

Idaho State

UNIVERSITY

College of Pharmacy

Advanced Pharmacy Practice Experience (APPE) Manual

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Office of Experiential Education
College of Pharmacy
Idaho State University

Mission

Develop competent and caring pharmacists operating at the top of their scope of practice in a team-based health care environment.

Vision

Become a leader in innovative experiential education by fostering excellence in collaborative, diverse patient-centered care and continued promoting preceptor development.

Goal

Provide innovative, patient-centered, interprofessional experiential education opportunities longitudinally across the curriculum.

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Overview of APPE Curriculum

<i>APPE Type</i>	<i>Length of Rotation*</i>	<i>Additional Information</i>
Ambulatory Care	6 weeks	Core Rotation Must be completed at home base site
General Medicine	6 weeks	Core Rotation Must be completed at home base site
Advanced Institutional	6 weeks	Core Rotation
Advanced Community	6 weeks	Core Rotation
Patient-Care 1	6 weeks	Student request
Patient-Care 2	6 weeks	Student request
Elective / Patient-Care 3	6 weeks	Student request
Off	6 weeks	Student request

* Each rotation consists of 240 hours, totaling 1680 hours for entire APPE year.

APPE Rotation Dates

APPE Dates 2017-2018:

<i>APPE Block</i>	<i>Start Date</i>	<i>End Date</i>
1	May 15, 2017	June 23, 2017
2	June 26, 2017	August 4, 2017
3	August 7, 2017	September 15, 2017
4	September 18, 2017	October 27, 2017
5	October 30, 2017	December 8, 2017
6	December 25, 2017	February 8, 2018
7	February 5, 2018	March 16, 2018
8	March 19, 2018	April 27, 2018

Each 6-week block is worth 7 credits. Students will be registered with ISU in the following manner:

Summer Term: Blocks 1 and 2
 Fall Term: Blocks 3, 4, and 5
 Spring Term: Blocks 6, 7, and 8

Pharmacy Fair: Students will be excused from rotations on October 19-20, 2017 to attend Pharmacy Fair. Please refer to Pharmacy Fair information for attendance requirements and policies.

Course Description

The purpose of the College of Pharmacy (COP) at Idaho State University is to prepare a competent pharmacy practitioner with effective primary care practice skills, including abilities to communicate and educate others on the rational use of medications and related devices. Advanced Pharmacy Practice Experiences (APPEs) are a series of in-depth clinical practicums that build on the skills and knowledge obtained in the previous three years of the didactic pharmacy curriculum and reiterate the purpose of the COP.

The APPE program is 7 blocks of six-week pharmacy experiences to be completed in the fourth professional year. Student will accumulate a total of 1680 experiential hours during the fourth year. Under the close supervision of experienced, well-qualified preceptors, students will have the opportunity to serve a wide variety of patient populations in various practice settings.

APPEs will stress patient care services, clinical skills, problem solving, critical thinking, interprofessional collaboration, outcome-oriented decision, and professionalism making which allows the student to incorporate and apply the values, skills, knowledge, ethics, and attitudes taught throughout the curriculum. Experiences are of adequate intensity, duration and breadth to enable achievement of required competencies which are demonstrated and validated by assessment of outcome expectations.

Required Experiences

Each student is required to complete 7 blocks of six-week experiences which include 4 core, 2 patient-care (p-care) and one elective.

All students are required to complete the majority (4 blocks) of APPEs at their home base (Coeur d'Alene, Eastern Idaho, Twin Falls, Western Idaho, or Reno, NV). The required core experiences consist of General Medicine, Ambulatory Care, Advanced Institutional, and Advanced Community. The Accreditation Counsel for Pharmacy Education (ACPE) requires that all core APPEs must be completed in the United States.

APPE Scheduling and Relocation

The College guarantees that each student will be assigned the APPE hours and rotation experiences necessary to graduate. Requests for specific experiences will be considered, but approval cannot be guaranteed. Preceptor and site availability dictates scheduling of APPEs, and schedules may change at any time – even during the fourth professional year.

Personal expenses including travel, food, and lodging (including relocation) while enrolled in the Doctor of Pharmacy program are the student's responsibility.

Home Base Assignments – In the fall of the P3 year, students will request their home base site for P4 rotations. Students will rank the four sites in order of preference. Students may choose from Coeur d'Alene, Eastern Idaho, Twin Falls, and Reno, NV to complete at a minimum 4 rotations, 2 of which must be Ambulatory Care and General Medicine. Students already at the Anchorage delivery site will have Anchorage automatically as their home base site.

The majority of APPEs will be located within the assigned home base area. Four rotations must be completed at the student's home base with ambulatory care and general medicine consisting of two of the four. Rotations located outside of the home base location must receive permission from the OEE.

Student Requests – Students are given the opportunity to indicate a preference for their elective and patient-care experiences. The assignment for elective and p-care APPEs will be determined based on class rankings based on grade-point-averages; students with higher rankings will have first preference for their elective and p-care sites.

Additionally, students will be given the opportunity to request when their six-week break will be scheduled. Every attempt will be made to meet the student's preferred selections. However, due to unforeseeable conflicts getting preferred sites or six-week breaks is never guaranteed. If, for any reason, a student does not progress through the curriculum with their original incoming class, their APPE preferences will be considered after those of the current class. **Students are not to contact ISU-COP preceptors for APPE scheduling without the permission of the OEE.** Students are not to coordinate patient-care or elective experiences with ISU-COP preceptors. Students may request the site, but communication directly with the site or preceptor is prohibited.

Rotation Site Restrictions

To avoid potential conflicts of interest, students are not able to complete APPEs with a family member, current/former partner, friend, or colleagues. If a student / preceptor is assigned that has this conflict, they are to contact the OEE immediately. The OEE will facilitate the change.

APPEs at Employment Site: getting APPE hours at the place of the student's current employment or with their primary supervisor is not allowed. In the case of chain community pharmacies, a student may get APPE hours with the same company but at a different location / supervising pharmacist. However, the OEE strongly suggests that the student's APPE rotation be in a different environment than where they are currently employed (ie if student works in a chain pharmacy, then try a different chain or independent pharmacy) to enhance their educational experience. Students employed in institutional settings may do APPE rotations at the same facility, but in a different capacity that which they are employed (ie hospital intern can do General Medicine at the facility, but not Advanced Institutional).

Out-of-Base APPEs

Students are to complete at least 4 rotations at their home base site, 2 of which must be Ambulatory Care and Adult Medicine. The remaining rotations can be completed at another home base site, another area of the country, or a foreign nation. If a student wishes to rotate in another home base, they are limited to the availability of rotations left after the students originally assigned to that area have been placed.

If a student would like to complete an APPE at a facility that does not have an established affiliation agreement with the COP, the student must find a willing preceptor and the site must meet the College's requirements. Students are to inform the OEE with contact information for the site by December 1st of the P3 year. This is a student responsibility. All paperwork must be finalized prior the first week of February. The OEE will evaluate the site/preceptor to ensure that it meets the College's criteria. Once the site has been evaluated, screened, secured and paperwork completed, the student is will not be able to opt out of the rotation. If an affiliation agreement is unable to be processed during this 6-month time period, the student will not be able to complete APPEs at the site

Students may only have one APPE in a foreign country and must be a p-care or an elective experience. Core rotations must be completed in the United States. The hours accrued during APPEs conducted in foreign countries will not be able to be submitted to the boards of pharmacy, therefore the student will only earn 1,440 hours during the P4 year.

Rotation Schedules

In the fall of the P3 year, students will select p-care and elective rotations from a list provided by the OEE. The OEE assigns rotations to ensure academic requirements are met for graduation. The OEE will assign rotations following review of student site preferences, professional experiences, consideration of site characteristics, and availability. The OEE does not guarantee placement into requested sites or opportunities, but works diligently to meet the needs of both the student and preceptor. Once rotation schedules have been finalized, students are not to drop, change, or cancel rotations without prior discussion with the OEE. Extreme hardship must be shown in

these cases. In some cases, unforeseen circumstances may cause a student's rotation schedule to be changed. The OEE will facilitate the change for all parties. Students are not to contact possible preceptors under any circumstances, unless directed by the OEE.

All costs accrued, including on-boarding procedures, housing, and travel during the APPEs is the student's responsibility, unless otherwise specified.

Patient Care (P-Care) Experiences

- Acute Care
- Advanced Ambulatory Care *
- Advanced Institutional *
- Advanced Medicine *
- Anticoagulation
- Cardiology
- Critical Care
- Diabetes / Endocrine
- Drug Information
- Emergency Room / Operating Room
- Geriatrics
- HIV / Hepatitis C
- Home Health
- Hospice
- Infectious Disease
- Intensive Care
- Long-Term Care
- Mental Health
- Medication Therapy Management
- Neonatal Intensive Care
- Oncology
- Pediatrics
- Rehabilitation
- Surgery
- Transplant

*Can only be completed in addition to the required experience

Elective Experiences

- Any from the Patient-Care Experience list (above)
- Academic
- Community Pharmacy Management
- Compounding
- Consulting
- Institutional Pharmacy Management
- Managed Care
- Medication Safety
- Nuclear Pharmacy
- Research
- Regulatory
- State Board of Pharmacy

Methods of Learning

The preceptor will assess professional outcome abilities throughout the APPE by involving the student in specific activities and tasks. These may include:

1. Reviewing and properly documenting in patient charts
2. Assessing appropriateness of drug therapy by means of patient interviews, drug utilization evaluations, and identification of drug interactions or adverse effects
3. Performing selected aspects of physical assessment
4. Effectively communicating with patients and their caregivers
5. Effectively communicating with health care providers
6. Participating in daily inpatient medicine rounds
7. Discharge counseling
8. Learning issues assigned on rounds
9. Recommending changes in therapy based on medical literature and assuming responsibility for the outcome
10. Serving as a patient and health professional educator. This may include oral and/or written projects such as SOAP/PHARME notes, presentations, projects, journal clubs, clinical intervention logs, conferences, etc.

Student Responsibilities

1. Contact preceptors, 2 weeks in advance, to coordinate first-day arrival plans.
2. Since the primary objective of the experience is learning, the student needs to be proactive, not passive. This requires active participation and communication.
3. Actively participate in the professional and technical functions of the site, relative to the experience objectives.
4. Maintain a high standard of professional behavior at all times. Recognize that optimal learning experiences require mutual respect, courtesy, motivation, initiative, and commitment. Unprofessional actions could cause removal from the site and failure of the experience. Professional behavior includes but is not limited to:
 - a. Appropriate attire and appearance for the professional setting.
 - b. Effective verbal and written communications.
 - c. Compliance with all site policies and procedures.
 - d. Assignments are completed satisfactorily and on time.
 - e. Consistent and punctual attendance.
 - f. Use of cell phones or other electronic devices is prohibited except with the express permission of the preceptor.
5. Maintain patient confidentiality in compliance with HIPAA regulations.
 - a. All information concerning patients/customers and patient care is to remain confidential. Any documents or notes with patient-related information should be shredded per site guidelines or at the end of the experience.
6. The student's APPE schedule is at the discretion of the preceptor.
 - a. This may be nights, weekends, holidays, etc.
7. Must inform preceptor in advance of any expected absence or tardiness.
8. Develop and revise professional and personal goals for each experience according to the objectives of the particular APPE.
 - a. Professional and personal goals should be within the scope of the experience.
9. Complete the preceptor evaluation forms.
10. Satisfy the attendance requirements (240 hours) within the outlined time period.
11. Complete reflection and portfolio exercises after each rotation.

Preparation for APPEs

The student shall:

1. Submit all required paperwork as outlined by the OEE during the P3 year.

2. Contact the preceptor **at least two weeks prior** to the start of the next APPE. Please be courteous and do not wait until the last minute.
 - a. If the student does not receive an answer after 4 days, please call the preceptor. If the student is still unable to contact the preceptor, contact the OEE for assistance.
3. Introduce themselves and ask the following questions:
 - Where should I report and to whom?
 - What time should I arrive there?
 - What should I bring with me (books, references, etc.)?
 - What is the appropriate dress?
 - What are the parking options?
 - Is there a site-specific syllabus available for that experience?
4. Read and be familiar with the APPE general syllabus (available online) prior to beginning the experience.

Goals and Objectives for APPEs

Patient Care APPE Goals and Objectives:

During the course of an APPE involving patient care, the student pharmacist shall:

1. Develop, integrate, and apply knowledge and skills appropriately to situations encountered in the practice setting.
2. Accurately gather and organize all relevant subjective and objective information (e.g., comprehensive medication list, allergies, medical history, pertinent lab/physical assessment findings, and social determinants of health).
3. Evaluate drug therapy regimen for appropriateness in achieving optimal patient outcomes (considering safety, efficacy, adherence). Appropriately prioritize potential or current pharmacotherapy problems.
4. Develop or revise, implement, and evaluate a patient-centered care plan to optimize drug therapy and clinical outcome.
5. Demonstrating critical thinking and innovation during the problem-solving process. Skillfully evaluate information and design a solution that incorporates new ideas or methods, when appropriate.
6. Effectively participate in practice/operations management activities using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.
7. Effectively communicate information verbally, non-verbally, and in written form when interacting with an individual, group, or organization.
8. Effectively interact with other members of the health care team or organization.
9. Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.
10. Exhibits appropriate behavior and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.

Non-Patient Care APPE Goals and Objectives:

During the course of an APPE that does not involve patient care, the student pharmacist shall:

1. Develop, integrate, and apply knowledge and skills appropriately to situations encountered in the practice setting.
2. Demonstrating critical thinking and innovation during the problem-solving process. Skillfully evaluate information and design a solution that incorporates new ideas or methods, when appropriate.
3. Effectively participate in practice/operations management activities using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.
4. Effectively communicate information verbally, non-verbally, and in written form when interacting with an individual, group, or organization.
5. Effectively interact with other members of the health care team or organization.
6. Examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.
7. Exhibits appropriate behavior and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society

Preceptor Evaluations Completed by Students

Students are to complete a confidential online preceptor evaluation at the completion of each APPE. It is important to receive this feedback to ensure the quality of each experience and preceptor. Grades may be withheld from the Registrar's Office until the evaluation is complete. In order to maintain confidentiality, preceptors will receive an aggregated report with all rating and comments after the completion of the APPE year. Individual evaluations will not be made available to preceptors.

Reflection Activities

Students are to complete reflection questions after every APPE. Students will receive a reminder email and a link from the OEE 2 weeks prior to the end of the rotation. These reflections will populate into the student's portfolio where it will be read by and commented on by the student's faculty advisor. Failure to complete all reflection activities may inhibit the progression through the curriculum or graduation from the pharmacy program.

Assessment

The assessment program at the College of Pharmacy employs a variety of measures from students, faculty, alumni and preceptors. Throughout the curriculum, students participate in assessments that are embedded as required components of specific courses and practice experiences. **Participation in these assessment activities is required.** Participation in competency and other College of Pharmacy assessment activities is required for all Doctor of Pharmacy students. Each student must complete assessments, each semester for successful progression in the program. Failure to actively participate and complete assessments is considered unprofessional conduct.

Code of Ethics for Pharmacists

PREAMBLE

Pharmacists are health professionals who assist individuals in making the best use of medications. This Code, prepared and supported by pharmacists, is intended to state publicly the principles that form the fundamental basis of the roles and responsibilities of pharmacists. These principles, based on moral obligations and virtues, are established to guide pharmacists in relationships with patients, health professionals, and society.

I. A pharmacist respects the covenantal relationship between the patient and pharmacist.

Considering the patient-pharmacist relationship as a covenant means that a pharmacist has moral obligations in response to the gift of trust received from society. In return for this gift, a pharmacist promises to help individuals achieve optimum benefit from their medications, to be committed to their welfare, and to maintain their trust.

II. A pharmacist promotes the good of every patient in a caring, compassionate, and confidential manner.

A pharmacist places concern for the well-being of the patient at the center of professional practice. In doing so, a pharmacist considers needs stated by the patient as well as those defined by health science. A pharmacist is dedicated to protecting the dignity of the patient. With a caring attitude and a compassionate spirit, a pharmacist focuses on serving the patient in a private and confidential manner.

III. A pharmacist respects the autonomy and dignity of each patient.

A pharmacist promotes the right of self-determination and recognizes individual self-worth by encouraging patients to participate in decisions about their health. A pharmacist communicates with patients in terms that are understandable. In all cases, a pharmacist respects personal and cultural differences among patients.

IV. A pharmacist acts with honesty and integrity in professional relationships.

A pharmacist has a duty to tell the truth and to act with conviction of conscience. A pharmacist avoids discriminatory practices, behavior or work conditions that impair professional judgment, and actions that compromise dedication to the best interests of patients.

V. A pharmacist maintains professional competence.

A pharmacist has a duty to maintain knowledge and abilities as new medications, devices, and technologies become available and as health information advances.

VI. A pharmacist respects the values and abilities of colleagues and other health professionals.

When appropriate, a pharmacist asks for the consultation of colleagues or other health professionals or refers the patient. A pharmacist acknowledges that colleagues and other health professionals may differ in the beliefs and values they apply to the care of the patient.

VII. A pharmacist serves individual, community, and societal needs.

The primary obligation of a pharmacist is to individual patients. However, the obligations of a pharmacist may at times extend beyond the individual to the community and society. In these situations, the pharmacist recognizes the responsibilities that accompany these obligations and acts accordingly.

VIII. A pharmacist seeks justice in the distribution of health resources.

When health resources are allocated, a pharmacist is fair and equitable, balancing the needs of patients and society.

Adopted by the membership of the American Pharmacists Association October 27, 1994.

Student Academic Policies

Board of Pharmacy Registration

Students are required to be registered as a pharmacy extern within the state they plan on completing their APPEs. For example, if a student is assigned to Reno, Nevada for their APPE year, the student will need to contact the Nevada Board of Pharmacy and obtain an extern registration prior to starting their APPEs. In addition, if the student was to complete their APPEs in two states, Idaho and Nevada, the student will need to register with both the Idaho Board of Pharmacy and Nevada Board of Pharmacy as a pharmacy extern during all phases of the experiential program.

Background Checks

During the spring semester of the P3 year, each student must complete and pass a background check through Certified Background (Castlebranch) in order to progress to APPEs. ISU-COP does not guarantee pharmacy practice experiences for students who have a history of felony or misdemeanor convictions or charges.

Hours and Licensure

The ISU-COP curriculum and experiential program will provide 1980 extern hours (1680 APPE and 300 IPPE) upon graduation.

The state of Idaho requires a minimum of 1740 hours for licensure. Other states have different requirements. Any student planning to take the NAPLEX to obtain licensure in a state other than Idaho should verify hour requirements with that state's Board of Pharmacy before beginning APPEs.

Licensure is dependent upon when the student is able to get an appointment to take the North American Pharmacy Licensure Examination (NAPLEX) and Multistate Pharmacy Jurisprudence Examination (MPJE) at a testing center. An appointment cannot be made until the Idaho State Board of Pharmacy sends an authorization to test (ATT) letter. This letter is released after they receive the certification of hours from the COP. The certification of hours can be sent after the student has satisfactorily completed all APPE requirements.

The student must complete all requirements for graduation by May of the year following the original scheduled graduation date at the time the student was first enrolled in APPE. There are two reasons for this policy: (1) the student's knowledge base must be current when experiential training begins; (2) due to staffing limitations, the College does not have a great deal of flexibility in providing repeat APPEs.

Attendance

Mandatory attendance is required for all Advanced Pharmacy Practice Experiences (APPEs) for academic credit and extern hours to be submitted to the Idaho State Board of Pharmacy. Each APPE consist of six weeks and each week should consist of a minimum of 40 hours at the designated experience for a total of 240 hours except in weeks where holidays recognized by the facility are scheduled or when students are authorized to attend pharmacy meetings.

Since patient care is continuous, some off-campus activities are conducted outside the traditional workday. For example, a student may have responsibilities in the morning, late at night, or on weekends. The preceptors determine what their needs will be for the students to accomplish the objectives of the APPE. Absences may be excused in the event of unforeseen emergencies, unusual circumstances, illnesses, or severe weather. The student is expected to contact the preceptor and/or the OEE in these circumstances. Any foreseeable absences must be pre-approved by the principle preceptor. All absences are expected to be made up as directed by the preceptor. Continual unexcused absences or tardiness are grounds for a NP of the experience. The only designated holiday during the APPE year is during the Christmas break between blocks 5 and 6. Students will also be released from APPEs for Pharmacy Fair in order for them to attend the event.

Concurrent employment during the experiential training period is **discouraged**. If necessary, work schedules must be adjusted to accommodate APPE requirements and will not be considered a legitimate reason for excusing a student from the practice site. The student is expected to adhere to the hours set by the preceptor. Work cannot interfere with practice site responsibilities.

Unplanned Absences: Absences that occur as a result of illness, dependent care needs, death of an immediate family member or other unpredictable event. Documentation is required for absences lasting over 2 days. In the case of illness, a doctor's note with a release to return to work is necessary. Students may be asked to bring other types of documentation depending on the circumstance.

Jury Duty: If a summons is received, the OEE recommends that the students first postpone the summons as indicated per the court. If necessary, the OEE will provide a letter on behalf of the student. An absence for jury duty needs to be documented via email to the OEE and the preceptor prior to the duty date.

Absence for Professional Meeting Attendance: Professional meetings are considered educational experiences. The student must receive permission from the preceptor and in as far in advance as possible. Preceptor approval is mandatory and assignments or make up time is at the discretion of the preceptor.

Absence for Post-Graduate Program Interviews: Interviews (i.e. residency, fellowship, graduate school) are considered educational experiences. The student must receive permission from the preceptor and in as far in advance as possible. Preceptor approval is mandatory and assignments or make up time is at the discretion of the preceptor.

Inclement Weather: If the practice site is open for business, students are expected to participate regardless if the Idaho State University campus is closed due to inclement weather. Campus closures should have no impact on rotations other than rotations that occur on an ISU campus. Therefore, students are expected to resume standard responsibilities as scheduled. If, however your site closes due to the weather, the student would not be expected to participate on the day(s) the practice site is closed. Under extreme weather conditions, each individual student is expected to maintain close communication with their individual primary preceptor regarding individual site closures, safety concerns or transportation difficulties. If the student is unable to make it to their practice site due to transportation difficulties or safety concerns, this would be considered an excused absence which would need to be made up according to the attendance policy outlined above. The student is strongly encouraged to take all necessary safety precautions when driving/transporting themselves to and from their practice site, especially during inclement weather.

Confidentiality

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) is a federal law passed by Congress in 1996. On April 14, 2003, a major component of HIPAA that deals with pharmacists and other health care providers became effective. These privacy regulations define appropriate and inappropriate disclosures of health information and define the process used to ensure patients' rights.

HIPAA was intended to ensure patient confidentiality while maintaining the ability of the health care system to share patient information, to improve communication between health care providers and to improve patient care.

Students enrolled in the Doctor of Pharmacy program are involved in patient care activities throughout the curriculum. PharmD students receive training to ensure practice sites that they understand the HIPAA requirements.

Students may not, under any circumstances, place identifiable electronic protected health information on their laptops/jump drives or send this information via any email program. Violation of HIPAA during IPPE or APPE may result in repercussions ranging from grade reduction to potential dismissal from the program.

FERPA

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

Please refer the Student Handbook for further information on FERPA and HIPAA.

Rules of the Idaho State Board of Pharmacy on Unprofessional Conduct

500. UNPROFESSIONAL CONDUCT.

The following acts or practices by a pharmacist, student pharmacist, or technician are declared to be specifically, but not by way of limitation, unprofessional conduct and conduct contrary to the public interest.

01. **Unethical Conduct.** Conduct in the practice of pharmacy or in the operation of a pharmacy that may reduce the public confidence in the ability and integrity of the profession of pharmacy or endangers the public health, safety, and welfare. A violation of this section includes committing fraud, misrepresentation, negligence, concealment, or being involved in dishonest dealings, price fixing, or breaching the public trust with respect to the practice of pharmacy.
02. **Lack of Fitness.** A lack of fitness for professional practice due to incompetency, personal habits, drug or alcohol dependence, physical or mental illness, or for any other cause that endangers public health, safety, or welfare.
03. **On-Duty Intoxication or Impairment.** Intoxication, impairment, or consumption of alcohol or drugs while on duty, including break periods after which the individual is expected to return to work, or prior to reporting to work.
04. **Diversion of Drug Products and Devices.** Supplying or diverting drugs, biologicals, and other medicines, substances, or devices legally sold in pharmacies that allows the circumvention of laws pertaining to the legal sale of these articles.
05. **Unlawful Possession or Use of Drugs.** Possessing or using a controlled substance without a lawful prescription drug order. A failed drug test creates a rebuttable presumption of a violation of this rule.
06. **Prescription Drug Order Noncompliance.** Failing to follow the instructions of the person writing, making, or ordering a prescription as to its refills, contents, or labeling except as provided in these rules.
07. **Failure to Confer.** Failure to confer with the prescriber when necessary or appropriate or filling a prescription if necessary components of the prescription drug order are missing or questionable.
08. **Excessive Provision of Controlled Substances.** Providing a clearly excessive amount of controlled substances. Evidentiary factors of a clearly excessive amount include, but are not limited to, the amount of controlled substances furnished and previous ordering patterns (including size and frequency of orders).
09. **Failure to Counsel or Offer Counseling.** Failing to counsel or offer counseling, unless specifically exempted or refused. The failure to retain appropriate documentation evidencing compliance with patient counseling requirements creates a rebuttable presumption of a violation of this rule.
10. **Substandard, Misbranded, or Adulterated Products.** Manufacturing, compounding, delivering, dispensing, or permitting to be manufactured, compounded, delivered, or dispensed substandard, misbranded, or adulterated drugs or preparations or those made using secret formulas.
11. **Prescriber Incentives.** Allowing a commission or rebate to be paid, or personally paying a commission or rebate, to a person writing, making, or otherwise ordering a prescription.
12. **Exclusive Arrangements.** Participation in a plan or agreement that compromises the quality or extent of professional services or limits access to provider facilities at the expense of public health or welfare.
13. **Failure to Report.** Failing to report to the Board any violation of statutes or rules pertaining to the practice of pharmacy or any act that endangers the health, safety, or welfare of patients or the public.

14. Failure to Follow Board Order. Failure to follow an order of the Board.

Immunizations

Students are required to have current immunization records on file with Certified Background Document Tracker.

Required immunizations include:

1. Current negative result for PPD (must be valid until May of expected graduation year)
2. Completed MMR series
3. Completed varicella vaccine or proof of immunity by blood titer
 - a. History of chicken pox is not acceptable by several institutions.
4. Current Tdap immunization
5. Completed hepatitis series
6. Influenza is required annually and should be obtained again in October / November of the P4 year.

To be in compliance with these requirements, students must submit a completed Immunization Requirement Form and upload the document to Certified Background using Document Tracker. The student is encouraged to keep a copy of the original records just in case if an APPE site requires a hard copy of the immunization records.

Students not in compliance with all Health Policies will be in violation of the Academic Standards of the College and may not participate in APPEs until compliance is met. Students are responsible for all arrangements and costs associated with health policies.

Drug Tests

Students are required to complete a drug test through Certified Background 6 weeks prior to the first rotation date. Scheduling through Certified Background will give you instructions on locations available. This test is at the expense of the students and failure to complete will result in the failure to begin APPEs.

Special Requirements for Rotations

Rotation sites may have additional requirements such as additional training (online or in person), fingerprinting, etc. Students will be notified in advance of these requirements so these can be completed prior to the start of the rotation. These costs may be at the student's expense. Failure to complete the requirements would inhibit the ability of the student to start the rotation and may result in a NP or reschedule of the rotation at later date.

CPR Training

CPR for Healthcare Providers must be current at the beginning of the APPE year and not expire until May of the expected graduation year. Proof of certification must be uploaded into Certified Background Document Tracker. Most students renew their certification the Fall semester prior to the start of APPEs.

Insurance

Liability Insurance

The College of Pharmacy will maintain malpractice insurance for all currently enrolled students. A minimum of a professional limit of one million dollars per incident, and a personal limit of one million dollars is required.

Workman's Compensation Insurance

ISU provides an approved Workers' Compensation program without cost to enrolled students who, as part of their instruction, are enrolled in a class or program for academic credit and for which the student, without receiving pay, works for or provides services to a third party, private or governmental entity. This program applies to any student completing the requirements of PHAR 9911/9912 off campus, those completing the clinical shadowing component of PHAR 9913/9914, as well as those P4 students enrolled in APPE rotations off campus. Any student

injured during the experiential portion of the curriculum should contact the Office of the Associate Dean for further guidance. General instructions may be found at: <http://www.isu.edu/ucounsel/workerscomp.shtml>

Health Insurance

Students are required to have health care insurance while enrolled.

Safety Occurrence Reporting

Students are required to notify the OEE immediately for all safety occurrences. This includes, but is not limited to, needle sticks, exposure to bodily fluids, tuberculosis exposure or exposure to a radioactive substance or other injuries that occurred at a rotation site. The OEE will contact the Associate Dean of Students. The student will need to fill out the Needlestick Bloodborne Pathogen Report and submit it to the OEE <http://pharmacy.isu.edu/live/current/training.php>.

Exposure Prevention and Infection Control Guidelines

As pharmacists become more involved in hands-on patient-centered care, there is a very small yet finite risk of contracting an infectious disease via a needle stick, mucous membrane contact, or administration of CPR. In order to minimize this risk, all students are required to comply with the following measures designed to minimize transmission of infectious diseases:

Universal Precautions

All pharmacy students must wash their hands before touching patients or preparing any sterile product. Hand washing should also be performed after touching patients, wiping one's nose or mouth, contact with any other body substances, and using the bathroom.

Personal Barriers

1. **Gloves** - Clean gloves should be put on immediately prior to contact with a patient's mucous membranes or open skin, before entry into a patient's room where glove use is required, and preceding any finger sticks or administration of vaccines. Use of gloves is also recommended during the preparation of sterile products. Gloves are highly recommended during routine preparation of chemotherapy agents.
2. **Gowns/lab coats** - Gowns or lab coats should be used to cover areas of skin or clothing which may be likely to become soiled with body fluids during patient care, and are also recommended during routine preparation of chemotherapy agents and use of caustic chemicals.
3. **Facial barriers** - Masks, goggles, and face shields should be worn when splashing or splattering of body fluids into nose, mouth or eyes could occur. Masks must be put on prior to entry into a room where mask use is required.
4. **Isolation signs** - Isolation signs should be respected. This requires mask, glove, and/or gown, according to instructions on the door of the patient's room, before entering. Students should ask their preceptors for guidance regarding when they should enter isolation rooms. Students handling any materials that have been in contact with body fluids must dispose of all materials in a marked biohazard bag. A solution of household bleach diluted 1:10 should be used for disinfecting surfaces that have come into contact with body fluids.

Management of Sharps

Most pharmacists' involvement with needles occurs in the preparation of sterile products. In this case there is little danger of serious infectious complications resulting from needle puncture to a person preparing these products. Pharmacists may be involved with potentially infectious contaminated sharps during vaccine administration or during a code situation. The following precautions should always be observed:

1. Discard all sharps into correctly labeled rigid plastic containers. Be certain that no needles protrude to present a hazard for others. Needles and other sharps should never be placed in a wastebasket and never left lying on a workplace surface or at a patient's bedside.
2. Needles should not be recapped unless it is unavoidable. If recapping is unavoidable, the needles should be laid on a flat surface and the cap should be "scooped" onto the needle, using only one hand, without touching the needle cap. Once the cap is covering the needle, it can be carefully tightened and should then be discarded into a sharps container as soon as possible. Any syringe not in use should always be capped.

Exposure Management

Students should discuss potential exposure to any infectious agents with the supervisor as soon as possible. If the supervisor feels the exposure was significant or if the supervisor is not comfortable making a judgment as to whether the exposure was real/significant, the supervisor should contact Student Health at (208) 282-2330.

If the exposure was significant, the following steps should be taken by the student:

1. Immediately remove gloves, clothing soaked with blood or other high-risk body fluids, and place in a biohazard container.
2. Wash any potentially exposed site with soap and water for 5 minutes, unless material has entered the eyes. In this case, the eyes should be flushed constantly for 15 minutes with water or normal saline.
3. If there was a needle stick, milk the affected area under running water to draw out as much blood as possible.
4. Report the injury to a supervisor.
5. If the needle stick occurred from a sharp immediately after vaccinating or drawing blood from a patient, do not let that person leave until you have obtained their name and contact information.
6. Contact Student Health at (208) 282-2330 immediately. If Student Health is closed or unavailable, the student needs to go to the nearest urgent care clinic or emergency room.
7. Follow the CDC/NIOSH guidelines for management/post-exposure prophylaxis, accessible via: http://www.nccc.ucsf.edu/hiv_clinical_resources/pep_guidelines/
This site has links to all current guidelines, information, and hotlines.
8. Complete the Needlestick/Bloodborne Pathogen Report Form, available on the College's website under "Current Students" then "PharmD Students."
9. Remember that if prophylactic medications are recommended to treat your exposure the optimum time to start is within 1-2 hours after the exposure.

Cost of Treatment

Should an infectious exposure or other medical problem arise, the cost of treatment is the responsibility of the student. The College of Pharmacy does not provide insurance coverage to the student for medical costs associated with exposures. If exposure does occur, the student is urged to seek medical attention immediately and to notify the Experiential Director so that concerns about payment do not act as a barrier to seeking emergency treatment.

Professionalism

Students in the College of Pharmacy represent the College as well as the profession of pharmacy. You are expected to act in a professional manner while in class, in practice settings, and on campus. Unprofessional behavior may result in students being placed on probation or expelled from the program. Professional behavior includes dress, speech, and actions. Disruptive or inappropriate behavior will not be tolerated. Profanity is strictly forbidden. Consistent with the University policy on disruptive behavior, preceptors and instructors may impose sanctions in cases of disruptive behavior.

Academic integrity is expected of all individuals and every student will be held to these standards. Dishonesty will not be tolerated. Students are expected to conduct themselves honestly in all academic and professional

activities. Dishonest conduct includes but is not limited to cheating, use of technology to view or capture exam material and plagiarism. Any form of dishonest conduct is punishable. Students should review the policies and procedures on academic dishonesty defined in the Idaho State University Student Handbook (Section II.A.3) and in the Faculty Staff Handbook (Part 6, Section IX.A) and in the College of Pharmacy Handbook.

Professionals are involved in their own education. Students are expected to be present during scheduled meeting times and to actively participate in those activities. Preceptors have the right to enforce attendance requirements. Students are encouraged to ask questions and actively participate. If students feel a need to use personal computers as learning aids during their APPEs, they are welcome to do so as long as their preceptor approves. Personal computers are not to be used to play games, “web surf”, send emails, send text messages or for other non APPE-related activities. Use of computers for other than APPE-related activities during this time is considered unprofessional conduct and may be referred for action to the Student Conduct Committee.

Cellular phones can interfere with discussion and lecture. Unless approved by the preceptor, cellular phones shall not be brought on site.

Professional Conduct Policy

Developed by the Student Senate in January 2005 - April 2006; Finalized April 7th, 2006. (Passed by Faculty on 3/7/06)

The College of Pharmacy Student Senate adopted the Professional Conduct Policy. This policy does not deny students or faculty their rights as described in the Idaho State University Student Handbook or prevent the Progressions Committee from taking action independently of this student group.

A. Code of Conduct

The Idaho State University College of Pharmacy strives to promote professionalism among its students as it fosters an environment committed to excellence in education and the practice of pharmacy. Pharmacy practice is a profession that requires adherence to impeccable ethical standards. Students represent the College as well as the profession and are expected to act with honor and integrity at all times, including times in the classroom, in pharmacy practice settings, and in the community. Students are expected to demonstrate respect towards faculty members and their fellow students, thereby creating an environment conducive to learning. Any form of academic or professional misconduct violates the standards expected of students. Disruptive or inappropriate behavior of any type is not acceptable.

Students will be held accountable for standards regarding professional and ethical behavior specified in the Idaho State University College of Pharmacy Student Handbook and the Idaho State University Student Handbook, which are updated regularly. Any violation of the Idaho State University and/or Idaho State University College of Pharmacy Code of Conduct or APhA Code of Ethics will result in the offending student appearing before the Student Conduct Committee for possible resolution. When deemed necessary, the “offending” student may then be referred to the Student Affairs Committee for further resolution.

The Idaho State University College of Pharmacy encourages students to be service-oriented, actively involved in student organizations, such as senate or class leadership, and to participate in service opportunities within the community, such as health fairs. Professional meeting attendance is also promoted on a local, state and national level.

B. Qualities that constitute professional and ethical behavior, students should:

- Be consistent
- Be prepared
- Be punctual
- Be respectful to students, instructors, staff, patients and other professionals
- Embrace teamwork

- Have good interpersonal skills
- Respect the contribution of professionalism to patient care
- Be receptive to feedback
- Promote trust
- Be good role models
- Maintain a professional appearance
- Be accountable
- Be open minded and flexible
- Be empathetic towards others
- Be culturally sensitive

C. Student Conduct Board

The Student Conduct Board will consist of nine members, including two nominated members of each class (one from Pocatello and one from Meridian) and the two student senate co-presidents. When a member representing a class is not chosen, the president of that class at their respective campus location will serve as the committee member. If, for any reason, a member of the Student Conduct Committee is unable to attend, he/she may send his/her class president in place of a nominated member or the vice president in place of the class president as a representative for that class. If any member of the committee is involved or associated with the situation being reviewed by the Committee, the person will be required to step down temporarily and his/her class president or vice president will take his/her place.

D. Referral Process

Students and/or faculty may submit a written statement to a member of the Student Conduct Committee detailing their concern about a particular student or situation. The Student Conduct Committee will review all written statements submitted to determine the particular action that should be taken regarding that particular student. The Student Conduct Committee may require students to come before the committee to discuss possible resolutions. If students do not comply with the recommendations put forth by the Student Conduct Committee, the student will then be sent to the Student Affairs Committee for further evaluation. All reviews, decisions, and actions made by the Student Conduct Committee will be documented in writing and kept by the Student Senate.

Misconduct

Academic Integrity

Academic dishonesty is unacceptable and will not be tolerated. Academic dishonesty includes, but is not limited to, cheating and plagiarism. Cheating is defined as using or attempting to use materials, information, or study aids that are not permitted by the instructor in exams or other academic work. Specific examples of both cheating and plagiarism may be found in the ISU Student Handbook. Dishonest acts undermine the College of Pharmacy's educational mission and the students' personal and intellectual growth. Pharmacy students are expected to bear individual responsibility for their work, to learn the rules and definitions that underlie the practice of academic integrity, and to uphold its ideals. Ignorance of the rules is not an acceptable excuse for disobeying them. Any student who attempts to compromise the academic process will be sanctioned. Students who are aware of cheating should report this activity immediately to the instructor or exam proctor. Academic sanctions are at the discretion of the instructor(s) and may range from an F on the assignment to an F in the course. Reports of suspected academic dishonesty or unprofessional behavior should be sent to the Office of the Associate Dean or to any member of the College of Pharmacy's Student Conduct Board.

Students should review the policies and procedures on misconduct, academic dishonesty, and appeals as defined in the Idaho State University Student Handbook (www.isu.edu).

Cheating

Cheating is defined as using or attempting to use materials, information, or study aids that are not permitted by the instructor in examinations or other academic work.

Examples of cheating include, but are not limited to:

1. Obtaining, providing, or using unauthorized materials for an examination or assignment, whether verbally, visually, electronically, or by notes, books, or other means.
2. Acquiring examinations or other course materials, possessing them, or providing them to others without permission of the instructor. This includes providing any information about an examination in advance of the examination.
3. Taking an examination for another person or arranging for someone else to take an examination in one's place.
4. Submitting the same work or substantial portions of the same work in two different classes without prior approval of the instructor.
5. Fabricating information for any report or other academic exercise without permission of the instructor.

Plagiarism

Plagiarism is defined as representing another person's words, ideas, data, or work as one's own.

Plagiarism includes, but is not limited to, the exact duplication of another's work and the incorporation of a substantial or essential portion thereof without appropriate citation. Other examples of plagiarism are the acts of appropriating creative works or substantial portions thereof in such fields as art, music, and technology and presenting them as one's own.

The guiding principle is that all work submitted must properly credit sources of information. In written work, direct quotations, statements that are paraphrased, summaries of the work of another, and other information that is not considered common knowledge must be cited or acknowledged. Quotation marks or a proper form of identification shall be used to indicate direct quotations.

As long as a student adequately acknowledges sources of information, plagiarism is not present. However, students should be aware that most instructors require certain forms of acknowledgment or references and may evaluate a project on the basis of form, penalizing the student in the grade assigned if citation of sources is improper.

It is not appropriate to take an entire sentence from a resource and present it as your own writing, even if it is cited correctly. For example, if reference A states that "Hypertension is the primary risk factor for the development of diabetic nephropathy." You can effectively reword this as: "The major cause of diabetic nephropathy has been identified as high blood pressure." Simply changing one or two words is not sufficient; the concept must be expressed in your own terms. If you reworded the original statement as "High blood pressure is the primary risk factor for the development of diabetic nephropathy." this would be considered plagiarism.

Self-Plagiarism: Please note, recycling a previously used presentation, journal club, or other assignment for a subsequent rotation and presenting it as new work is considered self-plagiarism. Such acts will be treated as academic dishonesty.

Dress Code

Students are in a working environment where patients or any other healthcare professional will see them. Students are representing the College of Pharmacy and must dress appropriately.

Professional dress means:

- White coat and name badge

- Slacks that fit appropriately, collared shirt and tie for men
- Dress pants (that fit appropriately) or knee-length skirt with a conservative blouse/shirt for women
- Hair (facial hair included) is to be neat, clean, and appropriately maintained
- Appropriate personal hygiene must be maintained at all times
- Artificial nails or gel manicures may have to be removed due to infection control policies of the rotation site

Un-professional dress includes but is not limited to:

- Jeans
- Bare midriffs, tanks, low-cut tops
- Undergarments showing
- Skirts shorter than knee-length
- “Fivefinger” shoes, flip-flops or other open-toed shoes
- Excessive or inappropriate piercings

It is up to each individual APPE preceptor to define appropriate attire. It is the student’s responsibility to ensure that they are dressed appropriately each day of APPEs. Preceptors will have the authority to send students home who are not dressed appropriately; students may return when they are dressed appropriately. Students who continue to violate a preceptor site dress code will be referred to the Experiential Education Office for disciplinary action.

Name Badges

The College provides name badges that students must wear at all times while participating in APPEs. Replacement nametags (approx. \$10) may be ordered by contacting the Office of the Associate Dean in Pocatello.

Personal Sickness

Students should not come to the practicum site if they are experiencing:

- Productive/uncontrollable cough or sneezing
- Fever above 100° F
- Unidentified rash
- Excessive nasal discharge
- Vomiting or diarrhea

The student should contact the preceptor before the start of the experience day. Some preceptors may require make-up time for students missing IPPE or APPE time due to illness.

The preceptor may recommend that a student be granted medical or personal leave in instances of psychological illness, undue personal stress (death in the family, etc.), or substance abuse. The student and preceptor will agree upon a course for making up this lost time. In addition, the OEE will need to be notified of any medical or personal leave of a student from an APPE site.

Pregnancy

Students who are pregnant or suspect pregnancy, or are planning on becoming pregnant are encouraged to contact the OEE immediately to ensure that the APPE work environment is compatible with pregnancy. The Experiential Education Office should be contacted immediately if an APPE needs to be rescheduled due to pregnancy.

Substance Abuse and Drug Testing Policies

Student use of illegal drugs, misuse of controlled substances, and/or alcohol abuse is a matter of concern to the Idaho State University College of Pharmacy. The College of Pharmacy endeavors to protect and assist students by providing reliable information about the hazards of drugs and alcohol and, where possible, assist students in receiving substance abuse treatment. The College of Pharmacy also recognizes its obligation to patient safety and the integrity of precepted student activities. The College of Pharmacy has a specific policy related to substance abuse by students.

The objectives of these policies are to:

1. Promote an environment free of illegal drug use;
2. Stress moderation, safety and individual accountability by those who choose to drink alcohol;
3. Provide an atmosphere free of coercion for those who choose not to drink alcohol;
4. Provide information and education on the health risks associated with drug and alcohol use and/or abuse;
5. Provide information and referral for confidential guidance and counseling for those with special needs related to substance abuse; and
6. Protect patient safety and the integrity of educational practice settings.

Substance Abuse Policy

The unlawful manufacture, distribution, dispensing, possession, or use of drugs is prohibited at Idaho State University College of Pharmacy. All students must report to work, class, or any other official College activity unimpaired and remain in a condition fit to perform. Reporting to work, class or other official College activity or working while impaired by drugs or alcohol is a violation of this policy and shall subject the student to the appropriate disciplinary and/or rehabilitative action.

As a condition of enrollment, every student must abide by the terms of this policy and notify the Associate Dean of any drug- or alcohol-related hospitalization, arrest, or conviction. If during enrollment a drug- or alcohol-related hospitalization, arrest or conviction should occur, notice is to be given no later than five days after such event; this includes, but is not limited to DUI arrests and convictions.

The College of Pharmacy shall provide students with an opportunity to address substance abuse or dependence problems confidentially during any phase of their academic experience. The guiding philosophies of the following policy are first to protect patients from potential harm caused by impaired students in clinical practice experiences, and second to encourage the discovery and recovery of substance impaired or addicted students.

When reasonable information is available of a potential substance abuse problem by a student, the student will be required to obtain a clinical assessment. This may be done with the assistance of the Pharmacist Recovery Network (PRN). Students refusing assessment may be dismissed from the College.

Students determined to have substance abuse problems may be required to enter into an agreement with the PRN, which the College of Pharmacy considers the primary group empowered to assist the College of Pharmacy in serving pharmacy students' needs for substance abuse treatment monitoring. Students entering into and maintaining an agreement with the PRN may continue their pharmacy education, with permission of the Associate Dean. Students with substance abuse problems and not under PRN contract will be dismissed from the College of Pharmacy.

Drug Testing Policy

This policy was established to comply with emerging accreditation standards and to promote the highest level of integrity in the health professions. The rationale for conducting drug testing is as follows:

1. To protect the safety of patients at settings where Idaho State University students perform educational experiences;
2. To ascertain the ability of pharmacy students to eventually become licensed as pharmacists;
3. To meet the requirements of ACPE accreditation standards; and

4. To meet the requirements of the affiliation agreements between and minimize the liability of the College and its experiential education practice sites by diminishing the risk that may be presented by persons under the influence of illegal drugs.

The College may require random mandatory drug testing of students as delineated in our agreement with CertifiedBackground.com. Additionally, pharmacy students may be required to undergo screening for drug and/or alcohol if they exhibit behaviors while in class, completing experiential requirements or participating in pharmacy-related trips or activities that raise suspicion of substance abuse. These behaviors include, but are not limited to:

- Aberrant or unusual behavior;
- A pattern of abnormal or erratic behavior;
- Reliable information from independent sources;
- Hospitalization, arrest or conviction for a drug- or alcohol-related incident;
- Being identified as the subject of a criminal investigation regarding substances of abuse; and/or
- Appearance of impairment at school, while engaged in College of Pharmacy activities on- or off-campus or in a clinical setting.

Pharmacy students may undergo multiple drug and/or alcohol screenings during their program of study. Standards of confidentiality will apply to all phases of the process. If a student does not consent to participate, declines the request for a drug test or Breathalyzer screen, or once evaluated does not fully comply with the terms of the student treatment plan/contract, the student may be dismissed from the program.

Students may be required to provide the results of drug tests to any Doctor of Pharmacy experiential education site (IPPE or APPE) participating in the academic training of that Doctor of Pharmacy student. Such requests will be made per the terms of the affiliation agreement and policies of the facility. The experiential education site has the authority to make a final determination whether the student may participate or continue to participate in that setting. Such a determination will be independent from any determination by the College or program regarding a student's admission or progression in the clinical sequence. Positive drug screens may delay a student's graduation.

Testing Protocol

Samples are transferred with chain of custody forms and analyzed at Substance Abuse and Mental Health Services Administration (SAMHSA) certified laboratories by qualified technicians in nationally certified laboratories. A Medical Review Officer (MRO) contracted by CertifiedBackground.com consults confidentially with any student whose screening test is positive to verify if there is a valid medical explanation.

Response to Positive Findings

A student with a positive screening for either drugs or alcohol will cease all experiential activities until the positive test can be investigated. Only students with positive drug screens due to verified, legally prescribed medication(s) will be cleared to continue.

In the event of a positive drug or alcohol screening, the implicated student has one week to challenge the test results by requesting that a confirmatory analysis be run on the sample. The cost of this analysis will be borne by the student but will be fully reimbursed by the College of Pharmacy if the confirmatory analysis reveals that the original screening test was a false positive.

In the event of an unchallenged positive urine drug screening or confirmed positive urine drug screen or alcohol breath or blood test above 0.02%, the implicated student has two options:

1. Withdraw from the program; or
2. Agree to participate in a college-identified professional addiction intervention program and any College-mandated counseling programs. All related costs are the student's responsibility.

The latter pathway is consistent with the pharmacy profession's understanding that addiction is a treatable disease and may not pose, by itself, insurmountable barriers to participation in the profession. If a student does not consent to participate, or does not fully comply with the terms of the treatment plan/contract, the student will be dismissed from the College.

A second positive drug test will result in dismissal from the program with no option for readmission.

A positive drug test connected to the individual's verified participation in distribution or diversion of drugs/controlled substances, violence against persons, possession of a unregistered weapon, or any other crime or pattern of criminal behavior or sexual harassment, which, in the opinion of the Progressions Committee, warrants exclusion or dismissal from the degree program, will remove the option for return to the program following treatment and demonstration of continuing sobriety.

Disabilities Services

The Americans with Disabilities Act (ADA) is the civil rights guarantee for persons with disabilities in the United States. It provides protection for individuals from discrimination on the basis of disability. Idaho State University, in the spirit and letter of the law, will make every effort to make reasonable accommodations, according to section 504 of the Rehabilitation Act of 1973 and the ADA. Students with disability-related needs should contact the Director of the Center for Students with Disabilities, Campus Stop 8121, phone (208) 282-3599. TTY (800) 377-3529.

Compensation Prohibited

While participating in any experiential activities to satisfy required hours stated in the College curriculum, pharmacy students shall not, under any circumstances, receive financial remuneration or compensation for hours obtained from experiential sites. Any hours in which the student is paid will not count toward fulfillment of the APPE. Additionally, a student may not complete training in facilities where he or she is employed or train under the supervision of individuals to whom he or she is related. Most preceptors are volunteers that are dedicated to pharmacy education.

Communications

Students are expected to keep their contact information up-to-date at all times in the Student Management system.

Internet access may be available at rotation sites. However, students must obtain permission prior to use. Internet use at the rotation site that is not directly related to the current rotation and its tasks is prohibited.

College faculty and administrators use electronic means, as well as traditional mailing to communicate. The information and /or material may be time-sensitive in nature. Therefore, students are expected to read and respond to email daily. This includes both the College of Pharmacy and ISU email.

Parent Involvement

Students should not involve parent in academic issues while on APPEs. Parents are not permitted to contact preceptors or the OEE regarding their child's academic performance. Please see FERPA.

Social Media

While participating in APPEs, students are expected to exhibit professionalism at all times. This includes social media. Students should keep in mind that any information posted online is likely permanent. The best guideline is

that if you would not want the community at large to see what you have posted published on the front page of the local newspaper, do not post it. If you are unsure if the comment violates professionalism standards, do not post it. Students should not use social media to post disparaging and inappropriate remarks about preceptors, faculty, classmates, patients, etc. Please refer to the College of Pharmacy Student Handbook E-Professionalism Policy.

Violation of this policy may result in dismissal from the site. In this circumstance, a “no pass,” NP will be given. Please see APPE Grading Policy. However, depending on the infraction, further consequences may occur, including legal.

APPE Student Evaluation

Academic performance is the basis for student evaluation while completing APPEs. Five domains comprise the major areas of student performance. These include:

1. Learning
2. Patient Care
3. Problem Solving
4. Communication
5. Professionalism

Each of these domains is important and a student must be marginally competent in each to satisfactorily pass the experience. The APPE evaluation form and the anchor scale should assist the preceptor in assessing student performance.

Student impairment (i.e. drug, alcohol abuse, psychological disorders, etc.) is an obstacle to education and professional growth. Negative attitudes, disruptive and passive aggressive behavior impact negatively on the functioning of the educational process and the work environment. If these problems are identified in a student, remedial action will be taken in a manner that is in the best interest of the student, the College of Pharmacy, and the clinical site.

The goals of APPE evaluations are:

1. To identify problems dealing with:
 - a. Significant knowledge base deficit
 - b. Breach of moral or ethical standards
 - c. Poor judgment and decision making
 - d. Substance abuse
 - e. Attitudes and behavior
 - f. Criminal behavior
 - g. Interpersonal relationships
2. To solve the above problems by addressing the problem in an individualized fashion designed to correct the problem in an expeditious, constructive manner. Potential actions include:
 - a. Verbal or written request for compliance
 - b. Dismissal from experience with a NP
 - c. Medical or personal leave

A copy of the APPE evaluation is at the end of this section.

Grade Scale

Grades for each experience are determined by the preceptor based on the end-point competencies provided by the College of each experience.

Final grade: A, B, C, No Pass (NP)

Rating Scale for Final Grade

- A** Overall exceptional performance, majority of graded categories are rated as (4)
B Overall competent performance, majority of graded categories are rated as (3)
C Overall marginal performance, majority of graded categories are rated as (2)
NP Aspects of the performance were deficient. Any final grade of (1) is an NP.

Mid-Point and Final Performance Evaluation

Preceptors must provide the student with a mid-point performance evaluation during the 3rd week of the six-week rotation. Preceptors will provide specific recommendations for areas of improvement if necessary. Preceptors should report any student receiving a NP at the mid-point evaluation to the Director of Experiential Education. The mid-point evaluation is an important opportunity to highlight the strengths and weakness of the student. Also, this allows enough time for the student to make the necessary adjustment to improve upon any knowledge/skill deficiencies.

Preceptors complete a final evaluation of the student at the completion of the 6-week rotation in a timely manner, preferably not more than a week after the experience is completed. The preceptor is encouraged to share and discuss the final evaluation with the student, including deficits and means of improvement. Students are provided with a copy of their evaluation online, however this will only be visible to them once the preceptor and site evaluations are completed.

APPE Grading Policy

Grades for the APPEs are as follows: **A, B, C, NP**

NP is No Pass. NP does not specify between a D or an F. A final grade of a NP will trigger intervention by the OEE to determine further course of action (see Course of Action Policy below). A NP may result from student's poor performance, unprofessional conduct, and if a student is asked to leave or is removed from an APPE.

Course of Action Policy for NP grade

When the student receives their first NP, the OEE will contact preceptor to gather additional information on the NP grade. The student will report to the Progressions Committee and will remediate the same rotation with a different preceptor, which may result in the student moving to a different home-base location.

When student receives a second NP, the OEE will contact preceptor to gather additional information on the NP grade. The student will report to the Progressions Committee and even if the student remediates previous NP successfully, the student may be removed from pharmacy program.

Progressions Committee

The student will report to the Progressions committee in the following situations 1) receiving final grade of a "C" or below in any APPE 2) receiving a final grade of a 2 or below in professionalism regardless of the final grade for the APPE.

Any grade of NP at midterm needs to be reported to the OEE.

Eastern Idaho, Twin Falls, Coeur d' Alene: Tracy Pettinger: petttral@isu.edu / 208.282.5012

Western Idaho & Reno, NV: Kevin Cleveland: clevkevi@isu.edu / 208.373.1872

Alaska: Tom Wadsworth: wadsthom@isu.edu / 907.786.6511

Progression within APPEs

In the interest of maintaining an acceptable level of academic standards, certain minimal requirements and regulations regarding academic achievement are followed. The Progressions Committee, a subcommittee of the Student Affairs Committee, is established within the College to ensure acceptable academic and professional standards are maintained. The Progressions Committee is composed of the Associate Dean, the Assistant Dean(s) for Experiential Education, and the Director of the Nontraditional Program as permanent voting members of the Committee. The remaining voting members are appointed annually from the Student Affairs Committee. The Progressions Committee is charged with monitoring student progress and its authority includes, but is not limited to, the following:

- Reviewing student competency assessments to determine advancement to the next academic year.

- Imposing disciplinary measures for students referred by faculty, staff, or the Student Conduct Committee for violations of the Professionalism or Professional Conduct Policies.
- Referring students to formal counseling, mentoring or academic advising services.
- Dismissal of any student not allowed to progress.

With regard to APPEs, students will be asked to attend a progressions meeting for the following reasons:

- Receiving final grade of a “C” or below in any APPE
- Receiving a final grade of a 2 or below in Professionalism regardless of final grade for the APPE

Please refer to the student handbook for more information on the Progressions Committee.

Discipline and Remedial Action

The following steps should be followed when preceptors document the need for remedial action for a student. Preferably this process will occur in a step-wise manner. However, at the discretion of the preceptor this process may be modified. Situations may arise which require immediate dismissal of a student from a site. These are listed below under “acts of commission or omission that may result in failing of an experience.”

A. Verbal or written request for compliance with the student

1. Preceptor outlines specific problems with student performance
2. Preceptor outlines specific steps for remediation
3. Preceptor outlines repercussions if remediation is not performed satisfactorily
4. Preceptor outlines timeline for re-evaluation

B. Dismissal from experience or No Pass

As with other courses, a student with a NP may not progress in the program and must appear before the Progressions Committee to determine the ultimate outcome. This outcome may range from retaking the APPE to dismissal from the program. If the student is required to retake an APPE, this will most likely be scheduled in the following APPE year within the constraints of scheduling and availability. Students retaking an APPE will be given last consideration during the scheduling process.

Acts of commission or omission which may result in the failing of an experience include but not limited to:

1. Unsatisfactory content knowledge base of pharmacy-related issues.
2. Failure to provide the quality of medical care consistent with the expectation for level of training.
 - a. Poor performance
 - b. Providing inappropriate information to patients, providers, or other staff
 - c. Failure to complete all written and (including guessing or agreeing with oral assignments satisfactorily irrational pharmacotherapy)
 - d. Lack of active participation
 - e. Informing a patient to change and/or discontinue a drug without consulting the prescribing provider
3. Repeated unexcused absences from required experience elements.
4. Violation of HIPAA and any other confidential site policy or patient confidentiality.
5. Failure to complete site-specific training and requirements.
6. Failure to comply with the established rules and regulations of the University (including academic dishonesty) and/or clinical site.

Examples of academic dishonesty include but not limited to:

- a. Plagiarism
- b. Cheating on exams
- c. Using the same work in more than one course
- d. Fabricating information
- e. Using someone else’s work in a course

7. Unprofessionalism, insubordination, leaving in the middle of an experience (walking out) without permission, unethical conduct, or criminal behavior, or otherwise inappropriate behavior.
8. Consumption of alcohol or other substances of abuse.
9. Any other acts which in the preceptor's view compromise patient care, the student's educational experience, or the functioning of the College of Pharmacy and/or clinical site.

The student has the right to appeal this decision. Refer to the College of Pharmacy Student Handbook and the ISU Student Handbook for grievance procedures.

Appeal of Course Grade

The College of Pharmacy extends the right of due process to all students. Students appealing a course grade should read and follow “Appealing a course grade” and /or the “Scholastic Appeals” found in the ISU Undergraduate Student Handbook.

Academic Dishonesty

Academic dishonesty is unacceptable and will not be tolerated. Academic dishonesty includes, but is not limited to, cheating and plagiarism. Cheating is defined as using or attempting to use materials, information, or study aids that are not permitted by the instructor in exams or other academic work. Specific examples of both cheating and plagiarism may be found in the ISU Student Handbook. Dishonest acts undermine the College of Pharmacy’s educational mission and the students' personal and intellectual growth. Pharmacy students are expected to bear individual responsibility for their work, to learn the rules and definitions that underlie the practice of academic integrity, and to uphold its ideals. Ignorance of the rules is not an acceptable excuse for disobeying them. Any student who attempts to compromise the academic process will be sanctioned. Students who are aware of cheating should report this activity immediately to the instructor or exam proctor. Academic sanctions are at the discretion of the instructor(s) and may range from an F on the assignment to an F in the course. Reports of suspected academic dishonesty or unprofessional behavior should be sent to the Office of Experiential Educations

Students should review the policies and procedures on misconduct, academic dishonesty, and appeals as defined in the Idaho State University Student Handbook (www.isu.edu).

Self-Plagiarism

Please note, recycling a previously used presentation, journal club, or other assignment for a subsequent rotation and presenting it as new work is considered self-plagiarism. Such acts will be treated as academic dishonesty.

Concerns

Students and preceptors must contact the OEE to report verbally and/or in writing, violations of pharmacy experiential education program policies. This includes alleged ethical and legal violations of the practice of pharmacy, alleged sexual harassment, verbal abuse, inappropriate and offensive physical contact and any other form of discrimination. These types of incidents should be reported immediately. Immediate reporting of such incidents will allow the appropriate action to be taken in accordance with Idaho State University Policies.

Evaluation Form for APPEs

The APPE Evaluation form was created in 2016 in conjunction with the Northwest Pharmacy Experiential Consortium (NWPEC) which encompasses all seven Schools/Colleges of Pharmacy in the Northwest (i.e. Washington State University, University of Washington, Oregon State University, Pacific University, Idaho State University, University of Montana & University of Wyoming). These seven schools will all use this same tool.

The consortium intentionally crafted this assessment tool with the purpose of being utilized in all rotation types (hospital based, ambulatory, community, non-patient care, etc.). The full evaluation is below.



Idaho State University College of Pharmacy
Preceptor Evaluation of Student
Advanced Pharmacy Practice Experiences

Idaho State
UNIVERSITY
College of Pharmacy

Instructions

The final assessment for the APPE program is a graded system as follows A, B, C, NP (No Pass). The preceptor should submit a student performance assessment at midpoint (end of week three) and end of the learning experience (end of week six) during each scheduled APPE. Each student pharmacist will be assessed in the performance categories of **learning, patient care, problem-solving, communication, and professionalism.**

Final Assessment

- All student pharmacists will be assessed using the following four (4) point performance rating scale for each of the ten (10) global learning objectives that apply to the APPE experience. A rubric describing each achievement level of performance is provided to assist the preceptor in determining the rating that best represents the student pharmacist's performance for each applicable outcome. This rating scale is based on increasing performance competency expectations over the final year of the program. This means that as the programmatic year progresses, higher expectations of achievement should be expected by the preceptor and reflected in the assessment ratings and comments.

Preceptor Comments

- Once the performance rating is selected, please use the comment section to provide additional feedback regarding the student pharmacist's strengths and achievements as well as areas of improvement and continued development. Comments will be **REQUIRED** if the entered score is 2 or lower to provide specific examples of areas needing improvement. To successfully pass each rotation, the student pharmacist must receive a final score of 2 or higher on the final assessment in **ALL** learning objectives that apply to each specific rotation experience. Receiving a rating of 1 in any outcome equates to a No Pass on the rotation. For non-patient care rotations the preceptor may submit a rating of N/A for the patient care outcomes. All other outcomes are applicable. The N/A performance rating does not contribute to the total available points and will not negatively impact the final score. In addition, students may be evaluated on rotation specific objectives beyond the established learning objectives which can be integrated in the evaluation as an additional learning objective.

Performance Levels

Exceptional (4)	Competent (3)	Marginal (2)	Deficient (1)	Not Addressed (NA)
<ul style="list-style-type: none"> • Expectations. Consistently performs above expected level. Performance can be described as impressive or exceptional. • Basic tasks. After initial instruction, the student can independently complete all basic tasks. • Complex tasks. The student can independently complete most complex tasks. • Intervention. Requires no intervention. • Practice-readiness. Demonstrates readiness for practice in early APPEs and performs beyond the level of an entry-level practitioner in later APPEs. 	<ul style="list-style-type: none"> • Expectations. Consistently performs at expected level. Performance possesses strengths with room for improvement in a few areas. • Basic tasks. After initial instruction, the student independently completes all basic and routine tasks. • Complex tasks. The student requires little guidance to complete most complex tasks. • Intervention. Requires little to no intervention. • Practice-readiness. Demonstrates near-readiness for practice in early APPEs and performs at the level of an entry-level practitioner in later APPEs. 	<ul style="list-style-type: none"> • Expectations. Meets expectations and performs consistently at expected level in only some areas. Several performance areas have room for improvement. • Basic tasks. After initial instruction, the student independently completes most basic and routine tasks. • Complex tasks. The student requires guidance to complete most complex tasks. • Intervention. Requires occasional intervention. • Practice-readiness. Demonstrates one performance deficit in early APPEs and near-readiness for practice in later APPEs. 	<ul style="list-style-type: none"> • Expectations. Performs well below baseline expectations. Performance demonstrates worrisome deficits. • Basic tasks. Does not satisfactorily and consistently complete most basic and routine tasks despite direction and repeated guidance. The preceptor or other pharmacy personnel must often complete the tasks. • Complex tasks. Cannot perform complex tasks. • Intervention. Requires repeated intervention. • Practice-readiness. Demonstrates multiple performance deficits in early APPEs and is clearly not ready for independent practice in later APPEs. 	<ul style="list-style-type: none"> • Not addressed in this experience. • Only allowed for non-patient care experiences

I. LEARNING

<p>1. Demonstrates learning. Develops, integrates, and applies knowledge and skills appropriately to situations encountered in the practice setting.</p>	<p><u>Midterm:</u></p> <ul style="list-style-type: none"> ○ Exceptional (4) ○ Competent (3) ○ Marginal (2) ○ Deficient (1)
<p><i>Examples of learning competence may include:</i></p> <ul style="list-style-type: none"> • Verbally displaying relevant knowledge from the pharmaceutical, social/behavioral/administrative, and clinical sciences. • Retaining and applying relevant information from current and prior experiences. • Self-identifying learning needs and appropriately correcting or enhancing knowledge and skills. • Identifying and critically analyzing literature to support decision-making. • Describing how population-based care principles influence creation of practice guidelines and care of individual patients. 	<p><u>Final:</u></p> <ul style="list-style-type: none"> ○ Exceptional (4) ○ Competent (3) ○ Marginal (2) ○ Deficient (1)

Strengths and Achievements regarding this area: _____

Areas for Improvement regarding this area: _____

II. PATIENT CARE

<p>2. Collects data. Accurately gathers and organizes all relevant subjective and objective information (e.g., comprehensive medication list, allergies, medical history, pertinent lab/physical assessment findings, and social determinants of health).</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>
<p><i>Examples of data collection competence may include:</i></p> <ul style="list-style-type: none"> • Conducting patient/caregiver interviews using an organized structure and comprehensible wording. • Efficiently reviewing electronic chart/health records. • Gathering pertinent information from other health professionals. • Performing/reviewing physical assessment findings. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>
<p>3. Assesses data. Evaluates drug therapy regimen for appropriateness in achieving optimal patient outcomes (considering safety, efficacy, adherence). Appropriately prioritizes potential or current pharmacotherapy problems.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>
<p><i>Examples of patient data assessment and prioritization competence may include:</i></p> <ul style="list-style-type: none"> • Interpreting and verifying prescriptions for accuracy and appropriateness. • Performing comprehensive medication review. • Performing medication reconciliation. • Performing accurate pharmacy calculations. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>
<p>4. Development, implementation, and monitoring of patient care plan. Develops or revises, implements, and evaluates a patient-centered care plan to optimize drug therapy and clinical outcome.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>
<p><i>Examples of plan development and implementation competence may include:</i></p> <ul style="list-style-type: none"> • Using clinical guidelines, primary literature, and information from other care providers. • Incorporating patient beliefs, preferences, and living environment constraints to represent the patient's best interests. • Identifying, incorporating, and implementing health and wellness improvement strategies. • Considering continuity of care across settings. • Providing patient education and addressing patient questions and concerns about therapy. • Monitoring patient response to therapy and success in achieving desired therapeutic goals. • Appropriately documenting patient interventions and other patient care activities. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1) <input type="radio"/> Not applicable</p>

Strengths and Achievements regarding this area: _____
 Areas for Improvement regarding this area: _____

III. PROBLEM SOLVING

<p>5. Demonstrating critical thinking and innovation during the problem-solving process. Critical thinking and innovation are intellectually disciplined processes of skillfully evaluating information and designing a solution that incorporates new ideas or methods, when appropriate.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of problem-solving competency may include:</i></p> <ul style="list-style-type: none"> Identifying and collecting relevant information. Analyzing, evaluating, interpreting, and prioritizing information using logical arguments and incorporating multiple perspectives. Synthesizing and implementing the most viable course of action/solution. Adapting when new or changing situations arise. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

<p>6. Performing management activities that prevent or address problems in a systematic manner. Effectively participates in practice/operations management activities using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of management competency may include:</i></p> <ul style="list-style-type: none"> Applying pharmacy law, ethics, and administrative policies and procedures appropriately. Participating in the oversight of preparation, dispensing, distribution, and administration of medications. Using technology to optimize efficiency and patient safety. Participating in the management of human resources, marketing, billing, quality assurance processes, or inventory control. Demonstrating leadership when needed. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

Strengths and Achievements regarding this area: _____

Areas for Improvement regarding this area: _____

IV. COMMUNICATION

<p>7. Effectively communicates information verbally, non-verbally, and in written form when interacting with an individual, group, or organization.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of verbal and written communication competence may include:</i></p> <ul style="list-style-type: none"> Listening to others with attention. Demonstrating interest, empathy, and respect during conversation Communicating articulately, concisely, tactfully, and confidently. Providing relevant information appropriately targeted to the audience. Writing effective patient care notes and other documents at a level appropriate to the reader. Creating documents that have a clear purpose, appropriate content, logical organization, correct mechanics, and appropriately cite and reference resources. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

<p>8. Effectively interacts with other members of the health care team or organization.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of team competence may include:</i></p> <ul style="list-style-type: none"> • Working collaboratively with the interprofessional and pharmacy team. • Engaging in shared decision making, rather than just making a recommendation to the team. • Displaying a willingness to speak up, even against a perceived power gradient. • Identifying and helping to resolve areas of conflict between team members. • Assessing effectiveness of team performance. • Adapting one's role to make the team more effective. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

Strengths and Achievements regarding this area: _____

Areas for Improvement regarding this area: _____

V. PROFESSIONALISM

<p>9. Self-Awareness Examines and reflects on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of self-awareness competence may include:</i></p> <ul style="list-style-type: none"> • Recognizing and accepting responsibility for own work, actions, and consequences. • Maintaining motivation, attention, and interest during learning and work-related activities. • Graciously receiving feedback and seeking to improve performance. • Displaying appropriate humility, confidence, initiative, persistence, and tolerance for ambiguity. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

<p>10. Professional Behavior Exhibits appropriate behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.</p>	<p><u>Midterm:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>
<p><i>Examples of professional behavior competence may include:</i></p> <ul style="list-style-type: none"> • Demonstrating altruism, integrity, trustworthiness, flexibility, and respect in all interactions. • Displaying preparation, initiative, and accountability consistent with a commitment to excellence. • Providing care in a manner that is legal, ethical, and compassionate. • Maintaining standards for professional conduct (e.g., attire, language, attendance, punctuality, commitment, confidentiality) • Demonstrating the skills and attitudes necessary for self-directed, life-long learning. • Gracefully managing stressful situations. 	<p><u>Final:</u> <input type="radio"/> Exceptional (4) <input type="radio"/> Competent (3) <input type="radio"/> Marginal (2) <input type="radio"/> Deficient (1)</p>

Strengths and Achievements regarding this area: _____

Areas for Improvement regarding this area: _____

Final Grade:

- A Overall exceptional performance, majority of graded categories are rated as (4)
- B Overall competent performance, majority of graded categories are rated as (3)
- C Overall marginal performance, majority of graded categories are rated as (2)
- NP Aspects of the performance were deficient. Any final grade of (1) is an NP.

Final Comments: _____

Preceptor Responsibilities

1. Orientation to the experience at the beginning of the APPE
 - a. Required objectives, activities and expectations
 - b. Starting and ending times
 - c. Policies and procedures
 - d. HIPAA compliance
 - e. Introduction to appropriate health care professionals and staff
 - f. Tour of the facility
2. Assign student to responsibilities consistent with the experience objectives.
3. Provide supervision of the student's activities and monitor achievement of required tasks to assess related student competencies.
4. Have those qualities which foster a positive professional role model.
5. Possess appropriate communications skills and have the ability to facilitate learning.
6. Supervise all written and verbal recommendations made by the student.
7. Never assume a student's competency, but determine it by reviewing their work profile, discussion and experience.
8. Provide the student with mid-point performance evaluation during 3rd week.
 - a. Specific recommendations for improvement if needed.
 - b. Any failing mid-point evaluation should be reported to the Experiential Director.
9. Complete evaluation of student's performance.
10. Communicate with Experiential Director regarding any significant irregularities in student behavior:
 - a. Irregular attendance
 - b. Unprofessional appearance
 - c. Violation of facility policies
 - d. Unprofessional behavior or inappropriate communications with health professionals, patients, customers or staff

Student Evaluation Forms Completed by Preceptors

Each student must be evaluated during mid-point and final week of the rotation against four educational outcome categories (i.e., Knowledge, Essentials for Patient Care, Approach to Patient Care, and Personal and Professional Development). Each outcome category has competencies (e.g., Applies the Knowledge of the Profession) that must be rated according to the student's performance by using the scale below. This is a global assessment of general competencies expected of students. The student does not need to necessarily demonstrate all listed competencies.

4 = Performs within and often beyond the expectations of a student at this level.

3 = Performs within the expectations of a student at this level in most areas. Some areas are still in need of growth.

2 = Performs within the expectations of a student at this level in only some areas. Several areas are still in need of significant growth.

1 = Student has too many areas needing development; a passing grade cannot be given.

N/A = Not addressed

Once the rating is determined, comments can be added to provide further insight regarding the performance of the student. This is especially useful to highlight examples of excellence and deficiencies. If the student rating is "2" or "1," it is required to provide commentary that includes areas that need development and significant growth. The student must receive scores of 2 or greater in each and every competency in order to pass the course.

PLEASE NOTE: ACPE Accreditation Standards require a mid-point evaluation of student progress. Please identify any area(s) of weakness and discuss with the student at the three-week rotation point. Any serious

deficiencies should be reported to the Assistant Deans for Experiential Programs: Tracy K. Pettinger at 208-282-5012 or Kevin W. Cleveland at 208-373-1872.

Preceptors play an integral part in the education of pharmacy students and provide the much needed expertise in the practice of pharmacy. The skills and proficiency students acquire from APPE sites are invaluable in pursuing their careers. The grades for APPE students are taken from the evaluation form that you complete online. Completing the evaluation/s online in a timely manner, preferably not more than a week after the experience is completed, helps us meet University grade deadlines.

Preceptor and Site Evaluations

Preceptors will receive evaluation data and comments from the previous year's students in July of every calendar year. The student evaluates the preceptor, the APPE site and overall experience for each rotation. The Experiential Education coordinator reads each evaluation. The evaluations needing additional attention will be brought to the attention of the Director of OEE. Evaluations are distributed via electronic means, unless the preceptor has requested an alternative delivery method. (Evaluation available for view on page 41)

Preceptor and Site Visits

The OEE will visit preceptors and their sites in the following frequencies to ensure compliance with ISU-COP standards, to provide individualized feedback and education, and to evaluate the APPE experience. Visits may be more frequent.

Site Location by Home Base	Frequency of Visit
Alaska	Biyearly
Coeur d' Alene, ID	Yearly in conjunction with ISU-COP Continuing Education program
Eastern Idaho	Biyearly
Reno, NV	Yearly
Twin Falls, ID	Yearly
Western Idaho	Biyearly

A site visit form (provided on pages 43-45) will be completed with each site visit. Sites that fail to meet Experiential Site Selection Criteria are provided a written warning of any noted deficiency as well as specific instructions for addressing it. The Assistant Dean for Experiential Education follows up with the site on a regular basis to ensure that necessary changes are made and that criteria are being met. In the event that a site does not comply with recommendations, the relationship will be discontinued and no students will be assigned for IPPEs or APPEs until the site demonstrates that appropriate corrective action has been taken.

APPE Student Evaluation of the Preceptor

Instructor:					
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Orientation to the Session					
1. My instructor adequately oriented me to the practice site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My instructor clearly identified the goals of the session, the performance expectations, and the approach to evaluation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. My instructor appropriately oriented me to each new activity and/or experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Orientation to the Session					
1. The practice site provided sufficient opportunity for me to meet all of the core experience objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The practice site provided sufficient opportunity for me to meet all of the site-specific objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Resources were readily available on site to complete the objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The instructor was sufficiently present and/or accessible to facilitate attainment of the objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Estimated number of hours per week spent in direct contact with instructor.					
Fostering Independent Practice					
1. My instructor demonstrated the integration of didactic knowledge into practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My instructor provided sufficient experience opportunities to foster my independence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a Mentor					
1. My instructor regularly and in a timely manner informed me of my overall progress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My instructor was able to recognize my areas of weakness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. My instructor was aware and could interpret my concerns and frustrations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. My instructor could suggest useful mechanisms to enhance my strengths and fortify areas of weakness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. My instructor served in a manner I would emulate given a similar position and environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall					
1. My instructor motivated me to do my best work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. My instructor was able to assist in my career development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please identify the primary strengths and weaknesses of the site and the Instructor/Instruction and, where applicable, factors that might have enhanced your experience (particularly helpful where “Disagree” and “Strongly Disagree” responses were given to evaluation statements):

Site	
Strengths:	Weaknesses:

Instructor/Instruction	
Strengths:	Weaknesses:

Suggestions for Enhancement

Idaho State University College of Pharmacy
Office of Experiential Education
Established Site / Preceptor

Practice Site Name: _____ Site Visit Date: _____

Provide completed **Preceptor Assessment** tool upon visit (attached). Yes No

Rotation Type: Adult Medicine Advanced Community Acute Care
 Hospital/Institutional Ambulatory Care Drug Information
 Geriatrics Infectious Disease Pediatrics
 Nuclear

_____ Non-Pt. Care Elective & Type:

Specialties:

_____ ex. Managed Care, Management, Academic Administrative, HIV, Neonatal, Hematology, other

What activities do the students participate in on a daily basis? _____

Primary Preceptor(s) at the Site – Review List in APPE data set

Secondary Preceptor(s)

Who has the primary day-to-day observation of the student? _____

Site Description

Present? Yes No

Site Description **Accurate** and **Verified** by Preceptor? Yes No

If No, action plan for getting it updated. _____

Syllabus developed, uploaded, and current? Yes No

If No, action plan for getting it developed. _____

Does the preceptor (s) continue to meet the quality criteria?

License in good standing? Yes No

Provide orientation to students on first day? Yes No

Complete mid-term evaluation? Yes No

Complete final evaluations? Yes No

Provide ongoing feedback? Yes No

IPE Rubric Completed? ___ Yes ___ No (please attach with site visit form)

Does the site serve an **Underserved Patient Population**? ___ Yes ___ No

Rotation Goals and Objectives met? ___ Yes ___ No (please attach specific rotation & check off goals that are being met)

Any feedback that should be addressed with Preceptors based on the data collected from the student evaluation forms? ___ Yes ___ No

What activity is the preceptor utilizing to assess students critical thinking/care planning? (SOAP Notes, case presentation, EBM Assignments)

What are the preceptor's current goals for precepting? (Make preceptor aware of the development opportunities such as CEI)

What preceptor resources from the OEE does the preceptor use? (Opportunity to point out what is available to them)

What is the Student Preceptor Ratio? (Including students from other programs)_____

- If greater than 3:1, provide rationale:

What can the College of Pharmacy OEE do to better support the site or preceptor?

Any current student issues we can help with? (Preceptor Concerns with students or the OEE).

Student Questions Reference Site / Preceptor

Are there any urgent or significant issues in reference to site or preceptor that the OEE should know about?

Idaho State University College of Pharmacy
Office of Experiential Education
New Site / Preceptor

1. New Preceptor Orientation provided? Yes No

2. Picture of preceptor obtained? Yes No

3. Site description: _____

4. Objective driven rotation syllabi in place? Yes No
(If no, please show preceptor the link to our template syllabi)

5. Orientation to all new preceptors at site:
 - Orientation to mission, vision, and goals of college Yes No

 - Review college's curriculum and teaching methods Yes No

 - Review goals and objectives for rotation type Yes No

 - Orientation to protocols for handling difficult students or unprofessional behavior Yes No

6. Student Evaluation Overview Yes No
 - Show the preceptor how and where to access the Midpoint and Final Evaluations.

7. APPE Manual Overview
 - Policies (such as attendance)

8. Preceptor Resources Website?
 - CEI
 - CEP
 - Library Resources
 - Live Events
 - Pharmacists Letter
 - Drug Information Center

9. Administrative / Management Support Yes No
If No, what can we do to help? _____

10. **IPE Rubric Completed?** __ Yes __ No (please attach with site visit form)

Idaho State University College of Pharmacy
Office of Experiential Education

Inter-Professional Experience (IPE) Evaluation Rubric

Site: _____ Preceptor: _____ Date: _____

Prescriber/Student Prescriber Interaction:

With what types of prescribers/student prescribers do you interact? (*physician, mid-level (PA/NP), dentist*)

Other _____

Deepest Level of Interaction	No meaningful interaction <div style="text-align: right;">0</div>	Minimal professional contribution (passive observation/shadowing, etc...) <div style="text-align: right;">1</div>	Active professional contribution (actively participating, making recommendations, etc...) <div style="text-align: right;">2</div>	Collaborative worksite (integrated, shared-decision-making, etc...) <div style="text-align: right;">3</div>
Methods of Interaction (Circle all that apply)	No meaningful interaction <div style="text-align: right;">0</div>	Phone, voicemail, instant message, e-mail, chart notes, etc... <div style="text-align: right;">1</div>	Face-to-face, video chat, etc... <div style="text-align: right;">1</div>	Group settings, such as rounds or committee meetings <div style="text-align: right;">1</div>
Frequency of Interaction	No meaningful interaction <div style="text-align: right;">0</div>	Seldom (monthly to yearly) <div style="text-align: right;">1</div>	Often (weekly) <div style="text-align: right;">2</div>	Regular (daily) <div style="text-align: right;">3</div>

Non-Prescriber/Student Non-Prescriber Interaction:

With what types of non-prescribers/student non-prescribers do you interact? (*nursing, MA, OT/PT, speech therapy*)

Other _____

Deepest Level of Interaction	No meaningful interaction <div style="text-align: right;">0</div>	Minimal professional contribution (passive observation/shadowing, etc...) <div style="text-align: right;">1</div>	Active professional contribution (actively participating, making recommendations, etc...) <div style="text-align: right;">2</div>	Integrated worksite (consultations, pharmacist utilized as resource, etc...) <div style="text-align: right;">3</div>
Methods of Interaction (Circle all that apply)	No meaningful interaction <div style="text-align: right;">0</div>	Phone, voicemail, instant message, e-mail, chart notes, etc... <div style="text-align: right;">1</div>	Face-to-face, video chat, etc... <div style="text-align: right;">1</div>	Group settings, such as rounds or committee meetings <div style="text-align: right;">1</div>
Frequency of Interaction	No meaningful interaction <div style="text-align: right;">0</div>	Seldom (monthly to yearly) <div style="text-align: right;">1</div>	Often (weekly) <div style="text-align: right;">2</div>	Regular (daily) <div style="text-align: right;">3</div>

Comments: _____

EXPERIENTIAL SITE SELECTION CRITERIA IDAHO STATE UNIVERISTY COLLEGE OF PHARMACY

The site:

- must meet all state and federal laws related to the practice of pharmacy and compliance with all HIPAA requirements.
- provides experiences that meet the goals, objective and educational outcomes of introductory and advanced experiential programs.
- must be devoted to patient-centered care consistent with contemporary pharmacy practice and provide preceptors time for daily contact with students, to provide students feedback and the opportunity to ask questions.
- demonstrates a caring and compassionate environment with a commitment to educating pharmacy students.
- should be adequate staffed (professional, technical and clerical) to provide a high standard of patient-centered care to patients and a professional staff which is involved in the education of pharmacy students.
- should include primary preceptor to supervise each student during the experience. All pharmacists at the facility can participate in educating the student if they meet the minimal requirements.
- must have an adequate patient population to accomplish the goals, objectives and educational outcomes of the specific experience.
- make available opportunities for the student to learn specific disease therapy management, provider-patient communication skills, ethical behavior and an environment that allows the student to have interaction with patients.
- must have available technology, informatics, and learning resources needed to support the student training and provide optimal patient care.
- should allow students to access to all pharmacotherapy information (patient profiles, patient history, medication history, physical examinations, disease states, laboratory data) which allows them to interpret and evaluate patient information.
- allows students to have the opportunity to communicate, where appropriate, as part of a multidisciplinary team of healthcare professionals providing patient care for a patient population with diverse cultures, medical conditions, gender, and age.
- allows students to perform pharmacist functions under the close supervision of a licensed pharmacist.
- Services the student should get experience in, where applicable:
 - Processing and dispensing new/refill medication orders
 - Taking telephone prescription orders and communication with physicians about medications
 - Perform patient interviews
 - Create patient profiles while following patients
 - Patient consulting on all aspects of patient-centered care (i.e., disease states, medications, dosing, dosage forms, routes of administration, over the counter products, self-care products, dietary supplements, nutrition, alternative therapy, etc.)
 - Reply to drug information from patients and health care providers
 - Ascertain patient-specific factors that influence pharmacotherapy, disease state management, medical information and compliance
 - Participate in the education of health care professionals and patients through presenting patient case, in-services, seminars and other presentations.
 - Provide educational programs/workshops for patients and other health care providers
 - Work with pharmacy technicians and other medical staff
 - Complementary therapy counseling (herbals and nutritional supplements)
 - Compounding preparations from physician orders
 - Communication with patients, physicians and other health care professionals
 - Third party billing for pharmacy services

PRECEPTOR SELECTION CRITERIA

IDAHO STATE UNIVERSITY COLLEGE OF PHARMACY

The preceptor must:

- Be a licensed pharmacist, and in good standing with the board of pharmacy as required by the practice environment and should not have any restrictions or sanctions placed on their practice.
- It is desired that the preceptor be a licensed pharmacist for at least 24 months and have a minimum of three months at their practice site as to be familiar with aspects, routines, policies, procedures and personnel.
- Show a commitment to professional development and life-long learning through involvement in local, state, and national professional organizations, continuing education programs, and preceptor training requirements stipulated by the College of Pharmacy.
- Be a role-model who maintains high professional standards and abides by the Code of Ethics provided by the American Pharmaceutical Association.
- Have the professional training and experience in their particular practice specialty to develop an innovative practice site which fosters student education.
- Demonstrate a good relationship other pharmacist, physicians and other health care providers and exhibit a caring attitude toward the pharmacy student and patients.
- Fully abide by all conditions and requirements as stipulated by the “Affiliation Agreement” between the College of Pharmacy and institution he/she practices.
- Be willing to accept responsibility for providing instruction, supervision and evaluation required for students to complete assignments and achieve competency in the site specific objective.
- Spend the considerable amount of their time providing patient-centered care in their facility and have sufficient freedom to spend significant time directly involved with the student to provide learning opportunities in all areas of the practice site.
- Offer specific experiences in accordance with the goals and objectives specified by the College of Pharmacy.
- Be available to the student and interact with students several times per week during the experience as dictated by work responsibilities, provide constructive feedback, provide mid-point and final evaluations on the student’s performance.
- Take part in preceptor training, education and development offered by the College of pharmacy.
- Not discriminate in any way based on race, color, religion, national origin, sex, age or disability.

Revised 7/28/2015

2016-2017 Preceptor Preference Form

Thank you for participating in the ISU College of Pharmacy Advanced and Introductory Pharmacy Practice Experiences (APPEs) & (IPPEs) for this academic year! The following information is needed to ensure all records are complete and current. *Please complete all information that is applicable to you and your facility by **November 7, 2015***

This form can be completed online at: <https://pharmacy.isu.edu/appe/login.php>

Complete your information using below.

Preceptor & Credentials: _____
Email: _____
Site Name: _____
Site Address: _____
City, State, Zip: _____
Phone & Fax: _____
License number: _____
Contact for affiliation agreement _____

- Are you Affiliate Faculty? YES NO
If no, are you interested in becoming an Affiliate Faculty? YES NO
- Are you an Idaho State University College of Pharmacy alumnus? YES NO

FACILITY REQUIREMENTS: Does your facility require any of the following:

- Non-ISU Background check? YES NO If so, specify what type _____
- Drug Test? YES NO
- Other requirement? please specify _____
- Would a student who is pregnant or breastfeeding be able to fully participate in your rotation? YES NO
- Does your rotation have prerequisites? YES NO
(i.e. Student must complete an General Medicine rotation prior to a Critical Care rotation)
If yes, please specify APPE prerequisite(s): _____
- Type(s) of APPE(s) available at your site:
1) _____ 2) _____ 3) _____

Please provide a brief description of each experience, including any unique characteristics (attach additional sheets if necessary).

This form can be completed online at: <https://pharmacy.isu.edu/appe/login.php>

Please indicate how many students you are willing to take per rotation block. If different experiences are offered at the same facility, please indicate how many students per experience.

- | | |
|----------------------------------|----------------------------------|
| 1) 2016-05-16 - 2016-06-24 _____ | 5) 2016-10-31 - 2016-12-09 _____ |
| 2) 2016-06-27 - 2016-08-05 _____ | 6) 2016-12-26 - 2017-02-03 _____ |
| 3) 2016-08-08 - 2016-09-16 _____ | 7) 2017-02-06 - 2017-03-17 _____ |
| 4) 2016-09-19 - 2016-10-28 _____ | 8) 2017-03-20 - 2017-04-29 _____ |

Introductory to Pharmacy Practice Experience (IPPEs)

- Does your site currently participate in IPPEs? YES NO ○ If no, would your site be interested in being a designated approved IPPE site? YES NO
- Please provide a brief description of the scheduling protocol students should adhere to when setting up an IPPE with your site.

Student Outreach / Service Projects *(answer only if you are a pharmacist licensed in Idaho)*

- Would you be willing to supervise students in community outreach events? YES NO

If you have any questions about this form, please contact the Office of Experiential Education at (208) 282-4794 or via email at tracy@pharmacy.isu.edu. Thank you for your participation! Together, we are "Preparing Leaders in Pharmacy" and shaping the future of pharmacy.



**EXPERIENTIAL SITE DESCRIPTION FORM
IDAHO STATE UNIVERSITY COLLEGE OF PHARMACY**

I. SITE NAME:

SITE ADDRESS:

Phone Number:

Primary Preceptor:

Type or Experiential Learning:

- | | | |
|---|---|---|
| <input type="checkbox"/> Academic | <input type="checkbox"/> Ambulatory Care | <input type="checkbox"/> Anticoagulation |
| <input type="checkbox"/> Cardiology | <input type="checkbox"/> Community | <input type="checkbox"/> Compounding |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Critical Care | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Drug Information | <input type="checkbox"/> Emergency Medicine | <input type="checkbox"/> Family Practice |
| <input type="checkbox"/> General Medicine | <input type="checkbox"/> Geriatrics | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Infectious Disease | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Institutional/Hospital |
| <input type="checkbox"/> Long Term Care | <input type="checkbox"/> Managed Care | <input type="checkbox"/> Management |
| <input type="checkbox"/> Mental Health | <input type="checkbox"/> MTM | <input type="checkbox"/> Nuclear Pharmacy |
| <input type="checkbox"/> Oncology | <input type="checkbox"/> Pediatrics | <input type="checkbox"/> Pediatric Intensive Care |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Research | <input type="checkbox"/> Surgery |
| <input type="checkbox"/> Other _____ | | |

II. Approximate the percentage of the following groups which are provided care by this site:

- Native American / Native Alaskan
- Caucasian / White
- African American / Black
- Asian American
- Pacific Islander
- Hispanic / Latino
- Geriatric patients
- Pediatric patients
- Uninsured patients
- Other race or demographic _____

III. Indicate which of the following services are provided:

- Processing and dispensing of medication orders
- Inpatient dispensing
- Outpatient dispensing
- Communication with physicians about medications
- Patient consulting on all aspects of pharmaceutical care
- Complementary therapy counseling (herbals/nutritional supplements)
- Compounding preparations from physician orders
- Compounding sterile products
- Ostomy supplies and durable medical goods
- Response to drug information inquires
- Long-term/nursing care
- Third party billing for pharmacy services
- Communication with patient, physicians and other health care providers
- Patient consultations
- Other: _____

EXPERIENTIAL PRACTICE SITE SURVEY

Please check the appropriate box to each question indicating whether you Strongly Agree, Agree, Disagree, or Strongly Disagree with each statement.

The site:

	Practice Site Survey Questions, the site:	Strongly Agree	Agree	Disagree	Strongly Disagree
1	Meets all state, federal and professional standards required to provide patient care.				
2	Provides experiences that meet the goals, objectives and education outcomes of practice experience.				
3	Has a practice environment that nurtures/supports interactions with patients.				
4	Allows students to perform pharmacists' functions under supervision of a licensed pharmacist.				
5	Has an adequate patient population that exhibits diversity in culture, medical conditions, gender and age, where appropriate.				
6	Has technology and learning resources needed to support student training and to reflect contemporary pharmacy practice.				
7	Has preceptor or qualified designees make daily contact with students.				
8	Has adequate patient population to accomplish the goals and objectives of the experience.				
9	Demonstrates a caring and compassionate environment with a commitment to educating pharmacy students.				
10	Has management supportive of professional staff involvement in educating pharmacy students.				
11	Provides medication therapy management and patient care services for diverse populations.				
12	Has adequate professional and supportive staff to meet the learning objectives and provide time for preceptor and student interaction.				
13	Permits students to have access to all pharmacotherapy information allowing them to interpret and evaluate patient information.				
14	Has collaborative professional relationships with other health care professionals.				
15	Provides educational programs for patients and/or other health care providers.				