

Site Payment Acceptance/Declination Form

****Return this completed form when you submit a student's grade to assist with accuracy and promptness of your payments****

Please provide the following information for each student who received your experiential education services:

Student Name: _____

Site: _____

Preceptor Name: _____

Dates of Experience: _____

Preceptor's Signature

Date

The College of Pharmacy would like to thank your site for participating in our Experiential Education Program. If you choose to accept payment for your services, select option one. The College will provide \$500 to each site per rotation per student. If you wish to decline payment, select option two. If your site is not allowed to accept payments, select option three. **If this form is not returned within 30 days from the end of the rotation we will assume that your site has declined payment.**

Option One:

Make payment to site specified in the Affiliation Agreement.

Option Two:

Decline payment for placement in a College of Pharmacy administered account to be used to support Experiential Program development & Student Housing Fund.

Option Three:

Our site is not allowed to accept payments.

Thank you!

**For questions regarding this form, please contact:
Michele Smoody**

smood001@umn.edu
612-624-6685

Pharmacy Student Evaluation
Institutional Practice Advanced Pharmacy Practice Experience

Please Print!

Student Name: _____

Site: _____

Preceptor Name: _____

Block Number: _____ Dates of Experience: _____

Overall Outcomes
Rating _____

Letter
Grade

If the student receives an incomplete (letter grade = I) please attach a list of the procedures that the student must follow to successfully complete the experience. (The Department office will assume the responsibility of informing the Academic Standing Committee of the situation). Please inform the Experiential Education Office immediately when the student has fulfilled the requirements of the experience.

SUMMARY STATEMENT PRECEPTOR: Please give a brief summary statement of your total impression of the student's performance. Comment on demonstrated student strengths and/or areas of improvement.

STRENGTHS:

AREAS OF IMPROVEMENT:

THE STUDENT WOULD BENEFIT FROM THE FOLLOWING EXPERIENCES AT SUBSEQUENT SITES:

This evaluation tool was reviewed by us upon completion of the student's advanced practice experience.

Preceptor's signature

Date

Student's signature

Date

Professional leave or vacation taken by student:

Dates: _____

Preceptor's Initials

Please use the following scale to evaluate the student's performance:

1	2	3	4	5
Inadequate Performance	Minimal level of acceptable performance in APPE but not acceptable for practice	Acceptable level of performance for an entry level practitioner	Good performance for an entry level practitioner	Outstanding performance for an entry level practitioner

1. Demonstrate ability to perform drug order processing

- Y N NA a. Correctly interpret a prescription order that is obtained in oral and/or written form
- Y N NA b. Analyze the prescription for appropriateness
- Y N NA c. Prepare the prescription for administration, counsel the patient and provide nursing information as needed

Outcome Rating:	1	2	3	4	5
_____	Has difficulty interpreting some prescriptions and hesitates to call to verify. Has difficulty with use of computer system for order processing.	Correctly interprets Rx orders but may not catch errors. Has understanding of formularies but sometimes unclear how to troubleshoot non-formulary issues.			Correctly interprets written and oral orders. Catches errors and knows procedures for remedy of errors. Is familiar with formulary issues.

Comments:

2. Demonstrate knowledge of current standards of institutional Pharmacy

- Y N NA a. JCAHO
- Y N NA b. ASHP
- Y N NA c. Department policies and procedures
- Y N NA d. Pharmaceutical Services Outpatient, Inpatient
- Y N NA e. Institution policies
- Y N NA f. Pharmacy & Therapeutics Committee
- Y N NA g. Pharmacy Nursing Committee
- Y N NA h. Regulatory Agencies (Board of Pharmacy)

Outcome Rating:	1	2	3	4	5
_____	Cannot demonstrate previously acquired knowledge of the above standards of institutional Pharmacy. Unaware of pharmacist role	Exhibits knowledge of JCAHO accreditation and ASHP rules applied in institutional pharmacy. Can't always apply department policies or determine when applicable.			Seek involvement/information regarding committees such as P&T or department committees. Contributes ideas and actively participates.

Comments:

3. Demonstrate knowledge and skills regarding unit dose and intravenous admixture systems

- Y N NA a. Identifies key elements of unit dose system
 Y N NA b. Demonstrate understanding of special handling, preparation, and administration procedures for IV drug products (chemo. TPN)
 Y N NA c. Identifies proper procedures for dispensing sterile products
 Y N NA d. Assesses technology in drug distribution.
 Y N NA e. Drug distribution system, automated dispensing.

Outcome Rating:	1	2	3	4	5
_____	Lack of compliance of sterile technique and special handling procedures. Does not grasp concept of drug distribution system.	Compliance with sterile technique and special handling. Demonstrates basic knowledge and understanding of the drug distribution system.			Uses exceptional technique in preparation. Contributes ideas or seeks more knowledge of the distribution systems.

Comments:

4. Demonstrate knowledge and understanding regarding purchasing and inventory control system

- Y N NA a. Identifies the appropriate terms used in the purchasing, billing, inventory control system, contracts, bid pricing processes.
 Y N NA b. Drug shortages, recalls.
 Y N NA c. Policies, compliance.

Outcome Rating:	1	2	3	4	5
_____	Unfamiliar with purchasing system and/or policies/procedures for institution. Lacks knowledge of options with drug shortages.	Able to describe purchasing system. Understands pharmacist role in drug shortages and recalls.			Demonstrates full knowledge and details of purchasing systems.

Comments:

5. Become familiar with Quality Assurance (QA) and Medication Use Evaluation

- Y N NA a. Demonstrate knowledge of MUE
 Y N NA b. Demonstrate knowledge of QA process

Outcome Rating:	1	2	3	4	5
_____	Unaware of application and utility of MUE and QA.	Understands utility of MUE and QA.			Actively participates in MUE if available or can actively describe the process and outcomes from an MUE and QA.

Comments:

6. Describe legal and regulatory requirements: distribution, disposal, and transfer of Controlled Substances, as well as requirement for Investigational medication distribution.

- Y N NA a. Board of Pharmacy
- Y N NA b. DEA
- Y N NA c. MPCA
- Y N NA d. CMS
- Y N NA e. JCAHO

Outcome Rating:	1	2	3	4	5
_____	Lacks understanding and application of laws pertaining to controlled substances and investigational meds. Non-compliant with regulatory requirements.		Understands the above organization's roles in controlled substances and investigational meds. Consistently complies with legal and regulatory requirements		Demonstrates exemplary knowledge and application of legal and regulatory requirements of controlled substances and investigational meds.

Comments:

7. Accurately interprets the medical literature and apply data to clinical practice

- Y N NA a. Conducts appropriate literature searches to find information.
- Y N NA b. Interprets primary literature.
- Y N NA c. Understands and applies evidence-based medicine concepts.
- Y N NA d. Understands and applies basic biostatistical principles.
- Y N NA e. Demonstrates knowledge of clinical guidelines for common conditions.

Outcome Rating:	1	2	3	4	5
_____	Does not use appropriate search terms to conduct useful literature searches; unaware of availability or applicability of appropriate clinical practice guidelines.		Able to gather some pertinent literature to apply evidence-based medicine; generally understands clinical relevance of primary literature.		Accurately locates and evaluates appropriate literature for clinical practice; considers statistic principles in their interpretation of the literature; approaches patient care from an evidence-based perspective.

Comments:

8. Displays professional behavior and work ethic

- Y N NA a. Maintains professional behavior at all times.
 Y N NA b. Is a responsible member of the health care team.
 Y N NA c. Follows HIPAA regulations.
 Y N NA d. Applies ethical principles to patient care.
 Y N NA e. Is reliable, responsible, infrequently late, and finishes work that is started.
 Y N NA f. Initiates activities and utilizes time effectively.
 Y N NA g. Displays appropriate response to feedback and is open-minded to recommendations for improvement.
 Y N NA h. Is able to resolve conflict appropriately.

Outcome Rating:	1	2	3	4	5
_____	Frequently late and may speak disrespectfully of patients/caregivers/other healthcare providers; needs continued reminder of privacy of health information; displays poor time management.	Attempts to modify behavior or improve performance based on feedback; generally considers ethical issues when caring for a patient; completes assigned tasks but rarely seeks additional learning opportunities.			Exhibits enthusiasm for practice and frequently initiates independent learning activities; takes personal responsibility for patient care; seeks feedback from preceptor and makes effort to improve performance.

Comments:

9. Effectively communicates with patients, caregivers and health professionals

- Y N NA a. Communicates effectively with patients with significant barriers (literacy, language, mechanical).
 Y N NA b. Communicates in a clear, concise and organized manner, both verbally and in writing.
 Y N NA c. Documents medication histories and interventions appropriately.
 Y N NA d. Writes complete and concise notes in the medical chart.
 Y N NA e. Provides effective written communication to patients (e.g., medication changes).
 Y N NA f. Recommends therapy verbally to health professionals, with confidence and assertiveness.
 Y N NA g. Provides complete, concise answers to drug therapy questions from health professionals and patients.

Outcome Rating:	1	2	3	4	5
_____	Provides inaccurate and unsupported information in answering drug therapy questions; includes incomplete drug information in clinical pharmacy notes; unable to design communications for audience (e.g., patient vs. nurse vs. physician)	Oral communications are understandable but may be slightly disorganized; adequately documents histories and interventions.			Written and oral communication contains complete information which is appropriate for the audience; communications are organized, clear and succinct.

Comments:

10. Cultural competency (optional)

- Y N NA a. Respectful of different patient groups and cultural/ ethnic/ religious traditions
- Y N NA b. Displays an open-minded attitude to cultural perspectives different from his/her own
- Y N NA c. Applies knowledge of a patient’s geographic location, socioeconomic status and environment to their assessment of health care needs, access, and health risk.
- Y N NA d. Patient – student interactions are conducted at appropriate language and educational levels.
- Y N NA e. Care plans are designed to appropriately reflect the patient’s cultural identity.
- Y N NA f. Patient Care is delivered in a culturally sensitive manner.

Outcome Rating:	1	2	3	4	5
_____	Does not understand the need for the application of cultural competency in pharmaceutical care. Does not identify the impact of a patient’s culture/SES/religion when faced with a related or relevant issue.	Collects and presents information when cultural issues are present. Does not always identify culture as a component of a patient’s health care needs.			Can correctly identify health care issues related to a patient’s cultural/religious/SES/ geographic orientation. Can identify own personal cultural perspective and successfully neutralize bias when managing the patient’s health care needs.

Comments:

General Comments: