



Vancouver Island Pharmacy
Vancouver Island Pharmacy

Evaluated By: evaluator's name

Evaluating : person (role) or moment's name (if applicable)

Dates : start date to end date

* indicates a mandatory response

Direct Patient Care Rotations Residency Coordinator Evaluation of Pass/Fail Status 2020

The residency coordinator reviews all program assessments and evaluations over the residency year and communicates with preceptors regarding resident performance.

Residents are expected to meet minimum performance levels for each parameter as outlined in the rotation evaluation/assessment rubric in order to pass the rotation.

The decision regarding a resident passing or failing a rotation is made by the residency coordinator, and not the rotation preceptor. If a preceptor has determined that a resident is not meeting performance expectations for a rotation, the preceptor contacts the residency coordinator early in the rotation so the residency coordinator, resident and residency preceptor can design and implement an action plan to remedy the deficient performance.

The residency coordinator in collaboration with the rotation preceptor will monitor the residents performance for the remainder of the rotation and will support the resident in meeting the performance expectations of the rotation.

*Not counting Clinical Orientation or Precepting Skills, this is Direct Patient Care rotation #

Expectations of Resident Performance

| Time Point | Expected Level of Performance (for moderately complex patients and drug therapy problems) | |
|-------------------------------------|--|---|
| | A. Knowledge B. Skills C. Attitudes and Professional Behaviour | Understanding Advanced Beginner Consistently Exhibits |
| Direct Patient Care Rotations 1 - 3 | A. Knowledge B. Skills C. Attitudes and Professional Behaviour | Understanding Advanced Beginner Consistently Exhibits |
| Direct Patient Care Rotations 4 - 6 | A. Knowledge B. Skills C. Attitudes and Professional Behaviour | Applying Competent Consistently Exhibits |
| Direct Patient Care Rotations 6 + | A. Knowledge B. Skills C. Attitudes and Professional Behaviour | Analysing Proficient Consistently Exhibits |

Knowledge Rubric

| Level | Characteristics |
|----------------------|--|
| Remembering | Data recall. Able to state/list previous learned information. Shallow processing, draws out factual answers. |
| Understanding | Understands meaning. Demonstrates understanding of facts/ideas through the ability to translate, interpret and extrapolate information. |
| Applying | Uses learning in novel situations. Able to use/implement information in settings that are new, unfamiliar or have a new slant. |
| Analyzing | Understands elements and relationships. Able to break down information into parts and determine how they relate to one another and the overall organizational structure or purpose. Able to use this information to solve problems. |

* Knowledge rubric based on Bloom's Taxonomy

Skills (Provision of Pharmaceutical Care) Rubric

| Level | Characteristics |
|--------------------------|---|
| Novice | Has incomplete understanding and minimal or "textbook" knowledge without connecting it to practice. Approaches tasks mechanistically. Little or no conception of dealing with complexity. Needs close supervision or instruction. |
| Advanced Beginner | Has a working understanding and knowledge of key aspects. Tends to see actions as a series of steps. Appreciates complex situations, but only able to achieve partial resolution. Able to achieve some steps using own judgement, but supervision needed for overall task. |
| Competent | Has good working and background understanding. Now sees actions at least partially in terms of longer-term goals. Copes with complex situations through deliberate analysis and planning. Able to work independently to a standard that is acceptable though it may lack refinement. Able to achieve most tasks using own judgement. |
| Proficient | Has a deeper understanding. Sees overall "picture" and how individual actions fit within it. Sees what is most important in a situation. Deals with complex situations holistically. Decision-making is more confident. Can achieve a high standard routinely and independently. Able to take full responsibility for own work. |

*Skills rubric based on Dreyfus Model of Skill Acquisition

A. Category "A" Criteria (these seven criteria carry a heavier weight towards the rotation outcome)

| | Two Levels Below Expectations | One Level Below Expectations | Meets or Exceeds Expectations |
|--|-------------------------------|------------------------------|-------------------------------|
| *1. Knowledge of Medical Conditions (2018 CPRB 3.1.1.b.) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *2. Knowledge of Pharmacotherapeutics (2018 CPRB 3.1.1.b, 3.1.2.a.b.c) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *7. Medical Problem List (2018 CPRB 3.1.8.f) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *8. Drug Therapy Problems (2018 CPRB 3.1.8.c, 3.2.4) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *10. Therapeutic Alternatives (2018 CPRB 3.1.2.b.c, 3.1.8.d.e.f) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *11. Therapeutic Recommendations and Implementing Care Plans (2018 CPRB 3.1.1.d, 3.1.3.c, 3.1.6,3.1.8.f.g) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *12. Monitoring Plan and Patient Education (2018 CPRB 3.1.8.h.i) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Category A Criteria Summary

*Category A Items One Step Below Expected Level of Performance

*Category A Items Two Steps Below Expected Level of Performance

B. Category "B" Criteria (these nine criteria carry a lower weight towards the rotation outcome)

| | Two Levels Below Expectations | One Level Below Expectations | Meets or Exceeds Expectations |
|--|----------------------------------|---------------------------------|----------------------------------|
| *3. Knowledge of Safe Medication Practices (2018 CPRB 3.2.5, 3.2.6, 3.3.2) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *4. Patient Triage and Prioritization (2018 CPRB 3.1.1.a, 3.1.7) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *5. Relationship with Patient (2018 CPRB 3.1.4, 3.1.8.a) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *6. Patient Information Gathering (2018 CPRB 3.1.8.d.e) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| **9. Goals of Therapy (2018 CPRB 3.1.5, 3.1.6, 3.1.8.b.f) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *13. Collaborative Care and Seamless Care (2018 CPRB 3.1.3.a.b.e.f) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *14. Documentation (2018 CPRB 3.1.1.d, 3.1.8.i) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *15. Medication and Practice-Related Questions (2018 CPRB 3.1.2.a.b.c, 3.5.1.a.b.c.d.e) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| *16. Critical Thinking and Time Management (2018 CPRB 2.1.5.3, 3.1.1.c, 3.4.1) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Category B Criteria Summary

*Category B Items One Step Below Expected Level of Performance

Category B Items Two Steps Below Expected Level of Performance

C. Attitudes and Behaviours (Professional Characteristics)

| | Does Not Consistently Exhibit | Consistently Exhibits |
|--|-------------------------------------|--------------------------|
| *17. Responsibility for Own Learning (2018 CPRB 2.1.5.3, 2.1.5.4, 3.1.1.c, 3.4.1) | <input type="radio"/> | <input type="radio"/> |
| *18. Recognizing Role (2018 CPRB 2.1.5.6, 3.1.3.a.b.c.d, 3.2.2, 3.3.4) | <input type="radio"/> | <input type="radio"/> |

Comments Regarding Attitudes & Behaviors

D. Evaluation of Rotation Pass/Fail Status

| | Less than 75% of expected level of performance | 75-85% of expected level of performance | 86% or higher of expected level of performance |
|--------------------------------|--|---|--|
| | UNSUCCESSFUL Outcome (FAIL) | BORDERLINE PASS Outcome | PASS Outcome |
| *Rotations Pass or Fail Status | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments

If a **BORDERLINE PASS** outcome is granted – a learning plan to support the resident may be developed with the resident and Program Coordinator as appropriate.

If an **UNSUCCESSFUL** outcome is determined – the preceptor must be confirm & discuss this with the

Program Coordinator who will inform and discuss with the resident. A remedial rotation will be arranged and a learning plan developed. Schedule adjustments may be made to accommodate learning needs. If a 2nd UNSUCCESSFUL rotation outcome takes place – the resident is deemed unsuccessful in the program and is not eligible to continue.

***Residency Coordinator: Did you have an opportunity to meet with this trainee to discuss their performance?**

☐ Yes

☐ No

Resident: Did you have an opportunity to discuss your performance with your preceptor/supervisor?

☐ Yes

☐ No

The following will be displayed on forms where feedback is enabled...

(for the evaluator to answer...)

***Did you have an opportunity to meet with the person you are evaluating to discuss his/her performance?**

☐ Yes

☐ No

(for the evaluatee to answer...)

***Did you have an opportunity to meet with the person who evaluated you to discuss your performance?**

☐ Yes

☐ No

***Are you in agreement with this assessment?**

☐ Yes

☐ No

Please enter any comments you have(if any) on this evaluation.

