What Can You Do?

Basically, pharmacy schools offer two kinds of experiential education.

- Introductory pharmacy practice experiences (IPPEs) take place while students are in the earlier years of their pharmacy education.
- Advanced pharmacy practice experiences (APPEs) typically occur in the final year of pharmacy school.

Depending on your setting, your responsibilities, and the kind of time you have available, you may precept one or the other, or even both.

What Fits You Best?

Here are some things to consider to determine which of the two types of practice experiences might fit you best as a preceptor.

Considerations Regarding IPPEs

- Students have less experience and tend to require more supervision for difficult tasks.
- The competencies students are developing are typically for the baseline of practice rather than for specialty areas.
- Depending on the university requirements, students' time with you may be intermittent over a semester or blocked into a few weeks.
- Time on site is often fairly rigid, for a specific number of hours at predetermined times.
- Because each student's experience before pharmacy school varies widely, those taking part in an IPPE may have a wide range of baseline knowledge and abilities.
- Usually, an IPPE requires time in both a community setting and a hospital setting, although other options may be available depending on how the curriculum is designed at each pharmacy school.

Considerations Regarding APPEs

- Students are meant to experience the breadth and depth of possible skills in a given practice arena.
- Competencies for students in APPEs are designed to prepare them for entry-level practice. Thus the site and patient base must allow students to expand their knowledge and skills.
- Students' time at the site is typically four to eight weeks.
- Students are not limited to an eight-hour day. I tell my students that APPEs *start out* at 40 hours per week and *go up* from there.
- APPE sites need to reinforce general patient care principles with rigor, or they must provide an opportunity to explore in detail a specialized practice environment or specialized patient base.
- APPEs can occur almost anywhere pharmacy is practiced.

What's in a Name?

A brief note on nomenclature. Over the years, the experiential portion of pharmacy training has been referred to as many things: an internship, externship, clerkship, practicum, rotation, etc. In recent years the Accreditation Council for Pharmacy Education has emphasized using the standard language listed above: IPPE and APPE.

The problem is, it's hard to undo years of habit. So, if you're around any preceptors or faculty who've been around for a while (old guys and gals), you may hear other terms being tossed around interchangeably. Just smile, nod, and ask for clarification if you are unsure what they are talking about.

Identifying Learning Opportunities

One thing I find when talking to preceptors is that they often underestimate the opportunities at their site for student learning. I'm not sure if this is because they're unclear about what the curriculum requires or because they have biases about the activities that are appropriate for students to participate in.

I suggest that you take time to brainstorm about the possibilities before deciding where and how students will be included. If you work with a team, you should involve them in this exercise. If you practice alone, brainstorming is a bit harder, but you can contact folks in similar practice areas to find out what they do with the students they precept.

The underlying purpose of the exercise should be to create a list of all the possible functions in your practice site. Maybe even include some in which you are

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not currently able to participate. Having a student may open them up. Once you have this long list of opportunities, you can work on narrowing it down.

Don't Overlook Valuable Learning

Be careful about the narrowing, though. Some preceptors seem to want to isolate students from certain tasks. I will give you an example.

One preceptor told me that he allocated time in the afternoon for students to work in the library on projects because there was nothing going on for them otherwise at the practice site. The idea of setting aside time to focus on projects is not bad, per se, but knowing what I know, I wanted to see if this student might be missing out on something valuable.

So I asked what the preceptor was doing during that time. He said that this is when he works on reports and committee assignments. I asked if knowing how to work on those reports and understanding how those committees function was not worth learning. As it turns out, those things *were* worth learning, but in the preceptor's mind, they were not "fun" activities, so he isolated the student from them.

This kind of thinking can leave out very valuable opportunities to build skills and be exposed to important tasks. Remember, we are training people to be pharmacists. Pharmacists carry out both patient care and non-patient care duties.

If you're still having trouble determining which activities are appropriate for your students, talk to someone at the college of pharmacy. Describe what you do and what a student could be involved with. The college will help you decide.

On a general note, if you ever get stuck, call the college. That's what it's there for.

Calculating Numbers

The question of how many students your site can accommodate comes up quite a bit in decisions about providing clinical education. Do you have the space, time, and patient load to accommodate one student at a time, two, or several? Important considerations are covered below.

Preceptors often underestimate the opportunities at their site for student learning.

What Does the Law Allow?

Every state's laws are different. You will need to explore how many students are allowed at your site based on where you are practicing. The experiential director at the university should be able to help answer this question, but be ready for some ambiguity.

State laws and regulations regarding the practice of pharmacy and the presence of pharmacy students in the practice setting often have holes in their coverage. Some laws apply only to dispensing areas. What does that mean when the rotation the student is involved in does not have a dispensing area? Some laws refer only to the absolute ratio of pharmacists to nonpharmacists, whether that nonpharmacist is a technician, clerk, or student, not to a ratio of pharmacist to specific type of supervisee. Some laws clearly differentiate between students, techs, and clerks in regard to supervision.

If the experiential director can't help you, ask others who have similar programs what they do. If that doesn't work, ask the board of pharmacy—but keep in mind that boards of pharmacy are government bureaucracies. When faced with a gray area that is hard to research, they may simply err on the side of caution and say "no" to your question.

What Does the Space Allow?

Every site is different. You will need to assess just how many physical bodies can occupy the environment.

- How many workstations are available?
- How many chairs?
- Where will the students be spending most of their time?

Having a small office does not matter if you are never there. If most of the work takes place away from the office, you can have quite a bit of flexibility. In today's world, instead of thinking about *where* the work gets done, we can focus on the fact that it *gets* done.

What Does the Workload Allow?

In considering this question, the time of year makes a difference. Some experiences may have a seasonal nature. For example, cities in the heart of Florida double or triple their populations during the winter, changing the hospital census and the need for students at the site. In other locations, the hospital census is consistent year-round. In either case, the workload is an indicator of the number of opportunities available for students. You may not be able to tell for sure what the workload allows until you have had a few students.

How Effectively Can You Teach More Than One Student?

This question is hard for anyone to answer other than you, and it may take some trial and error. I find that preceptors generally choose to work with only one student because they are unsure of the time commitment. I like to point out that economy of scale factors into clinical training. If you are going to have a topic discussion with one student, you can just as easily have it with two or even three.

Likewise, if you have only one student and she has a question, she has only one source for the answer. You. If you have two students, they will ask each other the question first and come to you only when they both don't know the answer.

Having said that, I know that not everyone can handle multiple students. If the issues above regarding law, space, and workload prevent bringing on more than one student at a time, it matters very little if you'd prefer to precept several. Do you have the space time and patient load to accommodate one student at a time two or several?

When Is the Right Time?

You must think about the variations in your site from month to month. Does every month offer the same opportunities for student learning experiences? If your site is fairly consistent, you may be able to accommodate a student every month—and, in fact, you may prefer a constant student presence because it allows you to get more done. If so, contact the college to determine the feasibility.

The type of experience you offer, whether this type of experience is in demand among students, and your location all play a role in whether the college can provide you with a full schedule of students. For example, if the experience you provide is required for all students and is located in a highly populated area, and if a limited number of sites also provide this type of experience, accommodating your request will be much more likely. If, however, you offer an elective experience in a small rural community far from a population center or in an area where multiple sites provide a similar experience, the likelihood of obtaining a full schedule of students is probably low.

If patient load or activity level varies at your site based on the time of year, you will need to decide which months you want to have students and which months will not work. Other things to consider:

- Staffing levels
- Vacations
- Scheduled state, regional, or national meetings
- Other significant events

You may also want to build in some "time out" from having students, particularly if you are precepting on your own and not as part of a team. When precepting solo, taking on too many students can lead to some degree of burnout—a problem you can prevent by planning breaks.

The Scheduling Process

No matter what kind of learning experience you eventually decide to offer, you need a process in place to match the students to the site. At most pharmacy schools, this process is typically handled by the director of experiential education, who is faced with the daunting task of ensuring that students get the kinds of experiential training they need to fulfill their requirements, based on the experience types available. Although it's not necessary for you to grasp all the nuances of how this process works, a few important things to understand are discussed below.

Opt In or Opt Out

Each college has a mechanism to collect data from you about your availability. If you don't tell the college if you are available or not, the experiential director can't know whether to schedule students with you. Some colleges may work on an *opt-in* method and some on an *opt-out* method. (I'm not sure anyone uses these exact terms, but for the sake of discussion, we'll use them here.)

Colleges that operate on an opt-in methodology will want you to let them know each cycle if you are available, how many opportunities you are willing to offer, when, and how many students for each. Colleges that operate on an *opt-out* method will assume you are in for a standard setup—such as whatever you offered the previous year, or whatever standard package of numbers and dates the college uses when a rotation site does not specify what it wants, such as "one student a month for every month." It is important that you know which method you are dealing with. If you think it is *opt-in* and it is actually *opt-out*, you may end up with students assigned to you that you were not expecting. If you think it is *opt-out* when it is actually *opt-in*, you could find yourself with no students at all.

As a first-time preceptor, it's best not to assume anything. Get in touch with the college and ask, for example, "What would be the best way for me to let you know when I would like to have students, and how many, for the next APPE cycle?" Then be specific about what you're offering, to help ensure you get exactly what you want.

Experiential Directors Are Not Perfect

Far from it, in fact. And although most experiential directors use some kind of computer system to make the scheduling process easier, none of these systems is perfect, either. For the system to operate correctly, the data entered into it must be accurate and the user must avoid making mistakes.

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Eventually something will go wrong, and when it does, it's helpful if you can be patient while correc-

tions are made. Also, once the schedule is made available, it's very important that you check it closely for errors. Make sure it matches up with your expectations. The people doing the scheduling have so much information to work with, they are unable to pick out every error. So please point out when they mess up.

For example, I have 300 students who must do APPEs each year over the course of 11 months, and these students all have very specific ideas of where they want to be and when. And I have approximately 1600 active preceptors with very specific ideas of when they want students and how many; some have additional prerequisites to comply with. Overall, that adds up to 3300 experiences and countless requirements to be met. Some of them are not going to be right and when that happens, the college needs to hear from you as soon as possible.

Your Rotation Is Part of the Whole

A student's experiential education is made up of many parts beyond the specific experience you offer. A balanced "whole" composed of different experiences is what's most important. Requirements set by the Accreditation Council for Pharmacy Education (ACPE) and individual colleges attempt to ensure that this balance occurs.

Each APPE provides knowledge, skills, and attitudes (KSAs) that will be valuable to students in their career. For APPE schedules, I look at the overall balance of a schedule rather than at individual rotations to see what the student is getting. Sometimes this is a hard concept to get across to students. I use the concept of personality testing, which most people are familiar with, to help explain. By looking at rotations as if they have a personality, I can define them using the following attributes.

- General knowledge, skills, and attitudes. These are the underpinnings of practice. Education items fall in this category if they are useful in virtually any setting and can also be gained in most settings.
- Unique knowledge, skills, and attitudes. These education items provide breadth of experience. They are found only in certain practice settings or among certain patient types and are typically only useful in specific areas, but can translate to other unique areas.
- Patient interaction. This category involves actual patient interaction and caregiving. Standing at a bedside while the patient is nonresponsive counts as this type of activity, but communicating with patients in a meaningful way counts much more. Likewise, phone conversations count, but person-to-person conversations count more because they include nonverbal communication.
- **Problem frequency.** This category refers to the rate at which problems occur at the site. It has to do with repetition and the degree to which students can become comfortable and confident in their use of certain skills. I like to think of this category and the next one as involving brain-building exercises—reinforcing knowledge and skills so they are ready for action when needed. Another good analogy is exercising a muscle. Repetition builds definition.

- Problem complexity. This category refers to the difficulty of problems that occur at the site. How hard is each problem to solve? How many resources does each one take to solve? How many possible viable solutions are there? How hard will it be to implement? Complexity builds new abilities and creates new pathways for problem solving so students have alternate methods to draw from when their first approach does not work.
- Autonomy. This category involves the amount of responsibility students are given. Within the limits of supervision, how accountable are students for outcomes? Autonomy is necessary for students to eventually transition to being independent practitioners.

Each rotation will involve different amounts of these attributes. A community experience, for example, will probably have a great deal of general KSAs, some unique KSAs, a good amount of patient interaction and problem frequency, a smaller amount of problem complexity, and some autonomy. A critical-care rotation, on the other hand, will have some general KSAs, quite a bit of unique KSAs, a very small amount of patient interaction, high problem frequency and complexity, and low autonomy.

You can probably estimate the mix and volume of attributes for your own rotation and for others you're familiar with—which constitutes the rotation's "personality." A schedule has a personality, too, which is the aggregate of all rotations included in it. The student benefits from all the rotations to achieve his or her education outcome.

The point of this discussion is to emphasize that no rotation provides everything. If a schedule is not balanced to cover everything a student needs to learn, it's not your obligation to make up the slack. And you may not be equipped to. Furthermore, if you try to make up the slack, your student may miss out on the very thing your site is good at providing.

Of course, if you see a deficit in a student's experience and have the means to help, you should, but remember that you are not alone—practice sites in other rotations may be better equipped to help the student.

Don't be surprised if the "balance" concept is not articulated by everyone in terms of personality attributes. This is my way of explaining things. I hope it has been helpful.