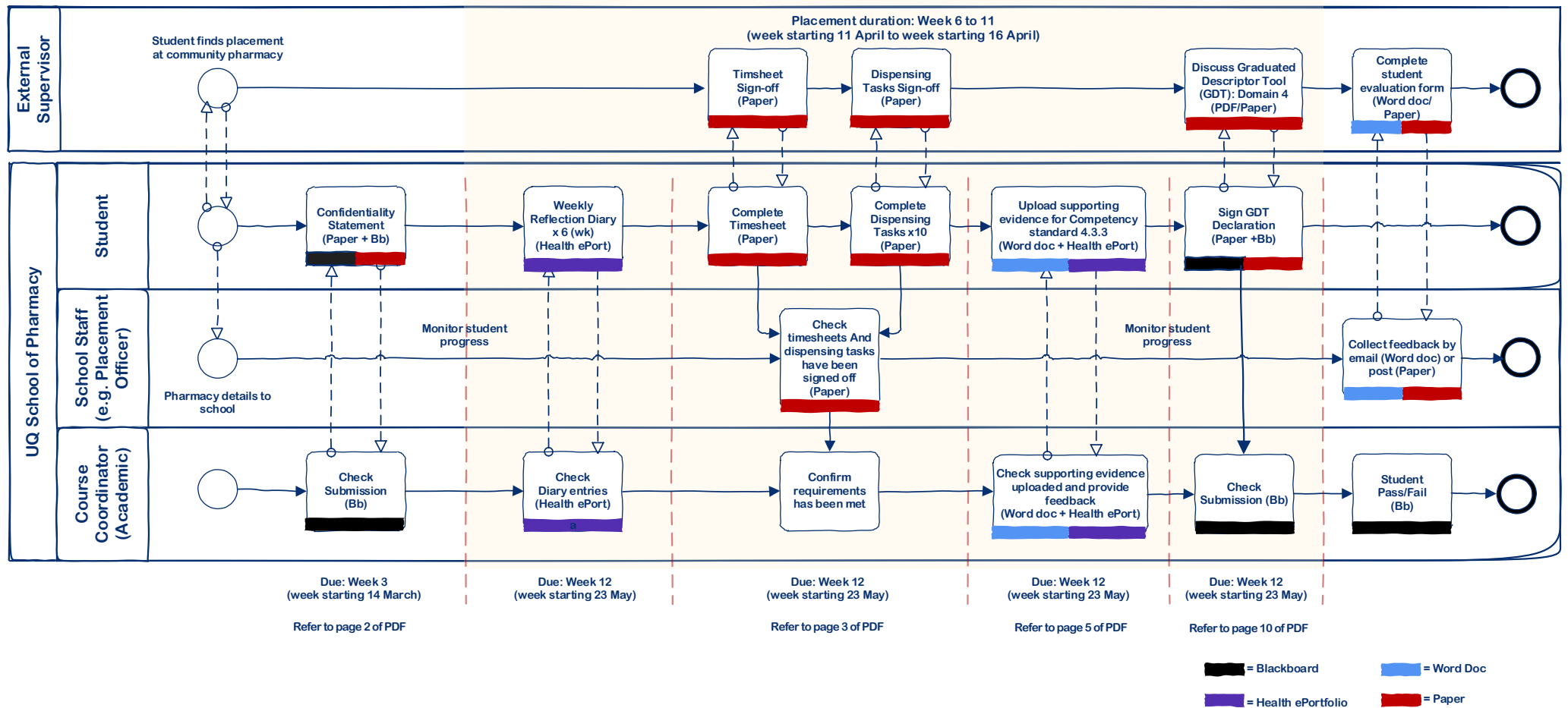


PHRM3011: current setup and workflow



Please note: Health ePortfolio is one of the bespoke (current) systems.

Student Confidentiality Statement

As part of The University's agreements with Preceptors and Placement Sites, it is our responsibility to obtain from you, the Student, a written undertaking before you start your placement relating to confidentiality.

This document is valid for the duration of your enrolment in the Bachelor of Pharmacy program and therefore applies to all of your experiential placements, although you will be asked to reconfirm this commitment each year.

Please read the following text carefully, and only sign it if you fully understand its consequences. You can contact the Placement Academic Supervisors to further discuss this, or for free legal advice please contact the Student Union.

The student undertakes to:

- ***not*** give to any person, directly or indirectly, any information acquired during the placement, that may lead to identification of someone receiving or who has received a service/treatment unless the Student is compelled to do so by law, or the person being identified consents to it, or the information is required for further treatment of the person being identified.
- ***not*** give to any person, directly or indirectly, any information acquired during the placement relating to financial or business management practices of the preceptors, the placement site and the Agency providing the placement unless the student has obtained express permission from the preceptor/Agency to do so, or unless the Student is compelled by law to provide the information.
- ***not*** access, read, record, communicate, OR attempt to access, read, record, communicate any written or electronic information concerning any person receiving or who has received a service / treatment UNLESS specifically directed or permitted to do so by the placement preceptor/ Agency, and then only for the purposes of carrying out a specific activity as part of the placement training.
- ***not*** share opinions, information, experiences, images, video or audio clips, including websites and applications used for social networking. Common sources of social media include, but are not limited to, Facebook, LinkedIn, blogs (personal, professional [except student diaries where directed] irrespective of whether named or published anonymously), WOMO, True Local, Twitter, YouTube, Instagram, discussion forums and message boards, as per AHPRA's Social Media Policy <http://www.ahpra.gov.au/News/2014-02-13-revised-guidelines-code-and-policy.aspx>.

You are asked to sign agreement to the above text as having been fully read, understood and will be followed.

I _____(Student name)_____ (Student number)

on _____(date) **agree to observe all of these guidelines.**

Community Pharmacy Placement

Attendance Sheet

Name (as on student card): _____

Name (as known at placement If different from above): _____

Pharmacy Name: _____

Pharmacist Preceptor Name: _____

Year of Program: 1st Year Accelerated 2nd Year 3rd Year
(please circle one above)

I hereby certify this Pharmacy student has completed the non-paid Community Pharmacy Placement at this workplace, to my satisfaction as the Placement Preceptor.

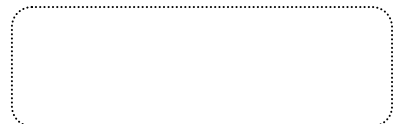
Date	Start Time	Finish Time	No. of Hours	Pharmacist Preceptor Signature

Students: The completed form **MUST** be presented at the School of Pharmacy Office by the due date as stated in the course ECP. Non-submission may result in a failing grade.

You **MUST WAIT** until the Administrative Staff have signed, dated and stamped the sections below, and provided you with your receipt. This provides you with proof of submission.

THIS FORM WILL NOT BE ACCEPTED WITHOUT AN ATTACHED PLACEMENT DISPENSING TASK

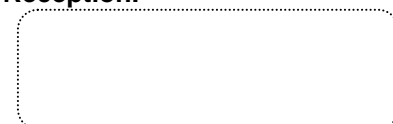
Received by (initials): _____ Date: _____



Please write your name below and submit at School of Pharmacy Reception.

Student Name: _____

Received by (initials): _____ Date: _____



School of Pharmacy Stamp

PHRM3011 – Placement Dispensing Task

Semester 1, 2015

Task: Students are to politely ask their preceptor pharmacist for opportunities to practice dispensing in a pharmacy environment, preferably during a quiet time at the pharmacy.

Purpose: Good dispensing processes help to ensure that consumers know about their medications and have the skills to take/use the medications in a safe and efficacious manner. The dispensing process is one of the key tasks performed by pharmacists. It is therefore essential that pharmacy students can demonstrate a satisfactory understanding of dispensing processes prior to their graduation.

Students must record they have dispensed **10 prescriptions** during the course of their placement. This can include a mixture of **original prescriptions (O)**, as well as **repeats from the same pharmacy (IR; no more than 2)** and **outside pharmacies (ER; no more than 2)**. This would require that the student dispenses ~1-2 scripts/week for their 6 week placement. Students must start this task on their first week of placement to minimise pressure in later weeks to dispense a larger number of prescriptions during their placement time.

Data must be recorded each week on this form and signed by the Preceptor.

No.	Date (dd/mm/yy)	Original (O), External (ER) or Internal (ER) Repeat	Preceptor Name	Preceptor Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Full Student Name (Print): _____

Student Number (8 digits): _____

Student Signature: _____

Date (dd/mm/yyyy): _____

Professional Development Feedback:

(Preceptors, please feel free to record any points that would help to improve the student's dispensing skills)

Pharmacy Clinical Practice Performance Portfolio

You are signed in as, **uqjtsai** Logout

Assessments Placements Diary Manage Staff Manage Students Exports Help Support

Student Attribute

ELEMENT 4.3.3

Element 3 – Assist consumer understanding and adherence

PERFORMANCE CRITERIA	EVIDENCE GUIDE
Liaises with the consumer/carer to clarify their information needs.	<ul style="list-style-type: none"> Ability to communicate with consumers/carers to confirm their knowledge and understanding of their disease/condition and medications and clarify the level, type and form of information required.
Identifies additional information needs arising from changes in the medicines or medication treatment.	<ul style="list-style-type: none"> Ability to identify circumstances where a change in appearance of medicine or its packaging (e.g. as a result of brand substitution or changes in corporate packaging) needs to be discussed with the consumer/carer.
Provides advice on the medicine, dosing regimen, precautions, possible adverse effects and any specific storage requirements.	<ul style="list-style-type: none"> Ability to describe, in terms appropriate for informing the consumer, the therapeutic indications, pharmacological actions and precautions for dispensed medicines. Ability to identify and describe the most relevant adverse effects and to discuss these with consumers/carers without causing alarm.
Reinforces and clarifies verbal advice by demonstrating administration technique and using written consumer information resources as required.	<ul style="list-style-type: none"> Ability to use written consumer information resources (e.g. CMI leaflet) to identify and tailor information relevant to specific consumers and/or circumstances. Ability to describe and/or demonstrate administration technique for commonly used medicines, including inhalers, eye ointments, and eye, ear and nose drops.
Checks that consumers understand why the medicines have been prescribed and how they are to be used/ administered and stored.	<ul style="list-style-type: none"> Ability to check that medicines information provided has been understood (e.g. uses questions to confirm understanding, interprets cues that information has not been understood).
Works with the consumer/ carer to positively impact on adherence with prescribed treatment regimen.	<ul style="list-style-type: none"> Ability to discuss with consumers/carers the importance of adherence and possible courses of action that may improve their ability or willingness to adhere. Ability to demonstrate the use of aids/appliances (e.g. spacer, tablet cutter, single dose packaging).

SUPPORTING EVIDENCE

Download the template from the Downloads Section; Rename (e.g. John Smith Competency Elementn.m.doc) and save to your computer; Complete the template recording the evidence that you feel best demonstrates your mastery of the competency element; Click **...EDIT** then **UPLOAD** your files to the portfolio

STAFF COMMENT

Click the **Edit** button & in the space provided please record the evidence that you feel best demonstrates your competency in this area. Then click the **Save** (or **Cancel**) button.

...edit

STAFF MARKING

...edit

STAFF LINKS

...previous Entered assessment	...next Entered assessment
...previous Flagged assessment	...next Flagged assessment
...previous student	...next student
...student's overall view	

The following text is an example of the required content and format.

Download the template; Rename (e.g. John Smith Y4 Evidence.doc) and save to your computer; Complete the template recording the evidence that you feel best demonstrates your mastery of the chosen competency element.

	Example: Situation as seen/presented + Background	Which performance criteria does this example relate to and why?	Reflection and identified performance gaps Reflect on your involvement in this example and document strategies you will undertake to overcome learning gaps.
Example 1	I consulted with a 68 year old male on his antihypertensive medication. He reported his BP was at 180/100mmHg prior to starting perindopril 5mg in the morning and atenolol 50mg in the morning. His most recent BP measurement at the GP was 125/85mmHg and he had been suffering from orthostatic hypotension and dizziness. The Doctor had reduced his perindopril to 2.5mg in the morning (atenolol to remain the same), aiming for a BP of 140/90mmHg. I discussed this management plan with the patient who was happy that I was sharing an interest and he expressed a greater understanding of his blood pressure control.	Competency Standard 4.2, Element 2, Criteria 1; This example required me to understand the therapeutic use of perindopril and atenolol and monitor for desired patient outcomes. Competency Standard 4.2, Element 2, Criteria 3; This example required me to identify orthostatic hypotension as an actual drug related problem likely to be associated with antihypertensives.	I hadn't encountered overtreatment of a condition prior to this, having the opportunity to consult with the patient and talk about how his management was going was an excellent educational experience. I initially assumed that the decrease in the perindopril dose was in error because I did not consider overtreatment. In future I will confirm any recent medication changes with the patient and consider a decreased dose may be part of a management plan.
Example 2	A patient presented with a prescription for Lipitor (atorvastatin) 80mg tablets with 11 repeats. The dispensing system records showed that the patient was previously on atorvastatin 10mg. On asking, the patient was not aware of a dose change, or that the Doctor was unhappy with his current cholesterol management/control. On speaking with the Doctor it became clear that the Doctor had not intentionally increased the dose of atorvastatin and that it must have been an error on his behalf when generating the prescription. The doctor faxed through a new script straight away for the 10mg tablets and we collected the original from the surgery that day.	Competency Standard 4.2, Element 2, Criteria 1; This example required me to understand the therapeutic use of atorvastatin and enquire with the patient regarding desired cholesterol lowering outcomes Competency Standard 4.2, Element 2, Criteria 5; This example required me to use my professional judgement to determine whether the increase in atorvastatin dose was warranted to increase efficacy.	I found that picking up on errors such as authority numbers being incorrect or missing is much easier than picking up on an erroneous change of dose by a prescriber, however this is often an even more important error to be aware of as far as patient outcome/safety is concerned. I will continue to be conscious of this type of error, build this process into my checking procedure and confirm any changes with the patient. I did not feel 100% confident calling the doctor as I had not previously done this before. To ensure I am well prepared when calling a prescriber, I will endeavour to gather all information prior to the phone call so that I am prepared for any questions or clarification required by the GP. Before I rang, I discussed my proposed conversation with my preceptor to see where & how I could improve.

	Situation as seen/presented + Background	Which performance criteria does this example relate to and why?	Reflection and identified performance gaps Reflect on your involvement in this example and document strategies you will undertake to overcome learning gaps.
1			
2			
3			
4			
5			

PHRM3011 Evidence Examples Marking Criteria

Criterion	0	25%	50%	75%	100%
Spelling, sentence construction, language, punctuation, grammar 10	Text has multiple errors and the document cannot be read with any clarity	Text has errors and this significantly impedes the reading of the document	Text has errors but the document can be read	Well written document with few errors	Well written with grammar, sentence construction & language clarifying the document
Situation/background description of the practice interactions; description of cases appear to be authentic and occurred during this placement. <i>(Description of what happened?)</i> 20	Minimal or no understandable description of the placement practice interactions; cases appear to be fabricated	Some adequate description of the practice interactions; cases lack authenticity	Reasonable or average description of the practice interactions; cases appear to be authentic	Good and clear description of the practice interactions; cases appear to be authentic.	Excellent logical description of the practice interactions; cases appear to be authentic
Evidence of performance in the designated competency element <i>(What did you do to demonstrate the competency element performance criteria?)</i> 30	Minimal or no description of the required evidence examples.	Poor description of the required evidence examples and/or the description only covers a single performance criteria	Reasonable or average description of the required evidence examples; some effort taken to provide good evidence of at least 2 different performance criteria	Good description of the required evidence examples; effort taken to provide good evidence of at least 3 different performance criteria	Excellent description of the required evidence examples; effort taken to provide good evidence of at least 4 different performance criteria
Description of personal performance gaps and learning needs <i>(What skills do you need in relation to the competency element performance criteria?)</i> 20	Minimal or no description of performance gaps and learning needs.	Poor description of performance gaps and learning needs.	Average/sound description of performance gaps and learning needs.	Good description of performance gaps and learning needs.	Excellent and well reasoned description of performance gaps and learning needs.
Plan for future action to address performance gaps <i>(What is the plan to develop these skills?)</i> 20	Minimal or no description of future action to address performance gaps	Poor description of future action to address performance gaps; plan too complicated or not feasible.	Average/sound description of future action to address performance gaps; plan often too complicated or not feasible	Good description of future action to address performance gaps; Sound plan.	Excellent description of future action to address performance gaps; plan for future action is clear and meaningful.

PHARMACY EXPERIENTIAL PLACEMENTS TOOL

HOW WELL AM I PROGRESSING: COMPETENCY GRADUATED DESCRIPTORS TOOL FOR SELF-ASSESSMENT AND FEEDBACK

- What is it?** A guide for assessing progress in achieving profession's competencies; focuses on student characteristics in early- and late-stage placements **or other relevant experiential activities**.
- Who should use it?** For self-assessment (e.g. prior to or during placements **or within other relevant experiential activities**) or for preceptor feedback/discussion purposes.
- How was it developed?** In workshops and in Australia-wide consultations **and trialling**, as part of an ALTC (Australian Learning and Teaching Council) research project.

Suggested use of the Tool

- Look at the pharmacy **Domains** (there are 8**): **Professional and ethical practice... to ... Critical analysis, research and education****. See dot points under early placement, late placement (**note: this also relates to other relevant experiential activities**).
- Before starting a placement, student self-assesses (by placing ticks in the circles) in each of the 8 Domains. (eg, black ticks ✓, as indicated below)
Level of Support – Significant assistance needed ... to ... Guidance (prompting, cues).
Time Taken for Tasks – Significant task time needed ... to ... Little additional time needed.
Clinical Problem-solving – Has knowledge, little application ... to ... Information integrated & applied: can connect knowledge elements and apply these.
Degree of Consumer Focus – Focused on own performance: the student is rule-bound and concentrating on themselves rather than the **consumer** in applications ... to ... **Mostly consumer**-focused: can apply processes flexibly to meet client needs.

LEVEL OF SUPPORT	<input checked="" type="checkbox"/> Significant assistance (direction)	<input type="checkbox"/> Minimal assistance	<input checked="" type="checkbox"/> Guidance (prompting, cues)
TIME TAKEN FOR TASKS	<input type="checkbox"/> Significant task time needed	<input checked="" type="checkbox"/> Some additional time needed	<input type="checkbox"/> Little additional time needed
CLINICAL PROBLEM-SOLVING	<input checked="" type="checkbox"/> Has knowledge, little application	<input type="checkbox"/> Recognises aspects of problem-solving	<input checked="" type="checkbox"/> Information integrated & applied
DEGREE OF CONSUMER FOCUS	<input type="checkbox"/> Focused on own performance	<input checked="" type="checkbox"/> Partly consumer-focused, partly self-focused	<input checked="" type="checkbox"/> Mostly consumer-focused

- In the initial weeks of the placement, student discusses the tool and their self assessment and placement goals with the preceptor.
- Mid way through a placement, student again self assesses, using a different colour tick for each category.
- Preceptor separately completes tool.
- Discuss similarities/differences.
- At the end of placement, repeat steps 5,6,7 using another colour and indicator. (eg, orange crosses ✗, as indicated above)

Use the Comment box to provide clarifying remarks.

** Based on the eight Domains from the *National Competency Standards Framework for Pharmacists in Australia* (Pharmaceutical Society of Australia, 2010). The right side columns acknowledge the links to 'Internship' and 'Newly-Registered Pharmacist', with 'Cues' indicating that 'Competent' status has been achieved. Note that Domain 3 is not required for Initial Registration but is outlined in this tool, with a focus on relevant preparatory activities.

Context details:

Student Name: _____

University and Program of Study: _____

Placement Description: e.g. first, final, rural, hospital _____

Purpose of Using Tool: (circle) Pre-placement self-assessment During placement self-assessment Post-placement self-assessment Preceptor feedback (interim) Preceptor feedback (final) Other (indicate) _____

Goals set by student: _____

Overall Preceptor feedback: _____

Domain 4: Review and supply prescribed medicines

Pharmacists manage the distribution process to ensure the safe and accurate supply of products and to support quality use of medicines

Developing skills in safe and accurate management of products

Early Placement Student
With assistance & significant additional time:

- assesses prescription validity
- clarifies medication orders
- assesses appropriateness of prescribed medicines
- follows predefined systematic dispensing procedures
- carries out specific documentation tasks
- identifies relevant information regarding medicines such as adverse affects, storage

Late Placement Student
With guidance & only some additional time:

-
-
-
- & reflects on systematic dispensing procedures
-
- & provides information to patients as appropriate

**I
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P**

**Newly-Registered Pharmacist
COMPETENT**

Cues

Validates prescription and clarifies medication orders, confirming availability and considering prescribed medicine to apply systematic dispensing procedures and maintain records

LEVEL OF SUPPORT	<input type="radio"/> Significant assistance (direction)	<input type="radio"/> Minimal assistance	<input type="radio"/> Guidance (prompting, cues)
TIME TAKEN FOR TASKS	<input type="radio"/> Significant task time needed	<input type="radio"/> Some additional time needed	<input type="radio"/> Little additional time needed
CLINICAL PROBLEM-SOLVING	<input type="radio"/> Has knowledge, little application	<input type="radio"/> Recognises aspects of problem-solving	<input type="radio"/> Information integrated & applied
DEGREE OF CONSUMER FOCUS	<input type="radio"/> Focused on own performance	<input type="radio"/> Partly consumer-focused, partly self-focused	<input type="radio"/> Mostly consumer-focused

Independence

Prioritises effectively and time efficient

Identifies problem-solving and integrates

Sufficient process skills for consumer focus

Comment (eg, discrepancies, areas of particular strength, future action)

**GRADUATED DESCRIPTORS TOOL–
DECLARATION OF ASSESSMENT**

As a component of the PHRM3011 Community Pharmacy Placements the following have been completed;

1. Self assessment at the placement site using the graduated descriptor tool downloaded from Blackboard.

2. Preceptor assessment of student using the graduated descriptor tool downloaded from Blackboard.

I _____(Student name) on _____(date) declare
that I have completed the above tasks as per the requirements of PHRM3011 Community
Pharmacy Placement.