



UNIVERSITY *of*  
TASMANIA

*Department of Pharmacy*  
*School of Medicine*  
*College of Health and Medicine*

**CSA357**  
*Pharmacy Skills in Practice*

**CSA430**  
*Pharmacy Practice*

*Experiential Learning Program*

**COMMUNITY PLACEMENT**  
**PRECEPTOR GUIDE**

**2019**

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***For emergencies after hours, please call 0413 702014.***

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## Concerns and Feedback

The School of Medicine appreciates your continued support of the community pharmacy placements. If you have any concerns you would like to express, or feedback about the students and/or the material presented in this document and other associated documents, please contact *Dr Felicity Veal* (3<sup>rd</sup> years) or *Mr Justin Cousins* (4<sup>th</sup> years) or *Mrs Josie Hughes* or *Mrs Anne Todd* (3<sup>rd</sup> and 4<sup>th</sup> years).

**Important:** If you have a student on placement who is performing very poorly, significantly below your expectations, or you are concerned about in any way, contact the placement team as early as possible.

### Version Control

2017 V01	Reviewed, updated, Layout changes	April 17
2018 V02	<ul style="list-style-type: none"><li>• Updated supervision requirements</li><li>• Updated website links</li></ul>	May 2018
2019 V03	<ul style="list-style-type: none"><li>• Minor revisions including updated mobile device use information</li><li>• Included 2019 assessment forms</li></ul>	April 2019

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## Objective

The objective of the placement is to provide students with an extended experience of community pharmacy. It provides an opportunity for students to work on a one-to-one basis with pharmacists and to experience the variety involved in community pharmacy. In order to achieve this objective, the following activities are considered to be relevant to students during their placements:

- **Prescription practice**
  - Interpretation and evaluation of accuracy and completeness of prescriptions.
  - Supervised compounding and/or dispensing to legal and professional standards.
  - Selection of appropriate ingredients, containers, brands and dosage forms as required.
  - Experience dealing with everyday problems encountered in prescription practice.
  - Problem solving using reference books and other drug information sources.
- **Effective patient communication**
  - Conversations with patients concerning health matters.
  - Consultations with patients concerning prescription and non-prescription medication.
- **Drug utilisation monitoring**
  - Evaluation and use of dispensary computer systems.
  - Monitoring for drug interactions and/or non-compliance, and procedures necessary to prevent subsequent problems.
  - Adherence tools e.g. MedsIndex
- **Professional Pharmacy Services**
  - Increase awareness of services provided in, and by the pharmacy
    - MedsCheck and Diabetes MedsCheck
    - Home Medicine Reviews and Residential Medication Management Reviews
    - Dose Administration Aids
    - Screening and risk assessment activities
    - Clinical Interventions
    - Staged Supply/Pharmacotherapy
  - 6CPA requirements and considerations
    - Inter-professional communication
  - Review relevant policies and procedures
- **Additional activities**

If you wish, additional activities can be scheduled with other health practitioners, including:

  - Spending time at health care centre / district hospital / aged care facility / day centre;
  - Spending time with the local doctor / dentist / district health or specialty nurse etc.
  - Attending home medication reviews

Please contact us if you would like assistance in arranging additional activities.

### *Performance expectations*

**Third year student** exposure to the community pharmacy environment prior to their placement is minimal, and they have yet to complete all of the relevant university content. Consequently, it is expected that third year students will operate at the level of a junior pharmacy assistant.

**Fourth year student**, once oriented to your pharmacy, is expected to be able to function at the level of a senior pharmacy assistant/commencing intern pharmacist.

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### ***Student Supervision:***

In general, the University expects pharmacists to be responsible for supervising undergraduate students during a community pharmacy placement. If students are participating within that setting with other health professionals acting as clinical educators, students are advised to remain within scope and not to undertake tasks or interactions with patients that are not appropriate to the competencies and standards of practice for pharmacists. As a guiding principle, students are not permitted to participate (as opposed to observe) in the care of a patient unless under the direct supervision of a registered health professional.

While it is ideal that students are at a pharmacist's side for their entire placement, the university understands that due to staffing and workload pressures, there may be times when it is necessary for students to work somewhat independently. Self-directed learning activities have been created for this purpose. Students may shadow and learn from other team members including interns, technicians and pharmacy assistants where appropriate, but they do not hold responsibility for student supervision. The ready reference at the end of this guide provides examples of activities where supervision by a pharmacist would be required.

### ***Orientation***

All students, especially those who are visiting your pharmacy for the first time, will possibly be feeling nervous and anxious. They will benefit greatly from a thorough induction to your pharmacy and team at the start of the placement. Some points you might like to cover include:

- Expectations on appearance and the use of a uniform, if applicable;
- Confidentiality issues and your privacy policy;
- Any policies applying to the operation of cash registers, customer accounts etc.;
- Your telephone policy, including general answering of the telephone as well as personal phone calls;
- Occupational Health and Safety policies, and relevant safety issues; and
- Any other issues/policies the student should be aware of for the duration of the placement.

### **Personal device (mobile phones etc) uses on placement:**

- Students are informed that every individual workplace will have particular guidelines on the use of personal devices (mobile phones, tablets) during work hours for clinical or personal use. Students must familiarise themselves with, and adhere to, the personal device use guidelines within each workplace.
- Generally, students are advised mobile phone use should be:
  - Limited to study and clinical needs only;
  - Should **never** be used to take copies or photographs of drug charts, scripts, files or other patient identifying information. Students must not record or film patient encounters.
  - May need to be kept in a locker / out of use until meal or other breaks;
  - If kept with the student (when allowed) must be left on silent, and use must comply with venue policy.

All students should have attended a pre-placement talk to give them an overview of what is expected of them. Furthermore, each student is provided with a workbook detailing the need to: maintain confidentiality during their placement; to exhibit professional behaviour in their manner, timekeeping and appearance; as well as information on how to access support should they need it on their placement.

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### ***Attendance and Punctuality***

**Third year placements** are two weeks in duration (Monday to Friday, 38 hours/week).

**Fourth year placements** are three weeks in duration (a *minimum* of 32 hours/ week).

All students have been instructed to contact their preceptor during the week prior to their placement to negotiate actual hours (including starting and finishing times) directly with their preceptors.

Students have been advised that they must report nonattendance due to illness or any other unavoidable cause to their preceptor by 9:30am (*by phone call only*) on the day of absence, and to the placement staff (*by email or phone call*) as soon as possible.

### ***Insurance and Policies***

The University of Tasmania provides insurance cover for students participating in Tasmanian Pharmacy Division placements. The students are also governed by all University policies and requirements during their placement. For more information, see pages 32 & 33 of this document: [http://www.utas.edu.au/data/assets/pdf\\_file/0020/215642/Insurance-Guidelines.pdf](http://www.utas.edu.au/data/assets/pdf_file/0020/215642/Insurance-Guidelines.pdf)

### ***Placement Exit & Emergency Procedures***

Placements are a compulsory and integral part of a student's studies. Therefore, students are given the opportunity to provide preferences for locations and reasons to be considered when allocating student placements. The consultative approach taken by the Division in arranging placements provides placements, which are hoped to be suitable and rewarding for both student and preceptor. However, it is acknowledged that from time to time, placements may not work out as planned or an emergency situation may arise where preceptors may find the following information useful:

- Students and/or preceptors can telephone or email unit coordinators to discuss concerns at any time (contact details on first page). If an emergency situation arises afterhours the Placement Officer can be contacted on: 0413 702014.
- If issue(s) cannot be resolved, arrangements can be made to remove students from placement and return them to the Division if necessary.
- If a crisis occurs while a student is on placement, they are provided with counselling details before departure and are made aware of University counselling services available to them on their return.
- Alternatively, **Lifeline** offers a 24-hour counselling service to anyone, anytime from anywhere in Australia. Free call 13 11 14 or their website [www.lifeline.org.au](http://www.lifeline.org.au)
- If a student is involved in an accident or emergency situation while on placement, their preceptors should contact the Division (details on contents page). If a situation arises after hours the Placement Officer can be contacted on: 0413 702014.
- Students are asked at the beginning of the year to provide emergency contact details, which are held in their student placement file with the Placement Officer, and in some instances sent to Preceptors when confirming placement details.

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## Intended Learning Outcomes (ILOs)

### *Fourth Year*

The intended learning outcomes (ILOs) for fourth year students, taken from the BPharm Course ILOs, for students on placement are:

1. Apply professional problem-solving skills to identify critical issues, conceptualise problems, use relevant information and formulate a range of solutions in relation to the provision of medicines or health advice
2. Demonstrate appropriate communication and collaboration skills combined with therapeutic decision making, and incorporating patient-centred care principles in the management of acute illness and chronic disease.
3. Develop organisational and reflective professional practice skills and explain how they underpin professional and ethical practice.
4. Describe the different activities and settings which a pharmacist may perform and the impact this may have on patient outcomes.
5. Demonstrate the role of pharmacists in health promotion, harm minimisation and preventative health activities.
6. Search, evaluate and appropriately reference drug information and pharmacy related literature

You will find these fourth year ILOs used on the preceptor assessment sheet.

## Assessment

### *Third year assessment*

Third year assessment will be based on two aspects: 10% of students' final mark for Pharmacy Skills in Practice will be from their written reflective assessment pieces, and 10% will be from preceptor's assessment of the student's skills, knowledge, attitudes and behaviour whilst on placement (see Preceptor Assessment Sheet – Year Three Pharmacy Students).

There are three reflective pieces that a student must complete (outside placement hours):

- One reflective piece (200-250 words) must document their experience in community pharmacy, discuss how their experience differed from / confirmed what they were expecting, and include their reflections about health care in a community setting. An example reflective piece has been put on MyLO (an online learning portal) for students.
- One reflective learning piece: reflecting on their experience in community pharmacy and explain how excellence in community pharmacy practice provides benefits to patients. The five reflective pieces with the highest scores will be submitted to the Pharmacy Guild of Tasmania for nominee selection for the "Excellence in Community Pharmacy Prize".
- One reflective piece must focus on specific scenarios and associated reflective learning (one A4 page max.), touching on:
  - What happened? What would they do differently/same next time?
  - Which competency standards are relevant to this scenario?
  - What learning needs have they identified relevant to this scenario?
  - How do they intend to achieve these learning outcomes?

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Students have also been requested to review ONE OTC section/product. From this, they will be asked to devise and deliver a 5-10 minute presentation. They have been told that there will not be a projector/computer to present with so they will need to work out other ways to present. This talk should be aimed at further education of community pharmacy assistants.

We would really appreciate if a pharmacist could be present for this presentation and provide any formative feedback on content or communication. We do appreciate you are very busy and if this is not possible, please feel free to contact Felicity (6226 2312) to discuss this further. Potential topics suggested to students are: Cold and flu tablets; when to provide an antidiarrhoeal; how to select the right NRT product for the patient; choosing the best contact solution for lenses; differences between infant formulas; antifungal choice for athlete's foot etc.

### ***Fourth year assessment***

There are three components to fourth year community assessments: their community portfolio, a pharmacy service project (each worth 10%) and your preceptor assessment (pass/fail, see Preceptor Assessment Sheet – Year Four Pharmacy Students).

#### Community Portfolio

Students are required to submit a summary of at least six activities conducted/observed on placement, with associated reflection (and accompanying evidence where appropriate), and any feedback that was provided to them by the supervising staff/pharmacist.

We do not require preceptors to assess the portfolio, but the student may ask for guidance as to what to include. Some examples of what these activities could include are below. This list is non-exhaustive, is at your discretion, and some activities can only be undertaken on request/direct supervision by staff/preceptor.

- Responding to an OTC/S3/S4 request + counselling
- Compounding & writing up an extemporaneous preparation
- Dispensing an S4 prescription
- Assisting with dosette-packing
- Responding to a drug / condition query
- Conducting a narcotic safe audit (supervision essential)
- Assisting with / observing Opioid Replacement Program in action
- Giving an in-service presentation to staff for education
- Observing / assisting with a MedsCheck (or Diabetes/Pain Medscheck) consultation
- Assisting with disease / condition monitoring e.g. asthma education, BP monitoring.
- Description and reflection of an incident which occurred in store with a staff member (HR-type incident), or customer (ethics / quality of interaction/ advice)
- NPS case studies (print out certifying completion of the activity)
- Any other CPD type programs / training they participated in.

To ensure students reflect on a variety of activities, we have asked them to include a maximum of two of the same activities (e.g. responding to two S3 requests) in their portfolio.

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### Pharmacy Service Project

Students are asked to design, initiate, run and evaluate a health-based project e.g. create a health stand on a chronic disease, perform a drug audit, design a staff training session etc. Students have been told they must talk to their preceptor(s) about the project in order to identify and meet the needs of the pharmacy. Following the project, students are expected to write a report about what they learned and what they would do differently next time.

### Student Self-Assessment

Fourth year students are provided with an assessment form (identical to the preceptor assessment form) for them to undertake a self-evaluation mid-way through their placement. They are encouraged to reflect on their placement so far, and discuss their evaluation with their preceptor and/or the placement team. Please feel free to provide additional feedback to the student at this stage. The placement team can be contacted for support if the student is falling below expectations, or if any other issues arise.

### ***Preceptor's Assessment (Third and Fourth year)***

Your feedback regarding each student's skills, professionalism and attitude is included in their overall assessment. There is a separate assessment form for Year Three and Year Four students, and you will find the templates at the back of this guidebook. In the last few days of each placement, the relevant assessment form will be sent to you along with a reply-paid envelope. If you have any additional comments to make about your student, good or bad, please contact a member of the placement team (details on contents page) at any time. If you have any questions or suggestions, please let the placement team know.

It is important that you return your Preceptor Assessment promptly once the placement has been completed. Constructive feedback received is passed on to students so that they can improve for subsequent placements.

If you anticipate that a student on placement will fall below the satisfactory score required to pass the placement (Year Four students) or is consistently performing below expectations (Year Three and Four students) please notify the unit coordinator or a member of the placement team as early as possible. We are able to offer support to students and placement sites if necessary.

### ***Extra Student Resources***

We have developed a separate resource for students to provide them (and preceptors) with a suite of additional resources and guides to complement student placements. The activities included in the resource are not compulsory, and non-completion does not affect students' university marks. These resources can be used to assist with student's knowledge gaps, for pharmacy downtimes and when preceptors and/or pharmacists are busy. A copy of this resource can be found at the end of the student's guidebook and can be emailed or sent to you on request. The student will have a copy with them on their placement.

## **Thank you**

**We appreciate the time and effort that you and your staff put into placements for our students and we are here to support you in any way we can.**

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## Pharmacy Preceptors' Ready Reference

The following pages are a guide to help pharmacists with student supervision, and to standardise student exposure across placements. There are two parts: suggested activities students can assist you with; and tips to assist you develop your leadership and preceptor skills (see *Further Information* for directions on how to earn CPD points for this activity).

### *Activities*

During a pharmacy placement, students may complete as part of their course obligations: dispensary work +/- extemporaneous dispensing, and front of shop (sale of S2 and unscheduled products). Students will need to be directly supervised by a pharmacist; however, there are some activities that can be done without direct supervision. These activities can only be completed after the supervising pharmacist has:

- Shown the student what to do and informed them what is expected of them;
- Observed the student attempting the activity; and
- Given the student appropriate feedback regarding how they undertook the activity.

This process may be repeated numerous times until the supervising pharmacist is satisfied with the student's performance, after which the student may undertake the activity unsupervised.

The following are suggested activities that students can perform unsupervised (unless otherwise stated) during their time in the community pharmacy. NB: Due to work flow and staffing, not all students may get the opportunity to perform all the activities outlined below.

### *Dispensary* (3<sup>rd</sup> and 4<sup>th</sup> year students)

- Take in a prescription for dispensing
- Ask the patient/carer for appropriate information (Medicare, concession and safety net details, age and weight of child)
- Contact Medicare to clarify patient details
- Check prescriptions for appropriateness
- Calculate paediatric doses
- Check for allergies
- Check previous dispensing history
- Pick stock for prescriptions
- Enter prescription through the dispensing system
- Label stock with prescription and ancillary labels
- Search for CMI's for prescriptions
- Hand out prescriptions
- Restock dispensary
- Pick stock for Webster-paks, Nursing Home medications, Doctor's bag order
- Fill Webster-pak
- **Supervising, registered pharmacist must check all dispensing and Dose Administration Aids** (e.g. Webster-paks) prior to giving medication to the patient/carer

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**With direct supervision and checking by a supervising pharmacist,** students can:

- Contact a GP to obtain information or clarify a prescription
- Provide verbal counselling and appropriate information (CMI/medication profiles) directly to patient/carer
- Obtain information required for the sale of an S3 product, assess the suitability of the request and provide appropriate counselling

***Extemporaneous*** (3<sup>rd</sup> and 4<sup>th</sup> year students)

- Label batches of pre-packed medications
- Pick stock for extemporaneous products
- Check stock, expiry dates and general stock-take

**With direct supervision & checking by a supervising pharmacist,** they can:

- Compound an extemporaneous product
- Calculate volumes/doses

***Front of shop*** (3<sup>rd</sup> and 4<sup>th</sup> year students)

- Introduce themselves to the patient/carer
- Talk to patients/carer to obtain a history
- Assess the signs, symptoms and history to determine whether the condition can be resolved with self-medication, health advice, or by referral to another health care professional
- Obtain medication history from patient/carer to check for interactions and side effects associated with individual products
- Provide appropriate first aid, nondrug treatments and health care advice
- Select non-prescription medications and provide counselling
- Select dosing aids (e.g. spacers, dosettes) and counsel on their use

***Down time activities*** (3<sup>rd</sup> and 4<sup>th</sup> year students)

- Read any guidelines, professional services, relevant areas of PSA professional practice standards and QCPP documents that relate to the topics below;
- MedsIndex - good quick adherence reference tool. Use this tool to identify candidates for MedsCheck or DAA;
- Dose Administration Aids (DAA). Read PSA professional practice standards on Medication adherence and DAA provision;
- Medicine lists – utilise pharmacies software to create medicine lists (medication profile). Could provide medication profiles for a number of customers that present during the placement or update for DAA patients;
- Medscheck service - read guidelines, do a dummy interview if time permits. Read some examples of services you have already provided;
- HMR process;
- Interprofessional communication – general preferred methods of communication with GP's, what works, what doesn't!!

For more downtime activities, please refer the student to the extra student resources in the student guidebook.

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### ***Suggestions for additional activities for placement (if available)***

Activities may include visits to:

- Patient's home with HMR pharmacist
- Local Community nurses
- Child and Family Health Clinic
- RNs or ENs in residential aged care facilities
- GPs – sessions or home visits
- District hospitals

### ***Preceptor Skills and Tips***

The clinical teaching environment is probably the most complex teaching environment in which anyone is asked to function. The preceptor is always dealing with two sets of needs: health care needs of patients and learning needs of students. The pharmacist cannot provide good health care to patients without knowing what their needs are. Likewise, the preceptor cannot provide good clinical learning without knowing what the student's learning needs are.

#### ***What makes a good preceptor?***

- A good role model (professional, caring and competent)
- Is a supervisor (gives direction and feedback and involves students)
- Is available and approachable (empathetic, respectful, supportive, focused and practical)
- Provides support (mentors, caring and shows an interest in the student)
- Is dynamic (motivates to learn, understands the relevance for learners and identifies their needs)
- Can handle errors with a no-blame approach (as a preceptor/teacher you need to anticipate mistakes, minimise the effect and then support the student to reflect and learn from the experience)
- Makes time to get to know the student as a person

#### ***What makes a bad preceptor?***

- Lack of time
- Lack of knowledge (e.g. not knowing how to give constructive feedback, motivate learners, and assess competency; using a 'telling' style instead of coaching)
- Lack of preceptor training
- Being criticised about the way they teach (e.g. "that was poorly done", mentoring by humiliation/sarcasm)
- Lack of rewards and recognition for taking on students
- Lack of confidence
- Unpredictable and varied teaching style/content

One characteristic which is reported in almost all studies is the need for an enthusiastic and competent preceptor. Students perceive very quickly whether or not the preceptor is happy to have them working in their clinic or pharmacy.

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## Giving feedback

### *Feedback: what makes good feedback?*

- Allow adequate time to give feedback on a regular basis
- Set clear goals with specific outcomes, so that both the preceptor and student know what they are being assessed on
- Preceptors need to directly observe the student to be able to give feedback
- Positive feedback
- Provide solutions (e.g. what can be improved? This helps identify education/training needs)
- Try and give positive feedback in front of peers
- Constructive feedback should be given in private
- Allow for student input (e.g. was it a fair evaluation of your performance?)
- Actively listen
- Never use personal remarks in feedback, always concentrate on the act/behaviour, not the person
- Remember everyone needs feedback, poorly performing students, as well as the good students. We all want to become better.

### *Feedback: how do you give positive feedback?*

After direct observation of the student a preceptor can give feedback. The following is a suggested dialogue you might like to use when providing this feedback.

1. Ask the student what they think they did well  
e.g. “What did you think you did well, in that situation?”
2. Preceptor then lists tasks/activities that they thought the student did well  
e.g. “Great, I agree you did XYZ very well, as well as...”
3. Ask the student what they think they could have done better  
e.g. “What do you think you could have done better?”
4. Preceptor then adds tasks/activities that they thought the student could improve on  
e.g. “I agree we may need to work on..., improve knowledge on.....”

Asking the student first allows and encourages self-reflection. It also emphasizes the positives and avoids negative feedback. This is also the easiest way for a preceptor to give feedback as the student has brought up the areas of concern rather than the preceptor delivering the bad evaluation of task/activity. If a situation arises where the preceptor and student have different ideas e.g. student doesn't think they could have done anything better, this may reveal issues in the student's insight.

### *Learning: plan for learning while working*

- Be specific about what is to be achieved and define the outcomes. Ensure that the outcomes are important and relevant to the student
- Are the goals achievable? Have you set too many goals or outcomes?
- Do the tasks allow you to measure and/or evaluate the student's competency?
- Ensure that the student has input into how the learning can be done. E.g. Student may request to counsel a patient on an antibiotic rather than an antipsychotic for their first medication counselling.
- Be clear about the roles and responsibilities for all parties involved, preceptor and student.

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## Poorly performing students

### *Poor performer: what's going wrong?*

As a preceptor, your role is to help manage the problem and prevent poor outcomes. Firstly, we need ask “is there a problem?” and if so “what is it?” The only way we can determine if there is a problem is with direct observation to gather information about the problem:

- Gather information
- Set aside time for a confidential discussion
- Get the student to speak first and voice their concerns
- Define the issue(s)
- Determine the cause(s)
- Agree on an action plan
- Monitor the outcome with frequent feedback

It may be beneficial to also gather information from other people (e.g. pharmacists, pharmacy technicians and assistants) who have also supervised or worked with the student.

**Reminder:** If you have a student on placement who is performing very poorly, significantly below your expectations, or you are concerned about in any way, contact the placement team as early as possible.

## Further information

For more information about learning styles, preceptor skills, cultural competency, and to complete the CPD module, go to:

<http://www.utas.edu.au/health/professional-experience-placement/supervisors/online-learning-modules/jack-and-the-beanstalk>

Please refer also to the University of Tasmania, School of Medicine professional experience placements website for further resources:

<http://www.utas.edu.au/health/professional-experience-placement/student-information/pharmacy>

### *References*

Pharmacy Board of Australia <http://www.pharmacyboard.gov.au/Registration-Standards.aspx>

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Kleffner, J.H. 2010. Becoming an effective preceptor. The University of Houston College of Pharmacy, Texas Southern University College of Pharmacy and Health Sciences, Texas Tech Health Science Centre School of Pharmacy and the University of Texas at Austin College of Pharmacy. USA

Spencer, J. 2003. ABC of learning and teaching in medicine. BMJ. 326:591-594

Clinical Education and Training Institute. 2011. The superguide: a handbook for supervising allied health professionals. CETI. Sydney, Australia.

Appendix 1 – Assessment Forms:

## Preceptor's Assessment: Year Three Pharmacy Students

Student Name: \_\_\_\_\_

Placement Site: \_\_\_\_\_

Student assessment					
Attribute	Above Average/ Often	Satisfactory/ Usually	Borderline/Below Expectation	Unsatisfactory	Not able to be assessed
	3	2	1	0	
Demonstrates adaptability, enthusiasm and responds well to feedback					
Demonstrates professional responsibility and accountability, including timeliness					
Demonstrates empathy, integrity and honesty					
Understands the need to practice within the legal, professional and ethical framework of a pharmacist					
Demonstrates effective communication skills					
Demonstrates sound pharmaceutical knowledge**					

**\*\*Please note:** *Third year students* should be able to demonstrate extensive knowledge and reasonable competence in the areas of cardiovascular disease, diabetes and other endocrine diseases, bleeding disorders, renal disease, respiratory disease, psychiatry, urinary incontinence, insomnia, epilepsy, pain, Parkinson's Disease, dementia and liver disease; They have also extensively covered OTC products prior to their placements.

**Additional comments regarding the student's placement:**

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**Preceptor's signature:** \_\_\_\_\_

**Preceptor's name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Many thanks for hosting a student on placement and for completing this form. Please return using the reply-paid envelope provided.

**General Program Feedback (Optional)**

- How supported have you felt by the university as a preceptor this placement?  
Very                      Moderately                      Not at all (*please circle*)
- How satisfied were you with the information and resources provided in assisting students in meeting their learning outcomes?  
Very   Moderately                      Not at all (*please circle*)
- Would you like a member of the placement team to call you to discuss your recent placements?    Yes    No (*please circle*)
- Please provide any additional comments or suggestions below:

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## Preceptor's Assessment: Year Four Pharmacy Students

Student Name: \_\_\_\_\_

Placement Site: \_\_\_\_\_

**Assessment (based on graduate attributes on the following page)**

Students need to achieve a score of 2/4 (adequate/satisfactory) to pass the placement

*Please circle*

Excellent	Above Average	Satisfactory	Below average	Unsatisfactory
4/4	3/4	2/4	1/4	0/4

Additional comments regarding the student:

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Are there any areas where you feel the student needs to do some more work on their skills, knowledge, attitude or behaviours? (please try to be specific to assist the student to improve)

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Preceptor's signature: \_\_\_\_\_

Preceptor's name: \_\_\_\_\_ Date: \_\_\_\_\_

Many thanks for hosting a student on placement and for completing this form. Please return using the reply- paid envelope provided.

**Please note:**

*Fourth year students* at the time of their placements, have completed all of their academic coursework, and should therefore be able to demonstrate these attributes at a graduate level.

Competency domains listed in order of relevance to the assessment criteria. National Competency Standards Framework for Pharmacists in Australia 2016: Pharmaceutical Society of Australia URL: <http://www.psa.org.au/practice-support-and-tools/psa-information-framework>

Version V11 January 2019

*Please turn over the page*

## Preceptor Assessment Sheet (Year Four Pharmacy Students) – Please complete

PROFESSIONALISM (For all placements)							
<b>1. Professional Life-long Learners (linked to ILOs – 4; Competency Domain 1,2,(4.1,4.2 –self management/reflection),5)</b>							
Demonstrates adaptability, enthusiasm and responds well to feedback	Satisfactory	Not satisfactory					
Demonstrates professional responsibility and accountability, including timeliness	Satisfactory	Not satisfactory					
<b>2. Practices ethically and with integrity (linked to ILOs – 3; Competency Domain 1)</b>							
Demonstrates empathy, integrity and honesty	Satisfactory	Not satisfactory					
Practices within the legal, professional and ethical framework of a pharmacist	Satisfactory	Not satisfactory					
CLINICAL SKILLS AND KNOWLEDGE (For community pharmacy, hospital and clinical placements only)							
Attribute	Excellent/ Always	Above Average/ Often	Satisfactor y /Usually	Borderline /Below Expectatio n	Un- satisfactor y	Not able to be assessed based on student capability	Not applicab le
	4	3	2	1	0		
CLINICAL SKILLS AND KNOWLEDGE (For community pharmacy, hospital and clinical placements only)							
<b>3. Drug Distribution Experts (linked to ILOs – 1, 2, 6; Competency Domain 3,1,2)</b>							
Ensures medication orders are safe and appropriate							
Accurate preparation and supply of medicines							
Demonstrates a patient centred approach							
<b>4. Clinical Pharmacy Experts (linked to ILOs – 1; Competency Domain 3,5,2)</b>							
Pharmaceutical knowledge							
Application of theory into clinical practice							
<b>5. Problem-solvers (linked to ILOs – 1,2,6; Competency Domains 3,5,2)</b>							
Effective and independent problem-solving							
<b>6. Public Health Practitioners (linked to ILOs – 4, 5; Competency Domain 3,5,2)</b>							
Promotes public health and wellness							
<b>7. Communicators (linked to ILOs – 2; Competency Domain 2,3)</b>							
Demonstrates effective communication skills							
Demonstrates appropriate counselling skills							

\* Please note, students MUST score a satisfactory score for each of the professionalism attributes to pass their placement.

### General Program Feedback (Optional)

1. How supported have you felt by the university as a preceptor this placement?  
Very                      Moderately                      Not at all *(please circle)*
2. How satisfied were you with the information and resources provided in assisting students in meeting their learning outcomes?  
Very                      Moderately                      Not at all *(please circle)*
3. Would you like a member of the placement team to call you to discuss your recent placements?  
Yes No *(please circle)*
4. Please provide any additional comments or suggestions below:



*If you wish to discuss a year four student's assessment, please call Justin Cousins  
(03 6226 1005)*