



## Priority #3 Highlights

**Best practice in preceptor development to establish/ augment best qualities/abilities in preceptors.**

ExEd rotation sites in Canada have called for greater coordination between programs (Undergraduate, IPG Postgraduate Pharm D and Residency) for preceptor training and development as well as flexible availability of content. **Priority #3 focused on the media and delivery mode (i.e. the how) used to deliver content rather than the content (i.e. the what)** as it was recognised that there is a plethora of both pharmacy-specific and interprofessional content available to preceptors.

Major recommendations include:

1. A set of **Canadian preceptor capabilities/ competencies** is the basis for a well-considered preceptor development program
2. A **national preceptor development program** should be developed to provide a central website to engage and guide learners in the CPD of teaching in the field, monitor attainment of competencies and provide **curated content for preceptors**

A working group is finalising a set of capabilities/ competencies for preceptors, determining web platform specifications, and securing support and funding for a National Preceptor Development Program. This electronic interface will be interactive, adaptable to preceptors' learning preferences and needs, community-building, and accommodating of various ExEd programs' unique needs. It has potential international and interprofessional marketability and educational research in CPD.

## Priority #4 Highlights

**Description and promotion of the value learners add to host organisations and their mandate**

Students on rotation provide economic, patient, organisational and personal benefit for the preceptor and organisation. Currently in Canada, **hospitals experience benefits** as opportunities to recruit future employees, provide excellent training for future professionals, expand their services and fulfill the educational mission of their organisation. Research literature augments these impressions by showing reduced costs, optimised therapies and lower re-admission rates as a result of identification of drug-related problems and discharge counseling by students. **Community pharmacy** rotations provide patient **benefit** as well as economic benefit. Value has been described for advanced/final year students on rotation rather than introductory/early experiential placements in this research.

Major recommendations:

1. Future quality **measurement should use established CQI** mechanisms for pharmacists (i.e. similar to KPIs in hospital) to quantify student-related patient care benefit
  2. A **national** set of items for inclusion on all ExEd annual **QA surveys** should be developed, integrated and monitored to determine trends in perceived/actual value
- Promotion will be addressed fully in Priority #7 (ExEd promotional strategies) and the 'intangible' personal preceptor benefits will be featured within Priority #5 (recruitment and retention).

## Up Next

Priority #5: **Optimisation of preceptor recruitment and retention** is expected to be ready for review at the end of October, 2015. The Can ExEd Project for Pharmacy is scheduled to conclude in March of 2016.

## Getting Involved

As a stakeholder you can contribute to the Project and influence the outcomes through:

1. Your representative on the Steering Committee (see Newsletter #1 for a list of members)
2. Project Manager: [katrina.mulherin@utoronto.ca](mailto:katrina.mulherin@utoronto.ca) or 416.931.4864
3. Attend conference presentations and workshops (CSHP and CPhA conferences)
4. Complete survey sections of interest to you. Available soon at: <https://www.surveymonkey.com/r/CanExEdStakeholder>
5. Volunteer to be an early-adopter of some of the tools/ models/programs developed by contacting your local ExEd Faculty coordinator

### Can Ex Ed Project Team (Priority #1-4)

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