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

**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**

<table>
<thead>
<tr>
<th>Exceptional (4)</th>
<th>Competent (3)</th>
<th>Marginal (2)</th>
<th>Deficient (1)</th>
<th>Not Addressed (NA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Expectations. Consistently performs above expected level. Performance can be described as impressive or exceptional.</td>
<td>• Expectations. Consistently performs at expected level. Performance possesses strengths with room for improvement in a few areas.</td>
<td>• Expectations. Meets expectations and performs consistently at expected level in only some areas. Several performance areas have room for improvement.</td>
<td>• Expectations. Performs well below baseline expectations. Performance demonstrates worrisome deficits.</td>
<td>• Not addressed in this experience. Only allowed for non-patient care experiences</td>
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<tr>
<td>• Basic tasks. After initial instruction, the student can independently complete all basic tasks.</td>
<td>• Basic tasks. After initial instruction, the student independently completes all basic and routine tasks.</td>
<td>• Basic tasks. After initial instruction, the student independently completes most basic and routine tasks.</td>
<td>• 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.</td>
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<tr>
<td>• Complex tasks. The student can independently complete most complex tasks.</td>
<td>• Complex tasks. The student requires little guidance to complete most complex tasks.</td>
<td>• Complex tasks. The student requires occasional intervention.</td>
<td>• Complex tasks. Cannot perform complex tasks.</td>
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<tr>
<td>• Intervention. Requires no intervention.</td>
<td>• Intervention. Requires little to no intervention.</td>
<td>• Practice-readiness. Demonstrates one performance deficit in early APPEs and near-readiness for practice in later APPEs.</td>
<td>• Practice-readiness. Requires repeated intervention.</td>
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<tr>
<td>• Practice-readiness. Demonstrates readiness for practice in early APPEs and performs beyond the level of an entry-level practitioner in later APPEs.</td>
<td>• Practice-readiness. Demonstrates near-readiness for practice in early APPEs and performs at the level of an entry-level practitioner in later APPEs.</td>
<td>• Practice-readiness. Demonstrates multiple performance deficits in early APPEs and is clearly not ready for independent practice in later APPEs.</td>
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NWPEC Apr 2016
## I. LEARNING

1. **Demonstrates learning.** Develops, integrates, and applies knowledge and skills appropriately to situations encountered in the practice setting.

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**Examples of learning competence may include:**
- 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.

Strengths and Achievements regarding this area: _____________________________________________________________

Areas for Improvement regarding this area: ________________________________________________________________

## II. PATIENT CARE

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).

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**Examples of data collection competence may include:**
- 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.

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.

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**Examples of patient data assessment and prioritization competence may include:**
- Interpreting and verifying prescriptions for accuracy and appropriateness.
- Performing comprehensive medication review.
- Performing medication reconciliation.
- Performing accurate pharmacy calculations.
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.  

**Midterm:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)
- Not applicable

**Examples of plan development and implementation competence may include:**
- 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.

**Final:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)
- Not applicable

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

### III. PROBLEM SOLVING

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.

**Midterm:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

**Examples of problem-solving competency may include:**
- 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.

**Final:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

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.

**Midterm:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

**Examples of management competency may include:**
- 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.

**Final:**
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

Strengths and Achievements regarding this area: ________________________________________________
Areas for Improvement regarding this area: ________________________________________________
IV. COMMUNICATION

7. Effectively communicates information verbally, non-verbally, and in written form when interacting with an individual, group, or organization.

Examples of verbal and written communication competence may include:
- 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.

Midterm:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

Final:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

8. Effectively interacts with other members of the health care team or organization.

Examples of team competence may include:
- 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.

Midterm:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

Final:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

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

V. PROFESSIONALISM

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.

Examples of self-awareness competence may include:
- 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.

Midterm:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)

Final:
- Exceptional (4)
- Competent (3)
- Marginal (2)
- Deficient (1)
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.

**Examples of professional behavior competence may include:**
- 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.

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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: __________________________________________________________________________________________