CORE COMMUNITY EXPERIENCE

PCTH 7401

GRADING CRITERIA, EVALUATION and FORMS

Core Community Experience - PCTH 7401

Terminal Behavioral Objectives

At the completion of this professional experience, the student will be able to:

1. Process and dispense any new or refill medication orders;

2. Conduct patient interviews to obtain patient information;

3. Interpret and evaluate information obtained to create patient profiles;

4. Assess health literacy status and non-adherence;

5. Communicate health and drug information to patients and healthcare professionals in person and via the telephone;

6. Identify patient-specific factors that affect health, pharmacotherapy and/ or disease state management;

7. Advise the patient regarding self-care products or preventative care practices for selected conditions;

8. Properly prepare and use a patient medication record;

9. Apply the laws and regulations to the proper handling and dispensing of the various classes of drugs;

10. Describe and use the procurement and inventory control system utilized by the site;

11. Describe the administrative structure and management of the site and properly perform related functions which are part of the normal routine;

12. Describe the type(s) of drug packaging and distribution used at the professional experience site and participate in the drug distribution process with other personnel;

13. Adequately process third party prescriptions and make appropriate decisions regarding drug selection based on the guidelines of the particular insurance plan;

14. Document medication therapy management services in a recognized format that is organized to allow clear understanding of the intervention(s);

15. Obtain a patient history and identify drug-therapy related problems for a patient.

Instructions and Grading Guidelines for Core Community Experience

STUDENT INSTRUCTIONS & ASSIGNMENTS

<u>1. Self-Assessment and Calendar</u> – (Initial Assessment) **Submit into Canvas by Friday of the first week**.

a. Please fill out the **Student Experience Self-Assessment-Initial** prior to the start of this experience. Using your judgment, place an "X" in the appropriate rating column that best describes your ability to perform/ describe the functions. Plan to review this chart with your preceptor to help tailor the activities and experiences that will meet your goals. This form needs to be turned into Canvas by the **Friday of the first week**.

b. Plan to sit down with your preceptor on the first few days of the experience to discuss and plan the **schedule of activities and goals** for the experience. A **schedule with 3-4 personal learning goals** needs to be turned into Canvas by the **Friday of the first week**. At least one those goals must pertain to direct patient care.

<u>2. Medication Therapy Management Interventions</u>

Interventions for Medication Therapy Management Services assignment must be submitted to Canvas throughout the experience (**see MTM section**). Students should plan for this activity as soon as they start the experience by looking for intervention opportunities with patients.

a. Student will complete a face-to-face medication history interview due and submit through Canvas by the **end of the second week.**

b. Prepare a **medication action plan** (MAP). Give a copy to the patient and submit through Canvas by the end of the experience.

c. Prepare a **personal medication record** (PMR). Give a copy to the patient. Prepare a claim form. Submit the PMR and claim form through Canvas by **Friday of the last week.**

<u>3. Final Paperwork</u>

At the end of the experience, students need to submit six documents to Canvas by **Friday of the last week**. They include:

a) **Checklist of Student Experiences** - completed by the preceptor and student throughout the experience.

b) **MTM Interventions Questionnaire** - completed by the student and preceptor

c) **Student Experience Self-Assessment – Final** - Final assessment by the student

d) **Student Grading Sheet** - completed and signed by the preceptor and the student

e) **Student Evaluation** - written comments by the preceptor and signed by both the student and the preceptor

f) **Final Grade Sheet** – includes total experiential hours and signed by the preceptor

<u>4. Experience/Preceptor Evaluation</u> - assessment by the student of the preceptor and the experience. A link to your preceptor evaluation will be made available to you at the conclusion of the experience on **RX Preceptor**. You will have 2 weeks to complete the evaluation. **Completion of the evaluation is mandatory** to receive credit for your experience. Survey responses are completely confidential.

Core Community Experience - PCTH 7401

STUDENT EXPERIENCE SELF ASSESSMENT - Initial
(Please share this with your preceptor on the first day)

Student Name: _____Start Date: _____

Preceptor Name:_____ Pharmacy:_____

	None	Minimal	Moderate	Extensive
1. Accurately evaluate the accuracy of a new prescription, or refill prescription, then correctly prepare and label it for dispensing.				
2. Accurately and process a new prescription or refill prescription in accordance with the law.				
3. Compound non-sterile drug products using accurate calculations, pharmaceutical components, and techniques.				
4. Obtain a patient history in an organized fashion that also includes drug allergies and reactions, medications used (including OTCs, & herbals) with dosing regimens.				
5. Interpret patient information, considering patient specific factors; to determine drug-related problems, and need for treatment/ referral.				
6. Determine appropriate storage of compounded prescriptions before and after dispensing.				
7. Develop and communicate (orally and non-orally) accurate health care and drug information at an appropriate level for patients, caregivers, and health care providers.				
8. Accurately and appropriately provide medication counseling to a patient or patent's caregiver receiving a medication.				
9. Assist a patient with appropriate selection of self-care products and preventative care based on disease state/drug therapy.				
10. Communicate alternative therapeutic strategies to a health care provider to correct or prevent drug-related problems.				
11. Collect accurate and comprehensive drug information from appropriate sources to make informed, evidenced-based, patient- or population-specific decisions.				

12. Promote to patients the importance of health, wellness, disease prevention and management of their diseases and medication therapies to optimize outcomes.				
13. Provide preventative health services (e.g. - immunizations, tobacco cessation counseling)				
14. Assist a patient or care giver with problems related to prescription benefit plans, including handling of claims, methods of reimbursement and effects of drug product selection.				
15. Supervise/ communicate with pharmacy technical personnel in a collaborative and supportive manner.				
16. Participate in discussions about human resources management, data management systems and financial performance.				
17. Managing systems for storage, preparation and dispensing of medications.				
18. Demonstrate caring, ethical and professional behaviors when interacting with peers, professionals, patients, and caregivers.				
19. Identify and document using MTMS codes disease-state specific Medication Management Therapy Services provided to a patient.				
20. Submit a claim form for MTMS provided to a patient.				

Preceptor signature: _____

Upload completed form into Canvas

Core Community Experience - PCTH 7401
Student Calendar and Goals

Student name: _____

Preceptor: _____ Site: _____

Date Started: _____Date Finished: _____

Week	Mon	Tue	Wed	Thu	Fri
1st					
2nd					
3rd					
4th					

Total Experiential Hours: _____

List 3-4 goals for this experience including one pertaining to direct patient care:

1.

2.

3.

4.

Upload completed form into Canvas

Core Community Experience

PCTH 7401

Medication Therapy Management Interventions

Core Community Experience - PCTH 7401
Medication Therapy Management Interventions

Objectives: By the end of this professional experience, the student will be able to:

1. Identify patient-oriented MTM interventions as defined by the "Core Elements" paper.

2. Obtain a medication history from a patient and evaluate and assess the patient's medication regimen.

3. Document the intervention on the appropriate form.

4. Communicate with the patient and/or the patient's prescriber any identified medication action plan(s).

5. Develop a personal medication record for the patient and assess the patient's medication adherence.

6. Utilize a Pharmacist Care Claim form and appropriate MTM codes for billing of MTM services.

Instructions:

1. Before starting this assignment, read these pages and the "Core Elements" document to become familiar with what is meant by medication therapy management services and to understand the different parts of the assignment.

2. During the first few days of the experience, with your preceptor's help, look for patients who may benefit from MTM services. The use of open-ended questions while educating a patient about their medications works well to identify potential interventions. Politely ask if you can schedule a medication history with them. Let them know that it will take 45 – 60 minutes.

3. If the patient agrees to be interviewed, using either the provided patient history form on Canvas to perform the medication history on the patient. Remember to obtain all parts of the history, including pertinent medical history, allergies and immunizations and OTCs, herbals, or supplements use. Remember to document that patient is not using any OTCs, etc, because if you don't document it, then you didn't ask about it. Document you interventions and your time on the Pharmacist Care Claim form (Canvas).

4. At the conclusion of your interview, the identified MTM interventions should be written up on a **Medication Action Plan (MAP)**. The MAP is used to communicate either with the patient or the patient's prescriber what changes/interventions you are recommending. The patient may also take the MAP to the prescriber. An example of a MAP is provided in the "Core Elements" paper. Plan on following up with the patient or prescriber via telephone about the changes within a week. Preparation of the MAP may take up to 30 minutes. Document your time on a Pharmacist Care Claim form.

5. Once the changes in the patient's medication regimen have been made, make up a **Personal Medication Record (PMR)** for the patient. This is a document the patient should be able to use for any and all medical appointments. Include important information such as allergies and immunizations. An example of one is provided on Canvas. Document your time on the Pharmacist Care Claim form.

6. Submit copies of all completed forms onto Canvas: patient history, medication action plan, personal medication record and claim form.

7. **In order to adhere to HIPAA regulations, do not use the patient's actual name, initials, date of birth, home address or telephone number or insurance identifier on any document for this assignment. Use the initials A.A. for the first patient. Use 555-1234 for phone numbers and "123 Main Street" for the street address. Use Dr. I.M. Smart for the prescriber's name.**

8. The intervention will be reviewed and critiqued as quickly as possible by the PEP Director. You will receive an email with comments and/or questions. If needed, students should revise the documented intervention, incorporating as many of the comments/suggestions as possible and return within a week of receipt. Keep in mind that patient-specific questions may be asked for which the student does not have an answer. For example, if the question is "what was the patient's BP?" and this was not ascertained during the interview, simply include a sentence such as "patient's blood pressure is unknown."

9. Interventions based on formulary management (e.g., switching brands due to formulary restrictions) will <u>not</u> be accepted for a required documented interventions. Students experiencing difficulty in identifying appropriate interventions should contact the PEP Director for assistance.

10. Preceptors may have the necessary claim forms (Pharmacist Care Claim) form on site, however some may not. Be sure to ask your preceptor whether these forms are available at your PEP site prior to starting the experience.

11. Complete the MTM questionnaire (Canvas) at the completion of the experience with your preceptor and submit through Canvas.

<u>Schedule of Assignments:</u>

For the Core Community Experience, you will to need submit through Canvas copies of the following assignments:

- **One medication history on one patient**
- **One medication action plan (MAP) that is given to the patient**
- **One personal medication record (PMR) that is given to the patient**
- **A Pharmacist Care Claim form that includes the time for each of the above assignments**
- **MTM Questionnaire**

The schedule of assignments is suggested as follows:

➤**Week two** – With the help of your preceptor, identify a patient who is willing to let you interview him/ her about their medications. Write up the interview using the provided patient history form in appendix D. This is an extensive interview about the patient's medication use, both past and current. This interview should take at least 40 - 60 minutes so prepare yourself and the patient for it. **<u>This assignment is due by the end of the second week.</u>** Prepare a Pharmacist Care Claim form documenting your time and any interventions made.

➤**Week three** - For this same patient, prepare a MAP after the interview. This is a record for the patient to take with him/her as a permanent record of their medications. The reason for the MAP is that you have identified a drug therapy problem that needs to be resolved and the MAP outlines for the patient what the change is in their medication regimen. This may take 30 minutes as well, as you may need to do some research. Document your time on the same claim form. Give a copy of the MAP to the patient and go over your recommendations.

➤**Week four** – Prepare a PMR for the same patient. Include in it any medication changes/ issues that you may have resolved for the patient. Give a copy to the patient. Document your time on the same claim form.

➤**End of experience – Complete the MTM questionnaire with your preceptor. Submit all of the above documents through Canvas.**

Some caveats:

- ❖ Format your own MAP & PMR, do not copy sample forms in the Core Elements document.
- ❖ Review how to bill for a pharmacist's time on using the MTMS codes (see below). If it is done incorrectly, it will be returned to you to do over.
- ❖ Do not print out a medication list from the pharmacy computer, black out the PHI, and send that in for medication history. That is not a medication history. That is a print out.
- ❖ Please discuss this assignment with your preceptor. You may be assisting them in their understanding of what MTMS is and how it can be done. They can assist you in finding a suitable patient.
- ❖ **All claim forms need to be signed by both you and your preceptor.**

Medication Therapy Management Service Codes

Code Model

Medication Therapy Management Service(s) (MTMS) describe face-to-face patient assessment and intervention as appropriate, by a pharmacist. MTMS is provided to optimize the response to medications or to manage treatment-related medication interactions or complications.

MTMS includes the following documented elements: review of the pertinent patient history, medication profile (prescription and non-prescription) and recommendations for improving health outcomes and treatment compliance. These codes are not to be used to describe the provision of product-specific information at the point of dispensing or any other routine dispensing-related activities.

99605	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, initial 15 minutes, with assessment, and intervention if provided; initial 15 minutes, new patient
99606	initial 15 minutes, established patient
99607	each additional 15 minutes (List separately in addition to code for the primary service)
	(Use 99607 in conjunction with 99605, 99606)

Rationale

Three codes 99605, 99606, and add-on code 99607 and guidelines have been established to report the provision of medication therapy management services (MTMS). These services are provided by a pharmacist to optimize the response to medications or for the management of treatment-related medication problems or complications. MTM services are initiated at the request of the patient and/or caregiver, payer, pharmacist and/or other healthcare provider. These codes are not to be used to describe the provision of product-specific information (i.e., product information leaflets) at the point of dispensing or any other routine dispensing-related activities (i.e., professional time related to preparation or delivery of the medication).

In provision of MTMS the review of the pertinent patient history, medication profile will include: evaluation of prescription medications, OTC's and herbal medications and/or physician samples. The pharmacist will inventory the medication list to identify and/or resolve drug therapy problems such as duplications, under- or overdosing and drug interactions or other types of therapy related issues. The pharmacist may discover medications that need to be added or stopped. This service may include communication of management recommendations to the prescriber.

Each medication is assessed to determine the effectiveness and the side-effects. A follow-up monitoring call is included in MTMS to determine if symptoms are resolving, if the patient is experiencing side effects and to assess compliance.

Assessment will be performed to determine the patient's adherence to medication recommendations. The pharmacist will educate the patient and monitor reaction to new and changed prescriptions and over-the-counter (OTC) medications.

Similar to other codes series in the CPT codebook, these codes have been structured to report the initial and more intensive encounter service with code 99605. The subsequent encounter, reported with code 99606 is intended to be reported for services provided which are similar to the initial encounter, with an emphasis on updating information provided at the initial encounter, assessment of the patient compliance and reactions and further evaluation of medications which have been added to the patient's therapy with those previously assessed. Add-on code 99607 is reported in addition to codes 99605, 99606 for each additional fifteen minutes of service beyond the initial service.

Clinical Vignettes

99605:

A 66 year-old female with pre-existing osteoporosis has been diagnosed with type 2 diabetes and hyperlipidemia. Initial medication therapy assessment and intervention is performed.

Pre Service

Obtaining patient intake information, gathering or preparing materials that will be used during the patient encounter and coordination of other support staff.

Intra Service

Assessment of the patient may include: obtaining a patient medical and medication (e.g., prescription and non-prescription) history; determining appropriateness of medication therapy (supra- or sub- optimal), performing a review of relevant systems; evaluating pertinent lab data; assessing potential or existing drug-drug, drug-disease, and drug-nutrient interactions; establishing and/or obtaining such additional information (e.g., obtaining information from other medical records) as may be necessary; and development of a care plan including recommendations for optimizing medication therapy.

Pharmacist interventions may include: providing education, training and resources; administering medication; formulating a treatment and/or follow-up plan; providing recommendations for disease prevention; and evaluating the patient's knowledge of medication and willingness to implement recommendations.

Post Service

Documentation of the patient encounter; non face-to-face interventions and recommendations; referrals; communication with other healthcare professionals; administrative functions (including patient and family communications) relative to the patient's care; and as appropriate scheduling of follow-up appointment(s).

99606:

A 66-year-old female with osteoporosis, type 2 diabetes, and hyperlipidemia is receiving follow-up reassessment after receiving a prior medication therapy management service.

Pre Service

Obtaining patient intake information, gathering or preparing materials that will be used during the patient encounter and coordination of other support staff.

Intra Service

Assessment of the patient may include: obtaining or updating a patient medical and medication (prescription and non-prescription) history; performing reviews of relevant systems; reviewing pertinent lab data; assessing potential or existing drug-drug, drug-disease, and drug-nutrient interactions; evaluating medication-related adverse events and toxicities; assessing medication effectiveness, organizing and interpreting the data; establishing and/or obtaining such additional information (e.g., obtaining information from other medical records) as may be necessary; assessing any recent change in medication therapy or a new medication therapy-related problem; developing a care plan including recommendations for optimizing medication therapy.

Pharmacist interventions may include: providing reinforcement of education, training and resources; modifying therapy; administering medication; formulating a treatment and/or follow-up plan; providing recommendations for disease prevention; re-evaluating the patient's knowledge of medication; and evaluating knowledge and willingness to follow new recommendations.

Post Service

Documentation of the patient encounter interventions and recommendations; referrals; communication with other healthcare professionals; administrative functions (including patient and family communications) relative to the patient's care, and as appropriate scheduling of follow-up appointment(s).

99607:

 Intra Service

The service(s) continued for an additional 15 minutes with the same patient.

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Final Paperwork

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PRECEPTOR'S CHECKLIST OF STUDENT EXPERIENCES

Place a check in the appropriate space(s) for each function performed. Students are responsible for completing the form daily. If no experience has been gained in a particular area by the end of the experience, indicate "NA."

Student name: _____ Preceptor: _____

Site:_____

I. Professionalism	Discussed	Demonstrated	Performed
A. Ethics and Legalities/ Code of Ethics			
B. Conduct			
C. Appearance			
II. Pharmaceutical Care			
A. Dispensing Prescription Orders	Discussed	Demonstrated	Performed
1. Face-to-face			
2. Telephone			
3. Legal Requirements			
4. Documentation			
B. Filling Orders	Discussed	Demonstrated	Performed
1. Product Selection			
2. Patient Profiles -- Drug History			
3. Patient Profiles -- Review			
4. Patient Profiles -- Allergies			
5. Patient Profiles – Interactions			
6. Methods of Checking			
7. Labeling – Legal Requirements			
C. Patient Counseling	Discussed	Demonstrated	Performed
1.Mandatory Counseling -OBRA Requirements			
Open v. Close-Ended Questions			
Written			
Documentation			
Telephone			
2. Teaching Use of Medical Devices (BP, glucose meter, peak flow meter, etc.)			
D. Controlled Substances-Legal Requirements	Discussed	Demonstrated	Performed
1. Schedule II			
2. Schedule III and IV			
3. Schedule V			
4. Forgeries			
5. Storage Requirements			
6. Controlled substance database (use and barriers)			
E. Refilling Prescriptions	Discussed	Demonstrated	Performed

	Discussed	Demonstrated	Performed
1. Legal Requirements			
2. "PRN" Refills – Appropriateness			
3. "PRN" Refills – Compliance			
4. "Emergency" Refills – Chronic Conditions			
5. "Emergency" Refills – Acute Conditions			
6. "Emergency" Refills – Controlled Substance			
7. "Emergency" Refills – Copies			
F. Medication Therapy Management Interventions and Consultations	Discussed	Demonstrated	Performed
1. Reasons for Interventions			
Under- or Over-Utilization			
Therapeutic Duplication			
Drug and/or Disease Contradictions			
Interactions or Adverse Drug Reactions			
Abuse or Misuse			
2. Patient Consultations			
3. Health Care Practitioner Consultation			
4. Marketing/Reimbursement			
5. Detecting and Reporting Adverse Drug Reactions (ADRs)			
6. Documenting Interventions			
Pharmacist Care Claim Forms			
MTM Codes			
ADRs (Med Watch Program)			
III. Non Prescription Drugs	Discussed	Demonstrated	Performed
A. Prescriptions for Non-Legend Drugs			
B. Arrangement of OTCs in Pharmacy	Discussed	Demonstrated	Performed
1. Ophthalmic/Otics			
2. Cough and Cold			
3. Gastrointestinal Agents			
4. Vitamins			
5. Analgesics			
6. Feminine Hygiene			
7. Foot/Oral Care			
8. Pediatrics			
9. Dermatologics			
10. Alternative/Complementary Therapies			
11. Self-Monitoring Products/Devices (Glucose monitors, pregnancy tests, ovulation kits, etc.)			
12. Other:			
C. Providing Information and Advice	Discussed	Demonstrated	Performed
1. Patient Requested			
2. Pharmacist Initiated			
3. Other Health Professionals			
IV. Pharmaceutical Care Services	Discussed	Demonstrated	Performed

A. Compounding			
1. Sterile Products			
2. Non-Sterile Products			
3. Pharmaceutical Calculations			
B. DME			
C. Diabetes education/ management			
D. Dyslipidemia education/ management			
E. Geriatrics			
F. Hypertension/ education/ management			
G. Immunizations			
H. Pediatrics			
I. Respiratory Care education			
J. Life-style management/ education			
K. Tobacco cessation education/ management			
L. Other services:			
V. Management	Discussed	Demonstrated	Performed
A. General Management Policies			
B. Physical Plant	Discussed	Demonstrated	Performed
1. Opening Pharmacy			
2. Closing Pharmacy			
3. General Layout – Merchandise Selection			
4. General Layout – Merchandise Display			
5. General Layout – Traffic Patterns			
6. General Layout – Theft Control			
C. Pricing Policies	Discussed	Demonstrated	Performed
1. Prescription Pricing			
2. OTC Pricing			
3. General Merchandise Pricing			
D. Inventory Control	Discussed	Demonstrated	Performed
1. Methods of Ordering – Wholesaler			
2. Methods of Ordering – Direct			
3. Receiving and Checking			
4. Biotechnology Drugs			
5. Payment Methods – Wholesaler			
6. Payment Methods – Manufacturer			
7. Arrangement of Legend Drugs – Routine Stock			
8. Arrangement of Legend Drugs – Special Storage Areas			
9. Turnover – Prescription Inventory			
10. Turnover – General Merchandise			
11. Return Goods Policy			
E. Sales	Discussed	Demonstrated	Performed
1. Cash Sales			
2. Charge Accounts and Billing			
3. Adjustment of Complaints			

F. Third Party Plans	Discussed	Demonstrated	Performed
1. Types of Programs Available			
2. Criteria for Acceptance or Rejection of Plans			
3. Handling of Claims			
4. Methods of Reimbursement			
5. Formulary Management			
6. Effects on Patient Counseling and Compliance			
7. Prescription synchronization			
G. Personnel	Discussed	Demonstrated	Performed
1. Hiring			
2. Motivation			
3.Discipline and Reprimands			
4. Dismissal			
5. Salaries and Fringe Benefits			
6. Staffing ratios(technicians, interns)			
7. Pharmacist-in-charge			
H. Controlled Substances – Inventory Issues	Discussed	Demonstrated	Performed
1. Preparation of DEA Order Forms			
2. Inventory Monitoring for Controlled Substances and Responsibility of the "Pharmacist-in-charge"			

Preceptor signature: _____

Please have the student upload this form into Canvas at the conclusion of the experience.

Medication Therapy Management Questionnaire

Student name: _____

        ❐ Discuss the following questions with your preceptor.
        ❐ Record your thoughts, etc. below (use back of page if needed).
        ❐ **Please upload the completed form onto Canvas.**

1.   List any characteristics/ criteria/ diseases that you feel would help to identify patients who may benefit from MTM services.

2.   If Medicare is expanded to include MTM services for all patients with Medicare-Part D, what will pharmacist need to do to prepare to provide this service?

3.   Identify three benefits of billing for cognitive services/interventions.

4.   Identify two barriers you encountered which might make it difficult to incorporate this practice into the daily routine at this site. NOTE: If you encountered some initial barriers, but overcame them, please note details.

5.   List two practices/activities can be done to help <u>patients</u> recognize the value of cognitive services that pharmacists can provide?

6.   If you were to practice in a community setting, list what you would do to incorporate MTM into your practice? (students)

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STUDENT EXPERIENCE SELF ASSESSMENT - Final
(Please complete at the conclusion of your experience)

Student Name: _____Start Date: _____

Preceptor Name:_____ Pharmacy:_____

	None	Minimal	Moderate	Extensive
1. Accurately evaluate the accuracy of a new prescription, or refill prescription, then correctly prepare and label it for dispensing.				
2. Accurately and process a new prescription or refill prescription in accordance with the law.				
3. Compound non-sterile drug products using accurate calculations, pharmaceutical components, and techniques.				
4. Obtain a patient history in an organized fashion that also includes drug allergies and reactions, medications used (including OTCs, & herbals) with dosing regimens.				
5. Interpret patient information, considering patient specific factors; to determine drug-related problems, and need for treatment/ referral.				
6. Determine appropriate storage of compounded prescriptions before and after dispensing.				
7. Develop and communicate (orally and non-orally) accurate health care and drug information at an appropriate level for patients, caregivers, and health care providers.				
8. Accurately and appropriately provide medication counseling to a patient or patent's caregiver receiving a medication.				
9. Assist a patient with appropriate selection of self-care products and preventative care based on disease state/drug therapy.				
10. Communicate alternative therapeutic strategies to a health care provider to correct or prevent drug-related problems.				
11. Collect accurate and comprehensive drug information from appropriate sources to make informed, evidenced-based, patient- or population-specific decisions.				

12. Promote to patients the importance of health, wellness, disease prevention and management of their diseases and medication therapies to optimize outcomes.				
13. Provide preventative health services (e.g. - immunizations, tobacco cessation counseling)				
14. Assist a patient or care giver with problems related to prescription benefit plans, including handling of claims, methods of reimbursement and effects of drug product selection.				
15. Supervise/ communicate with pharmacy technical personnel in a collaborative and supportive manner.				
16. Participate in discussions about human resources management, data management systems and financial performance.				
17. Managing systems for storage, preparation and dispensing of medications.				
18. Demonstrate caring, ethical and professional behaviors when interacting with peers, professionals, patients, and caregivers.				
19. Identify and document using MTMS codes disease-state specific Medication Management Therapy Services provided to a patient.				
20. Submit a claim form for MTMS provided to a patient.				

Preceptor signature: _____

Student signature: _____

Upload completed form into Canvas

Core Community Experience Competency Scales

On the **Community Experience Student Grading Sheet**, please indicate the number that best reflects the student's performance in the following areas. In order for the student to receive credit for the experience, the student must achieve a minimum score of "3" for all areas indicated below (unless the preceptor has indicated this area was "not applicable"). If an area does not apply or you have not observed enough behaviors to judge the student, mark N/A to the right of the heading on the Grading Sheet.

A.   DISPENSING PRESCRIPTIONS

   1.   Student is likely to dispense the wrong drug because adequate skills for checking that the correct prescription is dispensed have not been developed by the student.

   2.   Student generally dispenses the correct prescription, but with uncertainty.

   3.   Student has developed an adequate system for ensuring that the correct prescription is dispensed and produces labels which are easy to understand and correct.

   4   Student determines that all legal requirements necessary are present on the prescription, examines the patient profile for drug interactions and makes sure that the patient is not allergic to the medication.

   5.   Student performs at level 4, and also checks for product expiration date, determines the feasibility of generic substitution, makes recommendations to the patient and makes appropriate notations on the prescription.

B.   DISPENSING PRESCRIPTION REFILLS

   1.   Student does not understand the legal requirements and consideration when refilling a prescription.

   2.   Student refills prescriptions without checking the original prescription date or the last date the prescription was filled.

   3.   Student understands the legal requirement for prescription refills and checks with the doctor when appropriate.

   4.   Student reviews the patient profile to check for compliance and/or abuse and determine whether any new drugs have been added, which could cause problems.

   5.   Student performs at level 4 and also uses good judgment about how much drug to dispense when a physician cannot be reached on refills that need approval.

C.   DISPENSING TELEPHONE PRESCRIPTIONS

   1.   Student does not have an adequate knowledge base (e.g., the legal requirements, names of drugs, etc.) to understand a prescription order when it is conveyed over the phone.

   2.   Student often omits important information when receiving a prescription over the phone.

3.   Student copies all of the information presented correctly, but must sometimes call back after realizing that all of the information required is not present.

4.   Student understands the legal requirements for a telephone prescription, copies all of the information correctly and asks any relevant questions while still on the phone.

5.   Student immediately transcribes all of the relevant information, asks questions when not sure of the information, verifies that the person phoning the prescription is authorized and places the name or initials of that person on the prescription.

D.   MONITORING AND EVALUATING DRUG THERAPY

1.   Student simply fills and dispenses prescriptions without questioning the patient and checking the patient profile.

2.   Student checks the patient profile, but has not developed the skills and information necessary to judge the appropriateness of the therapy.

3.   Student uses the pharmacy's patient profile system to determine the medical and drug history when dispensing medications.

4.   Student is able to detect drug interactions and potential problems with therapy by questioning the patient.

5.   Student detects interactions and other problems; is able to distinguish clinically relevant information; questions the patient further; and acts in an appropriate manner to inform the patient or contact other health professionals.

E.   COMMUNICATING HEALTH CARE INFORMATION TO PATIENTS

1.   Student makes little attempt to communicate with the patient and does not fully understand required counseling expectations.

2.   Student attempts to communicate with the patient, but does not adequately convey important information or required counseling information to them.

3.   Student uses effective communication skills to question the patient about their medical and drug history, provides the basic information required by federal and state laws.

4.   Student performs at level 3, determines what information the patient is seeking and provides the information on an appropriate level for the patient.

5.   Student performs at level 4 and ascertains that the patient fully understands the information presented.

F.   COMMUNICATING WITH PATIENTS ON OTC PRODUCT SELECTION

1.   Student is unfamiliar with the majority of OTC medications and is unable to help patients.

2.   Student has an adequate knowledge of OTC products, but is unable to effectively communicate that knowledge to the patient.

3.   Student has an adequate knowledge of OTC products and is able to guide patient selection of the appropriate medication.

4.   Student has a good knowledge of OTC products, including risks and benefits, and is able to communicate this knowledge to patients in selecting products.

5.   Student performs at level 4 and integrates patient disease state and/or current drug therapy when recommending OTC products.

G.   COMMUNICATING WITH PATIENTS ABOUT PHARMACEUTICAL CARE

1.   Student has no knowledge in a pharmaceutical care area.

2.   Student has minimal knowledge in a pharmaceutical care area.

3.   Student has adequate knowledge in a pharmaceutical care area and communicates basic knowledge in this area to patients.

4.   Student has good knowledge in a pharmaceutical care area and can communicate this knowledge to patients in such a way as to improve drug therapy and/or quality of life.

5.   Student performs at level 4 and ensures patient follow-up and feedback.

H.   COMPOUNDING PRESCRIPTIONS

1.   Student does not understand which ingredients to use for compounding a prescription; cannot do related calculations; and uses wrong ingredients if unsure about them.

2.   Student takes an excessive amount of time to compound a prescription and is unsure of related calculations.

3.   Student is unsure about compounding for some prescriptions, but asks pharmacist to obtain information.

4.   Student can interpret the prescription, perform calculation correctly, determine needed ingredients and compound the prescription in appropriate time.

5.   Student performs at level 4, estimates the amount of time needed to compound and communicates this information to the patient.

I.   COMMUNICATING WITH PATIENTS

1.   Student has antagonized and/or alienated patients.

2.   Student lacks an understanding of patients' medical, emotional and physical needs.

3. Student is empathetic to the psychological, emotional, economic and medical needs of the patient.

4. Student operates at level 3 and makes every reasonable attempt to communicate more privately when needed.

5. Student operates at level 4 and patients ask for the student because they value the student's understanding and advice.

J. COMMUNICATING WITH HEALTH PROFESSIONALS

1. Student avoids all interactions with other health professionals.

2. Student interacts with health professionals, but does not possess an adequate knowledge base to communicate succinctly.

3. Student has an adequate knowledge base from which to work, but lacks the confidence to assert appropriate information.

4. Student performs at level 3, understands when another health professional needs to be contacted and effectively conveys the necessary information.

5. Student operates at level 4, exercises independent judgment and offers alternatives to solve problems.

K. MAINTAINING PROFESSIONAL AND ETHICAL STANDARDS

1. Student projects an unprofessional image and demonstrates little concern for professional and ethical standards.

2. Students understanding of the profession's legal requirements and code of ethics is limited.

3. Student understands both the profession's legal requirements and code of ethics.

4. Student has a good understanding of pharmacy's legal requirements and professional standards, integrating them into their practice.

5. Student has a high standard of practice which balances ethical, legal and professional requirements in a patient-oriented framework for practice.

L. MANAGING PHARMACY OPERATIONS

1. Student ignores or neglects most of the necessary management functions in the pharmacy.

2. Student lacks a basic understanding of the pharmacy management system and roles of personnel.

3. Student has a basic understanding of the pharmacy management system and adequately interacts with pharmacy personnel.

4. Student performs at level 3, can describe the various roles of pharmacy personnel and appropriately directs personnel to enhance functioning of pharmacy.

5. Student performs at level 4 and can describe pharmacy's role in the overall business organization.

M. INVENTORY CONTROL

1. Student ignores the inventory control system in the pharmacy.

2. Student forgets to re-order items when inventory is low or orders from inappropriate source.

3. Student generally orders when inventory is low and from the appropriate source.

4. Student can describe and adheres to the inventory control system of the pharmacy.

5. Student performs at level 4, recognizes shortages and can identify alternative sources for the products.

N. THIRD PARTY PRESCRIPTION PLANS

1. Student lacks a basic understanding of third party prescription plans.

2. Student allows patients to leave before obtaining all necessary third party information.

3. Student obtains all necessary third party information.

4. Student verifies all necessary third party information, understands reimbursement methods and third party plans' effects on drug product selection.

5. Student operates at level 4 and can discuss third party plans' effects on patient counseling and compliance.

O. ORGANIZING AND PLANNING

1. Student operates by reacting to situations only as they arise.

2. Student is somewhat organized, but does not use spare time to prepare efficiently.

3. Student is organized and performs the required tasks adequately.

4. Student is systematic and methodical in approach to using the time of self and others in an appropriate manner.

5. Student operates at level 4, plans to meet objectives and is able to anticipate future needs.

P. OVERALL EVALUATION

1. Student has neither the knowledge base nor the communications skills to function as a health professional.

2.   Student has inadequacies in either knowledge base or communication skills that need to be addressed before he/she can practice in a community pharmacy setting without supervision.

3.   Student has a good knowledge base and communication skills, but lacks either the confidence or experience to function as an unsupervised pharmacist.

4.   Student has a good knowledge base and communication skills and has the confidence to function as an unsupervised pharmacist.

5.   Student performs at level 4 and practices pharmaceutical care in a patient-oriented framework.

Core Community Experience - PCTH 7401
Student Grading Sheet

Student Name: _____Start Date: _____

Preceptor Name:_____ Site: _____

	2nd Week Score	4th Week Score
A. Dispensing new prescriptions		
B. Dispensing prescription refills		
C. Dispensing Telephone Prescriptions		
D. Monitoring and Evaluating Drug Therapy		
E. Communicating Health Care Information to Patients		
F. Communicating with Patients on OTC Medication Selection		
G. Communicating with patients about Pharmaceutical Care		
H. Compounding Prescriptions		
I. Communicating with Patients		
J. Communicating with Health Professionals		
K. Maintaining Professional and Ethical Standards		
L. Managing Pharmacy Operations		
M. Inventory Control		
N. Third Party Prescription Plans		
O. Organizing and Planning		
P. Overall Evaluation		

Preceptor signature and Date: _____
Student signature and Date: _____

Please upload the completed form into Canvas.

Core Community Experience - PCTH 7401
Student Evaluation (Preceptor Comments)

Student Name: _____Start Date: _____

Preceptor Name:_____ Site: _____

Please comment below on the student's particular strengths, and areas in which the student needs improvement.

Second Week (midpoint) Evaluation

Student'strengths:_____

_____

_____

_____

Areas for improvement: _____

_____

_____

_____

Preceptor signature:_____ Student signature: _____

Fourth Week (final) Evaluation:

Student's strengths: _____

_____

_____

_____

Areas for improvement: _____

_____

_____

_____

Preceptor signature:_____ Student signature: _____

Please upload the completed form into Canvas.

Core Community Experience - PCTH 7401
FINAL GRADE SHEET

Student Name:_____ Preceptor Name: _____

Site: _____ Dates: _____

 I hereby certify that _____ (name of student) has successfully completed 160 hours of community professional experience under my supervision.

Credit / No Credit (circle one)

Preceptor Signature & Date: _____

Please upload the completed form into Canvas.