmacy school unless approved by the IPPE Director or ADDE prior to the IPPE activity. Students may not receive remuneration for any pharmacy practice experiences in which academic credit is earned. The supervising pharmacist may not be an immediate family member of the student.

Documentation

Each longitudinal IPPE must be documented within 7 days of the experience for credit by 1) uploading a correctly completed pharmacist verification form to the CORE website. Students must also complete the verification information and submit it within CORE. *****A P3 IPPE experience is not complete for evaluation within a required deadline until documentation is complete. ***If the verification form is not completed within the 7-day time frame, it is up to the discretion of the Experiential Office as to whether or not the hours can still count toward the student's total.**

Students **MUST** accumulate documented IPPE activity regularly according to the Timeline for Completion of Experiential Hours (below). More hours than the minimum requirement may be documented, but the minimum must be met for each deadline.

Electronic documentation will be reviewed to ensure that the intent of the IPPE and its goals are being met and completed in a timely manner. Students who fail to complete their experiential hours may be issued a non-cognitive report and will be required to meet with the IPPE director or ADEE to generate a plan for completion of hours and/or additional assignments.

Overview of the UAMS College of Pharmacy Experiential Program

The fundamental goal of the experiential pharmacy education program is to provide structured, practical, and closely supervised, professional program experiences that enable the student to develop and apply skills and information previously presented in formal coursework in order to better assume their future role as a competent pharmacist. The student is expected to integrate their basic sciences and clinical background into an actual practice setting under the preceptor's guidance and instruction. This includes giving the student the opportunity to further refine professional judgement, practice competency, and technical skills.

Emergency

In the case of an emergency, the student should call the ADEE immediately at (501) 551-8193. This does not include absence for routine illness, job interviews, flat tires, etc. These issues are addressed in the Attendance Policy above.

Inclement Weather

If a student has a scheduled experience during inclement weather conditions (regardless of activation of the UAMS inclement weather policy), the student should contact the appropriate pharmacist or location contact to receive information about site hours of operation and function.

Policy for Interaction

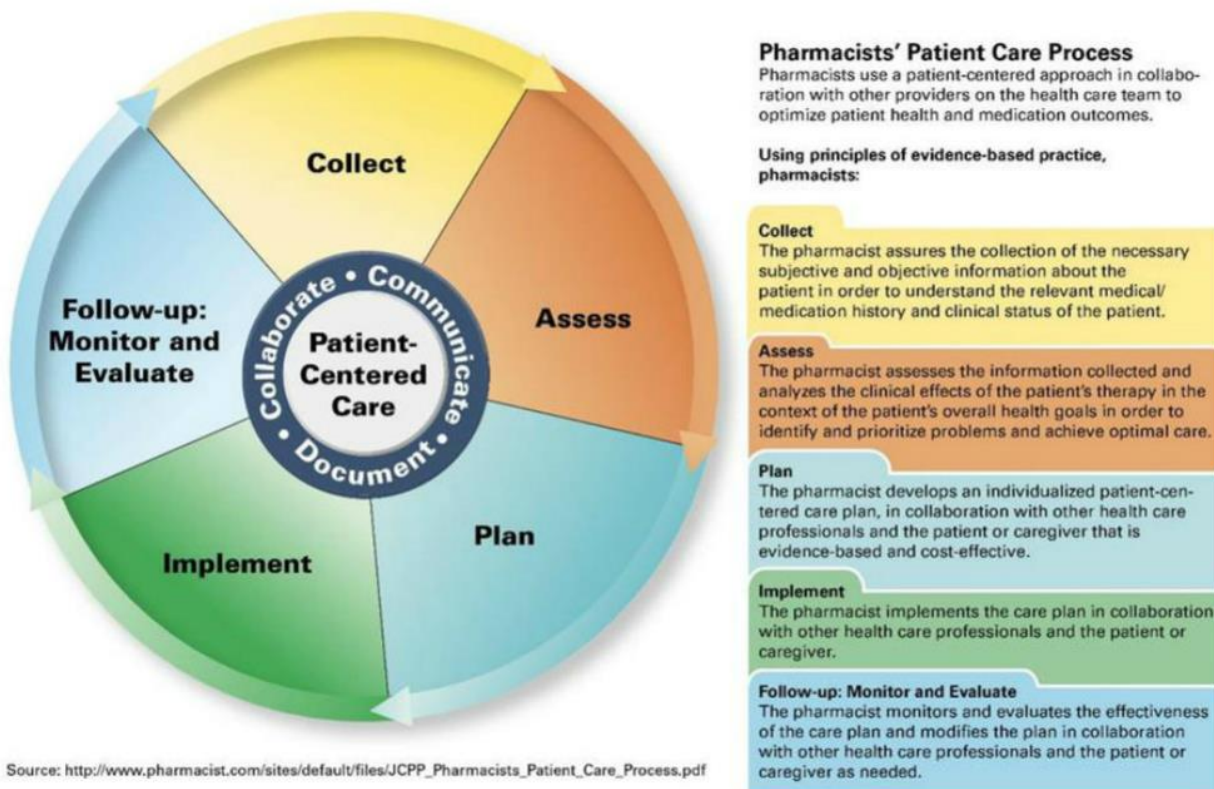
Students should contact the pharmacist or location contact via their office phone or email. Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the pharmacist or location contact, Experiential Education Director (EED) or ADEE, and finally the Dean's office. Course faculty do not have regularly scheduled office hours; however, all faculty are happy to set up an appointment to meet with you. Please do not hesitate to contact the office by phone or email to set up an appointment.

The course syllabus is a general plan for the course; the syllabus may be modified at any point during the semester and deviations communicated to the class. Any changes to the syllabus will be communicated at the earliest possible class meeting as well as electronically through electronic mail distribution.

Code Black

In the event of a violent occurrence on campus, special procedures are needed to ensure maximum safety and prevention of injury/loss of life. As a result, multiple responses are necessitated by all components of UAMS. Law enforcement is paramount in securing the situation, but the rest of the campus must work to ensure patient, student, visitor, and staff safety. Violent actions on campus could include an active shooter, hostage situation, terroristic threatening, and other scenarios not depicted here. While this is primarily a law enforcement operation, incident management, sheltering in place, and crisis communications are integral to the safety and security of the campus. The UAMS Code Black Plan is outlined in the COP Catalog and Student Handbook. During orientation to an experiential site, students should make every effort to be informed as to site-specific policies and procedures regarding violent events.

Pharmacists' Patient Care Process



The pharmacists' patient care process is a tool used within the College of Pharmacy and on rotations to help the student properly learn the process to provide patient-centered care. Students must be able to collect information from the patient, assess and analyze the information collected, create and implement an individualized plan, and then monitor and evaluate the effectiveness of the plan. The process should be practiced throughout rotations with preceptors to identify any areas where the student needs improvement. For example, the student may be able to collect all the necessary information, but unable to assess it properly to be able to form a plan. This process is used on midpoint and final evaluations as well.

Grading

Completion of the requisite 40 hours of P3 Longitudinal IPPEs is a pass/fail component of the P3 IPPE course located in the Spring semester of the P3 year. **Students must complete and appropriately document a minimum of 40 total hours of P3 IPPE credit no later than April 7, 2025 to pass the P3 experiential requirement.**

Timeline for Completion of Experiential Hours

Deadline	Minimum # of Hours Documented
August 30, 2024	10
December 6, 2024	20
January 31, 2025	30
April 7, 2025	40

Borderline Pass

Students who receive a “Borderline Pass” at the end of an IPPE experience will be required to attend a Formal Planning Conference with the ADEE and/or EED.

Academic Dishonesty

Students are expected to abide by the Pledge of Professionalism and Honor Code. These documents can be found in Appendix A in the student handbook at https://pharmacy.uams.edu/wp-content/uploads/2023/08/COP-Student-Handbook-2023-2024_FINAL.pdf Students who commit academic dishonesty or professional misconduct during an IPPE/APPE may be removed and given an “F” for the experience in which the violation occurred. Examples of academic dishonesty include but are not limited to plagiarism or cheating as described in the student handbook.

The Scholastic Rules for Experiential Course Work are outlined in the COP Catalog and Student Handbook. This document is available at <https://pharmacy.uams.edu/current-students/academics/handbook/> . Students are encouraged to review the full handbook available on the COP website for additional information.

Professionalism

Preceptors offer their pharmacy and time to teach students how to practice pharmacy. During the time the student is in the pharmacy, patients and other healthcare professionals will recognize him/her as a member of that pharmacy. The student’s conduct and actions will reflect upon the pharmacy. Students are expected to conduct themselves as professionals. Students will respect and follow operating procedures of the site and instructions of the preceptor.

Professional Attire

The student must be neat in appearance and maintain professional decorum while participating in IPPE experiences. The student is required to be professionally attired at all times while on site, including a name tag, required identification and their UAMS pharmacy white coat, unless instructed otherwise by the preceptor, pharmacist, or location contact. Although the term “professionally attired” can be interpreted differently, the following general guidelines should be followed.

- Contact your preceptor 1 week prior for UAMS preceptors and 2 weeks prior for non-UAMS preceptors. When contacting the preceptor prior to beginning the experience, students should ask if there is a dress code. If the site has a specific dress code, students are expected to abide by it. If a student does not abide by the site’s dress code, the preceptor may require the student to leave and change into more professional attire before returning. The student is expected to make up any time lost. If there is not a specific dress code at the site, the student should use the preceptor’s attire as a guide.
- If uncertain about a site’s dress code (e.g., the first day), a safe attire would be slacks, dress shirt, and necktie for males and dress or slacks/skirt and appropriate top for females.
- Clothing should always be neat and clean.

Social Media and Technology

Students should exercise caution when posting on social media and should avoid posting patient information. It can be easy to make a mistake and release identifiable patient information (e.g., posting that someone picked up a particular medication at a particular pharmacy during a certain time period may be enough to identify a patient). Date of service is legally a “patient identifier” under HIPAA, as is the city the patient lives in, the name of the patient’s employer, and other data elements. Putting patient information on any media site is grounds for dismissal from the College and possible criminal persecution. Students are advised to not post unprofessional content on social media. Many employers check applicants' social media pages. Remember, pharmacy is a small world. Many faculty, staff, and preceptors will not “friend” students and residents in the College to avoid any issues of favoritism or conflicts of interest. Do not be offended if your “friend request” is not reciprocated. Students are to maintain professionalism regarding personal technology use (cell phone, text messaging, internet, social media, etc.).

Confidentiality

The student must keep all information pertaining to the patient confidential. Discussion of any patient-specific information must only be done in a professional manner and in an appropriate environment. Students will learn certain aspects of site-specific pharmacy that should be kept confidential as well, including pricing procedures and other aspects of operation. The preceptor is placing significant trust in the student by taking him/her into their pharmacy. During this time, the student should feel part of the organization. **Violation of these confidences is grounds for immediate dismissal from the Experiential Program and may also result in additional disciplinary action as deemed necessary.**

Overall Competencies

The student will be exposed to the following competencies over the course of the experience.

1.1 Evaluate patient data and make an assessment:

- a. Identify and collect information from profiles, pharmacy and medical records, and patient (caretaker) history that will influence optimal drug choice and dosage,
- b. Obtain a medical history (e.g., chief complaint, medical, medication management, financial, social, cultural, review of systems),
- c. Conduct physical assessment, and
- d. Assess patient's quality of life.

1.2 Conduct a systematic review of the patient prior to recommending any drug or non-drug therapy:

- a. Identify drug-related problems including adverse drug reactions, drug interactions, and/or suboptimal treatment,
- b. Recognize common signs or symptoms indicative of disease control issues or drug-related problems,
- c. Ascertain levels of chronic disease control,
- d. Assess and address barriers to health care, and
- e. Collaborate with the patient or patient advocate to prioritize problems.

1.3 Design and implement an individual patient-centered treatment plan to maximize desired effects and minimize undesired effects:

- a. Conduct a focused evidence-based review of the necessary literature to determine the best evidence to support pharmacotherapy recommendations, applying pharmaceutical science principles,
- b. Select prescription or non-prescription medications (including doses and dosage schedules), applying both pharmaceutical science and therapeutic principles,
- c. Evaluate and address patient factors that are relevant to developing a treatment plan (e.g., sex, age, race, ethnicity, culture, literacy, sexual orientation, disability, health beliefs, health literacy, and genetics),
- d. Define treatment goals and plan to monitor pharmacotherapy for safety and effectiveness,
- e. Consider non-drug therapy, therapeutic lifestyle changes, and preventive care issues,
- f. Conduct patient education including verification of patient understanding of the treatment plan,
- g. Implement interventions to prevent or remedy non-adherence, and
- h. Implement interventions to resolve drug-related problems and unintended drug consequences.

1.4 Document patient care activities:

- a. Document assessment and pharmacotherapy plan for individual patient encounters,
- b. Record actions taken to achieve desired therapeutic outcomes, and
- c. Document patient and provider education activities.

2.1 Demonstrate accurate, safe, and time-sensitive preparation, dispensing, and administration of pharmaceuticals:

- a. Accurately transcribe verbal and written prescriptions and ensure appropriateness of these drug orders,
- b. Accurately and safely compound and package drugs for distribution in appropriate dosage forms,
- c. Select appropriate drug product, with respect to patient preference, manufacturing source, generic availability, and third-party reimbursement, and
- d. Apply appropriate labeling, including patient-specific auxiliary labels.

2.2 Manage pharmacy resources to optimize pharmacotherapy outcomes for individual patients and/or populations:

- a. Employ principles of personnel management to the operation of a pharmacy,
- b. Use principles of fiscal resource management,
- c. Employ medication distribution and control systems to operate the pharmacy efficiently, and
- d. Evaluate and use appropriate automation and information technology to optimize medication dispensing and patient care.

2.3 Educate patients and healthcare providers about requirements for effective therapy:

- a. Establish rapport with patients and other healthcare professionals to promote a team approach to patient care,

- b. Counsel patients regarding purposes of their medications, potential adverse drug reactions, and other required information, and
 - c. Provide medication information to patients and healthcare providers to promote rational drug therapy.
- 3.1 Demonstrate skills needed to participate in or provide preventive services:
- a. Participate in disease prevention,
 - b. Provide lifestyle and wellness counseling,
 - c. Provide drug-therapy evaluation and monitor for medication safety,
 - d. Participate in public health education programs, and
 - e. Neutralize social and cultural barriers to effective application of skills in preventive services.
- 4.1 Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivations, and emotions that could enhance or limit personal and professional growth.
- 4.2 Demonstrate responsibility for creating and achieving shared goals, regardless of position.
- 4.3 Engage in innovative activities by using creative thinking to envision better ways of accomplishing goals.
- 4.4 To demonstrate professional citizenship in the delivery of patient care, distribution of medications, and promotion of wellness and disease prevention:
- a. Collaborate with patients, providers, personnel, and other stakeholders to obtain and share pertinent patient information and pharmacotherapy recommendations, provide accurate and safe medication dispensing and resource management, and advance public health issues and pharmaceutical policy,
 - b. Perform duties in accordance with legal, ethical, social, economic, and professional guidelines, and
 - c. Maintain professional competence by identifying and analyzing emerging issues, products, and services that may impact patient care, medication distribution and the pharmacy business, and may improve disease prevention and wellness and inform pharmaceutical policies.

P3 Introductory Pharmacy Practice Experience (IPPE) Verification Form

For the student: You are required to have IPPE hours from **three of the five main categories** bolded below. You are responsible for having at least three different categories in order to receive credit for the P3 IPPE hours. In addition, **a minimum of 4 hours must be completed at one of these two clinics: 12th street or North Street clinic.** All other free clinics count in the same category and can only have up to 20 hours credited altogether.¹

For the pharmacist: Your signature certifies that the student has satisfactorily completed an IPPE of the type marked below (Please check one).

1. **12th Street or North Street Clinic (please circle)**

- **Other free clinic** _____ **Location**
- 2. Health Fair/Screening** _____ **Event name**
- 3. Shadowing** _____ **Location**
- 4. MTM/Medication Review** _____ **Location**
- 5. Immunization Clinic** _____ **Type/Location**
- **Other²: please describe** _____

Pharmacist's Signature: _____

Pharmacist's Name (Print): _____

Date: _____

Student: _____

Number of Hours: _____

¹ There is a cumulative max of 20 hours for each of the above categories

² "Other" must have **prior approval** of the Experiential Coordinator and does not count toward the four of the five required categories, which are bolded.

This form should be completed and signed at the conclusion of the experience. It must then be uploaded into CORE. Please see the P3 IPPE Guidelines for specifics.

**UAMS College of Pharmacy Preceptor and Experiential Site Evaluation
(P1 Community and P2 Institutional Introductory Pharmacy Practice Experiences)**

Preceptor-of-Record: _____

Rotation Site: _____

Please use the following descriptions to rate scaled items.

[1 – Unacceptable] [2 – Inadequate/needs improvement] [3 – Adequate/satisfactory] [4 – Good] [5 – Excellent]

Preceptor	Unacceptable			Excellent	
1. Preceptor's interest in the student.	①	②	③	④	⑤
2. Preceptor's availability to the student for help and advice.	①	②	③	④	⑤
3. Preceptor's knowledge.	①	②	③	④	⑤
4. Preceptor's ability to communicate/teach information to the student.	①	②	③	④	⑤
5. Preceptor's ability to communicate information to the patient and/or other healthcare providers.	①	②	③	④	⑤
6. Amount of time the preceptor actually spent with the student.	①	②	③	④	⑤
7. Clarity and organization of the preceptor's manner of teaching.	①	②	③	④	⑤
8. Preceptor's attempts to keep up with new trends and ideas.	①	②	③	④	⑤
9. Preceptor as an example of honest & ethical practice.	①	②	③	④	⑤
10. Professional attitude and motivation of the preceptor.	①	②	③	④	⑤

If the answer to number 9 or 10 was 2 or less, please explain: _____

Orientation and Site	Unacceptable			Excellent	
11. Orientation provided by the College.	①	②	③	④	⑤
12. Expectations of the preceptor were consistent with those explained in the manual and/or during the College's orientation.	①	②	③	④	⑤
13. Student was oriented to the pharmacy at the beginning of the rotation.	Yes	<input type="radio"/>		No	<input type="radio"/>
14. The preceptor reviewed the grading rubric at the beginning of this experience.	Yes	<input type="radio"/>		No	<input type="radio"/>
15. The preceptor went over the student's progress at the mid-point of this experience.	Yes	<input type="radio"/>		No	<input type="radio"/>
16. The preceptor used the grading rubric at the mid-point to guide his/her comments.	Yes	<input type="radio"/>		No	<input type="radio"/>
17. Exposure to the day-to-day operational aspects of the pharmacy.	①	②	③	④	⑤
18. Active involvement with the day-to-day activities of the pharmacy.	①	②	③	④	⑤
19. Pharmacy staff was friendly/easy to work with.	①	②	③	④	⑤
20. Value of the experience gained in this IPPE.	①	②	③	④	⑤
21. Degree of satisfaction with this experience.	①	②	③	④	⑤
22. Would you recommend this site be used for future students?	Yes	<input type="radio"/>		No	<input type="radio"/>

Comments:

1. Has this rotation been of value to your professional development by increasing your professional judgment, practice competency, and technical skills? If so, in what way? If not, why?

2. If you could have spent more/less time doing a specific task/activity during this experience, what would you have liked to have spent more or less time doing?

More:

Less:

3. What recommendations can you make to this preceptor for improving their teaching?

4. What did you like most about this experience?

5. What should the College do to improve this experience?

6. Other comments:

Introductory Pharmacy Practice Experience (IPPE) EVALUATION RUBRIC for P1 Community and P2 Institutional IPPEs

The student and preceptor each complete one copy of this form in CORE at the appropriate time(s).

P1 Community IPPE - Final Assessment (last day)

P2 Institutional IPPE – Midpoint (end of week 2) and Final (last day) Assessments

Assessment Guidelines:

1. At the appropriate time(s), the preceptor reviews the student's performance to assess development of skills in each of the competency areas. The preceptor completes the IPPE Evaluation Rubric by entering a proficiency score for each item listed under the competency areas. The final page of the assessment includes written comments on strengths and areas in need of improvement with a suggested plan for continued student development. These assessments are formally reviewed with the student. The Midpoint assessment (P2 only) should occur at the halfway point of the experience, i.e. the end of the 2nd week. The Final assessment should occur on the last day of the experience.
2. The student completes self-assessment(s) at the appropriate time point(s) using the IPPE Evaluation Rubric and reviews the document with the preceptor during a formal meeting to discuss any discrepancy between the student's and preceptor's assessments.
3. By the last day of the IPPE, the assessments are documented in CORE.
4. At the beginning of the next experiential activity, the student can review past assessments and identify/discuss activities they should focus on to further develop proficiency in the competency areas.
5. Preceptor and student assessments are reviewed by the Office of Experiential Education. If the student is not demonstrating adequate proficiency as outlined in the IPPE Grading and Assessment Procedure, the student will be contacted by the EED and/or ADEE, and a remediation plan will be coordinated, as appropriate.
6. For successful completion of IPPEs, students must achieve a proficiency score of 3 or higher for each item on the IPPE achievement-based assessment. Students must also fulfill the IPPE course requirements and complete all other required documentation prior to receiving credit for the IPPE.
7. Students who receive a "Borderline Pass" and/or competency score of 0,1, or 2 at the end of an IPPE clerkship, will be required to attend a Formal Planning Conference with the ADEE and/or EED.
8. Students will fail an experience if a preceptor indicates "Clear Failure" at the end of an experience. The student must repeat and pass that type of experience (Community or Institutional). No experience may be attempted more than twice. **In the event that a student receives a "Clear Failure" at the end of an IPPE, the EED/ADEE may develop an Individualized Educational Plan (IEP) and forward this to the Scholastic Standing Committee.** The Scholastic Standing Committee will review the recommended IEP for approval or modification. The student will have an opportunity to address the committee prior to approval/assignment of the IEP. Upon Scholastic Standing approval of an IEP, a course of "IEP" may be issued for the IPPE rotation in need of remediation. **The student must successfully pass the IEP before moving forward in the curriculum.**

Proficiency Score

5 – Exceeds expectations

4 – Meets expectations

3 – Progressing

2 – Needs significant improvement

1 - **Does not meet expectations**

0 - Though opportunities existed, student did not engage in requirement; therefore not able to assess

NA – Not applicable to experience or not observed

**UAMS College of Pharmacy
INTRODUCTORY PHARMACY PRACTICE EXPERIENCE EVALUATION
RUBRIC**

Professionalism

Professional Appearance and Approach

Appropriately groomed, professionally dressed, and punctual. **UAMS 4.4**

Demonstrates respect for all individuals (patients, families, staff, other healthcare providers, etc.).

UAMS 4.4

Uses personal technology appropriately (cell phone, text messaging, internet, social media, etc.).

UAMS 4.4

Ethics

Maintains strict confidentiality (patient, site/pharmacy, technology, etc.). **UAMS 4.4**

Places patient's welfare above personal self-interest (e.g. is accountable and responsible for patient care). **UAMS 4.4**

Understands and complies with all state and federal pharmacy rules and regulations. **UAMS 4.4**

Behaves ethically in all aspects of practice. **UAMS 4.4**

Dedication to Excellence

Acknowledges knowledge limitations, asks questions to increase knowledge, learns independently, seeks constructive criticism. **UAMS 4.4**

Drug Referencing

Identifies and utilizes appropriate drug references with minimal assistance. **UAMS 3.2, PPCP: Assess**

Communications

General

Communicates effectively in a clear, concise, and logical manner. **UAMS 2.3, 4.4**

Customizes communication to the appropriate level (e.g. lay person, healthcare professional). **UAMS 2.3, 4.4, PPCP: Implement**

Develops rapport and demonstrates positive interactions with patients/families/caregivers and healthcare professionals. **UAMS 2.3, PPCP: Implement**

Communication with Patients or Caregivers

Demonstrates active listening, responds with empathy, and uses open-ended questions (e.g. assesses understanding, clarifies feelings and concerns, etc.). **UAMS 2.3, PPCP: Implement**

Communication and Collaboration with Health Care Professionals

Provides timely responses and is able to defend recommendations. **UAMS 2.3, 3.2, PPCP: Plan**

Prescription Competency

Prescription and Patient Profile Requirements

Accurately completes calculations needed to fill a prescription. **UAMS 2.1, PPCP: Plan**

Produces an accurate prescription label. **UAMS 2.1, PPCP: Implement**

Obtains appropriate patient information necessary to fill a prescription. **UAMS 1.1, 1.2, 2.1, PPCP: Collect**

Accurately receives oral prescription from healthcare provider. **UAMS 2.1, PPCP: Collect**

Product Selection and Preparation

Accurately selects medication formulation from stock (drug, dosage form, strength, etc). **UAMS 2.1, PPCP: Implement**

Prepares medication and compounds sterile products correctly. **UAMS 2.1, PPCP: Implement**

- **Community:** Prepares medication correctly (e.g. counts, pours, mixes), places in appropriate bottle/vial;
- **Institutional:** Compounds sterile products correctly - adheres to aseptic technique (IV bag/admixture, syringe, piggyback, etc.), properly scrubs, cleans hood, places meds, solutions, and supplies in hood, swabs, uses appropriate work area, avoids touch/airflow contamination

Reconstitutes correctly (i.e. appropriate diluent/drug). **UAMS 2.1, PPCP: Implement**

Accurately fills prescriptions to completeness (i.e. correct pack type/size, auxiliary labels, places label on final product neatly, conducts final self-check). **UAMS 2.1, PPCP: Implement**

Legal Requirements

Recognizes required components of a legal written prescription (i.e. patient name, prescriber signature, drug, dose, sig, date, quantity, etc.). **UAMS 2.1, PPCP: Assess**

Pharmacy Operations

Workflow and Record Keeping

Understands the workflow in the pharmacy department (prescription intake, processing, dispensing and appropriate filing/record keeping). **UAMS 2.1, 2.2**

- **Community:** prescription handling, OTC medications, counseling, distribution areas;
- **Institutional:** IV and non-IV prescription handling and compounding, daily med delivery areas

Participates in pharmacy record keeping (i.e. inventory, necessary documentation, places paperwork in designated location with appropriate components in place, etc.). **UAMS 1.4, 2.2**

Roles and Responsibilities of Personnel

Understands the role of a pharmacy technician and pharmacy intern (e.g. can explain the duties/limitations of a technician; understands the pharmacist technician and pharmacist intern ratios; functions within his/her level of practice). **UAMS 2.2, 4.1, 4.2, 4.4**

Manages/triages questions from healthcare providers, patients, or customers. **UAMS 1.1, 1.2, 2.1, 2.3, PPCP: Implement**

- **Community:** completes point of sale with correct product, receipt, log book, etc.;
- **Institutional:** Answers questions regarding medication distribution (unit dose, proper storage, administration, disposal of medications); independently distributes medications to the floor, nursing unit, or satellite pharmacy.

Recognizes roles of other professions and/or interprofessional teams involved in providing patient-centered care. **UAMS 2.2, 4.4**

Technology

Understands the functions of the computer system beyond prescription order entry; able to discuss computer system(s) use in supporting pharmacy tasks; able to input new profile or insurance information and/or access specific patient information. **UAMS 2.2**

Assessment Metric

5. Exceeds expectations
 4. Meets expectations
 3. Progressing
 2. Needs significant improvement
 1. Does not meet competency requirements
 0. Though opportunities existed, student did not engage or attempt
- N/A. Not applicable or not observed

Midpoint Evaluation (P2 only): Clearly Passing _____ Borderline Passing _____ Clearly Failing _____

Final Evaluation: Clear Pass _____ Borderline Pass _____ Clear Failure _____

Describe student strengths:

Describe competency areas that need improvement:

Describe a plan of action for continued student competency development: