

**DEPARTMENT OF
PHARMACY PRACTICE**

**Advanced Practice Experience
Indirect Patient Care:
Community Pharmacy Management
Manual**

2009-2010



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***Advanced Practice Experience
Indirect Patient Care:
Community Pharmacy Practice***

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“Any concerns, questions, or procedural matters related to this course should be addressed in the following order of progression: the Instructor or Course Coordinator, Departmental Chair, 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 year and deviations communicated to the class via UAMS email.”

This manual is for teaching purposes only and should be used in conjunction with the 4th Professional Year Rotation Course Syllabus as a required resource for this clerkship

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Special thanks to this group for their efforts in the development of this clerkship.

General Policies:

Challenge to Grade: Please refer to page 41 of the College of Pharmacy Student Handbook.

Missed Exams or Assignments: All work is due by the end of the clerkship. Unfinished work will result in an Incomplete (I) and will be handled as described in the 4th Professional Year Rotation Course Syllabus.

Attendance: As described in the 4th Professional Year Rotation Course Syllabus, there are no excused absences. Any absence from the clerkship must be made up in conjunction with the preceptor.

Academic Dishonesty: Students are expected to abide by the Pledge of Professionalism found in the student handbook on page 55. Academic dishonesty will be dealt with severely and may result in failure of the course. Examples of academic dishonesty include but are not limited to plagiarism or cheating.

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Purpose

The primary purpose of the indirect care advanced practice clerkship in community pharmacy practice is to teach effective management techniques to senior pharmacy students through direct skill training and mentoring. Mentorship by proven pharmacy managers and owners will help students to develop the necessary skills for both these goals as students take part in structured, hands-on, experiential assignments designed to apply the management skills that are part of the classroom curriculum while at the same time practicing their patient care skills in a working community pharmacy practice setting.

While management techniques may be taught in a classroom setting, true understanding of management cannot fully be learned until experience is gained, and management concepts are applied. Furthermore, effective management has been the driving force behind most successful businesses.

Nearly every pharmacist in America has some role in the workplace as a manager. Whether this is managing personnel, inventory, or accounts, many times pharmacists are forced to learn appropriate management techniques on-the-job. This rotation should offer pharmacy managers and student pharmacists a unique opportunity to prosper professionally. Additionally, because this clerkship will take place in the day-to-day setting of a community pharmacy, there will also be the opportunity for students to obtain additional practice of their patient care skills in a community setting.

Goals & Objectives

Note: Community Pharmacy Practice Clerkship goals are numbered; Specific objectives are in italics and bulleted. UAMS COP Competency Statements addressed by this clerkship follow in parentheses.

Practice Foundation Skills

1. Take personal responsibility for attaining excellence in the ability to provide patient care in the community practice setting. (1.1; 1.3)
2. Demonstrate ethical conduct in all practice-related activities. (1.5b)
3. Demonstrate the characteristics of a professional. (1.5)
4. Appreciate the need to adapt patient care for diversity. (1.3c)
5. Display a caring attitude toward patients in all aspects of job responsibilities. (2.3)
6. Maintain confidentiality of patient and proprietary business information. (2.4b)
7. Manage time effectively to fulfill practice responsibilities. (2.2)
8. Communicate clearly when speaking or writing. (1.4, 2.3b, 2.4a)
 - *Organize all written and oral communication in a clear, concise and logical manner.*
 - *Address all communication at the level appropriate for the audience.*
 - *Use correct grammar, punctuation, spelling, style, reference system, and formatting conventions in preparing all written communications.*
 - *Speak clearly and distinctly*
 - *Use listening skills effectively in performing job functions.*
 - *Use persuasive communication techniques effectively.*
 - *Prepare all communications so that they reflect the positive image of a pharmacy professional*

Management Goals (2.1-2.4)

1. Improve student's understanding of the concepts involved in marketing management. At the end of the rotation the student should be able to:
 - *Defend product selection and location for specified section of the OTC department.*
 - *Describe a promotional plan for a specified section of OTC products.*
 - *Discuss rationale for addition of a patient care service in an area such as, but not limited to, OTC recommendation, compounding, charge accounts, delivery service, nursing home service, Disease State Management, health screenings or immunizations.*
2. Operations Management. At the end of the rotation the student should be able to:

- *Prepare a strategic plan for expansion of a pharmacy service.*
 - *Evaluate a particular store's performance in an area such as patient satisfaction or error prevention effectiveness.*
 - *Develop a plan for continuous quality improvement in an area such as management training, continuing education, compliance with corporate goals, benefits or promotion practices.*
 - *Compose a policy for improvement for pharmacy services.*
 - *Discuss the company's HIPPA policies and how they work to stay HIPPA compliant*
 - *Discuss the company's organizational structure.*
3. Expand student's experience in human resource management. At the end of the rotation the student should be able to:
- *Define legal issues that must be considered during hiring and termination of an employee.*
 - *Formulate and develop the tools required to search for an employee.*
 - *Describe the pharmacy's benefit schedule.*
 - *List methods used by the company in employee retention.*
 - *Explain the procedure for analyzing and managing a mis-filled prescription or other inappropriate employee action.*
 - *Evaluate a pharmacy's risk for medication error and determine a plan to reduce any risk found in the evaluation.*
 - *Recommend staffing levels for a pharmacy department.*
4. Improve student's financial management skills. At the end of the rotation the student should be able to:
- *Define each individual's role in inventory control. (e.g., Corporate office, District Manager, Pharmacy Manager, Staff Pharmacist).*
 - *Determine appropriateness of current prescription inventory level.*
 - *Discuss methods used in controlling inventory.*
 - *Describe benefits of pharmaceutical rebates and their role in financial management of pharmacy assets.*
 - *Explain the rationale involved in determining prescription drug pricing.*

1. APhA & ASHP. Accreditation standards and learning objectives for residency training in pharmacy practice (with emphasis in community care). Washington; 1996.
- Hepler CD, Strand LM. Opportunities and responsibilities in pharmaceutical care. Am J Hosp Pharm 1990;47:533-543.

Requirements of the Clerkship

- ◆ Written Job Description
- ◆ Interview Session (real or mock)
- ◆ Problem Scenario Case Presentations
- ◆ Staffing Change Evaluation
- ◆ Topic Presentation
- ◆ Management Project
- ◆ Mid-Module and Final Evaluations from Preceptor

Assignments

Problem Scenario Case Presentations

For this rotation, each student must document **in writing two (2) problem scenarios from their rotation experience and discuss in writing what was done wrong in each scenario, assess the risks to each party involved, and specify how you would handle the situation if you were in charge of this pharmacy. If there are instances where the law was broken, please highlight this in your assessment. Also, each student will present their 2 scenarios by the end of the month to their preceptor. Below are 2 examples of problem scenarios and the information that would be included in your documentation.

I. Medication Mix-up

The pharmacist was filling a prescription for Coumadin® 2mg. He had just finished typing the label and counting out the Coumadin® when the telephone rang. The pharmacist answered the phone and it was a physician ordering a prescription over the telephone for another patient for Lanoxin® 1.25mg. The pharmacist set the bottle with the Coumadin® to the side on top of the prescription, since he expected that patient to be in momentarily. After typing the label for Lanoxin®, he counted out the Lanoxin® and put them in a bottle and set them on top of the label and the prescription. He was interrupted by another telephone call. In the confusion he picked up the Lanoxin® label and placed it on the bottle containing the Coumadin®. He places the medication in the bag for the patient who should have received Lanoxin®. He handed the prescription to the patient when he arrived. The patient took the medication home and noted there was difference in the appearance of the tablets. The patient called back to the pharmacy and said that the tablets were a different color than they had been getting before. One of the clerks who answered the phone said, without checking with the pharmacist, "Don't worry, it is probably just a generic. It's okay!" The patient took the Coumadin® for several days before excess bleeding began. When the patient was admitted to the hospital, he was bleeding rectally and from the nose.

In writing, discuss what the pharmacist did wrong. Describe risk management procedures that the pharmacist should institute for all prescriptions in order to prevent this type of mistake from occurring again. Specify how you would handle the clerk's part in this error.

II. Inappropriate Duty Fulfillment

You are the pharmacy manager for a store with a significant staff of 3 pharmacists, including yourself, 2 technicians, and numerous clerks. One day while filling prescriptions you notice one of your technicians giving OTC advice to a patient before ringing up the sale for that customer. At first you think that maybe this technician is only helping someone to find a specific product that they have requested. The next day you notice a similar situation and find out that not

only is this technician recommending products to your patients, but they are also giving advice as to drug interactions and off-label pediatric dosing.

In writing, discuss what the technician is doing wrong. What risk does this pose to you as the pharmacist in charge of this pharmacy? Specify how you would handle this situation.

Staffing Change Evaluation

Evaluate a store's need for a change in staffing. Write a proposal for this staffing change or create a timeline for the projection of staffing needs with certain levels of production being met thus requiring a staffing change.

This project will require you to gain a basic understanding of the guidelines that the district or store managers follow to decide when staffing changes are necessary.

Job Description Written & Interview Session

Become familiar with interviewing pharmacists, technicians, and other support staff. Write a job description for a position opening in a pharmacy and conduct an interview for this position. Discuss with preceptor what important traits/characteristics they look for in potential employees.

Hand in the written job description as well as a summary of the concepts learned that apply to interviewing. (What do you look for in employees? What red flags do you look for in CV's and resumes? How do you determine how well you think someone will perform in this job?)

Topic Presentation

Prepare and present a lecture to your preceptor on a product that has been approved in the last 6-9 months. The purpose of this presentation is to educate pharmacists and other staff about this new product. Be sure to discuss the choice of topic with your preceptor prior to beginning the work on this presentation. The student and preceptor may seek Continuing Education credit for the presentation from the Arkansas State Board of Pharmacy prior to the presentation.

Management Project

Management Project Examples

If your preceptor does not have a project in mind for you during the clerkship, you may choose one of the following:

I. Merchandising Assignment

Discuss this assignment with your pharmacist preceptor before beginning the project.

Studies show that products sell better from an end-cap than from regular shelf placement. Choose a category of products (OTC, gift or seasonal items) and design a display on an end-cap. Mark the products you place in this display with a special sticker (maybe a colored dot) and track the sale of items from this section over the course of two weeks. Compare the sales of the items from here to items from regularly shelved items and report your results in the form of a report at the end of the rotation.

**This project may need to be coordinated with an OTC Manager or Department Manager depending on your rotation setting.

II. Disease State Management or other Clinical Service

You are the owner of an independent pharmacy in Anywhere, AR. You have completed the DSM Training Seminar for your state. You are very proud of this new program and can't wait to let the physician's offices in your area know about the new service. Write a letter of introduction for this new service. This letter will be mailed out to all physicians in your town. Not only should this letter serve as an introduction of your service, but should also enlist the support of the physicians for your clinic.

Community Pharmacy Practice Clerkship

Discussion Topics & Concepts

- ◆ Inventory Control
- ◆ Daily Cash-out/Sales Record
- ◆ In-house Charge Accounts
- ◆ Personnel Management
- ◆ Monthly Financial Records
- ◆ Third-party Billing
- ◆ Industrial Billing
- ◆ Daily Ordering
- ◆ Marketing and Services

Discuss these topics with your preceptor as time and opportunity allow. This will be your best chance to learn about and obtain practical experience in these areas of management.

Community Pharmacy Practice Clerkship

INVENTORY CONTROL

1. If possible, the student will perform inventory control. This will include evaluating all promotions, rebates and deals encountered by the prescription department as well as direct buying versus wholesaler deals.

DAILY CASH-OUT/SALES RECORD

1. If possible, the student will perform this task.
2. Reconcile all cash registers used in the pharmacy at the close of each day and prepare each register for use for the following day. This activity should include, but not be limited to:
 - a. Reconcile cash in the cash register with cash sales and the residual, i.e., amount left in the register each day for change.
 - b. Separate charges (in house and credit card) from cash and amounts paid on accounts, then reconcile with the cash register tape.
 - c. Reconcile refunds and paid-outs with tape.
 - d. Identify and separate sales tax items and non-taxed items. Discuss how sales tax is paid to the state and how often.
3. Policy/procedure for making bank deposits:
 - a. How often?
 - b. Time of day.
 - c. Who makes the deposit?
 - d. Fill out the deposit slips and record.
 - e. If allowed by your preceptor, accompany the person making the deposit at least one time.

INHOUSE CHARGE ACCOUNTS

1. Discuss with preceptor policy and procedure for individuals establishing credit with the pharmacy.
2. The student should discuss how often billing is done, the policies for collecting past due accounts, when and how long the pharmacy will 'carry' an account for a customer, and who handles this.

PERSONNEL MANAGEMENT

1. Who does the hiring and firing in the pharmacy?
2. Examine an application for employment and discuss procedures for checking the application.
3. Discuss discrimination and sexual harassment with the pharmacist. Does the pharmacy have a written policy in place?
4. Discuss the payment of 'unemployment' wages for an employee. Who can file for unemployment? How do you pay it and who decides how much is paid?

MONTHLY FINANCIAL STATEMENTS

1. If possible, review a monthly statement and ledger with your preceptor, including, but not limited to, the following (your preceptor may want to give you example data):
 - a. Policy and procedure for deriving the monthly statement
 - b. An analysis of the statement
 - c. Indicate the areas shown in the statement that should be investigated for possible trends, good or bad.
2. Make suggestions as to how the statement may be better organized or utilized and get your preceptor's comments on those suggestions.

THIRD PARTY BILLING

1. If possible, process and reconcile at least one reimbursement check from Medicaid, PAID, PCS, or other companies.
2. The student should consider the actual payment by the third party (i.e. how long until paid, effect on cash flow, etc.), an analysis of the pharmacy costs in processing the paperwork, and an opinion as to the pricing structure for reimbursement.

INDUSTRIAL BILLING

1. If possible during the course of the clerkship, the student should assist in the processing of industrial billings.
2. The following information is usually required to process industrial prescriptions and is obtained from the patient, the physician, or the employer:
 - a. Date of injury.
 - b. Place of employment.
 - c. Insurance company and address.
 - d. Claim number
3. The student should also be familiar with how these claims are handled on a weekend when prior authorization may not be available.

DAILY ORDERING

1. If possible, the student should do the merchandising order from the pharmacy, including:
 - a. Ordering from wholesaler.
 - b. Ordering direct.
 - c. OTC ordering.

2. The student should discuss with the preceptor how the following return merchandise situations are handled:
 - a. Incorrect merchandise delivery
 - b. Returns of out of date inventory to the wholesaler or manufacturer. How often is this done? How is the inventory collected/ screened for return?
3. The student should also be involved with reconciling invoices with order sheets.

MARKETING AND SERVICES

1. Discuss specialty products and services offered by the pharmacy. How did the pharmacist decide which products and services to offer? (i.e. Private label products, herbal products, Disease State Management services)
2. How does the pharmacy market and bill for the services discussed above? How did the pharmacist decide on the promotion and pricing strategy?
3. Does the pharmacy deliver? How do they provide this service? Do they charge for it? Why did they choose the delivery service they use?

COMPETENCY ASSESSMENT

In order to meet Guideline 14.5 and as outlined in Appendix C of the “*Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree*” adopted January 2006 by the Accreditation Council for Pharmacy Education, the College should provide a balanced series of required (the majority) and elective APPE that cumulatively provide sustained experiences of adequate intensity, duration, and breadth (in terms of patients and disease states that pharmacists are likely to encounter when providing care) to enable achievement of stated competencies as demonstrated by assessment of outcome expectations. Moreover, goals and objectives for each APPE should be mapped to the professional competencies to ensure that, when taken as a whole, each student’s experiential education will provide opportunity to achieve the stated competencies.

The Grading Rubric (Referred to as the UAMS Competency Assessment Form in your manual) was derived from our competency statements that reflects the minimum proficiency that a student should exhibit in order to graduate. The Grading Rubric was designed to be used by all APPE preceptors and students for both Midpoint and Final grades.

Each APPE will not provide the opportunity for the student to achieve all of the UAMS College of Pharmacy Competency statements. Therefore, using the Grading Rubric (UAMS Competency Assessment), during the Midpoint and Final evaluation the preceptor and student must assess which competencies the student met during the experience. If a competency was not covered please mark the “N/A” box on the online Grading Rubric.

The Grading Rubric is located under your login in the Education Management System (EMS) at <https://www.ems-webs.com/Arkansas/>. If you have difficulty with your username or password please contact Ellie Dickinson at 501-686-6494 or email her at eedickinson@uams.edu.

Once you login to EMS your student evaluations (Grading Rubric) is located under *Evaluations* on the left side of your home page. There you will be able to choose your student and complete the midpoint and final evaluations.

Please remember the **Midpoint and Final** evaluations must be completed by both **Preceptor and Student**. Preceptors and Students will be able to complete their evaluations online using their individual logins. Additionally, a printed form of the UAMS Competency Assessment is available in the manual as a reference to aid in the evaluation process. This form is for preceptor and student use only and is not required by the College of Pharmacy.

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

The graduate will provide patient-centered care in cooperation with patients, prescribers, and other members of an inter-professional health care team based upon sound pharmacotherapy principles and evidence.

1.1 Collect and evaluate data NA

<ul style="list-style-type: none"> Recognizes patient-specific information is needed to provide patient-centered care 	1
<ul style="list-style-type: none"> Recognizes types of patient information (medical and medication history, financial, social, cultural factors) Recognizes physical assessment data; Conducts physical assessment with supervision (BP, Accucheck, etc) Recognizes quality of life indicators (ADLs, ADEs) 	2
<ul style="list-style-type: none"> Identifies types of patient information from records or from patient (medical and medication history, financial, social, cultural factors) Identifies physical assessment data from records; Conducts physical assessment (BP, Accucheck, etc) and interprets result Identifies quality of life indicators (ADLs, ADEs) 	3
<ul style="list-style-type: none"> Obtains patient-specific information (medical and medication history, financial, social, cultural factors) from records or from patient Collects appropriate patient-specific physical assessment data to incorporate into assessment Collects patient-specific quality of life indicators Includes little or no extraneous information 	4
<ul style="list-style-type: none"> Performs all activities to the level outlined in Row 4 Proficiently AND Assesses patient's quality of life 	5

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

<ul style="list-style-type: none"> Recognizes the importance of patient-specific assessment to therapeutic recommendations 	1
<ul style="list-style-type: none"> Recognizes adverse and therapeutic effects of drug therapies Recognizes potential drug interactions Recognizes monitoring parameters indicative of disease control or adverse drug effects Recognizes barriers to health care (cultural, social, financial, literacy, etc) 	2
<ul style="list-style-type: none"> Identifies adverse and therapeutic effects of drug therapies Identifies potential drug interactions monitoring parameters indicative of disease control or adverse drug effects Identifies barriers to health care 	3
<ul style="list-style-type: none"> Identifies patient-specific signs/symptoms of disease control and any drug-related problems (adverse drug reactions, suboptimal therapy) Assesses level of disease control or drug-related problems based on patient-specific information to develop a problem list; Assessment addresses any barriers to optimal therapy Prioritizes problems related to self-care interventions Prioritizes problem list based on patient and health care provider collaborative relationships 	4
<ul style="list-style-type: none"> Performs all activities to the level outlined in Row 4 AND Anticipates changes in patient needs based on emerging differences in these variables 	5

1.3 Design and implement an individual patient-centered pharmacotherapy plan to maximize desired effects and minimize undesired effects. NA

<ul style="list-style-type: none"> Recognizes tertiary references Knows basic concepts of chemistry and biology Recognizes patient factors contribute to pharmacotherapy outcomes 	<ul style="list-style-type: none"> Recognizes general treatment goals Recognizes non-pharmacologic and lifestyle interventions Recognizes the factual content of steps necessary for proper medication/device use. Recognizes interventions to prevent non-adherence 	1
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COMPETENCY ASSESSMENT:	PRECEPTOR	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL	STUDENT	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL
<ul style="list-style-type: none"> Recognizes strengths/weaknesses of information sources Knows drug categories and indications and can identify primary treatment goals Identifies patient factors involved in pharmacotherapy 				<ul style="list-style-type: none"> Identifies the benefits of non-pharmacologic, lifestyle, and preventive care interventions Knows factual content of steps necessary for proper medication/device use. Lists the pros and cons of interventions useful in preventing or remedying non-adherence or drug related consequences. 		2
<ul style="list-style-type: none"> Selects appropriate tertiary references for situation. Knows drug categories and indications and can apply in simulated situation. Defines primary treatment goals and plan to monitor pharmacotherapy effectiveness. Assesses relevance of patient factors to select appropriate pharmacotherapy Assesses and evaluates desired outcome of non-pharmacologic, lifestyle, and preventive care interventions based on needs of individual patients 				<ul style="list-style-type: none"> Conducts patient education based on an understanding of patient needs/preferences and situation (cultural, social, economic, & education). Evaluates the current level of adherence to a treatment plan (pharmacologic and non-pharmacologic) and drug related consequences. Identifies interventions to prevent or remedy non-adherence or drug related consequences. 		3
<ul style="list-style-type: none"> Selects appropriate references (primary and tertiary) for application to individual patient situation. Selects/modifies/monitors medication therapy in <u>uncomplicated patients</u>. Defines individual patient treatment goals and plan to optimize pharmacotherapy outcomes. Recommends/modifies non-pharmacologic, lifestyle changes, and preventive care interventions based on individual needs of a patient Conducts individually tailored patient education based on an understanding of the patients needs/preferences and situation (cultural, social, economic, & education). Education includes assessment of patient understanding. Evaluates the current level of adherence to a treatment plan (pharmacologic and non-pharmacologic) and drug related consequences. Implements intervention individually tailored to the patient to prevent or remedy non-adherence or drug related consequences. 						4
<ul style="list-style-type: none"> Evaluates and selects appropriate references (primary and tertiary) for application to individual patient situation. Selects/modifies/monitors medication therapy in complicated patients. Defines individual patient treatment goals and plan to optimize pharmacotherapy outcomes. Recommends/modifies non-pharmacologic, lifestyle changes, and preventive care interventions based on individual needs of a patient with a plan to evaluate interventions Conducts individually tailored patient education based on an understanding of the patients needs/preferences and situation (cultural, social, economic, & education). Education includes verification of patient understanding. Evaluates the current level of adherence to a treatment plan (pharmacologic and non-pharmacologic) and drug related consequences. Implements intervention individually tailored to the patient to prevent or remedy non-adherence or drug related consequences and follows up with patient. 						5
1.4 Document patient care activities:						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Difficult to read secondary to significant grammar, punctuation, and misspelling mistakes 						1
<ul style="list-style-type: none"> Documentation is easy to read and understand 						5
<ul style="list-style-type: none"> Recognizes that written documentation occurs in the practice of pharmacy 						1
<ul style="list-style-type: none"> Terminology not written on the appropriate level for the patient or healthcare providers. (> 2 incidences) Records information but information is incomplete (missing major facts). Organization difficult to follow and includes extraneous information. Inappropriate length for area norms. 						2
<ul style="list-style-type: none"> Occasional use (1-2 incidences) of inappropriate terminology 'above' or 'below' the appropriate level for the patient or healthcare providers Records information accurately, but information is incomplete (missing minor facts). Minor organizational flaws (misplaced information) and extraneous information included – length inappropriate for area norms. 						3

COMPETENCY ASSESSMENT:	PRECEPTOR	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL	STUDENT	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL
<ul style="list-style-type: none"> Occasional use (1-2 incidences) of inappropriate terminology 'above' or 'below' the appropriate level for the patient or healthcare providers. Records information accurately, and completely (all required elements of area norm such as SOAP note). Organized and easy to follow with some extraneous information included – longer than area norms. 						4
<ul style="list-style-type: none"> Written on the appropriate level – patient or healthcare provider. Records information clearly, accurately, completely (all required elements of area norm such as SOAP note) and is well organized with no extraneous information included. 						5
Domain 2: Dispensing and Pharmacy Resource Management						
The graduate will manage and use resources of the health care system, in cooperation with patients, prescribers, and other health care providers 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						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Recognizes brand and generic drugs necessary to meet needs of prescription dispensing. 						1
<ul style="list-style-type: none"> Identifies brand and generic drugs. When preparing prescription for dispensing product is pharmacologically eloquent (labeling & packaging) Recognizes parts of a legal prescription. Sometimes verifies accuracy. 						2
<ul style="list-style-type: none"> Accurately transcribes verbal and written prescriptions. Dispenses prescription drugs in appropriate packaging. Usually verifies accuracy. 						3
<ul style="list-style-type: none"> Accurately transcribes verbal and written prescriptions. Dispenses and administers prescription drugs including basic compounding. (ex. such as that which can be done in any community or hospital pharmacy) Always verifies accuracy. 						4
Performs all activities to the level outlined in Row 4 proficiently AND verifies pertinent patient information is correct, with verification done for accuracy by use of a multiple check system.						5
2.2 Manage pharmacy resources to optimize pharmacotherapy outcomes						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Recognizes personnel involved in the delivery of pharmacotherapy to patients 						1
<ul style="list-style-type: none"> Lists personnel necessary to ensure delivery of pharmacotherapy Displays knowledge that other types of resources are used in the delivery of medication to patients 						2
<ul style="list-style-type: none"> Identifies personnel necessary to ensure delivery of pharmacotherapy to patients in light of regulatory constraints Describes simple distribution systems and other technology which are used in the delivery of pharmacotherapy to patients 						3
<ul style="list-style-type: none"> Demonstrates knowledge of management techniques related to ensuring appropriate personnel and fiscal resources necessary to deliver pharmacotherapy in light of regulatory constraints Explains complex distribution systems and other technology used in the delivery of pharmacotherapy to patients 						4
<ul style="list-style-type: none"> Optimizes pharmacotherapy delivery to the patient within the constraints of fiscal and human resources 						5
2.3 Educate patients and healthcare providers about requirements for effective therapy						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Recognizes basic communication principles and techniques. Unable to recognize basic components of patient counseling (Prime Questions, open vs. closed ended questions) 						1
<ul style="list-style-type: none"> Recognizes basic components of patient counseling (Prime Questions; open vs. closed ended questions). 						2

COMPETENCY ASSESSMENT:	PRECEPTOR	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL	STUDENT	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL
<ul style="list-style-type: none"> Identifies required patient counseling information (OBRA '90) Demonstrates knowledge of basic medication information with peers. 						
<ul style="list-style-type: none"> Incorporates basic components of patient counseling (Prime Questions; open vs. closed ended questions) Includes required patient counseling information (OBRA '90) Communicate knowledge of basic medication information and basic drug interactions with simulated patients and healthcare providers Develops rapport with patients 						3
<ul style="list-style-type: none"> Demonstrates positive interactions with patients and healthcare providers Incorporates components of patient counseling and maintains control of the interaction Includes required patient counseling information (OBRA '90) Communicates patient specific drug therapy recommendations to patients and healthcare providers Develops rapport with healthcare professionals and patients Communicates medication information to patients and healthcare professionals 						4
Performs all activities to the level outlined in Row 4 AND <ul style="list-style-type: none"> Communicates specific drug therapy recommendations (including purpose of medications, potential adverse drug reactions, and other relevant information) to patients and healthcare providers for complex patients with multiple meds/disease states Provides follow up with patients and healthcare providers to monitor therapeutic outcomes 						5
Domain 3: Health Improvement, Wellness, and Disease Prevention						
The graduate will promote improved health, wellness, and disease prevention.						
3.1 Demonstrate skills needed to participate in or provide preventive services						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Does not participate in screenings, health fairs or other public health/disease prevention activities 						1
<ul style="list-style-type: none"> Participates in technical aspects of screenings and health fairs (blood pressure, cholesterol, blood glucose) 						2
<ul style="list-style-type: none"> Participates in a variety of health and wellness screenings Identifies basic drug therapy and monitoring parameters 						3
<ul style="list-style-type: none"> Participates in a variety of health and wellness screenings and "brown-bag" events (applies basic drug therapy and monitoring parameters to specific patients). Provide public health education and disease prevention information 						4
<ul style="list-style-type: none"> Organizes and participates in a variety of health and wellness screenings and "brown-bag" events (applies basic drug therapy and monitoring parameters to specific patients). Demonstrates formal presentation skills on public health/disease prevention topics 						5
3.2 Apply research processes to inform pharmaceutical policy						<input type="checkbox"/> NA
<ul style="list-style-type: none"> Can perform a web-based search 						1
<ul style="list-style-type: none"> Identifies appropriate keywords for literature search Collects basic data from primary literature (population, methods, etc.) Recognizes managed care plans and institutional formularies have different drug availability 						2
<ul style="list-style-type: none"> Identifies appropriate keywords and databases for literature search Identifies efficacy endpoints from literature evaluation Identifies a variety of drug benefit designs regulated by third party administrators or institutional P&T committees 						3
<ul style="list-style-type: none"> Conducts a literature search and includes appropriate information for evaluation with minimal extraneous information 						4

COMPETENCY ASSESSMENT:	PRECEPTOR	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL	STUDENT	<input type="checkbox"/> MIDPOINT	<input type="checkbox"/> FINAL
<ul style="list-style-type: none"> • Evaluates drug literature for efficacy, safety, and cost factors • Describes how drug benefit design and process influence drug therapy • Describes how the institutional formulary management process affects drug therapy 						
Performs all activities to the level outlined in Row 4 and recommends alternative therapy based on plan specifications						5
1.5, 2.4, & 3.3 Demonstrate professional citizenship in the delivery of patient care, in the distribution of medications, and to promote wellness & prevent disease						<input type="checkbox"/> NA
<ul style="list-style-type: none"> • Inappropriately dressed, does not demonstrate respect for patients or other individuals. • Does not maintain confidentiality • Does not acknowledge limitations of therapeutic knowledge • Unconcerned with patient's welfare 			<ul style="list-style-type: none"> • Does not understand or comply with federal and state regulations concerning prescription competencies • Rarely puts forth noticeable effort, ignores criticism or argues when criticized • Does not behave ethically 			1
<ul style="list-style-type: none"> • Appropriately groomed and dressed, displays proper respect for all individuals • Maintains strict confidentiality • Acknowledges limitations in therapeutic knowledge • Places patient's welfare above personal self interest and is accountable and responsible for patient care 			<ul style="list-style-type: none"> • Understands and complies with all state and federal regulations concerning prescription competencies • Asks questions, independently seeks to increase knowledge, seeks constructive criticism • Behaves ethically in all aspects of practice 			5

**Advanced Pharmacy Practice Experience
Grade Computation Summary**

	Student Points	Possible Domain Points¹	% Score
Domain 1: Patient Care-Ensuring Appropriate Pharmacotherapy and Therapeutic Outcomes			
Domain 2: Dispensing and Pharmacy Resource Management			
Domain 3: Health Improvement, Wellness, and Disease Prevention			
Total			

¹ Represents the number of points available after subtracting the value of the domains marked “N/A”. The percent score is then calculated as student points/possible domain points

Grading Scale:

- A = 90 – 100%
- B = 80 – 89%
- C = 70 – 79%
- F = less than 70%

Student Name: _____ **Date:** _____

Community Pharmacy Practice Clerkship Problem Scenario Case Presentation

Student _____

Date _____

Preceptor _____

Site _____

- I. Preparation
 - 1. Scenario presentation 30% _____
 - Problems clearly stated
 - Risk to all parties assessed
 - Management procedures clearly stated
 - All information needed for necessary points
- II. Knowledge
 - 1. Pharmacy Law 20% _____
 - Understands each problem associated with scenario
 - Links problems with appropriate law
 - 2. Management Responsibilities 20% _____
 - Understand appropriate disciplinary action
 - Development of risk management procedures
 - Disciplinary actions justified
- III. Style of presentation 15% _____
 - Well organized
 - Diction
 - Personal appearance
 - Reliance on notes
 - Pertinent information
 - Voice projection
 - Distracting mannerisms
- IV. Response to questions 15% _____
 - Responses appropriate and straightforward

Total (100%) _____

Student: _____
Preceptor: _____

Date: _____
Site: _____

Management CE Evaluation Form

I. Introduction 10% _____

Were the objectives of the presentation clearly stated with an appropriate rationale for the objectives/hypothesis?
Were the objectives reasonable and attainable?

II. Drug therapy/monograph 30% _____

Did the student clearly and concisely describe:

- MOA
- Indications
- Adverse Events
- Side Effects
- Off label uses
- Counseling advice

III. Data Analysis\Statistics 20% _____

Were descriptive or inferential statistics used to examine the study?
Were these properly applied to the type of data?
Were the results of the significance testing interpreted correctly?
What influence does the number of patients analyzed have on the interpretation of the reported results?
Were the results statistically significant?

IV. Results 20% _____

Was an appropriate summary of results provided?
Was appropriate discussion of tables and figures given?
Did the student analyze the flaws of the study?
Were the results clinically meaningful?

V. Presentation 20% _____

Did the student present facts in a logical, organized sequence?
Was an interactive discussion facilitated?
Was appropriate use of medical terminology given?
Was the student able to answer questions accurately?

Total (out of 100%) _____

APPENDICES

1. **Request for Board of Pharmacy Approval of Continuing Education**
 - **Please mail or fax a copy of the completed CE form and participate count for the program to:**

Schwanda Flowers, Pharm.D.
UAMS –College of Pharmacy
Department of Experiential Education
4301 W. Markham Street / Mail Slot 522-1
Little Rock, AR 72205-7122
Phone 501-686-7920
Fax: 501-686-8104

2. **Site Specific Documents** (Reading lists, Schedules, Institutional Policies, Preceptor Info, Phone numbers, etc)

ARKANSAS STATE BOARD OF PHARMACY
101 EAST CAPITOL, Suite 218
LITTLE ROCK, AR 72201
Phone: (501) 682-0190 Fax: (501) 682-0195

FOR BOARD USE ONLY:

Drug Therapy or Patient Management: YES NO

Program ID # _____

REQUEST FOR BOARD OF PHARMACY APPROVAL OF CONTINUING EDUCATION

NOTE: THIS FORM MUST REACH THE BOARD OF PHARMACY OFFICE AT LEAST 15 DAYS BEFORE THE C.E. PROGRAM IS TO BE HELD. REQUESTS NOT RECEIVED WITHIN 15 DAYS OF THE DATE OF THE PROGRAM WILL BE RETURNED NON-APPROVED..

APPROVAL REQUESTED BY:

NAME: _____

PLEASE PRINT

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE #: _____ **FAX #:** _____

This is to affirm that the undersigned will be responsible for assuring that participants are present and that the program criteria is appropriate to meet the needs of the participating pharmacists.

****Signature of applicant for C.E. Program Approval:** _____

PROGRAM INFORMATION: (PLEASE LIMIT SPEAKERS CV'S OR RESUMES TO 5 PAGES OR LESS)

TITLE: _____ **PRESENTER/SPEAKER:** _____

LOCATION OF PROGRAM: _____

DATE PROGRAM TO BE PRESENTED: _____

PROGRAM BEGINS AT _____ **a.m./p.m. AND ENDS AT** _____ **a.m./p.m.**

DESCRIPTION OF PROGRAM CONTENT:

PROGRAM OBJECTIVES AND GOALS:

THE PROGRAM IS: LIVE AUDIO VISUAL CORRESPONDENCE

IF THE PROGRAM IS AN AUDIO VISUAL PRESENTATION PLEASE PROVIDE THE NAME OF THE LIVE MODERATOR: _____

DESCRIBE THE EVALUATION PROCESS:

SPECIFY HOW ACCREDITATION CERTIFICATION WILL BE PRESENTED TO PARTICIPANTS:

NUMBER OF HOURS REQUESTED:

1 HOUR 2 HOURS
 1 ½ HOURS OTHER _____

NUMBER OF HOURS APPROVED:

1 HOUR 2 HOURS
 1 ½ HOURS OTHER _____

APPROVED BY: _____ **DATE:** _____

EXECUTIVE DIRECTOR



THE INDIVIDUAL REQUESTING THE C.E. PROGRAM MUST ASSURE THAT EACH PARTICIPANT IS PRESENT AND COMPLETES THIS PORTION OF THE FORM.

NAME OF PARTICIPANT: _____ **AR LICENSE #** _____

PARTICIPANTS MUST KEEP A COPY OF THIS FORM FOR CE VERIFICATION