

PRECEPTOR SERIES:

The Benefits of Precepting Introductory Pharmacy Practice Experience (IPPE) Students and Strategies to Optimize These Experiences

by Michele Brenner, PharmD, BCPS, Thad Schumacher, PharmD, Daniel Duffy, PharmD, Albert Carbo, PharmD, BCACP, and Connie Kraus, PharmD, BCACP

Precepting students on their Introductory Pharmacy Practice Experiences (IPPEs) can be a rewarding time for students while also bringing value to the practice site and professional satisfaction to the pharmacy preceptor. Despite legal limitations in what IPPE students are allowed to do in Wisconsin, many preceptors have designed valuable learning opportunities for IPPE students, many of which benefit patient care. This article will detail IPPE precepting pearls on how to set expectations for a positive learning experience for students and describe activities that are ideal for pre-intern pharmacy students and can benefit both the student and the site. As a reminder, in Wisconsin pharmacy students must complete their second year of pharmacy school to be considered interns and be allowed to participate in certain aspects of pharmacy practice such as patient medication counseling.

While there are many resources to help preceptors improve their teaching in regards to working with fourth-year students on advanced pharmacy practice experience rotations (APPEs), including much of The Journal's precepting series, there is less guidance available for preceptor development specifically targeting students in the first three years of pharmacy school. Much of the material for how preceptors can improve student learning needs to be transferred from the APPE setting to the IPPE setting, which is not always ideal given the difference in their stage of didactic work.

To help assist IPPE preceptors we asked several award winning IPPE preceptors and

individuals with unique IPPE offerings to comment on what they do to ensure a successful IPPE rotation and to share their tips for IPPE preceptors.

Setting the Stage

Michelle Brenner - Ministry Saint Joseph's Hospital

Introductory Pharmacy Practice Experience is the foundational experience for our next

generation of professionals. For many, this is the first exposure to the diversity of pharmacy practice. In general, the goal is to introduce students to the role of each member in the pharmacy team and participate in professionalism and service learning to help develop required skills. As a preceptor it is our responsibility to mentor learners in all aspects of our profession. It is important to create a learning environment that combats the common

FIGURE 1. An Example Welcome Email

Welcome Email

Welcome to our pharmacy! We are going to have a fantastic rotation full of fun and learning. I will be involved in your learning as your primary preceptor but will also be engaging a number of my team members to enhance your experience. During your rotation you will be exposed to a broad range of patients and skilled decentralized pharmacists. I will take the lead with orientation and onboarding.

We try to be as flexible as possible with rotation experiences. We prefer weekdays as we have a broader array of experiences available. First- year students usually complete two 6- hour days or an 8-hour then 4-hour day option. Please send me your top three date preferences for completing the visit. Also, please send at least one area of interest and personal goal. I will try to incorporate these into your schedule.

If you would need housing, please contact Miss Housing at Misshousing@pharmacy.org as soon as possible to coordinate.

Once the dates are finalized, we will plan to have you arrive at 0815 on the first day of rotation. I will meet you in the front lobby by the gift shop and will bring you to central pharmacy for your first pharmacy huddle. Please be prepared to introduce yourself. You can park in the visitor parking across the street from the main entrance for day one of the rotation. During orientation we will get a parking pass and tour the available lots.

Please let me know if you have any additional questions. I look forward to seeing you soon.

feelings of being overwhelmed and intimidated. I have found that setting the stage with the learner front and center, especially with IPPE students, is an effective strategy to help optimize the learning experience and create enthusiasm for their selected career.

In reality, the school of pharmacy selects the play and casts the roles but preceptors are truly the director and have a significant artistic freedom to complete the production. Some IPPE students have not been pleased with their site assignment due to the location of my practice site. I have found in these cases a few minutes spent on preparation can help by setting the tone for the entire experience. Most students will be engaged when involved in planning the rotation. The key steps for setting the stage include a warm welcome, flexibility when able in the planning process, incorporation of student interest, inclusion of specific expectations and timely follow up.

A templated welcome can easily set the stage for success. I primarily use email but this will also work with phone conversations (See Figure 1. for an example welcome email). I try to show excitement for the visit starting in the initial communication. Be sure to highlight strengths of the assigned site and preceptor. It is important to include site-specific requirements and learning objectives for the student experience if this has been identified. The communication should detail the hours expected of the student and process for finalizing the rotation dates. I highly recommend for preceptors to be as flexible as possible when scheduling to allow students to minimize distraction during the experience. Additionally, students respond well when I have asked them to provide one to three personal goals or areas of interest for the experience to be included in the planning process. This simple step tells the student that his/her learning is customized and actually helps me to know what to highlight to keep student engaged even during very short observational experiences. I also include where to park and meet the preceptor, what to bring, and any other pertinent information. Lastly, I include up to date contact information and responses to any additional questions.

Scheduling of all dates and times of observation early is suggested to block off time before schedules get filled up. If only one to two observations are needed then all observations may be scheduled prior to starting; if more dates will be needed to meet course

expectations it may be easier to schedule the remaining dates in-person during the first observation. For students needing 32-40 hours at a site, I also schedule a make-up date as well in case something comes up and one of us needs to cancel. Scheduling in person only takes a few minutes, and can take the place of 4-10 emails back and forth to find dates that work. Scheduling dates and times early ensures the rotation goes smoothly and eliminates student stressors of finding common dates of availability when pressured by time and quickly approaching due dates.

Setting the stage is an easy and effective way I engage IPPE students. A templated introductory communication including a warm welcome, flexibility when able in the planning process, incorporation of student interests, inclusion of specific expectations and timely follow up will help to plan for and complete a successful rotation for both the student and preceptor. Start directing!

Jumping Into the Workflow

Thad Schumacher – Fitchburg Hometown Pharmacy

What are students coming into our practices for anyway? To learn and get a visual reference for how we do pharmacy, in real life. Sometimes what they are able to witness is awesome and career altering; but let's be honest, the majority of the time they are watching us and our staff barely hold it together. That is why I encourage all preceptors to put their students to work. I try to match the activities I assign for the student needs to be appropriate for the level of learner in order for it to be a good learning experience for the student.

When it comes to 1st year students, they bring a lot of work with them. Find time to engage with their questions and share how things really are, then put them to work. Have them organize a section of your pharmacy, check for out dates, or file some paperwork. They are generally quick learners and are motivated to do something as opposed to the nothing that is the alternative. I also try to take some time to discuss the purpose and importance of the tasks I am assigning to enhance the learning experience. I may also ask students to identify two medications that they see that they are unfamiliar with. Then ask the students to look them up and report back on the indication and most common adverse effects. Assigning these hands-on activities to students allows them to actively give back to their rotation site while

learning about their profession.

For second year students, I suggest trying to get them a little more hands on in the workflow of the pharmacy, if possible. When I have second year students, I prepare a few drug information questions for them to look up and report back to me. I ask them about the resources they used to find information. I often suggest other resources to consider as well. I also give second year students a complex patient case to look at with me and to work through how I use the WPQC process to systematically go through the case.

When it comes to Interns, 3rd and 4th years students, please utilize them to their full potential. My hand has been forced a little bit with the staffing issues that come with a startup business. So I admit, in the beginning, it felt awkward, the amount I was leaning on students to do. As time went on, it became apparent that the students were up to the challenge. So when your next intern visits the pharmacy make a list of the things that you need or want to accomplish, and work with the intern to figure out which of the things on the list excites them the most. The next step is the most difficult, give up control of the process and let the intern run with it, you may be surprised by the results!

Promoting Independent Learning Through OTC Activities

Daniel Duffy – Walgreen Drugs Cross Plains, WI

A pharmacy is a busy place, even in a low volume store. As a pharmacist, I am pulled in many directions, sometimes at the exact same time. A patient may have a question, there may be a physician calling in a new medication, or there may just be a lot of prescriptions to fill at that moment. Fitting in a meaningful discussion with a student can be challenging and it can be difficult to maintain his or her interest. In order to make the best possible experience for both the preceptor and the student, I assign pharmacy activities to IPPE students.

The first activity is to have the IPPE student select several herbals/weight loss products that he or she might be curious about, research it, then give an "in service" type talk on it. The student answers common questions that patients have with herbal supplements as part of their presentation. For example, a patient would want to know if it is safe to take the herbal with his or her current medication regimen. The student would therefore look at potential

interactions with the herbal product, including strength of evidence, and be able to discuss it. Another common question is whether or not the herbal will work for them. As this is a particularly interesting question, some time is spent discussing herbals as a whole.

The second activity is a seasonal OTC learning exercise. I have the IPPE student go into an OTC section (e.g. Cold and flu) and I ask him or her to help me select products given my “symptoms”. The student asks me probing questions to ascertain whether I need to go seek medical care as well. The student is given as much time as they need and can use any resource they would like before I start asking questions regarding their recommended product. For this activity it is vital to create a comfortable learning environment prior to questioning the student. He or she should be encouraged to try the activity, even if unsure. It is important to tell the student that it is not only ok to be incorrect, but expected at this point in the curriculum. Word choice, tone and body language, are especially important when creating the learning environment as well. These activities work well for both the student and preceptor because they acknowledge the demands of both parties. The preceptor is allowed some time to catch up, and more importantly the student can gain real world experience in an independent and engaging way.

Patient Advocacy and Partnership
Albert Carbo – Peninsula Community Health Services, Bremerton, WA; former preceptor at UW Hospital and Clinics, Madison, WI.

As healthcare delivery shifts towards more patient-centered care, there is an increasing need to incorporate patient advocacy skills into our experiential training, even starting in the IPPEs. In spite of the many patient advocacy roles preceptors adopt within their own practices, translating these skills into the clinical rotation setting can be challenging – perhaps because patient advocacy skills often lack the clarity of formal curriculum and assessment. On the other hand, perhaps it is precisely these more elusive, multifaceted, but no-less essential skills that are best realized through the experience of clinical rotations.


Since patient advocacy can be difficult to define, I have found it beneficial to begin our discussions by reviewing the social determinants of health – including poverty, immigration status, insurance coverage, physical access to

TABLE 1. Example Patient Advocacy Cases

Patient Cases
Example Case 1: Mr. Smith presents to your pharmacy with a prescription for a long-acting insulin with a total daily dose requiring multiple vials per month. He has a high-deductible commercial insurance plan, with an out-of-pocket cost of over \$200 per month – a cost Mr. Smith calls “unaffordable.” The prescriber is willing to work with you to find the least expensive option.
Possible considerations to review: Review the formulary for potential cost-saving interchanges, investigate co-pay cards or coupons (e.g. Needymeds.org).
Example Case 2: Mrs. Jones presents to your pharmacy with a prescription for dofetilide. Her cardiologist is adamant that this is the best therapeutic option; however, it is an out-of-pocket cost of over \$200 per month via Mrs. Jones’ Medicare Part D plan. What resources might you consider to assist Mrs. Jones?
Possible considerations: Medicare.gov, Aging and Disability Resource Centers
As a preceptor, make sure to highlight the process more so than a specific answer for this type of discussion.

care, language, and health literacy – as well as the specific roles pharmacists can play in addressing health disparities on a local, national, and global scale. With an appreciation for these social determinants, we can begin to consider how a patient’s individual concerns fit within the broader context of the patient’s experience. I encourage my IPPE students to be empathetic listeners, working collaboratively with patients to define and pursue patient-centered goals.

Patient advocacy supports and empowers a patient’s self-efficacy within the decision-making process. Consequently, I challenge students to provide patient education and patient skill-building, as well as employ motivational interviewing to help match patient goals with action. To provide effective support, students must learn the intricacies of a complex healthcare delivery system. IPPE students should be exposed to discussions regarding reimbursement, managed care, State and Federal health programs, and other relevant health policy. They should also be offered a working knowledge of drug costs, formularies and tiers, and prior authorization processes as they pertain to patient access. Where preceptor time is limited, students can be offered resources for self-directed learning (e.g. HealthCare.gov, CMS.gov, Robert Wood Johnson Foundation, Kaiser Family Foundation). Finally, IPPE students should begin to develop their own toolbox of patient-centered advocacy resources. This may include working with seasoned patient advocates, such as the social workers and patient navigators within the care team, as well as relevant local, state, and national agencies or patient advocacy organizations.



Self-directed learning resources:

HealthCare.gov, CMS.gov
 Robert Wood Johnson Foundation
 Kaiser Family Foundation

After exploring the conceptual foundation of patient advocacy, students should be provided with opportunities to creatively develop and apply their patient advocacy skills. I use the following topics to begin discussions with students. I ask them to consider how they might triage and connect patients to resources based on the patient’s needs:

- What patient-friendly resources would you recommend to a patient wishing to learn about his or her medications or medical conditions?
- What resources are available to review drug costs, formularies, or tiers?
- What resources would you recommend to connect patients with manufacturer copay cards or patient assistance programs?
- What resources would you recommend to patients wishing to identify appropriate clinical trials opportunities?

Integrating case-based scenarios also invites IPPE students to participate in creative problem-solving. Case discussions allow preceptors to model their own thought-processes while encouraging students to strengthen their own advocacy skills. By developing a robust set of cases derived from practice experience, I provide real-world scenarios and use certain cases highlighting specific patient advocacy skills and resources. These questions and cases may also provide preceptors an opportunity to

balance other responsibilities while students are engaged in self-directed learning.

The best learning experiences involve direct patient interaction. Consequently, I encourage IPPE students to engage patients in dynamic conversations with patients regarding their care. These encounters allow the patient to become the educator – providing further insight into his or her individual patient experience, as well as providing the student with realistic feedback.

Over the course of the clinical rotation, I ask students to assimilate their various experiences through self-reflection.

- What patient advocacy challenges did they encounter?
- How did their perspective change?
- What new skills were acquired?
- How will patient advocacy be incorporated into their future practice?

As preceptors we have an obligation that extends beyond providing merely a clinical and technical foundation. We have a responsibility to challenge our students to develop meaningful patient advocacy skills and experiences that both affirm and inspire their professional lives.

IPPE Student Involvement in Pharmacy Projects

Connie Kraus - UW-Madison School of Pharmacy and Department of Family Medicine and Community Health at Verona Clinic and Belleville Clinic

Introductory pharmacy practice experiences give students windows to see pharmacy practices in a variety of settings. Students are able to observe and participate, to variable extents based on law, in patient care during these rotations. Additionally, they have the opportunity to meet and talk with pharmacists about their practices, philosophies and ideas, and assist with non-patient care activities.

It is in this area of non-patient care activities that sometimes a connection develops between a student's and preceptor's interest, and an opportunity for collaboration "above and beyond" the IPPE experience may present itself. For example, several of my faculty colleagues and I longitudinally teach drug information and evidence-based medicine. I serve as a section editor for Evidence Based Practice, a journal published by the Family Physicians Inquiry Network. Over the years, many IPPE students who have done short-term rotations with me have expressed interest in trying to publish a drug information paper called a

Editors Note: *If you precept IPPE students and are interested in sharing a writing experience with your student, The Journal can often produce a topic for publication or an article for peer review. If you would like to coach an IPPE student in writing or peer reviewing for The Journal please contact Amanda Margolis, Pharmacist Editor of JPSW, at amargolis@pswi.org.*

clinical inquiry. In these cases, I work with the student beyond the IPPE experience as a senior co-author to assist them in identifying a question, submitting the question to the journal to ascertain interest, critiquing the student's search, and editing the draft before submission. I also assist the student in responding to peer and editorial review. Students have shared with me that the opportunity to publish is invaluable in terms of applications for residencies and employment. Getting to know students better through the process of writing with them also provides me with a deeper understanding of a student's interests, dependability, resilience and motivation, which has proven beneficial in situations where I have been asked for a letter of reference for residency or employment.

In my ambulatory care pharmacy practice, I am also often engaged in projects designed to improve the quality of some aspect of the clinic. Commonly, these projects involve an evaluation of medication use or similar focus. Even though an IPPE student's time with our practice is limited, some students have expressed interest in working on portions of these projects to gain experience in the process of design and implementation, but also, in some cases, in presenting results of the project to medical staff at the clinic, as a poster at a professional meeting or as a written publication. It is often the case that this type of engagement will span one or more semesters, depending on the degree to which students have time and interest to participate. Some of these students have elected to work with me to receive course credit as an independent study. I have also had the experience of working on a longitudinal project with students who did not desire independent study credits, but rather were focused on seeing the project until the end in order to collaborate on presenting the project as a poster or publication. There have been several examples of IPPE and APPE preceptors who have offered similar types of opportunities for students to work on a project at their site. By developing partnerships with experiential education faculty at the School of Pharmacy, it may be possible to provide independent study credits to students

for their participation in projects.

These longer term connections that sometimes evolve from an IPPE rotation are invaluable for students as they develop their professional networks. The value of finding mentors during the early stages of academic development can be profoundly beneficial to students in receiving professional guidance.

Closing

In addition to the suggestion above, providing either written or face-to-face feedback to IPPE students is extremely important, even if the hours completed at a site are small. Many preceptors try to identify an area for improvement in a student and do address it with the student so the student can grow and progress as a result of their experience. This should include at least one positive and one constructive piece of feedback. It's important for students to know what they should continue to do (that they are already doing well) as well as how behavior should be modified. For example, many IPPE students in the first year of the Doctor of Pharmacy program may still be learning what professionalism looks like and need guidance. Consider reviewing JPSW's precepting series article on setting expectations with student for ideas on conveying professionalism and other expectations for IPPE students in the January/February 2016 issue of *The Journal*.¹ For additional guidance on formulating effective feedback please see JPSW's precepting series article in article in the March/April 2016 issue of *The Journal*.²

With a little structure and preparation, pharmacy preceptors can craft a valuable and interesting learning experience for IPPE students, while bringing value to their practice site. For additional guidance on creating an active observation guide, which can be especially useful in precepting IPPE students, please see JPSW's precepting series article in article in the January/February 2017 issue of *The Journal*.³ If you do not currently precept IPPE students, we hope you consider working with a school of pharmacy to begin offering these influential rotations. Remember that Wisconsin state law

allows a preceptor to simultaneously have first or second year pharmacy student(s) while they have one third or fourth year intern.

Whether this article gives you some ideas on introducing your pharmacy to IPPE students or inspires you to try some new activities with them, we hope you were able to take away a few IPPE precepting tips that will help you during your interactions with future students. ●

Michelle Brenner is a preceptor and local site coordinator for the UW-Madison School of Pharmacy and is a Pharmacy Manager at Ascension/Ministry Health Care St Joseph's Hospital in Marshfield, WI. Thad Schumacher is the Owner of Fitchburg Hometown Pharmacy, Fitchburg, WI. Daniel Duffy is a Pharmacy Manager at Walgreens in Cross Plains, WI. Albert Carbo is currently a Clinical Pharmacist at Peninsula Community Health Services, Bremerton, WA. Previously Albert was an Outpatient Pharmacy Coordinator at UW Hospitals and Clinics, Madison, WI. Connie Kraus is a Professor (CHS) at the UW-Madison School of Pharmacy and an ambulatory care pharmacist with the UW-Madison Department of Pharmacy Medicine and Community Health, Madison, WI.

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