

# UB SPPS PRECEPTOR INFORMATION SESSION

May 8, 2025



# Experiential Education (EE) Administrative Team



Dr. Cha Inpatient General Med Coordinator



Dr. Cieri-Hutcherson al Med Assistant Director



Dr. Clark Hospital/Health System Coordinator



Dr. Daly Community Pharmacy Coordinator



Sarah Frontera IPPE Coordinator



Kris Jordan APPE Coordinator



Dr. Meaney Elective Coordinator



Dr. Slazak Ambulatory Care Coordinator



Dr. O'Brocta Director





### Agenda

- 1. Mission
- 2. Program Changes
- 3. Entrustable Professional Activities (EPAs)
- 4. Educational Outcomes (EOs)
- 5. Policies
- 6. IPPE/APPE
- 7. CORE Readiness/CEI
- 8. Preceptor Training Requirements/documentation
- 9. CORE, demonstration new evaluations/preceptor information
- 10. Q and A



### Mission, Vision and Values of the UB SPPS

#### **Our Mission**

To improve healthcare quality and outcomes through educating the next generation of pharmacists and pharmaceutical scientists in an environment fostering intellectual curiosity, through pursuing impactful basic and applied research, and through developing and evaluating models of clinical practice.

**Our Vision** 

To be a recognized global leader in developing solutions for evolving healthcare challenges.

#### **Our Values**

**Diversity:** We best serve our communities by embracing students, staff, faculty, preceptors, community stakeholders, and alumni from all backgrounds, with a range of skill sets and points of view.

Equity: We work tirelessly to contribute to a more just world, specifically through providing educational opportunities and advocating for equitable access to health care.
Integrity: We earn the trust of our stakeholders and partners by being ethical and responsible in everything we do, and by instilling these principles in our students.
Commitment: We will support and advance our communities through evidence-based practices in education, research, and clinical practice.
Impact: We achieve the greatest contribution through collaborative education, research, and clinical practice with our communities, partners, and alumni.
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Excellence: We are committed to cultivating the highest quality in research, education, and service at the local, national, and international level.

## Didactic Curriculum

- Rolling in new integrated curriculum starting in 2023 (click for web link)
- Pharmacotherapeutics→Integrated Pharmacy Concepts (IPC)
  - Integrated Pharmacy Concepts :Courses focused on medical disciplines, integrating concepts from pathophysiology, pharmacology, clinical pharmacokinetics and pharmacogenomics, patient assessment, essential patient skills, pharmacotherapeutics (e.g.
- P2: 2024-2025: FEN, Cardiology, Renal, Immunology/ID, Endocrine, and Pulmonology
- P3: 2025-2026: GI, Hepatology, Neurology, Pain/Psych., Toxicology/Critical Care, Derm/Rheum/Opth., Reproductive, Peds/Geriatrics, and Hem/Oncology.
- Educational Outcomes (EOs) and Entrustable Patient Activities (EPAs) (click for web link 2023)

## **Experiential Education Curriculum**

- P2: 2 x 80-hour community (1 may be ambulatory care)
- P3: 1 x 80-hour community (or ambulatory care) + 1 x 75 hour institutional
- P4: Ambulatory Patient Care, Inpatient Adult Patient Care, and Community = 240 hours each

Hospital/Health Systems = 160 hours each

Electives =  $3 \times 240$  hours each

Grading: IPPEs and APPEs H/S/U

### What are the EPAs?

- The EPAs describe pharmacy workplace activities that all students are entrusted to do in the experiential setting with direct or distant supervision that preceptors assess using an entrustment decision scale.
- EPAs are designed to translate the EOs into practice activities.
- Assessment scale 1-5 with rubric. Generally, the expectations are as follows:
  - P2: Level 1-2
  - P3: Level 2-3
  - P4: Level 3

#### EXAMPLE

**EPA 11**: Deliver medication or healthrelated education to health professionals or the public.

### When you click→ Example tasks to observe student, the following pops-up:

• Give a brief (~10 minutes) drug presentation to the pharmacy and or medical team. Consider using new drug information.

• Lead a discussion regarding published primary literature and its application to patient care (e.g., journal club).

• Develop and deliver a verbal, digital, or written medication or health-related educational program to health professional(s), a community, or other groups.

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#	EPAs			
1	Collect information necessary to identify a patient's medication-related problems and health-related needs.			
2	Assess collected information to determine a patient's medication-related problems and health-related needs.			
3	Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.			
4	Contribute patient specific medication-related expertise as part of an interprofessional care team.			
5	Answer medication related questions using scientific literature.			
6	Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.			
7	Fulfill a medication order. Site dependent process, which may mean to complete order entry/order verification, prepare medication (pull from shelf/count/activate/compound), label medication, dispense/administer to patient.			
8	Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.			
9	Monitor and evaluate the safety and effectiveness of a care plan.			
10	Report adverse drug events and/or medication errors in accordance with site specific procedures.			
11	Deliver medication or health-related education to health professionals or the public.			
12	Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.			
13	Perform the technical, administrative, and supporting operations of a pharmacy practice site. Site dependent and includes but is not limited to: Inventory management, Scheduling, and Controlled Substance Monitoring.			

#### https://doi.org/10.1016/j.ajpe.2023.100562

## EPA Assignment by Rotation Type

EPA	P2 community	P3 community	P4 community	P3 ambulatory care	P4 ambulatory care	P4 adult inpatient medicine	P3 institutional	P4 hospital/health system
1		1	1	1	1	1	1	1
2		1	1	1	1	1	1	1
3				1	1	1	1	1
4				1	1	1		
5		1	1	1	1	1	1	1
6				1	1	1		1
7	1	1	1				1	1
8	1	1	1	1	1	1		
9				1	1	1	1	1
10		1	1			1	1	1
11	1	1	1	1	1	1		
12			1		1	1		
13	1	1	1				1	1

FYI: NDPC electives do not have EPAs and the DPC elective has EPAs as optional.

### **Preceptor Feedback via Evaluation Forms**

The current EPA assignment by rotation was determined by volunteer preceptors and the EE committee. If you would like to provide feedback on which EPAs are assigned to a specific rotation type please click <u>here</u>. Feedback can be provided towards the bottom of the google sheet. We will review your input and make adjustments as needed for the 2026-2027 Experiential Cycle.

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## **EPA Rubric**

- 1. Learner is permitted to **observe only**. Even with direct supervision, learner is not entrusted to perform the activity or task.
- 2. Learner is entrusted to perform the activity or task with direct and **proactive supervision**. Learner must be observed performing task in order to provide immediate feedback.
- 3. Learner is entrusted to perform the activity or task with indirect and **reactive supervision**. Learner can perform task without direct supervision but may request assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of activity or task.
- 4. Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform task. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on sample of work.
- 5. Learner is entrusted to independently decide what activities and tasks need to be performed. Learner is entrusted to direct and supervise the activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goals.

### P4 EPA Scores < 3

Over the span of the students Direct Patient Care rotations, it is expected that student will achieve a level 3 at least once for each of the 13 EPAs. Students will use the required rotations (Ambulatory Care, Community, Hospital/Health Systems, Inpatient Adult Patient Care, Direct Patient Care Elective(s)) rotations as proof. If this is not achieved, the student will need to re-do an experience and achieve at least a level 3 assessment for all the EPA(s) in order to graduate.

- At the beginning of a rotation students should share with their new preceptor any EPAs they had received a low score (<3) in the past. This should enhance the ability of the student to achieve a score of at least 3 on all EPAs. EPA scores do not contribute to student's grade.

## **Educational Outcomes**

- A total of 15 EO's to assess and determine grade, most rotation type will have 13 EO's assigned to them.
- More transparent grading process involved via summation of individual EO assessment scores (1-4).
- Professionalism assessment has been simplified: no score but student must pass professionalism question to pass rotation.
- Course grade
  - IPPE: rotation grade contributes to course grade
  - APPE: rotation grade is course grade

Source: https://doi.org/10.1016/j.ajpe.2023.100562

Problem solver: Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.

When you click on problem solver the following will pop-up:

•Problem solving skills: Identify define problems that have multiple considerations (and possibly more than one viable solution); explore and prioritize potential strategies; compare and contrast potential solutions; design and evaluate implemented solutions using evidence and/or rationale and anticipate and reflect on outcomes.

•Critical thinking - evaluating conclusions by systematically examining the problem, evidence, & solution. It includes 6 core skills including interpretation, analysis, evaluation, inference, explanation, and self-regulation.

•Innovative mindset – a set of beliefs that includes being forward thinking, creative, open to testing, comfortable making mistakes and trying again; collaborative and focused on progress that allows a person to generate creative or novel solutions to problems that result in improved performance. **University at Buffalo** The State University of New York

	Student Educational Outcomes
	Learner: Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health.
	Problem solver: Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.
:	Communicator: Actively engage, listen, and communicate verbally, nonverbally, and in writing when interacting with or educating an individual, group, or organization.
	Ally: Mitigate health disparities by considering, recognizing, and navigating cultural and structural factors (e.g. social determinants of health, diversity, equity, inclusion, and accessibility) to improve access and health outcomes.
	Provider: Provide whole person care to individuals as the medication specialist using the Pharmacists' Patient Care Process.
	Advocate: Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.
	Steward: Optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems.
	Collaborator: Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies.
	Promoter: Assess factors that influence the health and wellness of a population and develop strategies to address those factors.
1	Leader: Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role.
1	Self-aware: Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence that could enhance or limit growth, development, & professional identity formation).
1	Professional: Did the student exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society.
1	Professional Skills and Attitudes: Activities and experiences, intended to advance professional, personal, and career development, are purposely designed and implemented to ensure an array of opportunities for students to document competency of advocacy, self-awareness, leadership, and professionalism. These activities complement and advance the learning that occurs within the formal curriculum and can occur, outside, alongside, and/or within the curriculum.
1	
1	Develop strategies to actively promote inclusivity, equity, and social justice in academic, and professional environments.

#### EDUCATIONAL OUTCOMES ASSESSMENT RUBRIC

**Does Not Meet Expectations (1):** The performance falls significantly below the **expected standards for the professional year**. There are numerous errors or deficiencies in understanding, execution, or completion of the task. The work does not meet the basic requirements and demonstrates a lack of effort or comprehension.

**Approaches Expectations (2):** The performance partially meets the **expected standards for the professional year**. There are some errors or deficiencies in understanding, execution, or completion of the task. While aspects of the work may be satisfactory, overall, it falls short of meeting all requirements and demonstrates room for improvement.

**Meets Expectations (3):** The performance meets the **expected standards for the professional year**. It demonstrates a solid understanding and execution of the task with minimal errors or deficiencies. The work meets all requirements and may also include additional elements that enhance its quality and completeness.

**Exceeds Expectations (4):** The performance goes above and beyond the **expected standards for the professional year**. It demonstrates a thorough understanding and exceptional execution of the task with no significant errors or deficiencies. The work not only meets all requirements but also includes additional elements that significantly enhance its quality, creativity, and/or innovation.

## **Reflection Questions**

- Moved to Student Evaluation of Preceptor and Site Evaluation
- Both IPPEs and APPEs

1. What was the most valuable learning experience on this IPPE rotation? Why? (Maximum of 250 words):

2. Describe the direct patient care activities you completed. (Maximum of 250 words):

Sum of points	Professionalism question response	Rotation Grade (Enters program in 2022 or later)	Rotation Grade (Enters program in 2021 or prior)
38-48	Yes	Honors (H)	Pass
30-37	Yes	Satisfactory (S)	Pass
30-48	No	Unsatisfactory (U)	Fail
<30	Yes or No	Unsatisfactory (U)	Fail

#### **IPPE AND APPE ROTATION GRADING**

IPPE **Course** grades are assigned by the course coordinator and determined by the rotation grade and if the student meets all other requirements in the course syllabus.

#### FOR APPE DPC AND NDPC ELECTIVE ROTATION GRADING

Sum of points	Professionalism question response	Rotation Grade (Enters program in 2022 or later)
29-32	Yes	Honors (H)
21-28	Yes	Satisfactory (S)
21-32	No	Unsatisfactory (U)
<21	Yes or No	Unsatisfactory (U)

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#### **Student Absences**

Student pharmacist must communicate with their preceptor on or before the first day of rotation to discuss planned absences.

Reason for Missed Rotation	Hours must be made up?	Student to add Comment in Hours Section of CORE
ACCP Meeting, up to 24 hours	No	Yes
ASHP Residency Showcase, up to 24 hours	No	Yes
APhA Annual Meeting and Exposition, up to 24 hours	No	Yes
Other Professional Meeting, up to 24 hours with approval from preceptor and OEE	No	Yes
Match results day, Phase I and/or Phase II	Yes	Yes
Religious Holiday or Holiday	Yes	Yes
Illness/Inclement Weather	Yes	Yes

Site / Date / Time Information Preceptor / Site : Required Start Date: Required (Format: MM-DD-YYYY) End Date: Required (Format: MM-DD-YYYY)
Start Date: Required (Format: MM-DD-YYYY) End Date: Required
Required (Format: MM-DD-YYYY) End Date: Required
End Date: Required
(Format: MM-DD-YYYY)
Time IN: 🗨 👻 Set Current Time
Time OUT: 🗨 👻 Set Current Time
Total Hours: Required
Hours Description
Comments:

## Site Visits

- ACPE requirement for QA program
- Can be done remotely

#### UB SPPS Site Visit Questions-Not all questions are applicable to every site

#### ALL PRECEPTORS/ROTATIONS

How do you support students achieving the learning objectives for the rotation?

What learning resources do students have access to at your site?

What resources do you have to ensure students receive oversight, professional guidance, and performance feedback?

#### PATIENT ORIENTED SITES

How do you provide a practice environment that nurtures and supports professional interaction between students, prescribers, pharmacists, patients, and their care givers?

Does your site have a patient population that exhibits diversity in ethnic and/or socioeconomic culture, medical conditions, gender, and age?

What contemporary services do you provide for individual and group patient care? Such as MTM?

How do you provide a commitment to health promotion, disease prevention, and patient safety, as reflected by the services provided (e.g., provision of health screening, tobacco cessation counseling, immunizations) and/or products made available (e.g., not stocking cigarettes and other tobacco products)?

#### SITE DETAIL QUESTIONS

What equipment and technology do you use that reflects contemporary practice/research and will support student education for your duties? Please describe?

#### HOW CAN THE SCHOOL BETTER SUPPORT PRECEPTOR?

How can the school assist you in training pharmacy students?

### IPPE

IPPEs involve students in common contemporary U.S. practice models, including interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and patient care activities. IPPEs are structured and sequenced to intentionally develop in students a clear understanding of what constitutes exemplary pharmacy practice in the U.S. prior to beginning the APPE curriculum.

P2: 2 x 80-hour community (1 may be ambulatory care)

P3: 1 x 80-hour community (or ambulatory care) + 1 x 75 hour institutional

Course	Credit Hours
PHM 683 (P2 Fall)	2
PHM 684 (P2 Spring)	2
PHM 783 (P3 Fall)	2
PHM 784 (P3 Spring)	2

### **APPE Overview**

APPE students are required to complete a total of 7 rotations (4 Required or Core + 3 Electives)

The four CORE/REQUIRED rotations that MUST be completed by all APPE students

#### PHM 843: Ambulatory Patient Care (6 weeks-240 hours)

An outpatient clinical rotation that provides the student with direct patient care activities focused on interprofessional patient management, chronic disease statement management and continuity of care. Depending on the actual site there may also be dispensing activities going on concurrently, however the main objective of this type of rotation is to provide medication therapy management and education for patients' chronic diseases.

#### PHM 844: Community Pharmacy (6 weeks-240 hours)

A community rotation provides the student with direct patient care activities including drug distribution and counseling activities. There may also be clinical activities going on concurrently, however the main objective of this type of rotation is to dispense medications in a safe and timely manner following all legal and regulatory requirements of the site/state. Practice management will also be emphasized.

### **APPE Overview**

#### PHM 845: Hospital Health Systems Pharmacy (4 weeks-160 hours)

A hospital health system rotation provides the student with direct patient care activities focusing on understanding how the right medication gets to the right patient at the right time. This usually includes exposure to the drug distribution system, IV admixture preparation, controlled substance management, inventory control, among others. The focus is on systemmanagement and continuous quality improvement.

#### PHM 846: Inpatient Adult Patient Care (6 weeks-240 hours)

A general medicine rotation provides the student with direct patient care experience in the inpatient setting utilizing a rounding service. The student will manage a diverse patient population with a variety of common conditions seen in adult care patients. The student will also actively contribute as a member of an interprofessional healthcare team.

### **APPE Overview**

The three elective rotations are:

- PHM 847: Elective 1 Direct Patient Care (6 weeks-240 hours)
- PHM 848: Elective 2 Direct or Non-Direct Patient Care (6 weeks-240 hours)
- PHM 849: Elective 3 Direct or Non-Direct Patient Care (6 weeks-240 hours)

Elective APPEs are meant to allow students to explore areas of potential practice interest. This may include practice, research, or other areas of interest for pharmacy students. An elective may include a repeat of <u>any</u> CORE rotation.

Total APPE hour requirement = minimum of 1600

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#### IPPE and APPE Student Responsibilities

START	MIDPOINT	FINAL
Hours Tracking (daily)	Student to complete Self-Evaluation of EPAs, Educational Outcomes, and Professionalism	Student to review Preceptor's Evaluation of their Professionalism and Skills Evaluation with Preceptor
<ul> <li>APPE only, student will provide low EPA scores (&lt;3) to new preceptor by the 1<sup>st</sup> week of rotation.</li> </ul>	<ul> <li>Student to review Preceptor's Evaluation of their EPAs, Educational Outcomes, and Professionalism</li> <li>Hours Tracking (daily)</li> </ul>	<ul> <li>Student to complete Self-Evaluation of EPAs, Educational Outcomes, and Professionalism</li> <li>Student to complete Patient Characteristics and Interprofessional Engagement form</li> <li>Hours Tracking (finalize)</li> <li>Student to complete Evaluation of Preceptor and Site</li> </ul>

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#### IPPE and APPE Preceptor Responsibilities

OTADT	MIDDOINIT	FINIAL
START	MIDPOINT	FINAL
<ul> <li>Preceptor to review expectations of rotation and collaborate on setting goals with student</li> </ul>	<ul> <li>Preceptor to review Student- Self-Evaluation of EPAs, Educational Outcomes, and Professionalism</li> </ul>	<ul> <li>Preceptor to review Student- Self-Evaluation of EPAs, Educational Outcomes, and Professionalism</li> </ul>
<ul> <li>Review students previous EPA low scores from required rotations when applicable.</li> <li>Discuss results with students and create strategies for future success.</li> </ul>	<ul> <li>Preceptor to complete Evaluation of students EPAs, Educational Outcomes, and Professionalism.</li> </ul>	<ul> <li>Preceptor to complete Evaluation of students EPAs, Educational Outcomes, and Professionalism.</li> </ul>
	<ul> <li>Discuss results with students and create strategies for future success.</li> </ul>	<ul> <li>Discuss results with students and create strategies for future success.</li> </ul>
	<ul> <li>Respond to the question, is the student passing at mid-rotation? Add comments as needed.</li> </ul>	• Describe 2+ activities the students completed to demonstrate achievement of a specific EPA.
	• Describe 2+ activities the students completed to demonstrate achievement of a specific EPA.	Confirm hours
	Confirm hours (daily/weekly)	

#### **IPPE PROGRESSION POLICY**

Progression through all IPPE rotations, IPPE-2 and IPPE-3 are dependent on successfully completing each rotation. Earning a grade of "Unsatisfactory" on a scheduled rotation, will require the student pharmacist to repeat that rotation type. Prior to repeating, the student must review their EPA/Educational Outcome scores with the EE rotation type advisor and create a plan for improvement (see Appendices) using the suggested resources in the UB Library. The student pharmacist is not eligible for a grade of "Honors". In addition, the student pharmacist's graduation date may be delayed. This remediation rotation will only be offered ONCE per academic year.

If a student pharmacist earns a grade of "Unsatisfactory" on a repeat rotation the student pharmacist will receive a course grade of "Unsatisfactory" and must meet with the chair of the PharmD Progression Committee (PPC) within 10 business days to determine an appropriate plan of action. The student pharmacist may be responsible for additional course tuition and fees.

### **APPE Progression Policy**

#### Earning a grade of "Unsatisfactory or Fail" on an APPE rotation:

If the student is dismissed from the rotation early due to professionalism concerns the student will receive an Unsatisfactory (or Failure) and will not automatically continue on to their next rotation. The student must meet with the chair of the PPC within 10 business days of the site dismissal. The PPC will then decide if the student should be dismissed from the PharmD program or determine another course of action.

Earning a grade of "Unsatisfactory or Fail" at the end of a rotation will require the student pharmacist to **repeat** that rotation type experience. The student may continue to their next scheduled rotation (if available) but must meet with the Experiential Progression Advisor and the chair of the PPC within 10 calendar days of the failure and review their Educational Outcome/EPA scores on their final evaluation. The student should look for low Educational Outcome/EPA scores and reference the "Suggested Resources" information in the UB library to improve knowledge deficits. The PPC will then decide if the student should be dismissed from the PharmD program or determine another course of action.

The student pharmacist's graduation date may be delayed.

The student pharmacist may be responsible for additional course tuition and fees.



### **EE Rotation Advisors**

- o IPPE/APPE Community rotation: Dr. Daly
- o IPPE/APPE Ambulatory care rotation: Dr. Slazak
- IPPE/APPE Hospital heath systems rotation: Dr. Clark.
- o APPE Inpatient Adult Patient Care: Dr. Cha
- o APPE Electives: Dr. Meaney

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## Suggested Resources for Remediation

Top 300 Drugs Flashcards

https://accesspharmacy.mhmedical.com/qa.aspx?groupid=955

Pharmacotherapy Flashcards

https://accesspharmacy.mhmedical.com/qa.aspx?groupid=1561

*Top 100 Nonprescription Drugs* 

https://accesspharmacy.mhmedical.com/qa.aspx?groupid=1405

Top 300 Prescription Drugs

https://accesspharmacy.mhmedical.com/qa.aspx?groupid=408

#### Due Process and Right of Appeal

Audience: All PharmD professional students at UB SPPS

**Purpose:** The purpose of this policy is to outline due process related to the student appeal process for progression decisions.

#### Policy:

Students have the right to due process and can appeal a progression decision (such as but not limited to dismissal, academic notice, academic integrity or unprofessionalism) by addressing the PharmD Progression Committee in a letter (not email). If that appeal decision is not favorable to the student, they can appeal to the dean of the School of Pharmacy and Pharmaceutical Sciences. If that appeal decision is not favorable to the student, they can appeal to the student, they can appeal to the dean of the student, they can appeal to the dean of the School.



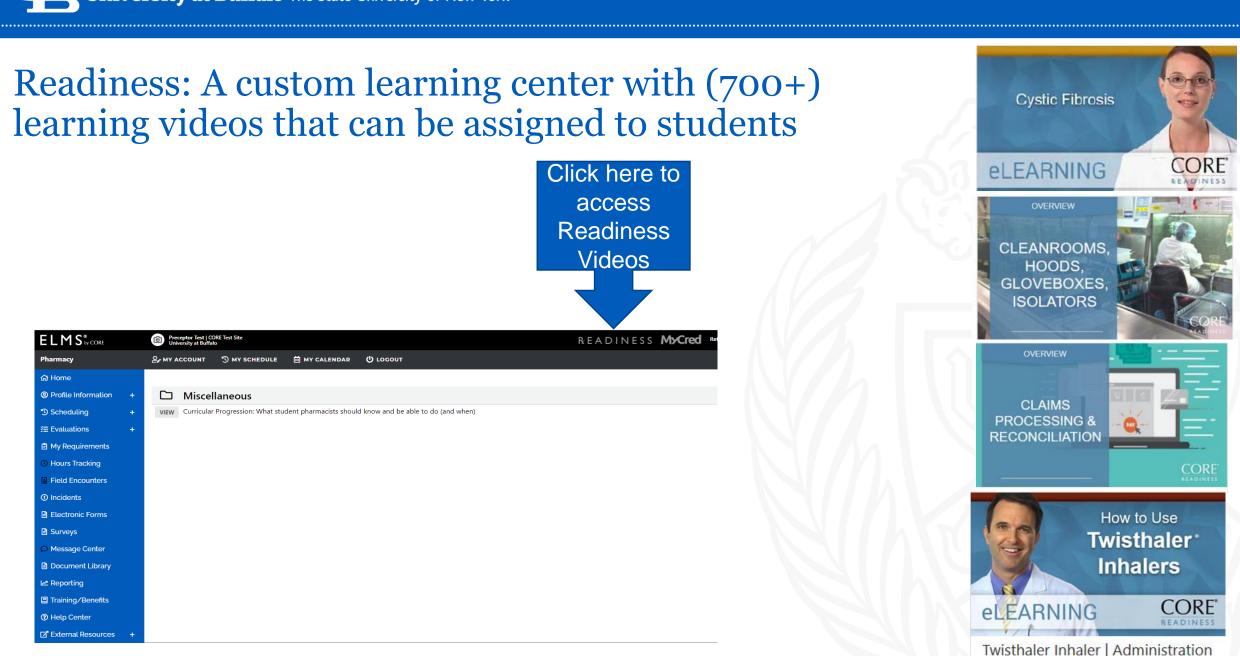
#### ACPE Standards 2025

3.3.a. Preceptor criteria - The college or school makes available and applies quality criteria for preceptor recruitment, orientation, performance, and evaluation. The majority of preceptors for any given student are U.S. licensed pharmacists.

3.3.b. Preceptor credentials/expertise - All experiential courses in the curriculum are taught by individuals with **academic credentials** and expertise that are explicitly linked to their precepting responsibilities.

3.3.c. **Preceptor education and development** - Preceptors are oriented to the program's mission, the specific learning expectations for the experience outlined in the syllabus, and effective performance evaluation techniques before accepting students. The college or school fosters the professional development of its preceptors through a variety of learning tools and programs commensurate with their educational responsibilities to the program.

3.3.d. Preceptor engagement - The college or school solicits the active involvement of preceptors in the continuous quality improvement of the educational program, especially the experiential component.

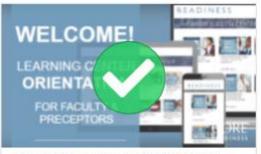


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### **CORE Readiness**

• Learning modules can be assigned by preceptor and completion tracked



WELCOME! eLearning Center Platform Orientation (for Faculty & Preceptors)

by coreREADINESS



PreceptorReadiness | A Preceptor Training Program

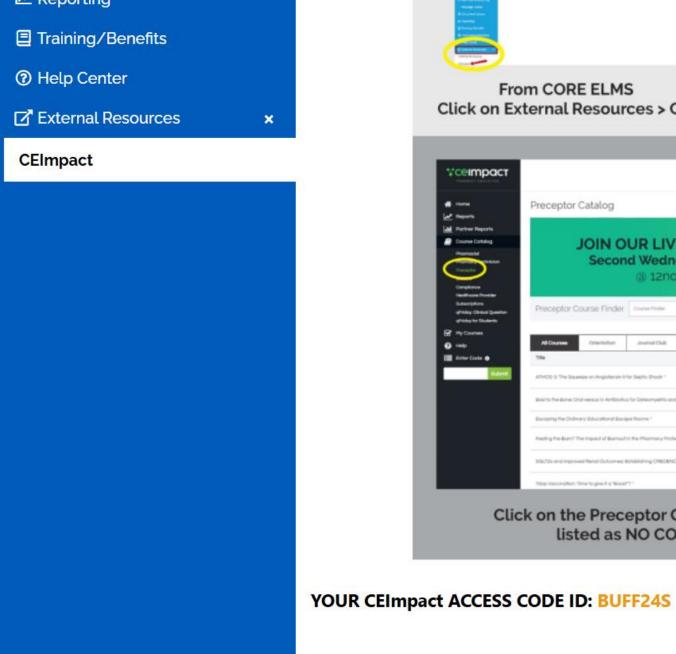
by coreREADINESS

• The link to access a list suggesting video learning modules for specific APPE rotations can be found in CORE under Training/Benefits

#### **CEImpact (Preceptors and Students have Access)**

ELMS <sup>®</sup> LORE	Preceptor Test   CORE Test Site     University at Buffalo	READINE
Pharmacy	ஜ் my account ூ my schedule 🛗 my calendar 🙂 logout	
<b>ה</b> Home		
Profile Information     +	<ul> <li>Miscellaneous</li> </ul>	
Scheduling +	VIEW Curricular Progression: What student pharmacists should know and be able to do (and when)	
Æ Evaluations +		
🖻 My Requirements		
O Hours Tracking		
Field Encounters		
① Incidents		
Electronic Forms		
Surveys		
Message Center		
Document Library		
Reporting		
Training/Benefits		
1 Help Contor		
☑ External Resources ×		
CEImpact		

- 1. External Resources
- 2. CEImpact
- 3. Register-if not used in past
- 4. Access Code ID: BUFF24 = pharmacists BUFF24S = students
- 5. Click on circle that indicates Preceptor CE
- 6. Find desired CE and complete



From CORE ELMS Login to CEI account Click on External Resources > CEI and Enter Access Code Preceptor Catalog JOIN OUR LIVE JOURNAL CLUB Second Wednesday Every Month @ 12noon (central) Preceptor Course Finder Course Freie Journal Child Inde House Course Type ATHOR 3 The Basease on Angolvenan's for Septe Shock On Demond .... ad to the Bone: Ond versus IV Antibiotics for Opticonveltitis and Joint Infections **On-Demand** .... 1000 learning the Ordinary Educational Excess Name **Dro Demonsil** 32100 ...... 10000 familing the Augno? The Impact of Augmout in the Photmacy Profession November 13,2018 299 2000a 1,346 NUA 100-000 ----15272s and mainweel Rend Cultures Retailed ing CNRCR14CB **Dry Demond** MO-CON ~ Map incomettors Time to give it a "Boost"? Click on the Preceptor Catalog. Courses listed as NO COST. Sort Courses Click here

Attention: Due to a major system upgrade with CEImpact, records before Jan 4th 2019 Go to CEImpact site 3

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#### Requested Training (My Requirements-left banner)

- In CORE 4 min video from Mayo Clinic " Cooking up Effective Feedback"
  - You may have done last year

ACPE (accreditation) will be visiting UB SPPS 2027!

#### View of Preceptor Requirements in CORE

Requirements	File	Mandatory	Added	Completed	Completed On	Confirmed	Expiration	Doc	View	Edit / Replace	Archive
1. Preceptor Information Session May 2025		Yes								Add	
<b>2. Cooking up effective feedback 4 min 20s</b> Please view Cooking up Effective Feedback video (4 min. 20 sec.) by clicking <b>here</b> . Once viewed please enter completed on date by clicking the Add button to the right and submit.		Yes	04-17-24	Yes	05-09-24				View	Edit Current	
<b>2. Preceptor Information Session May 2024</b> Once viewed please enter completed on date by clicking the Add button to the right and submit.	VIEW	No	04-17-24	Yes	05-09-24				View	Edit Current	
<ul> <li>3. Fostering Professional Identity in Your Students and Residents</li> <li>Available in the preceptor section of CEImpact. Click on External Resources (bottom left panel), then click on CEImpact, then click on Go to CEImpact site, then enter code BUFF23 (bottom left panel note BUFF23S is for students), submit. Then click on preceptor CE (circles), find fostering professional Identity in your students and residents and participate in CE.</li> <li>Once finished with the CE click the Add button to the right, then add date completed, click on the complete circle, and submit. THANK YOU!</li> </ul>		No	04-17-24	Yes	03-08-23				View	Edit Current	
Offers ACPE credit (no fee through UBSPPS)											

- 1. Review information: click hyperlink or under file click View
- 2. Click the "Edit Current" button and enter date, click complete or In-Progress, click on Enter Requirement.

### ACPE and Credentials

- 2025 Standards 3.3.b new requirement: *All* experiential courses in the curriculum are taught by individuals with academic credentials and expertise that are explicitly linked to their precepting responsibilities.
- Log into CORE → click on MY ACCOUNT (right below your name), scroll down until see Custom Fields, please add information as applicable. Please be sure license information is in CORE too.
- Scroll to bottom of page → click on Update Information

1 Year Fellowship type:		
2 Year Fellowship type:		
PGY1 Training type:		
PGY2 Training type:		
IF Residency Director, name		
program:		
program.		
If Recognized as Fellow, list		
organization:		
Board Certification type:		
Certifications:	MTM certificate	
	Leadership certificate	
	Immunization certification	
	Contraception provider certification	
	<ul> <li>Anticoagulation certification</li> </ul>	
	Certified Diabetes Care and Education Specialist	
	Diabetes Management Certificate	
	Teaching certificate	
	Other certificates	
Other Certificates:		
other certificates.		

## Assigning Poor Grades on Rotation

- DIFFICULT to do but necessary when poor grades are earned
  - Responsibility to patients/communities served
  - Ethics and Professional Accountability
  - Requires emotional and psychological integrity to manage moral stress
- Strategies
  - Remember student has remediation/progression policies/options
  - Reach out to school for support and guidance
  - Reach out to peers for a second set of eyes on issue
  - Student may be struggling and FERPA prevents school from disclosing previous academic concerns



# **Questions/Discussion?**