From the Assistant Dean for Experiential Learning

Dear preceptors,

Happy fall! The fall semester usually brings a new energy to the School of Pharmacy’s halls after a quiet and relaxing summer. This fall is very different, as our faculty spent the summer busily developing online course content to allow our first, second, and third year students to learn virtually. This new environment has also impacted our experiential learning rotations.

The Accreditation Council for Pharmacy Education continues to allow for creativity with rotation design and structure. As long as the rotation objectives are accomplished, rotations may be conducted remotely. Remote learning or a combination of virtual and in-person learning are acceptable for both introductory and advanced practice experiences.

The pandemic encouraged us to reevaluate our approach to many of our introductory rotations. Our one-week experience has been modified to allow all patient care faculty to precept our first-year students. The main objective of this rotation is to expose students to pharmacy practice in either a community or health-system setting. Our program has also introduced an additional four-week community IPPE during winter break. Additionally, we are trialing a longitudinal health-system IPPE this semester. Students will spend two days a week on-site for a total of 120 hours during October and November. If this experience is successful from both student and preceptor perspectives, we will consider longitudinal health-system experiences in the spring. If you are interested in participating in any of these new IPPE opportunities, please reach out to us.

Our new world also changed the annual APPE Fair to a virtual event over three nights in September. This revised format allowed for greater participation by our rotation sites. We were extremely pleased with the engagement of our preceptors and students and are likely to continue a virtual option in addition to an on-site opportunity for the APPE Fair in the future.

Finally, thank you from the entire ELP team. We know that you are working in unprecedented circumstances to care for patients all over the state and beyond. During these times, we are especially grateful for your continued dedication to mentoring our future pharmacists.

Sincerely,

Agnes Ann Feemster, PharmD, BCPS
Assistant Dean, Experiential Learning Program
Associate Professor, Department of Pharmacy Practice and Science
afeemster@rx.umaryland.edu
What the ELP Office Needs from Preceptors

Please help us be 100 percent compliant with preceptor requirements by doing the following:

• Submitting all required midterm and final evaluations by their due dates
• Submitting an W9 form if you are able to accept honorarium payments
• Entering your site requirements in CORE ELMS by clicking “My Requirements”
• Reading all emails that come from the School via CORE ELMS
• Completing two hours of preceptor development each year
• Providing a brief description in your preceptor profile in CORE ELMS by clicking “Profile Information,” then “Description”

Preceptor News

The ELP Office congratulates preceptor Robert Barth, BSP, of Martin’s Pharmacy on his retirement. Bob has been a preceptor for the School for more than 20 years and has precepted countless students. After 46 years as a pharmacist, he has decided to retire at the end of October. Please join the ELP Office in wishing Bob the best in this next phase of his life.

Preceptor Availability Submission

Availability submission for 2021-2022 rising third and fourth-year students is now open in CORE ELMS. Availability submission will remain open until Jan. 8, 2021.

When submitting your availability, please remember to select the following:

• Rotation date
• Rotation type
• Specialty (if applicable)
• Number of students accepting

Also, please utilize the “Notes” section in CORE ELMS to add any information you would like to include about your rotation. Should you have any questions regarding entering your availability, please contact Nathaniel Thomas at 410-706-0773 or via email nathaniel.thomas@rx.umaryland.edu.

Library Access

One of the many benefits of being a School of Pharmacy preceptor is having offsite access to Facts and Comparisons Online and Micromedex only through the University’s Health Sciences and Human Services Library (HS/HSL). Access is limited to School of Pharmacy preceptors who are scheduled to take a student for at least one block in the current academic year. If you would like to take advantage of this benefit, please contact LaTia Few at Lfew@rx.umaryland.edu for more details.

Focus on Policy

The COVID-19 pandemic has required the ELP Office to make numerous changes to the rotation schedule and policies this year. We thank all our preceptors for their willingness to accept students and their efforts to ensure their safety during this tumultuous time. We would also like to remind our preceptors that whenever possible, the School encourages virtual experiences for students. Sites are to abide by the CDC guidelines related to pharmacies and COVID-19. When on-site, students may participate in those activities allowed by the preceptor, should have minimal physical contact with patients, and are to observe social distancing to the extent possible.
We welcome the following newly appointed preceptors:

• Amanda Szczepanik
• Rachel Cordrey
• Charlotte Dunderdale
• Samuel Cincotta
• Courtney Morgan
• Grace Chao

Instructor Insights

Joanna Lyon, PharmD, MEd, MHS
Pharmacy Student Contributions During the COVID-19 Pandemic

The fourth-year Ambulatory Care rotation experience challenges and stretches pharmacy students as they apply their course work in live practice settings with real patients. This year, these challenges and learning experiences have been amplified as students have also needed to adapt to the protective protocols and special counseling needs of the COVID-19 clinical environment. During these educational experiences, two students not only adjusted to their new practice site settings, but they made significant clinical interventions for their patients.

Allison Dunn, a fourth-year PharmD student, completed her APPE 450 Ambulatory Care rotation at Northwest Hospital Center with preceptor Deborah Parker, RPh. During a patient counseling session, it was determined that one of Allison’s patients had recently recovered from COVID-19 after a month-long hospital stay. This patient had accrued significant hospital bills and was concerned about the cost of his recent Eliquis® prescription. He simply did not feel that he could currently afford an expensive brand name medication despite his need for stroke prevention. Allison quickly realized that her entire counseling session would be of no value to this patient if he never picked up the medication because of cost barriers. She utilized her retail experience and assisted the patient with applying for and activating an online manufacture’s coupon for Eliquis® that dramatically dropped the price of the medication. Allison’s sensitivity to the potential cost barriers to compliance brought about by COVID-19 helped ensure that the patient would be able to afford his life-saving anticoagulation medication.

Jianne De Raya, another fourth-year PharmD student who was mentored by Charmaine Rochester, PharmD, associate professor of pharmacy practice and science at the School of Pharmacy, also made significant patient medication contributions during her rotation at the University of Maryland Medical Center Midtown Campus. Following the COVID-19 protocols, Jianne collaborated with providers at this location to assist with patient care.

Masks are to be worn at all times. Patient counseling and patient education should be conducted in ways that maintain social distancing and minimize the risk of exposure for pharmacy staff and patients. Gloves, eye shields, and gowns are available if there will be physical contact with patients, such as during vaccine administration. We thank you once again for all that you do for our students. Should you have any questions, please contact the ELP Office at elp@rx.umaryland.edu.
During one of these collaborations, a patient's COPD medication regimen was being evaluated. Jianne took the initiative to discuss the addition of a LABA/ICS medication to this patient's current regimen, which had been previously overlooked by the team. Jianne’s therapy modification for this patient not only helped prevent a future COPD exacerbation, but also added an additional layer of preventative respiratory protection for this patient during the pandemic.

Despite the challenges brought about by the pandemic, University of Maryland School of Pharmacy students, mentored by highly qualified preceptors, have made impactful interventions for their patients during this difficult time.

Dr. Lyon can be reached at jlyon@rx.umaryland.edu
Eligibility for promotion

Preceptors who demonstrate active, consistent, ongoing activity in teaching within the experiential portion of the school’s curriculum are eligible for promotion. Substantial contact time with students is important. In order to be considered for promotion from assistant to associate clinical affiliate professor, the preceptor must practice for a minimum of six years in his or her practice area. In order to be considered for promotion from associate to full clinical affiliate professor, the preceptor must practice for a minimum of 12 years in his or her practice area.

How to Apply for Promotion

The preceptor must electronically submit a written request to the Chairperson of the Department of Pharmacy Practice and Science along with an updated curriculum vitae, a description of practice, and demonstration of achievement of the practice. A teaching portfolio is not required, but, if submitted, it will be considered throughout the review process. Promotion materials are due by July 1 or December 1. Candidates should expect this promotion review process to take about 6 months.

Promotion Criteria

The areas to be evaluated are teaching, professional achievements and service. The criteria for the evaluation are presented in the following table. To achieve the rank of Clinical Associate Professor, the preceptor must be evaluated as at least “excellent with promise of distinction” in teaching, “excellent” in one other area and “good” in the remaining areas. To achieve the rank of Clinical Professor, a Clinical faculty member must be evaluated as “distinguished” in teaching, “distinguished” in one other area and “excellent” in the remaining area.

- **Experiential Teaching:** Evidence of teaching competency should include but not be limited to student evaluations, visits by the Experiential Learning Program members, teaching aids, and other factors such as:
  a. Must precept students on a regular basis as detailed in the following table
  b. Review of rotation objectives and expectations with the students where applicable
  c. Provision of information to students concerning the goals, objectives and grading system of the course and the expectations of the faculty
  d. The ability to organize the rotation in a reasonable manner consistent with the School’s curriculum
  e. Ability to convey knowledge to students in an understandable manner
  f. The development of teaching aids and demonstrations
  g. In clinical teaching, the candidate is proficient at the clinical skills he or she is teaching the student and demonstrates the ability to teach and guide students in acquiring these skills
  h. The ability to evaluate performance and competencies using constructive feedback and in a timely manner
  i. In clinical settings serving as a role model to students in dealing with patients and other health professionals
  j. Evidence of ongoing assessment and improvement of the rotation

- **Professional Achievements, Innovative Practice and Publications:** An important factor in determining eligibility for promotion is contribution in the form of professional achievement, innovative practices and the dissemination of professional information to peers and other professionals.

  **Practice standards and innovation activities include:**
  (i) Evidence of development and maintenance of new or innovative types of pharmacy services
  (ii) Evidence that the practice has had or continues to have demonstrable effect on health care outcome within a practice setting
  (iii) Evidence that the practice has influenced the nature of other types of health care delivery (e.g. prescribing of physicians or medication administration by nurses) toward more optimal delivery of health care
  (iv) Evidence that the practice has led directly to the establishment of new standards of care within the practice setting or within the profession b.
**Presentations and Publications**

(i) Presentations to professional organizations
(ii) Publications in peer reviewed journals/ professional organization publications.
(iii) Other publications including non-peer reviewed journals, book chapters, etc

**Other Professional Honors and/ or Awards**

- **Service**
  - a. Professional Participation: Recognition will be given to participation in the activities of professional societies in the form of membership on committees, service as an officer or in some other active participation role.
  - b. University Service: Participation on committees and/or task forces: departmental, program, School, Campus, or University.
  - c. Community Service:
    - (i) Community Development Organizations
    - (ii) Charitable Organizations
    - (iii) Fraternal Organizations

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<tr>
<th>CATEGORY</th>
<th>ITEM(S)</th>
<th>GOOD</th>
<th>EXCELLENT</th>
<th>DISTINGUISHED</th>
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<tbody>
<tr>
<td>Experiential Teaching</td>
<td>(a), (b), (c), and (e)</td>
<td>Must precept a minimum of three students annually in five of of the last seven years</td>
<td>Must precept a minimum of six students annually in five of of the last seven years</td>
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<td>(d), (f), (g), and (i)</td>
<td>Must rate 3 or higher 75% of the time on the relevant items on student evaluations.</td>
<td>Must rate 4 or higher 75% of the time on the relevant items on student evaluation.</td>
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<td>(h)</td>
<td>Must consistently provide written feedback at both the midpoint and final evaluations and complete a majority of evaluations within five business days of the completion of the rotation in five of the last seven years</td>
<td>Must consistently provide written feedback at both the midpoint and final evaluations and complete 80% of evaluations within five business days of the completion of the rotation in five of the last seven years</td>
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<tr>
<td>Practice Standards and Innovation</td>
<td>i) thru iv)</td>
<td>Evidence of activity i</td>
<td>Evidence of activity in areas iii.</td>
<td>As in excellent, plus evidence that practice has led directly to establishment of new standards of care on a regional or national level.</td>
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<td>Presentations and publications</td>
<td>i) thru iii)</td>
<td>Evidence of sustained activity i</td>
<td>Evidence of sustained activity in areas i and ii.</td>
<td>As in excellent, plus evidence of sustained publication and presentation with a minimum of two annually on average.</td>
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<td>Professional Honors and/ or Awards</td>
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<td>Evidence of a local award or honor</td>
<td>Evidence of a state award or honor</td>
<td>Evidence of a national award or honor</td>
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<td>Service</td>
<td>(a), (b), and (c)</td>
<td>Evidence of activity in any area.</td>
<td>Evidence of activity in more than one of the listed areas and leadership at a state level</td>
<td>As in excellent, plus evidence of activity in more than one of the listed areas and leadership at a national level</td>
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Note: See Appendix A; note peer observation is not required; see H.1.k