

UC San Diego

Skaggs School of Pharmacy and Pharmaceutical Sciences

Introductory Pharmacy Practice Experience

**Community Pharmacy
Institutional Health-System Pharmacy
Health-Related Service Learning**

**SPPS 200A
SPPS 200B
SPPS 200C**

Office of Experiential Education

Christina Mnatzaganian, Pharm.D.
Associate Dean for Experiential Education

cmnatzaganian@health.ucsd.edu

Ph:(858) 822-5642

Alex Luli, Pharm.D.
Director of IPPEs

aluli@health.ucsd.edu

Ph:(858) 534-5750

Greg Marciel
IPPE Experiential Education Coordinator

gmarciel@health.ucsd.edu

Ph: (858) 822-7803

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Introductory Pharmacy Practice Experience

- Students are required to engage in Introductory Pharmacy Practice Experiences (IPPEs) in the areas of community pharmacy, institutional health-system pharmacy, and health-related service learning during the first three years of the pharmacy curriculum.
- These experiences are intended to serve as a bridge between didactic courses and Advanced Pharmacy Practice Experiences (APPEs) in the fourth year of the curriculum.
- Students must complete all required IPPEs by the end of the Winter Quarter of the P3 year.
- Students must complete 300 hours of IPPEs (which may be composed of Community, Institutional Health-System, and Service Learning, in order to progress to fourth year APPEs).
- Students must attend all activities and complete all evaluations within 5 business days of completion to receive IPPE credit for the activity. Exceptions may be made for recurrent clinical events, which should be logged in at least quarterly (i.e. UC San Diego Student-Run Free Clinic)
- Students are responsible for maintaining competencies required for pharmacy practice (e.g. immunizations, CPR, OSHA, background checks). The Offices of Student Affairs (OSA) and Experiential Education (OEE) will coordinate record keeping.
- Students should refer questions regarding IPPE to appropriate faculty/staff in OEE.

The Community and Health-System IPPEs are required experiences within the pharmacy curriculum to introduce the profession in alignment with didactic course work. The IPPEs are designed to begin application of direct patient care responsibilities, including but not limited to, patient safety, basic patient assessment, medication information, identification and assessment of drug related problems, counseling patients, and pharmacy operations and workflow. The IPPEs are designed to be a progressive learning experience to be conducted over the course of a student's first three professional years to develop the students' understanding of what constitutes exemplary pharmacy practice. Additionally, IPPEs involve interaction with preceptors and patients, ensuring exposure to medication distribution and interprofessional team-based patient care. Specific community and health-system IPPE student activities and competencies, as per the ACPE Standards, are described below.

IPPEs expose students to common contemporary U.S. practice models, including interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct 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 APPE.

**INTRODUCTORY PHARMACY PRACTICE EXPERIENCE (IPPE)
COMMUNITY PHARMACY**

There are two types of Community Pharmacy IPPEs that student pharmacists will be required to complete: Longitudinal and Block. In total, **SPPS 200A is 6 units** (longitudinal + block). See below for descriptions.

I. Course Description: SPPS 200A - Longitudinal

In Fall, Winter, and Spring Quarters, students will complete a 9-week longitudinal community IPPE during the P1 year. This IPPE requirement will allow students to obtain practice skills in a community pharmacy early during their training and will complement knowledge and skills obtained in the Pharmacy Practice Course. This longitudinal experience will also prepare students for their upcoming summer block IPPEs. Approximately one third of the P1 class will complete this longitudinal experience for one of the three quarters. Tuesdays are slated for this experience, and it is expected that students attend their assigned pharmacy for eight hours each week.

The longitudinal IPPE allows students to gain experience with the various roles of pharmacists in the delivery of health care services in community pharmacy practice settings. Students will have the opportunity to provide direct patient-oriented medication delivery and health care to a diverse patient population, and practice appropriate communication with patients and members of the health care team. Through this supervised experience, the student will be able to apply introductory concepts from clinical didactic course work to gain experience in direct patient care, promotion of wellness, and disease prevention. The pharmacy setting for this experience may include independent, chain, and health-system community sites.

| | Fall Quarter | Winter Quarter | Spring Quarter | Summer between P1 and P2 years |
|-------------------|-----------------|-----------------|-----------------|--------------------------------|
| Longitudinal IPPE | 1/3 of P1 class | 1/3 of P1 class | 1/3 of P1 class | n/a |
| Block IPPE | n/a | n/a | n/a | Entire P1 class* |

**SRP students may defer their Block IPPE rotation to the summer between P2 and P3 years*

II. Prerequisites

- A. California pharmacy intern license
- B. Up-to-date immunization records
- C. HIPAA training
- D. Adhere to SSPPS Guidelines on the Evaluation of Professionalism
- E. Other specific requisite training/certifications as necessary

III. Course Goals

The community pharmacy IPPEs are designed to introduce the student to the fundamentals of community pharmacy practice. Students will participate in a variety of community pharmacy and patient care-related activities with the pharmacy preceptor(s). Practice sites are expected to promote and integrate equity, diversity, inclusion, and cultural sensitivity/humility into the experience (see appendix 3).

IV. Course Objectives (Domains)

Note: Course Objectives are the same for all required IPPEs

Preceptors will expose students to the following domains as available in their practice setting:

- A. Accurately prepare, label, dispense and distribute medications to ensure patientsafety
- B. Collect, record, and assess patient data to identify medical and medication-related problems
- C. Demonstrate knowledge of commonly usedmedications, formulations and drug products
- D. Identify and assess potential drug-related problems
- E. Perform accurate pharmaceutical calculations involved in the preparation ofcompounded preparations
- F. Demonstrate caring, ethical and professional behavior when interacting with patients, caregivers, health care professionals, and in all practice activities
- G. Demonstrate effective and appropriate verbal, non-verbal and written communication abilities when interacting with patients and their caregivers, and other health careprofessionals
- H. Provide effective health and medication counselingto patients and their caregivers
- I. Demonstrate appropriate use of drug information resources to assist in patient care
- J. Promote to patients the importance of health, wellness and disease prevention
- K. Assist patients with questions/problems related to prescription medication coverage, health insurance or economic barriers to healthcare.

V. Activities

During the first day of rotation, the student and preceptor should review the syllabus and domain checklist. Students will be expected to participate in activities, as assigned by the preceptor and other healthcare professionals, that are deemed appropriate and necessary for the care of patients in the community pharmacy. Activities may include, but are not limited to, the following:

- A. Review the syllabus, domain checklist, and expectations for the rotation
- B. Pharmacy tour (location of medications, supplies, references, and other areas of importance)
- C. Introduction to other team members/employees
- D. Introduction to pharmacy workflow
 1. Receiving prescriptions
 2. Screening prescriptions
 3. Hand off to order entry
- E. Introduction to inventory control
 1. Purchasing
 2. Pricing
 3. Outdated medications
 4. Return to wholesaler
 5. Return to stock>Returns from patients
 6. Recalls
- F. Legal Standards
 1. Prescription requirements-written and oral
 2. Refills
 3. Transfers
 4. Introduction to controlled substance dispensing/security forms
 5. Filing/record keeping for prescriptions, invoices, etc.
 6. HIPAA regulations
 7. Methamphetamine Act (PSE)
 8. Pharmacist in Charge/Pharmacist responsibilities

9. Board of Pharmacy/DEA/DHS oversight
 10. Board of Pharmacy Self-Assessment tool: https://www.pharmacy.ca.gov/forms/17m_13.pdf
- G. Third-Party Reimbursement (Insurance)
1. Managed care/Pharmacy benefit managers (PBM)
 2. Government payors (MediCal, CMS, CCS, GHPP)
 3. Health plan website use/patient eligibility
- H. Prescription order entry
1. Preparing and dispensing prescriptions
 2. Performing pharmaceutical calculations for compounded preparations
 3. Receiving prescriptions and transfers
 4. Reviewing prescriptions
 - a. Check allergies
 - b. Clinical review/patient profile
 - c. Check for correct drug, dose and route
- I. Clinical Services
1. OTC product selection
 2. Preventive health (immunizations, tobacco cessation, etc.)
 3. Patient prescription and disease-state counseling
 4. Introduction to disease state management and pharmacy protocols (may be site-specific)
 - a. Smoking cessation
 - b. Hormonal contraception furnishing
 - c. Naloxone furnishing
 - d. Cholesterol screening
 - e. Hypertension screening and monitoring
 - f. Fitness, nutrition and weight loss program
 - g. Body fat analysis
 - h. Diabetes, HIV, asthma, etc. management
 - i. Medication therapy management services
- J. Regulatory/Performance Improvement
1. Board of Pharmacy standards
 2. Medication safety
 3. Quality assurance

Example weekly schedule for Longitudinal IPPE:

| Week(s) | Activities | Notes |
|---------|--|---|
| 1 + 2 | <ol style="list-style-type: none"> Orientation: Prescription processing Pharmacy Operations | <ol style="list-style-type: none"> Introductions to pharmacy staff, getting to know students, describing roles of each team member, workflow overview, expectations of student, communication pearls (e.g., phone call etiquette, how to triage issues, etc.) Shadowing/assisting pharmacy technician at prescription intake, data entry, dispensing, and point-of-sale Inventory management, medication storage, personnel requirements |
| 3 | OTC Comparison | <ol style="list-style-type: none"> Review OTC products offered Review 3 products offered in major categories (i.e., pain, allergic rhinitis, cough and cold, heartburn) |
| 4 | OTC Consult | <ol style="list-style-type: none"> Shadow pharmacist during OTC consult Student conducts OTC consult (can be done in later weeks) |
| 5 | Top 200 drugs | <ol style="list-style-type: none"> Identify and review 25 fast mover medications in the pharmacy and compare to Top 200 list given to student |
| 6 | Medication safety/Regulatory issues/ compounding (if available) | <ol style="list-style-type: none"> Discussion on preventing medication errors, adverse events, and technology in the pharmacy Prescription requirements, record keeping, controlled substances, HIPAA Review ISMP newsletter for community pharmacies Shadow technician/pharmacist during compounding Student compounds 2 medications with preceptor oversight Discuss requirements/best practices during compounding |
| 7 | Immunizations* <i>*Students may not provide immunizations until they have received their APhA certificate.</i> | <ol style="list-style-type: none"> Screen patients for appropriate vaccines Shadow pharmacist during immunization administration Administer immunizations Review/discuss immunization billing practices |
| 8 | Patient counseling | <ol style="list-style-type: none"> Shadow pharmacist during routine medication counseling Provide counseling with direct supervision for medications covered in didactic curriculum |
| 9 | Open week/wrap up | <ol style="list-style-type: none"> Time to review any additional activities that are specific to the pharmacy Revisit any of the activities in prior weeks if needed Review final evaluation |

VI. Evaluations

- A. IPPEs are graded as Pass/No Pass.
- B. If a student receives a No Pass grade for a rotation, the student must make up the experience in a subsequent block.
- C. Longitudinal rotations require the completion of a mid-point evaluation by both the student and preceptor halfway through the rotation (mid-point evaluations are not required for block rotations).
- D. Students must complete evaluations of their sites and preceptors within 5 business days of the completed activity in order to receive their grade.
- E. Students must attend all required community pharmacy IPPE hours assigned to them in order to receive their grade. This includes a total of 190 hours of community pharmacy IPPEs: 70 performed in longitudinal rotation and 120 in summer block rotations. Students must demonstrate competency in all eleven core domains (pp 14-17) as noted in Course Objectives (Section IV) by the end of both community and health-system IPPE experiences.
- F. IPPE Required Domains (see Appendix I for further details):
 - Patient safety – accurately dispense medications
 - Basic patient assessment
 - Medication information
 - Identification, assessment, and resolution of drug-related problems
 - Mathematics applied to pharmaceutical calculations, compounded medications, dose calculations, and applications of pharmacokinetic calculations
 - Ethical, professional, and legal behavior
 - General communication abilities
 - Counseling patients
 - Drug information analysis and literature research
 - Health and Wellness – Public Health
 - Insurance/Prescription drug coverage

INTRODUCTORY PHARMACY PRACTICE EXPERIENCE (IPPE) COMMUNITY PHARMACY

I. Course Description: SPPS 200A (4 units) Summer Block

In addition to the longitudinal IPPE in the P1 year, students will also complete a Summer Block IPPE in the summer following the P1 year. This IPPE requirement will allow our students to obtain additional practice skills in a community pharmacy during their training and will complement the knowledge and skills they have learned in both the didactic curriculum and longitudinal IPPE rotation. All students will complete the summer block IPPE in the summer following P1 year, unless they are completing an approved training program (example: SSPPS Summer Research Project (SRP)) in which case the summer block IPPE may be deferred to the summer between P2 and P3 years (*Please refer to the IPPE Scheduling Guidelines document posted on the course management website for further details on scheduling*).

Student pharmacists will learn the various roles of pharmacists in the delivery of health care services in community pharmacy practice settings. Students will have the opportunity to provide direct patient-oriented medication delivery and health care to a diverse patient population, and practice effective communication with patients and the other members of the health care community. Through this supervised experience, the student will be able to apply concepts from clinical didactic course work to situations to ensure competencies in direct patient care, management and use of resources and promotion of wellness and disease prevention. In addition to gaining proficiency in roles related to assessing patient data and reviewing and evaluating medications orders, students will also be involved in processes related to product delivery and operations management. Similar to the longitudinal IPPE, the setting for this experience may include independent, chain, and health-system community sites.

II. Prerequisites

- A. California pharmacy intern license.
- B. Up-to-date immunization records
- C. HIPAA training.
- D. Meet course eligibility requirements per SSPPS Progression Policy
- E. Adhere to SSPPS Guidelines on the Evaluation of Professionalism
- F. Other specific requisite training/certifications as necessary

III. Course Goals

The community pharmacy IPPEs are designed to introduce the student to the essential components of community pharmacy practice. Students will participate in a variety of community pharmacy and patient care-related activities with the pharmacy preceptor(s). Practice sites are expected to promote and integrate equity, diversity, inclusion, and cultural sensitivity/humility into the experience (see appendix 3). The summer block IPPE rotation will build on the skills learned in the longitudinal IPPE rotation during the P1 year.

IV. Course Objectives (Domains)

Note: Course Objectives are the same for all required IPPEs

Students will experience the following domains as available in their practice setting:

- A. Accurately prepare, label, dispense and distribute medications to ensure patients safety
- B. Collect, record, and assess patient data to identify medical and medication-related problems
- C. Demonstrate knowledge of commonly used medications, formulations and drug products
- D. Identify and assess potential drug-related problems
- E. Perform accurate pharmaceutical calculations involved in the preparation of compounded preparations
- F. Demonstrate caring, ethical and professional behavior when interacting with patients, caregivers, health care professionals, and in all practice activities
- G. Demonstrate effective and appropriate verbal, non-verbal and written communication abilities when interacting with patients and their caregivers, and other health care professionals
- H. Provide effective health and medication counseling to patients and their caregivers
- I. Demonstrate appropriate use of drug information resources to assist in patient care
- J. Promote to patients the importance of health, wellness and disease prevention
- K. Assist patients with questions/problems related to prescription medication coverage, health insurance or economic barriers to healthcare.

V. Activities

During the first day of rotation, the student and preceptor should review the syllabus and domain checklist. Students will be expected to participate in activities, as assigned by the preceptor and other healthcare professionals that are deemed appropriate and necessary for the care of patients in the community pharmacy. Activities may include, but not be limited to, the following:

- A. During the first day of rotation the student and preceptor should review the syllabus and domain checklist as well as any expectations for the rotation.
- B. Pharmacy tour (location of medications, supplies, references, and other areas of importance)
- C. Introduction to employees
- D. Introduction to pharmacy workflow
 1. Receiving prescriptions from patients
 2. Screening prescriptions
 3. Hand off to order entry
- E. Introduction to inventory control
 1. Purchasing
 2. Pricing
 3. Outdated medications
 4. Return to wholesaler
 5. Return to stock>Returns from patients
 6. Recalls
- F. Legal Standards
 1. Prescription requirements-written and oral
 2. Refills
 3. Transfers
 4. Introduction to controlled substance dispensing/ security forms
 5. Filing/record keeping for prescriptions, invoices, etc.
 6. HIPAA regulations
 7. Methamphetamine Act (PSE)
 8. Pharmacist in Charge/Pharmacist responsibilities

9. Board of Pharmacy/DEA/DHS oversight
 10. Board of Pharmacy Self-Assessment tool: https://www.pharmacy.ca.gov/forms/17m_13.pdf
- G. Third Party Reimbursement
1. Government payors (MediCal, CMS, CCS, GHPP)
 2. Managed care/PBM
 3. Health plan website use/patient eligibility
- H. Prescription computer order entry
1. Preparing and dispensing prescriptions
 2. Performing pharmaceutical calculations for compounded preparations
 3. Receiving prescriptions and transfers
 4. Reviewing prescriptions
 - a. Check allergies
 - b. Clinical review/patient profile
 - c. Check for correct drug, dose and route
- I. Clinical Services
1. OTC product selection
 2. Preventive health (immunizations, tobacco cessation, etc.)
 3. Patient prescription and disease-state counseling
 4. Introduction to disease state management and pharmacy protocols (may be site-specific)
 - a. Smoking cessation
 - b. Hormonal contraception furnishing
 - c. Naloxone furnishing
 - d. Cholesterol screening
 - e. Hypertension screening and monitoring
 - f. Fitness, nutrition and weight loss program
 - g. Body fat analysis
 - h. Diabetes, HIV, asthma, etc. management
 - i. Medication management therapy services
- J. Regulatory/Performance Improvement
1. Board of Pharmacy standards
 2. Medication safety
 3. Quality assurance

VI. Evaluations

- A. IPPEs are graded as Pass/No Pass.
- B. If a student receives a No Pass grade for a rotation, the student must make up the experience in a subsequent block.
- C. Longitudinal rotations require the completion of a mid-point evaluation by both the student and preceptor halfway through the rotation (Mid-point evaluations are not required for block rotations).
- D. Students must have submitted completed evaluations of their sites/preceptors within 5 business days of the completed activity in order to receive their grade.
- E. Students must attend all required community pharmacy IPPE hours assigned to them in order to receive their grade. This includes a total of 190 hours of community pharmacy IPPE: 70 performed in longitudinal rotation and 120 in summer block rotations. Students must demonstrate competency in all eleven core domains (pp 14-17) as noted in Course Objectives (Section IV) by the end of both community and health-system IPPE experiences.
- F. IPPE Required Domains (see Appendix I for further details):
 - Patient safety – accurately dispense medications
 - Basic patient assessment
 - Medication information
 - Identification, assessment, and resolution of drug-related problems
 - Mathematics applied to pharmaceutical calculations, compounded medications, dose calculations, and applications of pharmacokinetic calculations
 - Ethical, professional, and legal behavior
 - General communication abilities
 - Counseling patients

INSTITUTIONAL HEALTH-SYSTEM IPPE

I. Course Description: SPPS 200B (3 units)

Student pharmacists will learn the various roles of pharmacists in the delivery of health care services in the institutional health systems setting. Students will have the opportunity to provide direct patient-oriented medication delivery and health care to a diverse patient population, and practice effective communication with members of the health care team. Through this supervised experience, the student will be able to apply concepts from clinical didactic course work to situations to ensure competencies in patient care, management and use of resources, and efficiency within institutional health-system settings. In addition to gaining proficiency in roles related to assessing patient data and reviewing and evaluating medications orders, students will also experience product delivery and operations management.

II. Prerequisites

- A. California pharmacy intern license.
- B. Up-to-date immunization records
- C. HIPAA training.
- D. Meet course eligibility requirements per SSPPS Progression Policy.
- E. Adhere to the SSPPS Guidelines on the Evaluation of Professionalism.
- F. Other specific requisite training/certifications as necessary

III. Course Goals

The Institutional Health-System IPPEs are designed to introduce the student to the fundamentals of institutional health-system pharmacy practice. Students will participate in a variety of hospital pharmacy and patient care-related activities with the pharmacy preceptor(s). Practice sites are expected to promote and integrate equity, diversity, inclusion, and cultural sensitivity/humility into the experience (see appendix 3).

IV. Course Objectives

Note: Course Objectives are the same for all required IPPEs

By the end of both the community and health-system pharmacy IPPE experiences, the student will have completed the following:

1. Accurately prepare, label, dispense and distribute medications to ensure patientsafety
2. Collect, record, and assess patient data to identify medical and medication-related problems
3. Demonstrate knowledge of commonly used medications, formulations and drug products
4. Identify and assess potential drug-related problems
5. Perform accurate pharmaceutical calculations involved in the preparation of compounded preparations
6. Demonstrate caring, ethical, and professional behavior when interacting with patients, caregivers, health care professionals, and in all practice activities
7. Demonstrate effective and appropriate verbal, non-verbal and written communication abilities when interacting with patients and their caregivers, and other health care professionals
8. Provide effective health and medication counseling to patients and their caregivers
9. Demonstrate appropriate use of drug information resources to assist in patient care
10. Promote to patients the importance of health, wellness and disease prevention
11. Assist patients with questions/problems related to their prescription medication coverage, health insurance or economic barriers to healthcare

V. Activities

- A. Students will be expected to participate in activities, as assigned by the preceptor and other healthcare professionals, that are deemed appropriate and necessary for the care of patients in the institutional health system. Activities may include, but not limited to, the following:
1. During the first day of rotation, the student and preceptor should review the syllabus and domain checklist as well as any expectations for the rotation
 2. Pharmacy tour
 - a. Location of oral and IV medications and supplies
 - b. Location of resources and areas of importance
 3. Introduction to employees
 4. Introduction to reference materials commonly used in daily activities of institutional settings (Clinical Pharmacology Online, Micromedex, etc.) – *See Appendix 4 for guidance on using artificial intelligence*
 5. Introduction to pharmacy workflow
 - a. Receiving orders from physicians, nurses, pharmacy staff
 - b. Completing order entry
 - c. Filling orders via unit dose, intravenous/admixture processes
 6. Review and discuss the established hospital policies and procedures
 7. Introduction to institutional medication distribution system (unit dose, cart fill, automated dispensing system [PYXIS, Omni-Cell, Sure-Med] etc.)
 8. Introduce concept of medication control (especially systems used to monitor and manage Controlled Substances), storage and security functions related to the medication distribution process
 9. Introduction to inventory control
 - a. Purchasing
 - b. Pricing
 - c. Outdated medications
 - d. Return to wholesaler
 - e. Return to stock>Returns from patients
 - f. Recalls
 10. Discuss the utilization of the hospital drug formulary program and its impact on cost effective patient-centered care
 11. Shadow clinical pharmacists for an introduction to the role of the clinical pharmacist (team-based, operations-based)
 12. Discuss the current quality improvement programs the institution employs and their impact on error control
 13. Shadow pharmacists and technicians and discuss the importance of aseptic technique; observe preparation of IV admixtures and IV room maintenance activities
 14. Discuss legal and regulatory standards
 15. Order processing
 16. Introduction to controlled substance dispensing
 17. Filing/record keeping
 18. HIPAA regulations
 19. Pharmacist and technician responsibilities
 20. The Joint Commission, CDPH, Board of Pharmacy, DEA and other regulatory agency oversight
 21. California Board of Pharmacy Self-assessment tool:
https://www.pharmacy.ca.gov/forms/17m_13.pdf

VI. Evaluations

- A. IPPEs are graded as Pass/No Pass.
- B. If a student receives a no pass grade for a rotation, the student must make up the experience in a subsequent block.
- C. Students must have submitted completed evaluations of their sites/preceptors within 5 business days of the completed activity to receive their grade.
- D. Students must attend all required health-system pharmacy IPPE hours (total of 80 hours) to receive their grade; students must demonstrate competency in all eleven core domains (pp 14-17) as noted in Course Objectives (Section IV) by the end of both community and health-system IPPE experiences.
- E. IPPE Required Domains (see Appendix I for further details):
 - Patient safety – accurately dispense medications
 - Basic patient assessment
 - Medication information
 - Identification, assessment, and resolution of drug-related problems
 - Mathematics applied to pharmaceutical calculations, compounded medications, dose calculations, and applications of pharmacokinetic calculations
 - Ethical, professional, and legal behavior
 - General communication abilities
 - Counseling patients
 - Drug information analysis and literature research
 - Health and wellness – public health
 - Insurance/prescription drug coverage

HEALTH-RELATED SERVICE LEARNING IPPEs (SL-IPPEs)

I. Course Description: SPPS 200C (1 unit)

Health-related service learning is an opportunity for students to learn about social issues and apply their knowledge and skills to address a need in their community. It helps foster professional responsibility, develop a sense of caring for others, and reinforces what is taught in the didactic curriculum. Health-related service learning provides avenues for interaction with other health care professionals, as well as patients and caregivers in the community.

Service learning is a structured learning experience performed by students in collaboration with community partners. Such experiences require clearly defined objectives, careful preparation, purposeful reflection, and engaged discussion with fellow students, faculty members, and—if possible—members of the community served. The experiences help students establish professional relationships with patients and communities, promote patient welfare, collaborate with other healthcare professionals, and/or provide exposure to drug distribution systems.

II. Prerequisites

- A. California pharmacy intern license.
- B. Up-to-date immunization records
- C. HIPAA training.
- D. Meet course eligibility requirements per SSPPS Progression Policy.
- E. Adhere to the SSPPS Guidelines on the Evaluation of Professionalism.
- F. Other specific requisite training/certifications as necessary.

III. Course Goals

Health-related service-learning activities are intended to engage the student in helping the community while reinforcing knowledge and skills learned in the didactic curriculum. Students will participate in the events with oversight by a licensed pharmacy preceptor(s). A minimum of 30 hours of service learning IPPEs must be completed by the end of Winter Quarter of the P3 year.

IV. Course Objectives

By the end of the health-related service-learning activity, the student will be able to:

- A. Demonstrate caring, ethical and professional behavior when interacting with members of the community, their peers, and other health care professionals.
- B. Provide appropriate health-related and/or medication counseling to members of the community.
- C. Demonstrate effective communication abilities with members of the community and other health care professionals.

V. Activities

Students will be expected to participate in activities that promote community engagement, service, and learning throughout their pharmacy academic career. Health-related service learning IPPEs are activities involving patient care and consumer education (not health provider education). Examples of approved health-related service-learning activities are posted in course resources on Canvas.

VI. Evaluations

- A. Completion of a Health-Related Service-Learning reflection is submitted by the student in CORE ELMS and is approved by the Preceptor.
- B. Students must complete the required number of hours dedicated to service learning per the policies of OEE.
- C. Students must have submitted completed evaluations of their sites/preceptors within 5 business days of the completed activity to receive their grade. Exceptions may be made for recurrent clinical events, which should be logged in at least quarterly (i.e., UCSD Student-Run Free Clinic) or at the direction of the preceptor.

Appendix 1: IPPE Domain Checklist/Competencies

| Domains | Example Activities <i>(Students should complete at least one activity to satisfy domain. Additional activities may also qualify at the discretion of the preceptor and/or pharmacy site)</i> |
|---|--|
| <p>Domain 1. Patient Safety - Accurately Dispense Medications</p> <p>Student demonstrates a commitment to and a valuing of patient safety by assuring accurate preparation, labeling, dispensing, and distribution of prescriptions and medication orders.</p> | <ul style="list-style-type: none"> * Accurately prepare and dispense medications or supervise the preparation of medications. * Evaluate the acceptability and accuracy of a prescription and verify that the information is correct and then correctly prepare the prescription and label for dispensing. * Evaluate appropriateness of medication orders by correlating the order with patient- specific data and drug information. * Compound parenteral and non-parenteral drug products using accurate calculations, pharmaceutical components, and techniques. * Dispense medications and devices in accordance with legal requirements * Provide safe, accurate and time-sensitive medication distribution. * Appropriately compound, dispense, or administer a medication, pursuant to a new prescription, prescription refill, or drug order. * Accurately process and dispense medication pursuant to a new prescription, prescription refill or drug order. * Accurately evaluate and process prescriptions/orders, in accordance with applicable laws and regulations. * Determine appropriate storage of compounded medications before and after dispensing. |

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| <p>Domain 2. Basic Patient Assessment</p> <p>Student collects, records, and assesses subjective and objective patient data to define health and medication-related problems. Patient information must be collected in a manner demonstrating knowledge of patient educational level, the unique cultural and socioeconomic situations of patients, and comply with requirements for patient privacy.</p> | <ul style="list-style-type: none"> * Collect patient histories in an organized fashion, appropriate to the situation and inclusive of cultural, social, educational, economic, and other patient-specific factors affecting self-care behaviors, medication use and adherence. * Obtain, record, and interpret a history from a patient to at minimum include medication allergies and reactions, drugs (prescription, OTC, and herbal) being taken, doses being used, cultural, social, educational, economic, and other patient-specific factors affecting self-care. * Patient Assessment: Obtain and interpret patient information to determine the presence of a disease, medical condition, or drug-related problem(s), and assess the need for treatment and/or referral. * Gather and organize accurate and comprehensive patient-specific information. * Obtain and interpret patient information, inclusive of cultural, social, educational, economic, and other patient-specific factors affecting self-care behaviors, medication use and adherence to determine the presence of a disease, medical condition, or drug-related problem(s), including a basic medication history from a patient to include drug allergies, a description of allergic reactions, drugs being taken, doses being used, over the counter medications being taken, and herbal/natural products being used. * Obtain accurate and comprehensive patient history (include drug allergies, a description of allergic reactions, drugs being taken, doses being used, over the counter medications being taken, herbal/natural products being used, self-care behaviors, and adherence). * Gather information necessary to evaluate patient drug therapy (both patient history and utilization of a chart). * Record all patient information accurately, legally and succinctly. * Perform a basic review of a patient's medication profile to identify medication allergies, correct doses, duplicate medications, and important drug interactions. * Obtain and accurately record a patient's health and medication history. * Gather and accurately record a patient's health and medication information from his/her medical record. * Evaluate patient information to determine the presence of a disease, medical condition, |
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| | <p>or drug-related problem(s) and assess the need for treatment and/or referral.</p> <ul style="list-style-type: none"> * Evaluate a patient's medication profile to identify medication allergies, appropriate doses and patient instructions, duplicate medications, and clinically relevant drug interactions. * Identify and prioritize a patient's drug-related problems. |
| <p>Domain 3. Medication Information</p> <p>Student demonstrates knowledge of and accepts responsibility for that knowledge of commonly used medications, formulations, and drug products.</p> | <ul style="list-style-type: none"> * Summarize key information related to the use of common (Top 200) medications. * Identify brand and generic names, dosage forms and usual dosing ranges for common (Top 200) medications. * Describe the mechanism of action of common medications (Top 200 medications) at the molecular, cellular, systems, and whole organism levels. * List and describe the mechanism(s) of common drug interactions. * Cite the spectrum and common indications for commonly used antibiotics. * Identify target drug concentrations for Narrow Therapeutic Index drugs. * Determine the appropriate storage of compounded medications before and after dispensing. * Identify appropriate medication information sources for professional and patient use |
| <p>Domain 4. Identification, Assessment, and Resolution of Drug-related Problems</p> <p>Student correlates drug related variables and patient related variables to identify and assess drug related problems. Evaluates how the unique characteristics of patients and patient populations impact on manifestations of drug-related problems.</p> | <ul style="list-style-type: none"> * Evaluate medication orders to identify drug related problems. * Assess the urgency and risk associated with identified drug-related problems. * Evaluate patient information and medication information that places a patient at risk for developing drug-related problems. |
| <p>Domain 5. Mathematics applied to pharmaceutical calculations, compounded medications, dose calculations, and applications of pharmacokinetic calculations</p> <p>Student utilizes pharmaceutical and pharmacokinetics mathematics to perform accurate medication calculations. Values the importance of total accuracy in performing and applying these calculations.</p> | <ul style="list-style-type: none"> * Perform accurate pharmaceutical calculations, especially involved in the preparation of compounded oral, topical, rectal, ophthalmic, or parenteral preparation, and pharmacokinetic calculation of appropriate doses. * Apply mathematical principles (e.g., accurately perform dose calculations, kinetics) in pharmacy practice. |

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| <p>Domain 6. Ethical, Professional, and Legal Behavior</p> <p>Student, in all health-care activities, demonstrates knowledge of and sensitivity towards the unique characteristics of each patient. Complies with all federal, state, and local laws related to pharmacy practice. Demonstrates ethical and professional behavior in all practice activities.</p> | <ul style="list-style-type: none"> * Professionalism: Demonstrate caring, ethical, and professional behavior when interacting with peers, professionals, patients, and caregivers. * Demonstrate sensitivity and responsiveness to culture, race/ethnicity, age, socioeconomic status, gender, sexual orientation, spirituality, disabilities, and other aspects of diversity and identity when interacting with patients, caregivers, and other health care professionals. * Comply with federal, state and local laws and regulations related to pharmacy practice. * Practice ethically, including maintaining patient confidentiality, responding to errors in care and professional misconduct (including plagiarism). * Comply with federal, state and local laws and regulations related to pharmacy practice. * Maintain professional and ethical behavior in all practice environments, demonstrating ethical practice, empathy, cultural sensitivity, and professional communications in compliance with all laws, regulations, and professional standards. * Professionalism: Demonstrate empathy, assertiveness, effective listening skills, and self-awareness. * Demonstrate professional and ethical behavior in all practice environments. * Apply legal and regulatory principles to medication distribution, use and management systems. * Accept responsibility for patient care. * Make and defend rational, ethical decisions within the context of personal and professional values. * Demonstrate empathy, assertiveness, effective listening skills, and self-awareness. |
| <p>Domain 7. General Communication Abilities</p> <p>Student demonstrates effective communication abilities in interactions with patients, their families and caregivers, and other health care providers. Communication should be consistent with education level, cultural issues, and be empathetic. Elicits feedback validating understanding of communication.</p> | <ul style="list-style-type: none"> * Communicate effectively (using verbal, non-verbal, and written communication as appropriate) with patients, caregivers, and other health care providers, at a suitable level for the partner in the interaction, to engender a team approach to patient care. * Demonstrate effective communication skills (verbal, non-verbal, and written) at an appropriate level for patients, caregivers, health care providers, and the general public. |

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| <p>Domain 8. Counseling Patients</p> <p>Student provides effective health and medication information to patients and/or care givers and confirms patient and/or care giver understanding of the information being provided.</p> | <ul style="list-style-type: none"> * Use effective written, visual, verbal, and nonverbal communication skills to provide patient/caregiver self-management education. * Appropriately and accurately provide basic medication counseling to a patient or caregiver receiving a medication. * Assess and validate the ability of patients and their agents to obtain, process, understand and use health- and medication-related information. * Counsel patients on proper self-care and preventative care. * Use appropriate methods of patient education to review indications, adverse effects, dosage, storage, and administration techniques. * Use effective written, visual, verbal, and nonverbal communication skills to provide education to the patient/caregiver on drug, drug use, self- or preventative care, or other health-related education to healthcare providers. * Communicate alternative therapeutic strategies to the prescriber to correct or prevent drug-related problems. * Assist a patient in correctly selecting an over-the-counter preparation. * Develop and provide drug, drug use, or other health-related education to consumers or health providers. * Provide accurate an response to drug information requests written and verbally. * Use effective written, visual, verbal, and nonverbal communication skills to counsel and educate a patient or caregiver regarding appropriate medication use, whether prescription and self-care. * Demonstrate and/or describe proper administration technique for various drug delivery systems (e.g., inhalers, eye drops). |
| <p>Domain 9. Drug Information Analysis and Literature Research</p> <p>Student assesses information needs of patients and health providers and applies knowledge of study design and literature analysis and retrieval to provide accurate, evidence-based drug information.</p> | <ul style="list-style-type: none"> * Collect accurate and comprehensive drug information from appropriate sources to make informed, evidence-based, patient-specific or population-based decisions. * Recognize the type of content that is available in general (tertiary), secondary, and primary information sources. * Collect, summarize, analyze and apply information from the biomedical literature to patient-specific or population-based health needs. * Demonstrate utilization of drug information resources. * Describe the type of content in commonly used drug and medical information resources. * Collect and interpret accurate drug information from appropriate sources to make informed, evidence based decisions. * Use effective written, visual, verbal, and nonverbal communication skills to accurately respond to drug information questions. |
| <p>Domain 10. Health and Wellness – Public Health</p> <p>Student knows and applies principles of health and wellness in provision of individual and population-based health and wellness information. Integrates unique characteristics of individuals and populations in design of health and</p> | <ul style="list-style-type: none"> * Participate in activities that promote health and wellness and the use of preventive care measures. * Promote to patients the importance of health, wellness, disease prevention (e.g., immunizations, tobacco cessation counseling), and management of their diseases and medication therapies to optimize outcomes. * Provide preventative health services (e.g., immunizations, tobacco cessation counseling) * Public Health: Promote to patients the importance of health, wellness, disease prevention, and management of their diseases and medication therapies to optimize outcomes. |

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| wellness information. | |
| <p>Domain 11. Insurance /Prescription Drug Coverage</p> <p>Student utilizes knowledge of a wide array of private and public health insurance options to assist patients and care givers to obtain their medications and related para-pharmaceuticals in an affordable manner that meets their health care needs.</p> | <p>* Assist with problems related to prescription medication coverage, health insurance, or government health care programs.</p> |

Appendix 2: Guidelines on the Evaluation of Professionalism

Student pharmacists are expected to demonstrate professional attributes throughout their training (preclinical and clinical years) both within and outside the boundaries of a course, professional learning experience, or clinical activity. Many attributes of professionalism cannot be observed during a single encounter; thus, patterns of behavior, as observed throughout the continuum of training, play an important role in making these determinations. A student pharmacist's demonstration of the highest standard of professional behavior is necessary to progress to graduation. Therefore, the student's professional performance will be evaluated as a continuum throughout each year of their training.

The intent of the School, in placing these guidelines into effect, is to provide notice and offer assistance to the student to remedy any identified deficiencies. The School's hope is that the student may, subsequently, be successful and move forward in his/her profession with utmost confidence.

A faculty member, course director, or preceptor who is concerned about a student's behavior may give feedback to the student and make suggestions for improvement. A Professionalism Evaluation Form (PEF) may be used to assist in documenting the behavior:

<https://pharmacy.ucsd.edu/sites/default/files/docs/admissions/Student%20Pharmacist%20Professionalism%20Evaluation%20Form.pdf>

The following may occur if the Course Director, faculty member, administrator, or preceptor identifies students who have not demonstrated the highest standard of professional behavior:

1. The Course Director, faculty member, administrator, or preceptor may choose to complete the Professionalism Evaluation Form (PEF) and discuss the PEF with the student.
2. If a PEF is completed, the student will be given the opportunity to submit a written response within 72 hours of receiving a copy of the PEF.
3. The student and the originator of the PEF will meet to discuss goals for improvement and/or a remediation plan.
4. The completed PEF with or without the student response will be submitted to the Associate Dean for Student Affairs and retained in the student file in the Student Affairs Office. If the incident involved a 4th year student (clinical year), the completed PEF with or without the student response will also be submitted to the Associate Dean for Experiential Education.
5. At the discretion of the Associate Dean for Student Affairs, the PEF may be reviewed by the Academic Oversight Committee for possible further action.
6. Should a student engage in two or more acts of unprofessional conduct, or if the student fails to meet the terms of the remediation plan, the student will be reviewed by the Academic Oversight Committee for appropriate action depending on the nature of the unprofessional conduct.

Examples of unprofessional behaviors:

- * student engages in abuse of power in interactions with patients or colleagues
- * student engages in bias and/or sexual harassment
- * student does not respect patient autonomy and/or confidentiality
- * student does not attend required lectures/group sessions
- * student does not respond in a reasonable manner to communications from the faculty and administration
- * student does not attend a patient-related activity, such as the free medical clinics, immunization clinics, or other similar activity, and neglects to make appropriate contact with the preceptor
- * student does not meet the requirements that are in place to progress to their clinical experiences, including but not limited to receiving required immunizations, attending required orientation sessions, and completing other requirements associated with preparation for the clinical years

- * student demonstrates difficulty incorporating feedback in order to make changes in behavior
- * student demonstrates difficulty fulfilling academic and professional responsibilities or tasks in a reliable and timely manner
- * student misrepresents or falsifies actions and/or information
- * student is not punctual for professional obligations
- * student appears resistant or defensive in accepting constructive feedback and/or criticism
- * student appears unaware of his/her inadequacies and limitations
- * student demonstrates difficulty accepting responsibility for errors
- * student shows signs of being overly critical or verbally abusive during times of stress
- * student demonstrates arrogance
- * student has difficulty creating rapport with fellow students, faculty, staff, or patients in a learning or practice environment
- * student lacks empathy and demonstrates insensitivity to the needs of peers, patients, and/or others
- * student shows signs of not functioning well within the health care team concept
- * student has difficulty establishing and maintaining appropriate professional boundaries in work and learning situations
- * student does not demonstrate honesty
- * student who disrupts the academic environment or impedes the learning opportunities of others
- * student does not treat others with respect, including those of diverse race, gender, religion, sexual orientation, age, disability or socioeconomic status
- * student does not resolve conflicts in a manner that respects the dignity of every person involved
- * student does not use professional language in professional settings
- * student does not protect patient confidentiality
- * student does not dress in an appropriate and professional manner
- * student does not use appropriate names and titles when addressing faculty and/or preceptor

Appendix 3: SSPPS Rotation Equity, Diversity and Inclusion Statement:

Each rotation is a place to expand knowledge and experiences safely, while being respected and valued. We support the values of UC San Diego to “create a diverse, equitable, and inclusive campus in which students, faculty, and staff can thrive.” It is our intent that students from all diverse backgrounds and perspectives be well served by this rotation, that students' learning needs be addressed, and that the diversity that students bring to this rotation be viewed as a resource, strength and benefit. It is our intent to present materials and activities that are respectful of diversity: gender, sexuality, disability, age, socioeconomic status, ethnicity, race, religion, and culture. We ask that everyone engage in interactions with patients, caregivers, and other members of the healthcare team with similar respect and courtesy.

All people have the right to be addressed and referred to in accordance with their personal identity. We encourage everyone to share the name that they prefer to be called and, if they choose, to identify pronouns with which they would like to be addressed. We will do our best to address and refer to all students accordingly and support colleagues in doing so as well. We hope you will join us in creating a learning experience that upholds these values to further enhance our learning as a community.

Appendix 4: Use of Generative Artificial Intelligence (AI)

The use of generative AI tools in clinical or experiential settings is strictly regulated, and misuse can lead to serious consequences, including but not limited to violations of the Health Insurance Portability and Accountability Act (HIPAA) and causing harm to patients. Generative AI is to be used as an assistive tool and should never be used as a substitute for clinical or professional judgment.

SSPPS students are responsible for staying informed about and adhering to the guidelines for using approved generative AI tools at their practice sites. Students are advised to ask preceptors and/or site coordinators about each site's generative AI use policy during orientation to the practice site. In the absence of a generative AI use policy at the practice site, the use of such tools should be assumed to be prohibited.