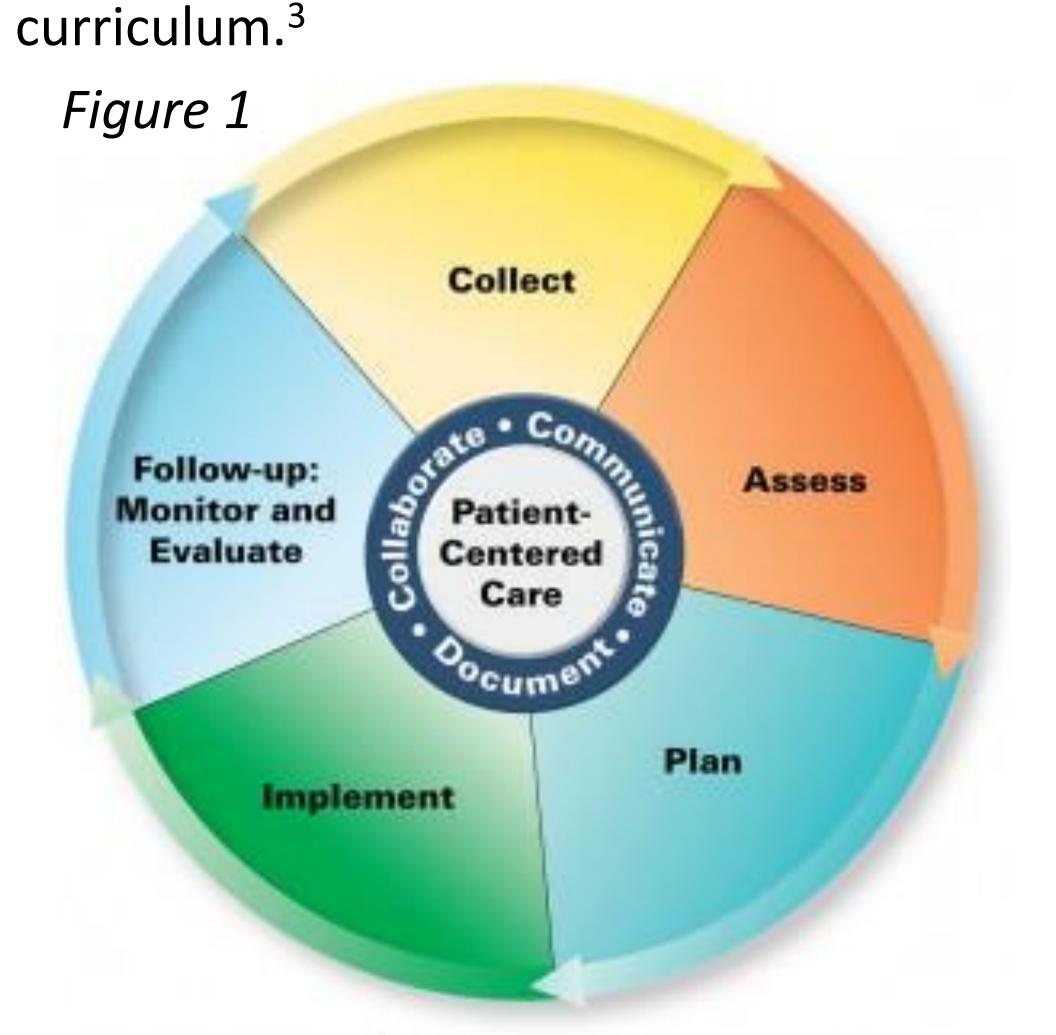
Increasing Assessment for Learning of the Pharmacist Patient Care Process in the Professional Didactic Curriculum

Katelyn Galli; Cassandra Doyno; Youssef Bessada; William Baker; Diana Sobieraj; Jessica Palliardi University of Connecticut School of Pharmacy, Storrs, Connecticut, USA



Background

Patient Care The Pharmacists' released by Commission of Pharmacist Practitioners as a standardized means of providing evidence-based care to patients (Figure 1) and has been integrated into curricula standards in pharmacy schools.^{1, 2} Various programs have approached individual student and program assessment strategies; however, there is no consistent means of determining student success in patient care, particularly in the didactic portion of the



Objective

To enhance assessment for learning of the pharmacist patient care process (PPCP) in didactic historically pharmacotherapy modules

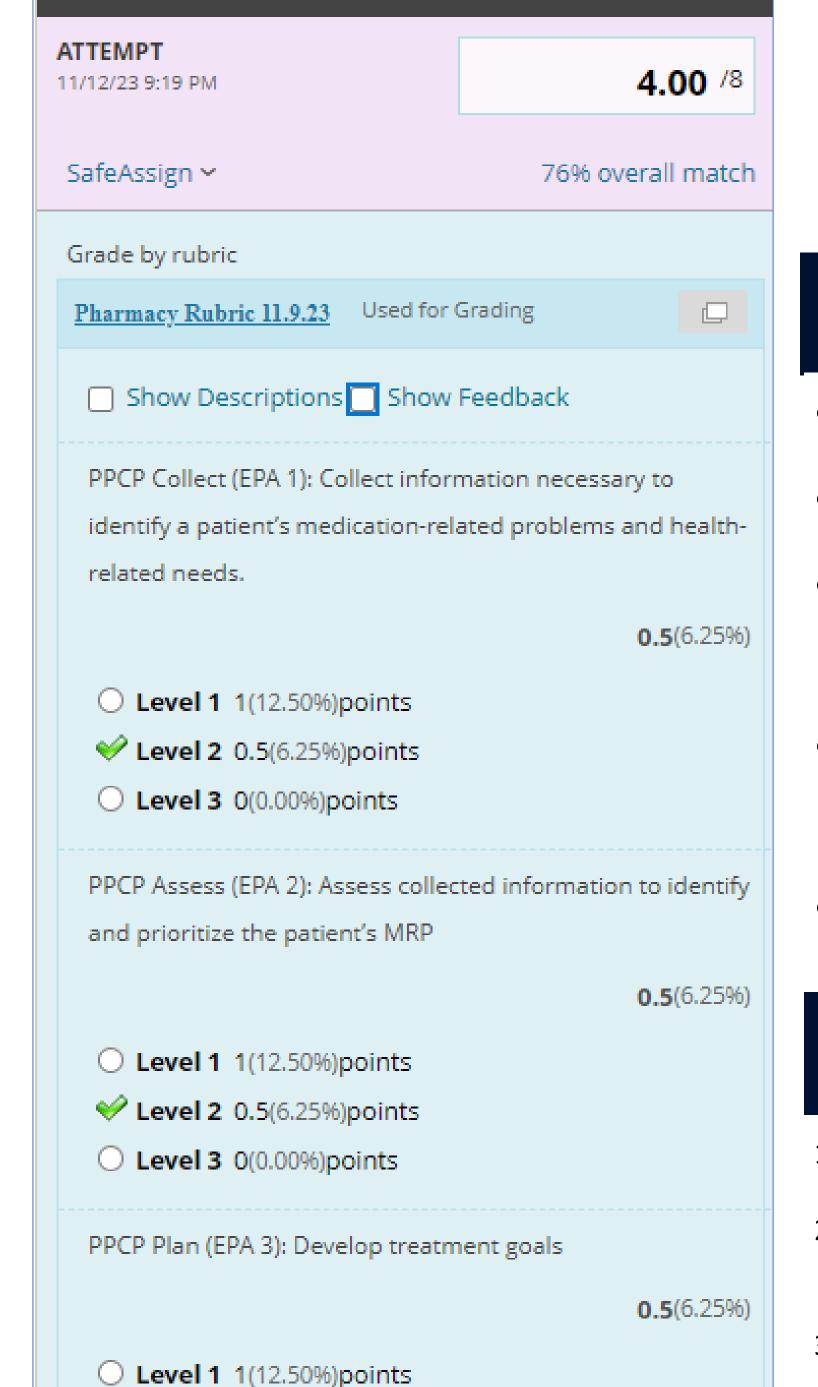
Methods

E-rubric integrated in Blackboard using 5 EPAs and professionalism. (Figure 2)

Instructors provided individualized student feedback and scoring (Figure 3)

Figure 3

Assignment Details 🗸



Level 2 0.5(6.25%)points

Level 3 0(0.00%)points

In-class debrief

led by instructors

to model critical

thinking steps

Cancel Save Rubric

Results

Paired e-rubric with EAC Visual Data in Blackboard was effective way to increase assessment for learning of the PPCP and monitor student performance programmatically

Challenges in identifying competency-based assessment levels and establishing pointbased thresholds Faculty workload concerns surfaced regarding time spent providing individualized feedback

Learning activities:

PPCP activities

developed for P3

didactic modules

Cardiology: Patient cases requiring students to submit care plans Toxicology: Patient cases with targeted open-ended questions

Figure 2

Skills	Novice	Advanced Beginner	Competent
PPCP Collect (EPA 1): Collect	No/few pertinent pieces of subjective and	Identifies most (but not all) pertinent	Identifies all pertinent subjective and
information necessary to identify a	objective information to identify MRPs	subjective and objective information	objective information needed to
patient's medication-related problems and health-related needs.		needed to identify MRPs	determine MRPs.
PPCP Assess (EPA 2): Assess	Identifies no or few MRPs, main MRP may	Identifies most (but not all) MRPs,	Identifies all MRPs, including the main
collected information to identify	be missing, unable to prioritize MRPs,	identifies and prioritizes main MRP, but	MRP as such, and then prioritizes
and prioritize the patient's MRP	includes non-existing MRPs	unable to prioritize full list	remaining MRPs accordingly.
PPCP Plan (EPA 3): Develop treatment goals	Missing/incorrect therapeutic goals for most MRPs	Some appropriate therapeutic goals, including for the main problem, but missing/incorrect for other MRPs	Appropriate therapeutic goals for all MRPs
PPCP Plan (EPA 3): Design treatment plan	Missing/inappropriate pharmacologic treatment plan for most of the MRPs	Appropriate pharmacologic treatment plan for most MRPs, including main MRP, but some plans are incorrect or incomplete	Appropriate pharmacologic treatment plan for all MRPs
PPCP Plan (EPA 3): Provide treatment plan justification/rationale.	Missing/incomplete/ incorrect justification for most MRPs	Some appropriate justification provided for MRPs, including main MRP, but missing/incomplete for others	Appropriate justification provided for all MRPs.
PPCP Plan (EPA 3): Identify monitoring parameters across the treatment course and for different populations.	Missing /incomplete/ incorrect monitoring parameters for most MRPs	Appropriate monitoring parameters for some MRPs, including main MRP, but missing/incomplete/ incorrect for others	Appropriate monitoring parameters for all MRPs
PPCP Implement (EPA 4): Tailor patient education and counseling points to patient/specific populations.	Missing/incomplete key education/counseling points for most MRPs	Complete education and counseling points for some MRPs, including main MRP, but missing/incomplete for others	Complete education and counseling points for all MRPs
Demonstrate appropriate drug information resources used (EPA 5)	References missing or very limited. References listed are inappropriate (i.e. tertiary) and/or not relevant.	References listed are appropriate (i.e. guidelines or primary), but not complete and some may be missing. Not AMA formatted.	Provides a complete and appropriate list or references that are in AMA format.
	B	ehavior	
	Demonstrate professional language and pres	sentation of information (written or verbal)	

Future Directions

- Integration of assessment within other modules
- Optimize additional tools within Blackboard
- Analyze programmatic success prospectively to determine effectiveness of assessment
- Standardize activities and grading based on student competency level
- Address challenges revolved around faculty workload

References

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