

# College of Pharmacy PharmD Internship Advisory Group



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Qatar University College of Pharmacy

May 22, 2012

## Agenda

1. Welcoming Remarks and Introductions
2. Program and Preceptor Reflection
  - a. orientation and patient assignment
  - b. student evaluation
  - c. student weaknesses
  - d. examples of "creative" mentorship
3. Faculty Liaison Visits
4. The Advanced Clinical Internships for 2012/13
  - a. rotation descriptions
  - b. readings (pre-rotation, therapeutic discussions)
  - c. next year's schedule
5. Questions



## Advanced Clinical Internships Advisory Group

|                          |                    |
|--------------------------|--------------------|
| Sumaya al Saady          | Mohammed Rijims PA |
| Mohammed Hafeez Olalikan | Mohamad Abu Nahia  |
| Nisrine El-Muabby        | Ahmed Satti        |
| Ahmad Saad               | Salih Mutaz        |
| Ahmed Mahfouz Sobhy      | Eman Al-Hamoud     |
| Osama El Badry           | Lolawa Barakat     |
| Mohamad Yamin Radwan     | Maha Mohamed       |
| Rasha Qaddoura           | Zainab Malik       |
| Khalid Al-Siyabi         | Rasha El-Enany     |
| Wessam El Kassem         | Hoda Badran        |
| Afif Mohamad Ali Ahmed   | Imran Khudair      |
| Linda Jean               | Shaza El-Awad      |
| Shereen El-Azazy         | Mahmoud Gasim      |
| Ibrahim Mohammadi        | Sabah Khalifa      |
| Abdulla Adam             | Ahmed Mitha        |
|                          | Mohamad Ibrahim    |

## Advanced Clinical Internships Advisory Group – New Members

|                        |                        |
|------------------------|------------------------|
| Ahmed Hussam           | Asmaa Ezeldin          |
| Omer Alabad            | Ahmed Atef             |
| Ahmed Abd Elaziz Bahey | Asmaa Abd Elaziz Bahey |
| Talal Nassar           | Ihab El Cheikh Ali     |

## Preceptors

### Who is an advanced practitioner?

- ❖ Employed within an endorsing department
- ❖ Nominated by endorsing Pharmacy Director
  - ❖ Sufficient experience in patient care settings
  - ❖ Defined de-centralized patient care responsibilities
  - ❖ Formal advanced degree/training preferred
  - ❖ Evidence/potential to function as a grad student mentor
- ❖ Desire to promote advanced pharmacy practice and patient care models at your site in Qatar
  - ❖ Interest and commitment to sharing your expertise with motivated students (future colleagues) while advancing your own knowledge



## Advanced Clinical Internships Preceptors

Table 1. Attributes of Successful Mentor-Protégé Relationships

|   |  |
|---|--|
| <b>Mentor Qualities</b>   |  |
| Strong interpersonal skills   |  |
| Technical competence / expertise  |  |
| Knowledge of organization and profession                                |  |
| Status / prestige within the organization and profession                |  |
| Willingness to be responsible for someone else's growth and development |  |
| Ability to share credit   |  |
| Patience  |  |
| <b>Protégé Qualities</b>  |  |
| Self-perceived growth needs   |  |
| A record of seeking / accepting challenging assignments                 |  |
| Receptivity to feedback and coaching                                    |  |
| Willingness to assume responsibility for own growth and development     |  |
| Ability to perform in more than one skill area                          |  |
| <b>Relationship Qualities</b>   |  |
| Voluntary   |  |
| Mutual benefits perceived and derived from the relationship             |  |
| No conflicts of interest / competition between mentor and protégé       |  |
| No confined to merely professional or business interests                |  |

Haines ST. The Mentor-Protégé Relationship. AJPE 2003;67:Article 82



## Doctor of Pharmacy Program Full-Time

- ❖ First class are completing internships (June 2012)
  - ❖ Next class selection process underway
- QU BScPharm graduates (n=14 max applicants)

The PharmD program is designed to meet international standards for an advanced degree in the health sciences field. It involves post-baccalaureate study designed to build on the knowledge, skills, attitudes and values developed during the undergraduate degree experience. The goal of the program is to educate pharmacy practitioners to become highly proficient in the delivery and evaluation of pharmaceutical care, and to further advance the practice of pharmacy.

[http://www.qu.edu.qa/pharmacy/program/PharmD\\_Program.php](http://www.qu.edu.qa/pharmacy/program/PharmD_Program.php)

QU CPH PharmD Internship Advisory Group  
Meeting #3, May 22, 2012



Advanced Clinical Internships – QU College of Pharmacy Doctor of Pharmacy Program  
ROTATION SCHEDULE 2011/2012

|                  | R1                                 | R2                              | R3                                       | R4   | R5                           | R6                                   | R7                                   | R8                                |
|------------------|------------------------------------|---------------------------------|--|--|------------------------------|--------------------------------------|--------------------------------------|-----------------------------------|
| Student          | Sep 25/11                          | Oct 23/11                       | Nov 27/11                                | Dec 25/11                                  | Feb 12/12                    | Mar 11/12                            | Apr 8/12                             | May 6/12                          |
| AMAAL Gullied    | NICU<br>Women's M Abu Nahia        | Primary Care<br>GP A Adam       | Gen Med<br>Al Amaal Hafeez               | CCU<br>Heart Hosp A Mahfouz                | Gen Med<br>HGH Eman          | Ob/Gyn<br>Women's Wessam             | Gen Med<br>Al Khor A Satti           | Drug Info<br>South Carolina       |
| DOUA Al Saad     | Primary Care<br>QP L Jean          | NICU<br>Women's M A Nahia       | Ob/Gyn<br>Women's S Elawad               | Gen Med<br>HGH Zainab                      | Hem/Onc<br>Al Amaal Shereen  | CCU<br>Heart Hosp Osama              | Outpt. Cardiol<br>Heart Rasha        | Gen Med<br>Al Khor Mutaz          |
| HAGER Ahmed      | Primary Care<br>QP L Jean          | Outpt. Cardiol<br>Heart Ahmad S | Pediatrics<br>HGH Hoda                   | Gen Med<br>HGH Zainab                      | Ob/Gyn<br>Women's Wessam     | Gen Med<br>Al Khor A Satti           | CCU<br>Heart Hosp Osama              | Drug Info<br>Al Amaal Sumaya      |
| HALLA Sunallah   | Gen Med<br>HGH Lowia               | Hem/Onc<br>Al Amaal Hafeez      | Ob/Gyn<br>Women's M Gasim                | Outpt. Cardiol<br>Heart Hosp Yamin/Nisrene | Primary Care<br>QP Mohammadi | Cardiol Inpt<br>Heart Hosp A Mahfouz | NICU<br>Women's M Abu Nahia          | Gen Med<br>Al Khor Mutaz          |
| HEND Mansoor     | Gen Med<br>HGH Lowia               | Ob/Gyn<br>Women's M Gasim       | Primary Care<br>QP Mohammadi             | Hem/Onc<br>Al Amaal Shereen                | MICU<br>HGH Maha             | Gen Med<br>Al Khor A Satti           | Drug Info<br>HGH M. I.               | Cardiol Inpt<br>Heart Hosp Osama  |
| MARYAM Khaja     | Outpt. Cardiol<br>Heart Hosp Rasha | Gen Med<br>Al Khor Mutaz        | Pediatrics<br>HGH Hoda                   | Gen Med<br>HGH Lowia                       | CCU<br>Heart Hosp A Mahfouz  | Hem/Onc<br>Al Amaal Sumaya           | MICU<br>HGH Maha                     | Primary Care<br>QP A Mitha        |
| NOOR Al Salimy   | Hem/Onc<br>Shereen                 | Gen Med<br>Imran                | Gen Med<br>Al Khor Mutaz                 | CCU<br>Heart Hosp A Mahfouz                | Primary Care<br>QP Mohammadi | Home Health<br>Sabah                 | NICU<br>Women's M Abu Nahia          | Ob/Gyn<br>Women's S Elawad        |
| RHAB Kalissi     | Cardiol Inpt<br>Heart Hosp Khalid  | Primary Care<br>QP A Adam       | Ob/Gyn<br>Women's S Elawad               | Gen Med<br>HGH Lowia                       | Drug Info<br>HGH M. I.       | Outpt. Cardiol<br>Heart Hosp Rasha   | MICU<br>HGH Maha                     | NICU<br>Sara Al Dahir New Orleans |
| SAMAH El Salem   | Hem/Onc<br>Al Amaal Shereen        | Gen Med<br>HGH Imran            | Primary Care<br>QP Mohammadi             | Ob/Gyn<br>Women's A Ahmed                  | Gen Med<br>Al Khor Mutaz     | CCU<br>Women's M. R. P. A.           | CCU<br>Heart Hosp Osama              | Cardiol Inpt<br>Heart Hosp Osama  |
| SHAIKHA Al Naimi | NICU<br>M Abu Nahia                | Gen Med<br>Mutaz                | Outpt. Cardiol<br>Heart Hosp Ahmad/Yamin | Ob/Gyn<br>Women's A Ahmed                  | MICU<br>HGH Maha             | Home Health<br>HGH Sabah             | Cardiol Inpt<br>Heart Hosp A Mahfouz | Primary Care<br>QP A Mitha        |

## Study Plan Advanced Clinical Internships

- ❖ Internal Medicine I ✓
  - ❖ Special Populations ✓
  - ❖ Primary/Ambulatory Care ✓✓
  - ❖ Critical Care ✓✓✓✓
  - ❖ Infectious Diseases ✗
  - ❖ Internal Medicine II ✓
  - ❖ Oncology/Hematology ✓
  - ❖ Psychiatry ✗
  - ❖ Drug Information & Evaluation ✓
  - ❖ International Site ✓✓
- } Core Internships = common to all students

[http://www.qu.edu.qa/pharmacy/program/PharmD\\_studyplan.php](http://www.qu.edu.qa/pharmacy/program/PharmD_studyplan.php)

QU CPH PharmD Internship Advisory Group  
Meeting #3, May 22, 2012



## Faculty Liaison Visits

- ❖ Each rotation/preceptor had a Faculty Liaison
- ❖ Faculty Liaison purpose intended to support the internship preceptor in his/her role
- ❖ Faculty Liaison is not a co-preceptor
- ❖ Faculty Liaison will not conduct independent student evaluations
- ❖ Faculty Liaison made weekly visits to the rotation preceptor (e.g. patient work up and therapeutic discussions)



## Faculty Liaison Visits

- ❖ QU CPH is one of the few health professional training programs who are known to have this system in place
- ❖ Marina Paiva is a UBC Doctor of Pharmacy student completing an elective rotation here at QU CPH
- ❖ As part of her rotation, she has developed a short questionnaire to learn more about your faculty liaison experiences
- ❖ We are seeking your feedback to improve the process for 2011/2012



## Reflection and Feedback

- ❖ Student orientation
  - ❖ students initiate contact with preceptor 1 week in advance of rotation
  - ❖ day 1 tour of pharmacy and patient care location/s
  - ❖ review rotation/personal goals & objectives
  - ❖ outline schedule of activities for the month
- ❖ Preceptor orientation
  - ❖ September session
  - ❖ 1<sup>st</sup> faculty liaison visit
- ❖ Student orientation
  - ❖ advance introductory message to pharmacy + medical staff by preceptor
  - ❖ complete paperwork for student access to patient electronic profile by site director and QU
  - ❖ directed advance reading for student identified by preceptor
- ❖ Preceptor orientation
  - ❖ enhancement of online resources - QU
  - ❖ additional workshops



## Reflection and Feedback

- ❖ Patient Assignment
  - ❖ paired students
  - ❖ multiple teams
  - ❖ patient load
- ❖ Patient Assignment:
  - ❖ reduction of paired students on rotation - **QU**
  - ❖ distinct patient assignments per student (no patient sharing) - **preceptor**
  - ❖ consistent team assignment to ensure care and learning continuity – **preceptor**
  - ❖ progressive patient care responsibilities

See online slides from PharmD preceptor session January 2012



## Reflection and Feedback

- ❖ Student evaluation
  - ❖ duplicate evaluation scores without distinct qualitative elaboration
- ❖ Student evaluation
  - ❖ strategies to overcome giving too similar evaluations when students are paired?
  - ❖ continuous verbal feedback (at least weekly, ideally daily) - **preceptor**
  - ❖ written feedback on midpoint+final evaluations to support student learning/development – **preceptor**



## Reflection and Feedback

- ❖ Student evaluation
  - ❖ private verbal and written elaboration of preceptor assessments
  - ❖ **What are challenges you have faced with providing feedback?**
- ❖ Student evaluation
  - ❖ 10-15 minute with individual student to explain evaluation - **preceptor**
  - ❖ establishing privacy for feedback- **preceptor**
  - ❖ establishing positive environment/process for contributor (allied health + pharmacy) staff feedback – **preceptor**
  - ❖ Opportunity for student reflection + share plan for improvement - **preceptor**

## Reflection and Feedback

- ❖ Student evaluation
  - ❖ initial rotation evaluations (especially midpoint) over- estimated actual student abilities
  - ❖ **What are your experiences using this evaluation tool?**
- ❖ Student evaluation
  - ❖ *meets expectation (2)* is the rotation/program goal
  - ❖ In exceptional circumstances (more likely in later rotations), *exceeds expectations (3)* is may be more accurate representation of skills/knowledge
  - ❖ *Below expectations (1)* must be accompanied by written feedback



## Reflection and Feedback

- ❖ Student weaknesses
  - ❖ not using patient work-up form tool
  - ❖ incomplete data collection (historical patient information and current patient data)
  - ❖ insufficient plans and execution of patient medication monitoring
  - ❖ work ethic and attitude issues
- ❖ Student weaknesses
  - ❖ reinforcement of expectations at Sept orientation – **QU**
  - ❖ extended hours (early AM) to access patient charts
  - ❖ reinforcement throughout rotations– **preceptor + QU**
  - ❖ changes to on-campus courses to address these deficiencies earlier plus rotation reinforcement – **QU + preceptor**

See online slides from PharmD preceptor session January 2012



## Preceptor Pearls

- ❖ Heart Hospital
  - ❖ daily evidence exercise
- ❖ Hamad General
  - ❖ shared therapeutic discussion sessions (with non-precepting pharmacists)
- ❖ Women's Hospital
  - ❖ time with anesthesiologist (epidural exposure)
  - ❖ end-of-week assignments to reinforce discussion topics
- ❖ Al Amal Hospital
  - ❖ chart and intervention documentation exercises



## Preceptor Pearls

- ❖ Al Khor Hospital
  - ❖ medication history to discharge counseling for admitted patients
- ❖ Qatar Petroleum
  - ❖ students are referred patients by physicians for medication review and teaching
  - ❖ explore opportunity to follow-up with patients before the end of the rotation
- ❖ Home Health Care
  - ❖ students give journal club to *interdisciplinary* group



## Discussion



## PharmD Preceptor Appreciation Event



PharmD Appreciation Night  
The W Hotel  
Fall 2012  
Day and Time To be Announced



## New Faculty Member

### Kyle Wilby to Join the College

We are pleased to announce that Mr. Kyle Wilby, Pharm D candidate (June 2012) has accepted a formal offer to join the college as an Assistant Professor with a clinical cross-appointment to one of our institutional health care providers. This is the third of six such cross-appointments that we will be recruiting over the next year.

Kyle Wilby received his Bachelor of Science in Pharmacy from the University of Saskatchewan in Saskatoon, Saskatchewan, Canada in 2008. He then completed a hospital pharmacy residency at Vancouver Coastal Health and Providence Health Care in Vancouver, British Columbia, Canada in 2009. Kyle will complete his Doctor of Pharmacy degree at the University of British Columbia, Vancouver, Canada with an expected graduation date of May 2012.

Kyle has experience in both hospital and community pharmacy settings and is actively practicing as a Clinical Pharmacist at Lion's Gate Hospital in North Vancouver. He has extensive international experience working in Accra, Ghana for BaseCamp International Centers and has most recently completed internships in both Uganda and Qatar. He also acts as a clinical instructor for international health clerkships in Ghana for Canadian undergraduate pharmacy students.

Kyle has numerous peer-reviewed publications in the areas of infectious diseases, tropical medicine, critical care, clinical pharmacokinetics, and medication adherence. His primary clinical and research interests include pediatrics, gastroenterology, infectious diseases, and international health. He has delivered 14 invited podium presentations, received numerous student and research awards, and is an active member of many national and international professional organizations.

These clinical cross-appointment professors will play a vital role in the training of our BSc and PharmD students, as well as contributing to the advancement of pharmacy practice in this country. We are pleased that he has elected to join us in this exciting new portfolio.

Welcome onboard, Mr. Wilby. We look forward to having you join the team!

[http://www.qu.edu.qa/pharmacy/about\\_us/news\\_archive/2012.php](http://www.qu.edu.qa/pharmacy/about_us/news_archive/2012.php)



## What happens next?

- ❖ Finalization of updated preceptor team near completion (including international affiliates)
1. Match new preceptor members expertise with advanced clinical internships (CPH)
  2. Determine preceptor availability (R1-R8)  
Please see Rotation Schedule in your package (You)
  3. Revise advanced clinical internship goals and learning objectives and resources PRN (We!)

Complete step#1-2: this week and next

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## Advanced Clinical Internships AY 12 Rotation Schedule

| R1          | R2          | R3          | R4          | R5          | R6          | R7          | R8          |
|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Sep 16 2012 | Oct 14 2012 | Nov 18 2012 | Dec 16 2012 | Feb 03 2013 | Mar 03 2013 | Mar 31 2013 | Apr 28 2013 |
|             | EID         |             |             |             |             |             |             |
| Oct 11 2012 | Nov 15 2012 | Dec 13 2012 | Jan 10 2013 | Feb 28 2013 | Mar 28 2013 | Apr 25 2013 | May 23 2013 |