New Course Outline

- The PharmD Approval Process for New Course Outlines document provides for more information on next steps and approval timelines.
- The Course Outline Submission Overview document provides more detailed guidelines on course learning objectives, topic outlines/scheduling requirements, and assessment methods.
- The AFPC Educational Outcomes for Professional Programs document provides complete information on roles and key competencies for Pharmacy Degree Programs.

Course Number: PHM251H1

Course Title: Early Practice Experience (EPE) - Year 2

Outline Version Code:

Course Description:

This course is the second of two experiential rotations, consisting of 160 hours of experiential education in an institutional practice site. Students will undertake EPE-2 during the summer following Year 2 (sometime between May to August). Each student will actively participate in day-to-day services under the guidance of a pharmacist preceptor within a direct patient care institutional pharmacy practice setting, thus enabling application of knowledge, skills and values learned in faculty-based courses and simulated practice environments (laboratories). Required activities include:

- developing a learning plan (Learning Contract)
- prescription/medication processing (distributive and clinical review)
- educating patients
- providing components of pharmaceutical care: establishing rapport with patients, conducting patient assessments (including identifying & prioritizing drug therapy problems), formulating patient care plans, monitoring patient outcomes for effectiveness and safety
- documenting patient care activities
- Conducting Best Possible Medication History (BPMH) as well as participating in Medication Reconciliation
- Creating and delivering a medication/health-related presentation
- Observing pharmacist involvement in other professional responsibilities
- Recognize, respond to and disclose adverse events

In performing the above activities, students must demonstrate self-insight and self-directed learning, evidence-informed practice, effective communication skills, interprofessional and intraprofessional collaboration, professionalism and ethical behaviour.

Semester: ☐ Fall ☐ Winter ☒ Summer

Course Type: ☐ Elective ☐ Selective ☒ Mandatory

1. Course Learning Objectives:

Upon completion of this course, students will have achieved the following level of learning objectives:
Introductory = knowledge and comprehension of concepts, definitions
Intermediate = application of concepts to simple situations
Advanced = application of concepts to more complex situations with ability to synthesize and evaluate
Knowledge
Introductory Level:

• Develop knowledge of unfamiliar therapeutic areas (pathophysiology, therapeutic options, monitoring parameters) as required during patient encounters

• Observe and explore pharmacists’ other responsibilities (teaching, management, patient advocacy and/or professional advocacy)

Examples: scope of practice contributions, novel reimbursement strategies, practice specialty groups, patient safety rounds/reviews, committee work (Pharmacy and Therapeutics, informatics, particular disease-related advocacy bodies), policy/procedure and guideline development

• Self-assess and discuss performance with EPE-2 preceptor

• Self-identify specific deficits of knowledge/skills and/or areas of interest and state learning objectives and activities (with preceptor assistance) to address them

• Demonstrate responsibility and accountability for addressing patient needs

Intermediate Level:

• Apply therapeutic knowledge of familiar and new disease states to routine patient care work-ups (assessment, care plan and follow-up monitoring) in conducting patient interviews, determining in conjunction with the patient, goals and outcomes, identifying therapeutic alternatives, making reasonable clinical decisions to recommend specific therapy to patients and patient care team members, and developing monitoring approaches plans for minimally to moderately complex needs (patients with 1 to 3 disease states and minimal barriers to care).

• Apply knowledge of social determinants of health in determining patient outcomes and formulating patient care plans.

• Employ principles of patient safety in the course of identifying high-risk situations in the course of medication distribution/provision, patient education, patient care work-ups and clinical documentation.

• Apply therapeutic, practice management, economic, and/or pharmacy/interprofessional practice knowledge in creating, delivering and evaluating a basic medication/health-related presentation to a patient or care team audience

• Draw on knowledge of ethical principles and professional standards to reflect upon and respond to professional and ethical challenges in the health care environment. Demonstrate effective communication techniques in working with patients, their advocates or other health care team members

• Employ all steps in the pharmaceutical care process (assessment, care plan and follow-up monitoring) consistently to patients with common conditions encountered at the practice site

• Document patient care in accordance with site-specific and professional standards of practice for interprofessional, intraprofessional and/or remunerative purposes
• Use appropriate written, verbal and non-verbal communication skills

• Determine topic, prepare, market and present a health-related presentation to a target audience (i.e. patient or health professional)

• Demonstrate behaviours conducive to collaborative practice with all members of the patient care team (patients, technicians, pharmacists and other health care professionals)

• Use effective education techniques during individual and group learning interactions

• Employ an evidence-informed approach to providing drug information and patient care decisions (predominantly tertiary and secondary literature with limited primary literature)

• Effectively and safely participate in technical components of prescription/medication distribution and dispensing

• Exhibit professionalism in all aspects of pharmacy practice

• Practice ethically according to the standards and codes governing students and the profession of pharmacy

Advanced Level:

Skills
Introductory Level:

Intermediate Level:

Advanced Level:
Attitudes/Values:
Introductory Level:

Intermediate Level:

Advanced Level:

2. Rationale for Inclusion in the Curriculum:

Early Practice Experience-2 will enable a student to progress toward competency in all seven AFPC outcomes. The roles of:

• Care Provider
• Communicator
• Scholar
• Professional
• Collaborator
• Manager
• Advocate

Students will be expected to apply and extend the knowledge from the Year 1 and 2 classroom and simulated practice to actual pharmacy practice sites, building a foundation and context for further learning during the 3rd and 4th year of the curriculum.
3. Pre-requisites:

PHM151H1 Early Practice Experience

PHM201H1 Pharmacotherapy 2: Dermatology and EENT

PHM202H1 Pharmacotherapy 3: Endocrinology, Nephrology and Urology

PHM203H1 Pharmacotherapy 4: Infectious Diseases

PHM204H1 Pharmacotherapy 5: Cardiovascular Diseases

PHM205H1 Medication Therapy Management 2

PHM206H1 Medication Therapy Management 3

The academic prerequisite for commencing EPE-2 is successful completion of EPE-1, completed (but not necessarily passed) all year 2 courses as well as undertaken the Calculations module.

Other pre-rotation requirements:

• CPR/first aid certification

• Compliance with Policies on Communicable Diseases and Immunizations for Undergraduate Pharmacy Students

• Compliance with any site-specific requirements (mask fit, police record check/vulnerable sector screening)

• Compliance with the Ontario College of Pharmacists (OCP) requirements for a registered pharmacy student including personal liability insurance.

• WSIB Declaration

4. Co-requisites:

5. Course Contact Hours and Teaching Methodologies:

<table>
<thead>
<tr>
<th>Didactic (lecture)</th>
<th>Hours: 3</th>
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<tbody>
<tr>
<td>Large group problem-based/ case-based learning (group size: )</td>
<td>Hours:</td>
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<tr>
<td>Laboratory or Simulation</td>
<td>Hours:</td>
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<tr>
<td>Tutorial/Seminar/Workshop/Small Group (group size: )</td>
<td>Hours:</td>
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<tr>
<td>Experiential</td>
<td>Hours: 160</td>
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<tr>
<td>On-line</td>
<td>Hours: 0.5</td>
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<tr>
<td>Other (please specify):</td>
<td>Hours:</td>
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<tr>
<td><strong>Total Course Contact Hours</strong></td>
<td><strong>Hours: 164</strong></td>
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</table>
6. Estimate and description of student's weekly out-of-class preparation time excluding exam preparation:

a) Some out of site time expected prior to (e.g. 4 hours) and during EPE rotation block (e.g. 10-20 hours) to develop Learning Contract, reflect on activities, and document learning in conjunction with course assessment methods.

b) Students are expected to complete University Health Network's online module, “SIMS Education: Privacy for Learners” which requires approximately 15 minutes to complete. The module’s content is generalizable to all clinical settings. (http://www.uhn.ca/for_staff/computer_education/privacy_elearning/modules/UHN%20Privacy%20for%20Learners/player.html)

7. Topics Covered and Lecture Specific Learning Objectives

**Week 1**
**Lecture Topic:** Rotation-First 72 hours

**Lecture Learning Objectives:**

Learning objectives are met during the course of the 4 week (160 hour) rotation

Submissions: First 72 hour checklist and Learning Contract (reviewed and released by preceptor)

Preparation/Readings: Review and decide on which (minimum of one) of the 3 Flexible IPE Activities will be undertaken during EPE-2. Consider topic, audience and schedule for student presentation.

**Week 2**
**Lecture Topic:** Rotation-Week 2 (midpoint)

**Lecture Learning Objectives:**

Learning objectives are met during the course of the 4 week (160 hour) rotation

Submissions: Student self-assessment (midpoint) and preceptor’s assessment of student (midpoint). If student is NOT meeting expectations, a second Learning Contract is to be completed and submitted by the student (reviewed and released by preceptor)

Preparation/Readings: Finalise the topic, audience and schedule for student presentation

**Week 3**
**Lecture Topic:**

**Lecture Learning Objectives:**
Week 4
Lecture Topic: Rotation-Week 4 (final point)

Lecture Learning Objectives:

Learning objectives are met during the course of the 4 week (160 hour) rotation

Submissions: Student self-assessment (final) and preceptor's assessment of student (final). All documentation of activities must be filed electronically by noon on the final day of the rotation (same day as final assessment). Learning contract is reviewed, updated and submitted.

Week 5
Lecture Topic:

Lecture Learning Objectives:

Week 6
Lecture Topic:

Lecture Learning Objectives:

Week 7
Lecture Topic:

Lecture Learning Objectives:
Week 8
Lecture Topic:

Lecture Learning Objectives:

Week 9
Lecture Topic:

Lecture Learning Objectives:

Week 10
Lecture Topic:

Lecture Learning Objectives:

Week 11
Lecture Topic:

Lecture Learning Objectives:

Week 12
Lecture Topic:
## Lecture Learning Objectives:

### Week 13

### Lecture Topic:

### Lecture Learning Objectives:

## 8. Assessment Methodologies Used:

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Course Learning Objectives Addressed</th>
<th>Assessment Method Used</th>
<th>Percent of Course Grade</th>
<th>For Group Work: Individualized or same mark for all group members</th>
</tr>
</thead>
</table>
| ☐ Assignment ☐ Presentation ☒ Rotation ☐ Mid-term ☐ Final Exam | Rotation-First 72 hours:  
Submissions: First 72 hour checklist and Learning Contract (reviewed and released by preceptor)  
Preparation/Readings: Review and decide on which (minimum of one) of the 3 Flexible IPE Activities will be undertaken during EPE-2. Consider topic, audience and schedule for student presentation. | Assessment 1 (performance): Mid-rotation electronic assessment by preceptor, using assessment guidelines/framework prepared by Course Coordinator | N/A |  |
| ☐ Assignment ☐ Presentation ☒ Rotation ☐ Mid-term ☐ Final Exam | Rotation-Week 2 (midpoint)  
Submissions: Student self-assessment (midpoint) and preceptor’s assessment of student (midpoint). If student is NOT meeting expectations, a second Learning Contract is to be completed and submitted by the student (reviewed and released by preceptor)  
Preparation/Readings: Finalize the | Assessment 2 (performance): End-rotation electronic assessment by preceptor, using assessment guidelines/framework prepared by Course Coordinator | N/A |  |
<table>
<thead>
<tr>
<th>Assignment</th>
<th>Presentation</th>
<th>Rotation</th>
<th>Mid-term</th>
<th>Final Exam</th>
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**Rotation-Week 4 (final point)**

- Submissions: Student self assessment (final) and preceptor's assessment of student (final). All documentation of activities must be filed electronically by noon on the final day of the rotation (same day as final assessment). Learning contract is reviewed, updated and submitted.
- Assessment 3 (submissions): all required documents completed and filed electronically on the electronic rotation platform (E-Value)
- Student to log 160 practice hours electronically

**Assessment 3 (submissions):**

N/A

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**Expectation for pass grades for all Pharmacy courses is 60%**

9. Policy and procedure regarding late assignments/examinations/laboratories:

10. Policy and procedure regarding missed assignments/examinations/laboratories:

**Supplemental assignments/examinations/laboratories:**

Students who fail an EPE rotation will be required to complete supplemental activities and/or additional rotation time, as determined by the Course Coordinator. The supplemental activities and/or rotation will usually (but not always) be undertaken in the same summer or early fall following the initial rotation. If the student fails a supplemental rotation the student will be required to successfully complete remedial activities prior to starting a second supplementary EPE rotation. Remedial activities will be tailored to the particular student's challenges. Should the student fail the second supplemental rotation, s/he would be dismissed from the program.

Students failing an EPE rotation are permitted to enroll in the subsequent year's courses. EPE-1 must be successfully completed before enrolling in EPE- 2, and EPE-2 must be successfully completed prior to undertaking the Advanced Pharmacy Practice Experience (APPE) rotations.

Please note: new wording of this policy is required based on discussions at Academic Standing and Faculty Council.
11. AFPC Education Outcomes addressed (check all those that apply):
- Refer to AFPC Educational Outcomes for Professional Programs for further information about the role and key competencies.

As Care Providers, pharmacy graduates:

**CP1 – Practice within the pharmacist scope of practice and expertise**

☑ CP1.1 Apply knowledge from the foundational sciences to make decisions relevant to the contemporary and evolving scope of pharmacist practice;

☑ CP1.2 Integrate AFPC Communicator, Collaborator, Leader-Manager, Health Advocate, Scholar, and Professional roles in their practice of pharmacy;

☑ CP1.3 Recognize and respond to the complexity, uncertainty and ambiguity inherent in pharmacy practice;

☑ CP1.4 Explain the benefits, risks and rationale associated with pharmacist-provided care as an important step in obtaining and documenting consent to pharmacist care;

☑ CP1.5 Recognize and take appropriate action when signs, symptoms and risk factors that relate to medical or health problems that fall into the scope of practice of other health professionals are encountered.

**CP2 – Provide patient-centred care**

☑ CP2.1 Collect, interpret, and assess relevant, necessary information about a patient's health-related care needs;

☑ CP2.2 Formulate assessments of actual and potential issues and in collaboration with the patient and other health team members as appropriate, prioritize issues to be addressed in a given patient encounter;

☑ CP2.3 Create and document plans in collaboration with the patient and other health team members as appropriate, and make recommendations to prevent, improve or resolve issues;

☑ CP2.4 Implement plans in collaboration with the patient and other health team members as appropriate, including:

   CP2.4.1 obtaining consent
   CP2.4.2 making a referral or consulting others
   CP2.4.3 adapting, initiating, renewing/continuing, discontinuing or administering medication as authorized
   CP2.4.4a dispensing and/or
   CP2.4.4b compounding and/or
   CP2.4.4c delegating/authorizing such tasks to others appropriately
   CP2.4.5 engaging the patient or care-giver through education, empowerment and self-management, and
CP2.4.6 negotiating the role of pharmacy and non-pharmacy team members in continuity and transitions of care.

☐ CP2.5 Follow-up by monitoring, evaluating progress toward achievement of the patient’s goals of therapy, adjusting plans in collaboration with the patient and health team members across the care continuum.

CP3 – Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety

☐ CP3.1 Recognize and respond to harm and potential harm from health care delivery, including patient safety incidents;

☐ CP3.2 Adopt strategies that promote patient safety and address human and system factors;

As Communicators, pharmacy graduates:

CM1 – Communicate in a responsible and responsive manner that encourages trust and confidence

☐ CM1.1 Select and use oral, non-verbal and written communication strategies (tools, techniques, technologies, etc.) effectively so that the patient's best interests are foremost;

☐ CM1.2 Provide timely, clear responses that are tailored to the context and audience;

☐ CM1.3 Express facts, evidence, opinions and positions accurately and effectively, with clarity and confidence;

☐ CM1.4 Listen, actively solicit and respond appropriately to ideas, opinions and feedback from others;

☐ CM1.5 Use language, pace, tone, and non-verbal communication that is suitable for:

    a) the intended outcomes of the communication, and
    b) the complexity, ambiguity, urgency and/or difficulty of a situation, conversation or conflict

☐ CM1.6 Seek and synthesize relevant information from others in a manner that ensures common understanding and where applicable, clarifies and secures agreement and/or consent;

☐ CM1.7 Compose and share oral, written, and electronic information in a manner that optimizes patient safety, dignity, confidentiality, and privacy.

CM2 – Communicate in a manner that supports a team approach to health promotion and health care

☐ CM2.1 Engage in respectful, empathetic, compassionate, non-judgmental, culturally safe, tactful conversations with patients, communities, populations, and health team members;

☐ CM2.2 Demonstrate awareness of the impact of one’s own experience level, professional culture, biases and power and hierarchy within the health team on effective working relationships,
communication and conflict resolution with health team members and adapt the approach to the situation appropriately;

☐ CM2.3 Demonstrate accuracy and appropriateness of communication as well as respect for the role of other health team members when disclosing information about harmful or potentially harmful situations;

☐ CM2.4 In word and in action, convey the importance of teamwork in patient-centred care, patient safety, health care quality improvement and health program delivery.

As Collaborators, pharmacy graduates:

CL1 – Work effectively with members of the health team including patients, pharmacy colleagues and individuals from other professions

☐ CL1.1 Establish and maintain positive relationships;

☐ CL1.2 Recognize, respect and negotiate the roles and shared/overlapping responsibilities of team members;

☐ CL1.3 Join with others in respectful, effective shared decision-making.

CL2 – Hand over the care of the patient to other pharmacy team members and non-pharmacy team members to facilitate continuity of safe patient care

☐ CL2.1 Determine when and how care should be handed over to another team member;

☐ CL2.2 Recognize, respect and honour the negotiate shared and overlapping responsibilities of patients, pharmacy team members and other health members when handovers occur;

☐ CL2.3 Demonstrate safe handover of care, using oral, written, and electronic communication, during a patient transition to a different care provider or setting.

As Leader-Managers, pharmacy graduates:

LM1 – Contribute to optimizing health care delivery and pharmacy services

☐ LM1.1 Work with others to apply quality improvement strategies and techniques to optimize pharmacy care;

☐ LM1.2 Contribute to a culture of patient safety;

☐ LM1.3 Confirm the quality, safety, and integrity of products;

☐ LM1.4 Use health informatics to improve the quality of care, manage resources and optimize patient safety.

LM2 – Contribute to the stewardship of resources in health care systems
LM2.1 Apply evidence and management processes to achieve cost appropriate care;
LM2.2 Allocate health care resources for optimal patient care;
LM2.3 Contribute to the management of finances and health human resources in pharmacy practice settings;

LM3 – Demonstrate leadership skills
LM3.1 Demonstrate leadership skills to enhance pharmacy practice and health care.

LM4 – Demonstrate management skills
LM4.1 Work with others to apply the principles of effective management and supervision of health human resources and medication use systems;
LM4.2 Use effective strategies to manage and improve their own practice of pharmacy.

As Health Advocates, pharmacy graduates:

HA1 – Respond to an individual patient’s health needs by advocating with the patient within and beyond the patient care environment
HA1.1 Work with patients to address determinants of health that affect them and their access to needed health services or resources;
HA1.2 Work with patients to increase opportunities to adopt healthy behaviours;
HA1.3 Incorporate disease prevention, health promotion and health surveillance into interactions with individual patients.

HA2 – Respond to needs of communities or populations they serve by advocating with them for system-level change in a socially accountable manner
HA2.1 Work with community or population to identify the determinants of health that affect them;
HA2.2 Participate in health promotion and disease prevention programs.

As Scholars, pharmacy graduates:

SC1 – Apply medication therapy expertise to optimize pharmacy care, pharmacy services and health care delivery
SC1.1 Use knowledge and problem-solving to arrive at recommendations and decisions that are appropriate, accurate, and practical;
SC1.2 Use professional experience to solve routine, previously encountered problems;

SC1.3 Use established decision-making frameworks and apply learning required to manage new situations and problems.

**SC2 – Integrate best available evidence into pharmacy practice**

SC2.1 Generate focused questions related to needs for information, recommendations and decisions in practice;

SC2.2 Use systematic approaches in the search for best available evidence;

SC2.3 Critically appraise health-related research and literature;

SC2.4 Incorporate best available evidence in the decision-making process.

**SC3 – Contribute to the creation of knowledge or practices in the field of pharmacy**

SC3.1 Apply scientific principles of research and scholarly inquiry;

SC3.2 Apply ethical principles that underlie research and scholarly inquiry.

**SC4 – Teach other pharmacy team members, the public and other health care professionals including students**

SC4.1 Provide effective education to others;

SC4.2 Employ appropriate teaching roles when teaching others;

SC4.3 Deliver effective feedback in teaching and learning situations;

SC4.4 Use appropriate learning assessment and evaluation strategies when working with patients, team members, students and teachers.

As **Professionals**, pharmacy graduates:

**PR1 – Committed to apply best practices and adhere to high ethical standards in the delivery of pharmacy care**

PR1.1 Exhibit professional behaviour whether face-to-face, in writing, or via technology-enabled communication. Professional behaviour includes, but is not limited to:

- a) demonstrating honesty, integrity, humility, commitment, altruism, compassion, respect for diversity and patient autonomy;
- b) being accessible, diligent, timely and reliable in service to others;
- c) abiding by the principle of non-abandonment;
- d) maintaining appropriate interpersonal boundaries;
- e) maintaining professional composure, demeanor, and language even in difficult situations, and;
f) maintaining privacy and confidentiality;

☐ PR1.2 Use ethical frameworks as one component of professional judgment;

☐ PR1.3 Recognize and respond to situations presenting ethical dilemmas, including conflicts of interest;

☐ PR1.4 Engage in activities that:

   a) protect the public, and;

   b) advance the practice of pharmacy.

**PR2 – Able to recognize and respond to societal expectations of regulated health care professionals**

☐ PR2.1 Take responsibility and accountability for actions and inactions;

☐ PR2.2 Demonstrate a commitment to patient safety and quality improvement;

☐ PR2.3 Honour the laws, ethical codes, and regulatory requirements (by-laws, standards, policies) that govern the self-regulated profession of pharmacy;

☐ PR2.4 Demonstrate an understanding of federal, provincial/territorial, and municipal laws, policies and standards that apply to pharmacy workplaces;

☐ PR2.5 Demonstrate an ability to maintain competence to practice through evaluating areas for improvement and planning, undertaking learning activities to address limitations in competence and/or performance and incorporating learning into practice;

☐ PR2.6 Identify and respond to unprofessional, unethical, and illegal behaviours in pharmacists, other pharmacy team members, and other health professionals.

**PR3 – Committed to self-awareness in the management of personal and professional well being**

☐ PR3.1 Set professional and personal goals, priorities, and manage their time to balance patient care, workflow, and practice requirements;

☐ PR3.2 Examine, reflect upon, and manage personal attributes (knowledge, skills, beliefs, biases, motivations, emotions, etc.) that could influence self-development and professional performance;

☐ PR3.3 Adapt their practice of pharmacy to fulfill evolving professional roles;

☐ PR3.4 Recognize and respond to self and colleagues in need.