2017 – 2018 COURSE SYLLABUS

YPHP 615A, 615B, 615C - INTRODUCTORY PHARMACY PRACTICE EXPERIENCE II

COURSE DESCRIPTION
The Introductory Pharmacy Practice Experiences (IPPEs) are designed to provide the foundation for the student pharmacists in preparation for their Advanced Pharmacy Practice Experiences (APPEs). This course is a structured introduction to pharmacy practice in a health-system pharmacy setting. The Health-System IPPE spans the P2 year, during which the students will engage in basic distributive and administrative processes in community pharmacies and gain initial experience interacting directly with patients, preceptors, technicians, and other health care providers and pharmacy personnel.

COURSE DIRECTOR
<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Bradley Cannon, PharmD</th>
<th>Lisa Michener, PharmD, MS,</th>
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<tbody>
<tr>
<td>Title</td>
<td>Director of Experiential Education</td>
<td>Associate Director of Experiential Education</td>
</tr>
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<td>847-578-3433</td>
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<tr>
<td>Office location</td>
<td>IPEC 2.808</td>
<td>IPEC 2.816</td>
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<tr>
<td>Office hours</td>
<td>By appointment</td>
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CONTACT HOURS
The Health-System Pharmacy IPPE is a longitudinal rotation experience, during which the students will complete at least 104 hours in a health-system pharmacy (Figure 1). For additional details related to the IPPE dates and hours, refer to the IPPE P2 Health-System 2017-2018 schedule. Simulation activities will account for approximately 10 hours during the P2 year.

Figure 1. Experiential Education Structure

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Updated 9-1-2017
PREREQUISITES*
Documented completion and compliance with the following is required before beginning a practice experience:
1. Pharmacy Technician Registration as a Student Pharmacist with the Illinois Department of Financial & Professional Regulation**
2. Online HIPPA training via Desire2Learn (D2L), completed annually
3. OSHA Bloodborne Pathogen training (completed in conjunction with the Pharmacy Skills Education course), completed annually
4. Basic Life Support (BLS) training for Healthcare Providers (live training via the American Heart Association)
5. Criminal background check, completed annually
6. Drug test, completed annually
7. Up-to-date vaccination history per the RFUMS Student Pre-Matriculation Immunization Form
9. Annual influenza vaccination, which must be completed annually.

*Some sites may have additional requirements for student pharmacists completing IPPEs.
**A student pharmacist is NOT required to become a Certified Pharmacy Technician as long as the student is in good standing at RFUMS College of Pharmacy.

TEACHING METHODS
Student pharmacists participating in the P2 IPPE will be engaged in active learning through the use of practice-based activities in health-system pharmacies, team-based projects, preceptor interaction, and simulation activities.

TERMINAL PERFORMANCE OUTCOMES1: Upon completion of this experiential course, the student pharmacist will have met the following performance domains and abilities:
1. Learner—Develop, integrate, and apply knowledge from the foundational sciences to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population and patient-centered care.
2. Patient-centered care—Provide patient-centered care as the medication expert
3. Medication use systems management—Manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use
4. Health and wellness—Design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness
5. Problem solving—Identify problems, explore and prioritize potential strategies, and design, implement, and evaluate viable solutions
6. Educator—Educate respective audiences by determining the most effective and enduring ways to impart information and assess understanding
7. Patient advocacy—Assure that patients’ best interests are represented
8. Interprofessional collaboration—Actively participate and engage as a health care team member by demonstrating mutual respect, understanding, and values to meet patient care needs
9. Cultural sensitivity—Recognize social determinants of health to diminish disparities and inequities in access to quality care
10. Communication—Effectively communicate verbally and nonverbally when interacting with an individual, group, or organization
11. Self-awareness—Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth
12. Leadership—Demonstrate responsibility for creating and achieving shared goals, regardless of position
13. Innovation and entrepreneurship—Engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals
14. Professionalism—Exhibit behaviors and values that are consistent with the trust given to the profession by patients, other health care providers, and society

1 Based on the Center for the Advancement of Pharmacy Education’s Educational Outcomes 2013.
COURSE OBJECTIVES AND EXPECTATIONS

Upon completion of this advanced pharmacy practice experience in community pharmacy, the student pharmacist will be able to:

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<th>Learner</th>
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<tr>
<td>• Summarize key information, including brand and generic names, dosage forms, usual dosing ranges, and counseling points related to the use of common prescription and nonprescription medications</td>
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<td>• Describe the mechanism of action of common medications</td>
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<td>• When responding to drug information requests from patients or health care providers, identify appropriate sources of information and evaluate primary literature to synthesize answers</td>
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<tr>
<td>• Critically analyze scientific literature and clinical practice guidelines related to medications and diseases to enhance clinical-decision making</td>
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<tr>
<td>• Perform accurate pharmaceutical calculations, including preparation of compounded medications, weight-based pediatric dosing, and dose adjustments based on body weight and renal function</td>
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<tr>
<th>Patient-Centered Care</th>
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<tr>
<td>• Collect subjective and objective evidence related to patient, medications, allergies/adverse reactions, and disease, by performing patient assessment (including physical assessment) from chart/electronic health records, pharmacist records, and patient/family interviews.</td>
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<tr>
<td>• Collect patient histories in an organized fashion, appropriate to the situation and inclusive of cultural, social, educational, economic, and other patient-specific factors affecting self-care behaviors, medication use and adherence to determine the presence of a disease, medical condition, or medication-related problem(s).</td>
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<tr>
<td>• Accurately assess and record a patient’s blood pressure, pulse, respiratory rate, and other objective data as applicable</td>
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<tr>
<td>• Evaluate a patient’s medication profile to identify actual and potential medication-related problems</td>
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<tr>
<td>• Formulate evidence-based care plans, assessments, and recommendations based on subjective and objective data, the patient’s needs, and the patient’s goals</td>
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<tr>
<td>• Implement patient care plans and monitor response to therapy</td>
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<tr>
<td>• Document all patient information accurately, legally, and succinctly</td>
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<tr>
<td>• Effectively communicate recommendations to other health care providers</td>
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<th>Medication Use Systems Management</th>
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<td>• Distribute medications in a safe, accurate, and timely manner</td>
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<td>• Compound drug products using accurate calculations, pharmaceutical components, and techniques</td>
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<tr>
<td>• Accurately evaluate, process, label, and dispense medications and devices pursuant to a new prescription, prescription refill, or drug order in accordance with legal requirements</td>
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<tr>
<td>• Determine appropriate storage and beyond-use dating of compounded and reconstituted medications before and after dispensing</td>
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<tr>
<td>• Incorporate continuous quality improvement techniques when processing prescriptions for patients to reduce and prevent errors</td>
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<td>• Manage health care needs of patients during transitions of care</td>
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<th>Health and Wellness</th>
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<tr>
<td>• Provide preventive health and wellness services (e.g., immunizations, tobacco cessation counseling, wellness screenings)</td>
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<th>Problem Solving</th>
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<tr>
<td>• Identify and prioritize a patient’s medication-related problems</td>
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<th>Educator</th>
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<td>• Use effective written, visual, verbal, and nonverbal communication skills to educate patients and/or caregivers on medication use, self-management, and preventive care</td>
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<tr>
<td>• Assess the ability of patients and their agents to obtain, process, understand and use health- and medication-related information</td>
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<tr>
<td>• Use appropriate methods of patient education to review indications, adverse effects, dosage,</td>
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2 Based on the Center for the Advancement of Pharmacy Education’s Educational Outcomes 2013 and the Accreditation Council for Pharmacy Education’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (Guidelines 2.0, Appendix D).
storage, and administration techniques

**Educator**

- Demonstrate and/or describe proper use of various drug delivery and monitoring systems (e.g., inhalers, eye drops, glucometers, etc.)
- Use effective written, visual, verbal, and nonverbal communication skills to accurately respond to drug information questions
- Educate health care providers, pharmacy staff, and student pharmacists regarding a patient case or other pharmacy-specific information
- Given a condition that can be treated with self-care interventions, recommend appropriate nonprescription and nondrug therapy

**Patient Advocacy**

- Assist a patient or caregiver with problems related to prescription medication coverage, health insurance, or government health care programs
- Encourage patients to set priorities and goals to better meet their health care needs

**Interprofessional Collaboration**

- Engage as a member of a health care team by collaborating with and demonstrating respect for other areas of expertise

**Cultural Sensitivity**

- Incorporate patients’ cultural beliefs and practices into health and wellness education

**Communication**

- Document patient care activities clearly, concisely, and accurately using appropriate medical terminology
- Comply with the communication expectations of the Office of Experiential Education

**Self-Awareness**

- Approach tasks with a desire to learn
- Display positive self-esteem and confidence with interacting with others
- Accept constructive criticism and strives for excellence
- Demonstrate the ability to be a self-directed, life-long learner

**Leadership**

- Foster collaboration among the pharmacy team to achieve a common goal

**Innovation and Entrepreneurship**

- Demonstrate creative decision-making when dealing with unique problems or challenges
- Develop new ideas or strategies to improve patient care services at the pharmacy

**Professionalism**

- Demonstrate a commitment to the advancement of pharmacy practice
- Comply with the professionalism expectations of the Office of Experiential Education

### PROFESSIONALISM & COMMUNICATION EXPECTATIONS

**Professionalism & Communication Expectations**

*To behave professionally, the student must:*  

- Demonstrate knowledge of and sensitivity towards the unique characteristics of each patient.  
- Comply with all federal, state, and local laws related to pharmacy practice.  
- Demonstrate ethical and professional behavior in all practice activities.  
- Maintain ethical behavior by being honest, ensuring patient confidentiality, responding to and preventing errors in patient care and avoiding professional misconduct (including plagiarism).  
- Make and defend rational and ethical decisions within the context of personal and professional values.  
- Maintain a clean, orderly, and safe workspace.  
- Display appropriate dress, grooming, and hygiene that is professional in appearance (e.g., defined by site policy and/or procedures, preceptor, instructor and/or professional etiquette or culture).  
- Complete assignments on time.  
- Arrive on time and avoids absences when possible.  
- Call and notify preceptor in advance of any planned absences or when unable to meet a deadline or arrive on time.
• Prepare for assigned activities as designated (e.g., workbook, homework etc.)
• Complete designated activities during allotted rotation hours or class time.
• Accept accountability and responsibility for patient care without repeated reminders.
• Show a sincere desire to learn.
• Demonstrate willingness and flexibility to contribute to the well-being of others.
• Apply knowledge, experience, and skills to the best of his/her ability.
• Seek help from the preceptor or instructor when necessary.
• Never be hesitant to admit that he/she does not know something, but should seek help and ask questions whenever necessary.
• Not make decisions without the knowledge of the preceptor, particularly in regard to prescription dispensing.

To communicate effectively, the student must:
• Demonstrate effective communication abilities in interactions with patients, their families and caregivers, and other health care providers.
• Communicate clearly, respectfully, and effectively through active listening using appropriate verbal, non-verbal, and written communication skills at a level appropriate for caregivers, health care providers, and the general public.
• Introduce self at first encounter and make appropriate eye contact.
• Greet patients and/or other health care professionals with a smile and/or positive inflection in voice (e.g., not condescending or sarcastic).
• Demonstrate appropriate self-awareness, assertiveness and confidence (e.g., not meek or overly assertive, even under stress).
• Work as an active team member with patients, peers, and other health care professionals (e.g., contributes relevant information).
• Accept and use constructive feedback to improve performance.
• Not publicly question the advice or directions given by the preceptor or staff, but is encouraged to discuss issues or ask questions in private.

Professionalism Policy
Per the OEE Professionalism Policy detailed in the Experiential Manual, students will begin with 100 professionalism points. Each professionalism infraction will result in the loss of either 5 or more points, depending on the infraction. A student’s professionalism points will be tracked throughout the first 3 years of the program. Professionalism points will be used during the rotation selection process. The order of rotation selection will be based on the number of points. Students in each class will be ranked according to their allotment of points at the time of rotation selection. Students with the most professionalism points will be given the first opportunity to select rotations. For additional detail, refer to the Experiential Manual.

RECOMMENDED ONLINE RESOURCES
15. Institute for Safe Medication Practices. Available at: www.ismp.org
**ACTIVITIES AND ASSIGNMENTS***
This introductory pharmacy practice experience will include the following activities and assignments:

1. **Health-System IPPE Workbook**

   The IPPE Workbook provides guidance for hands-on activities during each health-system pharmacy visit. The activities in the workbook reinforce the knowledge and skills taught in the didactic coursework and pharmacy skills education class. Completion of all elements of the workbook is required to successfully pass this course.

2. **Reflection exercises**

   Throughout the year, students will be required to document in writing their experiences with the pharmacy practice and patient care activities. These reflections will be submitted and maintained in E*Value.

3. **Simulation activities**

   The second year IPPEs will feature a total of 10 hours of simulation targeting specific aspects of basic patient assessment and health care professional communication skills, as well as prescription preparation calculations and dispensing skills. Students will interact with high fidelity mannequin patients in an interprofessional session with faculty, and other students to role-play encounters consistent with health-system pharmacy practice.

4. **C3 activities**

   C3 activities are based on key element 12.3 as described in the Accreditation Council for Pharmacy Education (ACPE) Standards 2016 document. Completion of all elements of the approved activity, including the reflection, are required to pass this course.

5. **Additional coursework as assigned by the preceptor**

   *Any events and/or activities listed in this syllabus are subject to change.

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**ACCESS TO MATERIAL AND INFORMATION**
In addition to what will be provided in class, materials and information will be distributed using the University email system, and E*Value. These systems are mandatory communication modalities among faculty, preceptors, and students involved with this course.

**ATTENDANCE POLICY**
1. Hours are to be completed on-site and must be accurately documented in the E*Value system via the Time Tracking feature.
3. Key expectations for attendance:
   1. Attendance is MANDATORY for all site visits:
      a. Attendance for all site visits is mandatory.
      b. Attendance is mandatory at all IPPE orientation meetings, simulation activities and reflections.
   2. Site visit is defined as
      a. 8 hours (excluding lunch) for Q1 (Fall), Q2 (Winter) and Q3 (Spring) quarters.
   3. During the P2 year, students are not authorized to modify their schedule without the expressed emailed joint consent from the course director and preceptor.
   4. Refer to the Attendance Policy for details on rescheduling or IPPE absences in the Experiential Manual.

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EVALUATIONS
A variety of evaluations are used in this course. These serve to provide feedback to the students, preceptors, and course director regarding student progress and course activities. Evaluation forms are completed in E*Value: https://www.e-value.net/login.cfm at midpoint and at the end of the rotation.

Midpoint Evaluation:
The midpoint evaluation includes:
- the preceptor’s evaluation of the student
- the student’s self-evaluation
- the student’s evaluation of the rotation

Final Evaluation:
The final evaluation includes the following:
- preceptor’s evaluation of the student
- the student’s self-evaluation
- the student’s evaluation of the preceptor
- the student’s evaluation of the site
- the student’s evaluation of the entire course

How Students Access Preceptor Evaluations:
- Students must complete all evaluations (e.g. self, site, preceptor and course) in order to access the evaluation completed in E*Value by the preceptor.
- It is expected that the preceptor and student meet to discuss both midpoint and final evaluations.

How Preceptors Access Student Evaluation of Site and Preceptor:
Student must demonstrate professionalism when documenting all evaluations. Once a preceptor has precepted at least three students, the students’ preceptor evaluations will be compiled and reported back to the preceptor in aggregate.

How Evaluations Determine Students Grade:
Both the preceptor’s midpoint and final evaluations of the student are factored into the student’s grade as noted in the grading policy.

GRADING POLICY
Students will receive a PASS or FAIL grade for their completion of the P2 Health-System IPPEs (YPHP 615A-C). Grades will be issued at the end of the spring quarters (Q3).

To pass YPHP 615A-C (Q1 – Q3), students must meet the following requirements:
1. Complete all workbook assignments as applicable
2. Complete all applicable reflection exercises by the posted deadlines
3. Complete all applicable simulation activities
4. Complete all C3 activities
4. Complete the mid-point and final self and rotation evaluations by the posted deadline
5. Meet or exceed all competencies including Ethical, Professional, and Legal Behavior.

The course director(s) and/or preceptor(s) may assign a performance improvement plan to any student who does not meet these standards.
REMEDIATION
Per the Experiential Manual, a student who receives an “F” in an IPPE must remediate the course before he or she can be promoted unless remediation is in progress. Remediation of this course is not a guarantee. Students requesting to remediate an “F” must contact the course director. The course director may develop a remediation plan for the student and forward a copy to the Assistant Dean for Academic and Student Affairs. Successful remediation of experiential courses must be completed before promotion to the next year. Students for whom remediation is offered should refer to the course remediation policy in the College of Pharmacy’s Guidelines and Procedures for Student Assessment and Evaluation for additional guidance. For additional guidance regarding course deficiencies and failures, refer to the Experiential Manual.

ACADEMIC INTEGRITY
This course will adhere to the Rosalind Franklin University of Medicine and Science Standards of Student Conduct, which can be found in the Rosalind Franklin University of Medicine and Science Student Handbook. Please refer to this document for policies on cheating, plagiarism, academic dishonesty, abuse of academic materials, stealing, and lying.