Preceptor Orientation

Office of Experiential Education
About Duquesne University School of Pharmacy

• The Mission of the Duquesne University School of Pharmacy and the Graduate School of Pharmaceutical Sciences is to educate and mentor students who advance the profession of pharmacy and pharmaceutical research to improve the health outcomes of patients and their communities.

• The Vision of the Duquesne University School of Pharmacy and Graduate School of Pharmaceutical Sciences is to develop professionals, through student-centered experiences, who are recognized leaders, innovators and advocates in all areas of pharmacy practice and research.
School of Pharmacy Values

• The **Values** that guide the school are an appreciation for ethical and spiritual ideals and a sense of personal, professional, and social responsibility.
  • Integrity
  • Respect
  • Diversity
  • Collaboration
School of Pharmacy
Focus

**Beyond the values** that guide the school, focus areas help us maintain continuity within the varying educational experiences we provide students

- Discovery
- Innovation
- Outreach
- Professionalism
- Leadership
School of Pharmacy Curriculum

- Traditional PharmD
- Online PharmD
- www.Duq.edu/pharmacy
Overarching Experiential Education Goals

• Offer students a breadth of experiences
• Provide a venue for direct application
• Demonstrate mastery of School of Pharmacy competencies and CAPE Outcomes
• Refine the clinical, distributive, professional, management, and fundamental practice skills
Accreditation Council for Pharmacy Education (ACPE)

- National agency for accreditation
  - Professional degree programs in pharmacy
  - Providers of continuing pharmacy education
- To maintain ACPE accreditation, must meet standard and guidelines
- Office of Experiential Education (OEE) responsible for reporting student experiential hours to State Board of Pharmacy and ACPE
CAPE Educational Outcomes

Domain 1 – Foundational Knowledge
1.1. Learner (Learner) - Develop, integrate, and apply knowledge from the foundational sciences (i.e., biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

Domain 2 – Essentials for Practice and Care
2.1. Patient-centered care (Caregiver) - Provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).
2.2. Medication use systems management (Manager) - Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.
2.3. Health and wellness (Promoter) - Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.
2.4. Population-based care (Provider) - Describe how population-based care influences patient-centered care and influences the development of practice guidelines and evidence-based best practices.

Domain 3 - Approach to Practice and Care
3.1. Problem Solving (Problem Solver) – Identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.
3.2. Educator (Educator) – Educate all audiences by determining the most effective and enduring ways to impart information and assess learning.
3.3. Patient Advocacy (Advocate) - Assure that patients’ best interests are represented.
3.4. Interprofessional collaboration (Collaborator) – Actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.
3.5. Cultural sensitivity (Includer) - Recognize social determinants of health to diminish disparities and inequities in access to quality care.
3.6. Communication (Communicator) – Effectively communicate empathically, verbally and nonverbally, when interacting with an individual, group, or organization.

Domain 4 – Personal and Professional Development
4.1. Self-awareness (Self-aware) – Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.
4.2. Leadership (Leader) - Demonstrate responsibility for creating and achieving shared goals, regardless of position.
4.3. Innovation and Entrepreneurship (Innovator) - Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals.
4.4. Professionalism (Professional) - Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

Introductory Pharmacy Practice Experiences (IPPE)

- Progressively develop the professional insight and patient care skills necessary to advance into direct patient care responsibilities
- Involves interaction with practitioners and patients to advance patient welfare in authentic practice settings
- Provide exposure to both medication distribution systems and high quality interprofessional team-based patient care
- IPPE I (Community setting)
- IPPE II (Institutional health-system settings)
- Total IPPE Hours required = 300
Advanced Pharmacy Practice Experiences (APPE)

- Majority of time in APPE focused on direct patient care
  - ACPE Required Hours: 1,440
  - Duquesne Required Hours: 1,470
- APPE’s build upon activities that define the IPPE
- Must include the following activities:
  - Optimization of individual patient drug therapy outcomes
  - Interprofessional interaction and practice
  - Medication dispensing, distribution, administration, and systems-management
  - Reporting medication errors and adverse drug reactions, participating in the health system’s formulary process
- Rotation Types
  - Required Advanced Hospital (RAH)
  - Required Acute Care (RAC)
  - Required Ambulatory Care (RAM)
  - Required Community Practice (RCP)
  - Required Elective (RE)
Preceptor Appointment

- Field Instructor of Pharmacy Experiential Education
- [www.duq.edu/preceptors](http://www.duq.edu/preceptors)
Preparing for Your Student Arrival

• Prior to the rotation, ask the student about their goals for the rotation
  • This will help to tailor the rotation to maximize the educational experience.
• Prepare for your student by planning an orientation on the first day
• Set clear goals and expectations about the rotation
• Assess the students’ prior knowledge and experience relative to the rotation objectives
• Review your site description; update as needed
Documenting and Addressing Student Performance

- IPPE and APPE rotations are Pass/Fail courses
- Assignments are evaluated by the preceptor utilizing 4-point Likert scale rating system
- Assessment questions are mapped to the 2013 CAPE Outcomes
## Experiential Likert Scale

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 = Exceptional</td>
<td>- All components of assignment comprehensively and thoroughly addressed</td>
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<tr>
<td></td>
<td>- No errors or omissions</td>
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<tr>
<td></td>
<td>- Little to no prompting required on the part of the preceptor</td>
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<tr>
<td></td>
<td>- Level of work is consistent with that of an accomplished practitioner</td>
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<tr>
<td>3 = Very Good</td>
<td>- Most important and critical areas adequately addressed</td>
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<tr>
<td></td>
<td>- No errors; omissions are minor in nature and would not adversely affect patient outcomes</td>
</tr>
<tr>
<td></td>
<td>- Student adequately addresses omissions with minimal prompting</td>
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<tr>
<td>2 = Satisfactory</td>
<td>- Meets minimal level of competence</td>
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<tr>
<td></td>
<td>- Some omissions and minor errors exist that would not result in patient harm or adversely affect patient outcomes</td>
</tr>
<tr>
<td></td>
<td>- Student adequately addresses deficiencies upon prompting by the preceptor</td>
</tr>
<tr>
<td>1 = Unsatisfactory</td>
<td>- Significant deficiencies exist</td>
</tr>
<tr>
<td></td>
<td>- Major omissions and /or errors that would result in patient harm or adversely affect patient outcomes</td>
</tr>
<tr>
<td></td>
<td>- Even with prompting by the preceptor, student cannot adequately address errors and omissions</td>
</tr>
<tr>
<td>N/A</td>
<td>- Assessment question not applicable</td>
</tr>
</tbody>
</table>
Documenting and Addressing Student Performance – PharmEd Plus

• PharmEd Plus Training
  • [https://edtech.msl.duq.edu/Mediasi te/Play/f766d05c1f4646d8b3194b49b5d1f2ba1d](https://edtech.msl.duq.edu/Mediasite/Play/f766d05c1f4646d8b3194b49b5d1f2ba1d)

• Mid-Point Professional Behavior Assignment

• Final Professional Behavior Assignment

• Mechanism to provide feedback to school
Policies to Address Student Problems

• Document problem in the Mid-Point Professional Assignment

• Reach out to the OEE by the mid-point of the rotation if there is a concern about the student’s ability to pass the rotation
  • Preceptors can reach out to OEE at any point in time if they have a question or concern about a student

• The OEE will work with the preceptor to identify the best approach based on the situation
  • A Remediation Plan for the student may be recommended
Policies to Address Student Problems – Remediation Plan

- Step 1: The student reviews preceptor evaluations/comments and develops a written remediation action plan for each objective in which the preceptor identifies as an area of deficiency.

- Step 2: The student must meet with the OEE to review the remediation plan. The focus of this meeting is on success and moving forward. This student-led discussion promotes self-awareness and ownership of the identified area(s) of deficiency.

- Step 3: The OEE provides feedback on the plan and identifies, in collaboration with the student, any additional tools or resources to support remediation.

- Step 4: The remediation plan must be submitted to the OEE signed by the student and OEE.

- Step 5: The OEE will review student evaluations for future pharmacy practice experiences. The student is advised to review their remediation plan during all future pharmacy practice experiences to engage in self-directed life-long learning and development. If a similar deficiency arises, the student will be required to meet with the OEE. The OEE will determine outcome due to second deficiency. Outcomes could include failure of the rotation, repeat rotation, continue rotation with monitoring, etc.
Responsibilities of the School/OEE

- Determining competencies, curricular content, and assessment methods for the experiential program;
- Providing the site/preceptor with a summary of experiential policies and procedures;
- Ensuring that students and faculty participating in experiential education maintain general liability coverage and that students further maintain additional individual professional liability insurance;
- Scheduling students for the practice experiences in conjunction with the preceptor and site;
- Ensuring that the student completes a standard background check, an FBI fingerprint clearance, a Child Abuse clearance, and health screenings as required by the School;
- Informing the student that he/she is responsible for contacting the preceptor/site for any additional site-specific requirements and for providing the site/preceptor with documentation of any such required certifications, background checks, and/or screenings;
- Ensuring that the student has completed University-provided HIPAA training;
- Providing the site/preceptor with a schedule of assigned students in advance of the rotation;
- Providing preceptor development programming;
- Granting preceptor access, while a student is on rotation, to electronic library resources and drug information databases as maintained by the University;
- Maintaining student records and submitting course grades to the University registrar;
- Assisting in the resolution of any problems or difficulties with students at the practice site;
- Maintaining open communication with the site/preceptor.
Responsibilities of the Preceptor

- Ensuring that the student is aware of the policies and procedures of the practice site, including HIPAA policies;
- Providing the student with an orientation to the practice site;
- Providing the student with structure to the practice site that includes a schedule of activities;
- Integrating the student into the work activities of the practice site;
- Identifying activities/assignments necessary for the student to complete the requirements and meet the learning objectives of the associated practice experience;
- Identifying a sufficient variety and mix of patient cases to allow the student to complete the requirements of the associated practice experience;
- Ensuring that the student has the opportunity to interact with other health care professionals;
- Evaluating student assignments and performance on a regular basis through PharmEd Plus™;
- Meeting with students on a regular basis to provide formative feedback;
- Conducting behavioral assessments at mid-point and final;
- Notifying the Director of Experiential Education regarding any student performance or behavioral deficiencies;
- Notifying the Director of Experiential Education regarding any student absences (see Attendance Policy, supra);
- Conducting the final student assessment and conference.
Responsibilities of the Site

- Engaging in an affiliation with the School;
- Ensuring that the student has submitted the necessary documentation pertaining to any clearances, immunizations, and/or screenings necessary for participation at the practice site;
- Ensuring that the student is aware of the policies and procedures inherent to the practice site;
- Providing any site-specific training (e.g., HIPAA) that may be required for student participation at the practice site;
- Allowing the student to utilize the cafeteria, parking facilities, and conference space, if available;
- Providing the student with access to electronic resources and patient medical records, when assigned and where appropriate;
- Identifying qualified personnel in conjunction with the School to serve as site preceptor(s), who meet the standards of recognized professional licensing and accrediting agencies and the objectives of the educational program;
- Supporting the preceptor in his/her role and association with the School to include participation in professional development programs;
- Maintaining a level of staff support sufficient to carry out adequate service functions so that an assigned student will not be expected to perform in lieu of staff;
- Providing emergency health services to the student, to the extent possible, with costs to be assumed by the student;
- Maintaining ultimate authority, supervision, and responsibility for patient care.
Responsibilities of the Student

- Contacting the preceptor in advance of the practice experience to determine site requirements and schedule;
- Ensuring that all prerequisite background checks, child abuse clearances, FBI fingerprinting, screenings, immunizations, and other site requirements, such as HIPAA training, have been met and appropriate documentation provided in advance of the practice experience;
- Abiding by the policies and procedures of both the School and the practice site;
- Maintaining a professional appearance (i.e., white coat and name tag) unless otherwise directed by the practice site;
- Maintaining patient confidentiality and protecting personal patient health information;
- Maintaining professional boundaries;
- Being respectful and demonstrating sensitivity in interactions with the preceptor, staff, other health care professionals, and patients;
- Holding an active Pennsylvania intern license, and if applicable, other state intern license if rotation is located outside of Pennsylvania;
- Completing the required assignments and activities in a timely fashion as per practice experience;
- Abiding by attendance guidelines and fulfilling all of the requisite hours for the practice experience;
- Notifying the preceptor and Director of Experiential Education regarding any anticipated or unanticipated absences or tardiness (See Attendance Policy);
- Not engaging in unauthorized use of electronic media for personal use during the practice experience;
- Taking responsibility for learning;
- Working in collaboration with the team;
- Providing and accepting constructive criticism and feedback in a positive fashion;
- Completing an evaluation of the preceptor and practice experience prior to the conclusion of the rotation.
## Criteria for Evaluating Preceptor Performance

### Method: Site Visits

<table>
<thead>
<tr>
<th>Evaluation of the PRECEPTOR (OEE)</th>
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<tbody>
<tr>
<td>Demonstrates a clear understanding of the goals and learning objectives of the rotation</td>
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<tr>
<td>Maintains a well-structured and clearly defined itinerary for the rotation</td>
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<tr>
<td>Effectively communicates the expectations for this rotation to the student</td>
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<tr>
<td>Effectively explains the objectives and student’s role for this rotation to his/her staff</td>
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<tr>
<td>Performs regular and consistent evaluation of the student to ensure that the objectives of the rotation are being met</td>
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<tr>
<td>Provides student with fair and constructive formative feedback in an environment conducive to open discussion</td>
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<tr>
<td>Encourages student learning by providing opportunities for enrichment</td>
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<tr>
<td>Tailors the rotation to meet the needs of the individual student by challenging the student at a level commensurate with their academic standing and prior experience</td>
</tr>
</tbody>
</table>
Likert Scale Rating of Preceptor – OEE Site Visits

• 5 = Outstanding - The preceptor demonstrates exceptional ability and greatly exceeds expectations in this area.
• 4 = Very Good - The preceptor is very effective to excellent, exceeds expectations and is clearly among the top one-half of his/her peers in this area.
• 3 = Good - The preceptor adequately meets expectations and is average among peers in this area.
• 2 = Fair - The preceptor is performing slightly below acceptable competency levels and is clearly among the bottom one-half of his/her peers in this area. Performance is in need of improvement.
• 1 = Unacceptable - The preceptor is deficient in this area. Performance is among the worst of his/her peers. Requires immediate and considerable improvement.
## Criteria for Evaluating Site Performance

### Method: Site Visits

<table>
<thead>
<tr>
<th>Evaluation of the SITE (OEE)</th>
<th></th>
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<tbody>
<tr>
<td>The physical environment is clean, neat and well-organized with sufficient size and space to accommodate staff and students.</td>
<td>Pharmacy staffing, in terms of professional and support personnel, is of such a nature so as to allow the preceptor to spend sufficient time with the student as well as provide the student with ample opportunity for learning opportunities and exploration.</td>
</tr>
<tr>
<td>Workflow patterns are efficient and clearly defined with resultant maximization of productivity.</td>
<td>Policies and procedures are clearly defined and formally documented.</td>
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<tr>
<td>Drug information is readily accessible on-site and comprehensive in nature.</td>
<td>An atmosphere of cooperation and collegiality at this site creates an environment that is pleasant and conducive to learning.</td>
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<tr>
<td>Adequate and quiet workspace is provided for student research.</td>
<td>New opportunities for growth and development are explored and encouraged.</td>
</tr>
<tr>
<td>Computer access to patient databases is readily available to the student.</td>
<td>(If applicable) The area for patient counseling is designed so as to adequately accommodate and provide privacy for the involved parties. Reference and patient counseling materials are readily available as is access to the patient record.</td>
</tr>
<tr>
<td>Standard computer software programs, such as word processing, are available to the student.</td>
<td>Overall impression of site</td>
</tr>
</tbody>
</table>
Likert Scale Rating of Site – OEE Site Visits

• 5 = Superior-The site is excellent in this area. Observational data and intermittent student feedback suggest that the site is consistently among the top 10% of sites in this area.

• 4 = Very Good-The site is very good in this area. Observational data and intermittent student feedback suggest that this site usually exceeds expectations and consistently ranks among the top 25% of sites in this area.

• 3 = Average-The site generally meets expectations in performance in this area. Observational data and intermittent student feedback suggest that this site is typical of many other sites in this area.

• 2 = Fair-The site could use some improvement in this area. Observational data and intermittent student feedback suggest that performance may not consistently meet expectations and is usually among the bottom 25% of sites in this area.

• 1 = Unacceptable-The site should devote immediate attention to this area. Observational data and intermittent student feedback suggest that performance often falls short of meeting minimal expectations and is typically among the bottom 10% of sites in this area.
### Criteria for Evaluating Preceptor Performance

**Method: Student Evaluations**

<table>
<thead>
<tr>
<th>Evaluation of the PRECEPTOR (Student Evaluations)</th>
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</thead>
<tbody>
<tr>
<td><strong>The preceptor developed a structured and defined plan for this rotation</strong></td>
</tr>
<tr>
<td><strong>The preceptor clearly communicated the expectations for this rotation to me</strong></td>
</tr>
<tr>
<td><strong>The preceptor provided the elements necessary to enable me to accomplish the learning objectives for this rotation</strong></td>
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<tr>
<td><strong>The preceptor regularly and consistently provided me with constructive feedback on my performance</strong></td>
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<tr>
<td><strong>The preceptor was readily accessible to me</strong></td>
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<tr>
<td><strong>The preceptor was courteous towards me</strong></td>
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<tr>
<td><strong>The preceptor encouraged open discussion that served to enhance my learning experience</strong></td>
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<tr>
<td><strong>The preceptor communicated effectively with his/her patients or clients</strong></td>
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<tr>
<td><strong>The preceptor maintained a positive rapport with his/her staff</strong></td>
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<tr>
<td><strong>The preceptor served as a professional role model</strong></td>
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<tr>
<td><strong>Overall rating of this preceptor</strong></td>
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<tr>
<td><strong>Overall rating of this experiential rotation</strong></td>
</tr>
</tbody>
</table>

**Scoring:** 4 = Exceptional, 3 = Very Good, 2 = Satisfactory, 1 = Unsatisfactory, N/A = Not Applicable
Preceptor Development Opportunities

• Foundational CE for Precepting
• Additional CE opportunities
• Certificate Programs at a discounted preceptor rate
  • [www.duq.edu/certificateprograms]
• Preceptor Newsletter
• Preceptor Appreciation Events
• Access to Library Resources and databases such as LexiComp, PubMed, Access Pharmacy, when a student is on rotation
• Interact and engage with students outside of their practice site in the didactic curriculum
Experiential Education Rotation Timeline

• October: OEE reaches out to the preceptor to capture availability for the next academic year
• January/February: OEE conducts student rotation placements
• March: Preceptors will be notified of student placements
• May – August: IPPE I and IPPE II Rotations occur
• May – May: APPE Rotations occur
Thank YOU!

-Office of Experiential Education