

The Role of the Interprofessional (IP) Evaluator

IP Evaluators have an important role in interacting with and evaluating our pharmacy students as they demonstrate their collaborative knowledge, skills, and attitudes in fourth year clinical rotations. IP Evaluators:

- Observe the student during interactions/collaborations, (in-person, by phone or in writing), and share some formative feedback.
- Monitor and document student interactions and performance throughout the clinical rotation.
- Complete this summative assessment at the end of the rotation.

Instructions for Completing this Assessment

1. **Competencies:** Review the six collaborative competency descriptions below. Some examples for each are provided on page 3.
2. **Rating:** Select the rating column that best matches what you observed for each competency, and mark with an “X”.
 - i. **Not observable** - *Limit to no more than 2 competences. Please contact the student’s preceptor if you are unable to observe at least 4 of the 6 competencies.*
 - ii. **Below Expectations** - *Demonstrates minimal collaborative competence and requires remediation OR demonstrates conduct that is of concern.*
 - iii. **Developing** - *Below expectations for entry-to-practice but shows an understanding of key concepts and with support could meet expectations.*
 - iv. **Competent** - *Meets expectations for entry-to-practice, demonstrating collaborative knowledge, skill, and attitudes at a level consistent with most licensed pharmacists.*
 - v. **Exceeds Expectations** - *Demonstrates collaborative knowledge, skill, and attitudes consistent with the more highly collaborative licensed pharmacists. Would welcome to the team.*
3. **Examples and Further Comments:** To support your rubric rating, identify the collaborative activities you observed and describe how the student performed. (*Mandatory*). Some examples are provided on page 4.
4. **Additional Feedback:** Please add some constructive feedback to help the student further develop their collaborative competence. Some examples are provided on page 4.
5. **Review:** Discuss the assessment with your student.
6. If this assessment is completed in **paper form** instead of electronically, the completed assessment must be returned to the student’s preceptor for entry into CORE Elms.

Evaluator name:							
Evaluator discipline/profession:							
Nature of working relationship with student: <i>(e.g., Worked together in ER taking medical/medication histories, worked in medical building next door to student’s pharmacy, worked together during virtual consults, etc.)</i>							
Frequency of interactions with student: <i>(e.g., Daily, a few times a week, weekly, a few times, once or twice.)</i>							
A - Competencies:		Rating:	Not observable	Below expectations	Developing	Competent	Exceeds expectations
1. Interprofessional Communication Student can communicate with practitioners from a different profession in a collaborative, responsive, and responsible manner.							
<i>Examples and Further Comments:</i>							
2. Collaborative Leadership Student can understand and apply leadership principle that support a collaborative practice model.							
<i>Examples and Further Comments:</i>							

Rating: A - Competencies:	Not observable	Below expectations	Developing	Competent	Exceeds expectations
3. Role Clarification Student understands their own role and the roles of those in other professions and uses this knowledge appropriately to establish and achieve patient / client / family and community goals.					
<i>Examples and Further Comments:</i>					
4. Patient / Client / Family /Community Centered Care Student seeks out, integrates, and values, as a partner, the input, and the engagement of the patient/client/family.					
<i>Examples and Further Comments:</i>					
5. Team Functioning Student demonstrates effective teamwork dynamics and group/team processes to enable interprofessional collaboration.					
<i>Examples and Further Comments:</i>					
6. Interprofessional Conflict Resolution Student actively engages self and others, including the client/patient/family, in positively and constructively addressing disagreements as they arise.					
<i>Examples and Further Comments:</i>					
B - Additional Feedback <i>Before completing your assessment, please provide some brief feedback for the student on what was done particularly well and identify one or two specific areas that could benefit from further development with reflective practice.</i>					

Interprofessional Evaluator Grading Guide

Understanding the Collaborative Competencies:

The six competencies in this rubric are based on [Canadian Interprofessional Health Collaborative \(CIHC\) Competency Framework](#). Some examples of competency outcomes for each of the six competency domains in the rubric are listed below.

1. Interprofessional Communication

- Shares information, ideas, concerns, opinions, and feedback with others.
- Communication is clear, concise, confident, assertive, persuasive, and respectful.
- Ensures a common understanding of care decisions.
- Actively listens to other team members.
- Demonstrates respect for all team members and values their opinions and contributions.

2. Collaborative Leadership

- Works collaboratively with others to enable effective patient/client outcomes.
- Shares in decision-making with other members of the team to establish common goals and care plans.
- Shares leadership with other members of the team.
- Demonstrates accountability to other members of the team.
- Builds interdependent working relationships with others.

3. Role Clarification

- Communicates roles, knowledge, skills, and attitudes using appropriate language.
- Considers the roles of others in determining or negotiating their own roles.
- Accesses others' skills and knowledge appropriately through consultation.
- Recognizes, values, and respects the diversity of other health and social care roles.

4. Patient/Client/Family/Community-Centred Care

- Listens respectfully to the expressed needs, values, and beliefs of all parties in care planning and delivery.
- Shares information in a respectful manner, so that it is understandable, encourages discussion, and enhances participation in decision-making.
- Provides appropriate education and support to all involved with their care or service.

5. Team Functioning

- Demonstrates trust, mutual respect, open mindedness, accountability, open communication, attentive listening, etc.
- Establishes and maintains effective and healthy working relationships.
- Effectively facilitates discussion and interactions among team members.
- Participates and is respectful of all members' participation in collaborative decision-making.

6. IP Conflict Resolution

- Values the potential positive nature of conflict.
- Recognizes the potential for conflict to occur and takes constructive steps to address it.
- Seeks to clarify and understand the perspective and opinions of others.
- Encourages/promotes a safe environment in which to express diverse opinions.
- Develops a level of consensus among those with differing views, allowing all member to feel their viewpoints have been heard, no matter what the outcome.
- Recognizes the potential for conflict to occur and values the potential positive nature of conflict.
- Can identify common situations that are likely to lead to disagreements or conflicts.
- Demonstrates an understanding of strategies to prevent, address, and resolve conflict.
- Effectively works to address and resolve disagreements, including analyzing the causes of conflict, and works to reach an acceptable solution.

Providing Examples and Further Comments:

To support each of your rubric ratings, identify the collaborative activities you observed, and describe how the student performed. Some examples of collaborative activities include:

- Sharing findings from a MedsCheck or medication reconciliation.
- Collaborating on patient/client assessment or monitoring.
- Responding to request for drug information
- Initiating contact to discuss patient/client care, a drug therapy problem or prescription problem.
- Requesting patient/client history or diagnostic information.
- Contributing to a health care team activity, care planning meeting, patient rounds, etc.
- Collaborating on a research project/clinic day/presentation.
- Making a patient/client referral.
- Connecting to address a communication, prescribing or dispensing error, difference of opinion, etc.
- Other: _____

For a comprehensive list of collaborative learning outcomes expected of pharmacy students at entry-to-practice: [CIHC/AFPC Competency Crosswalk](#)

Writing Additional Feedback:

Please provide the student with specific, actionable, and constructive feedback to help guide further development of their collaborative competence. Some examples:

- *Written communication could have been more concise.*
- *Could benefit from more practice working with and presenting to others on the team to build confidence.*
- *Backing up recommendations with evidence could make them more persuasive.*
- *Could ask more questions to gain a better understanding of the opinions and priorities of others.*
- *Could benefit from giving more consideration to the priorities, limitations and wishes of the patient/client/family.*
- *When differences of opinion occur, focus on coming up with a plan that will be acceptable to all parties, rather than taking it personally.*

The Waterloo Pharmacy Interprofessional Education (IPE) Program

The School of Pharmacy provides many opportunities for students to learn with, from and about other health care practitioners and students throughout the PharmD Program.

In-class

Key foundational content, interprofessional speakers and practice simulations are integrated into the curriculum and include:

- PHARM 120 – Intro to IPE and **IPE Day**, an event with UW and UWO students from medicine, nursing, optometry, social work, nutrition, optometry, physiotherapy, occupational therapy, etc., involving an IP panel and case study discussion.
- PHARM 127 – Professional communication skills
- PHARM 290 – Interprofessional speaker seminar series, health care practitioner interview assignment, and **HIPED**, an event with McMaster medical students including assessment, communication, and prescribing activities.
- PHARM 329 – **RnRx**, an event with McMaster University/Conestoga College nursing students including assessment, care planning and deprescribing in palliative and end of life care.

Extracurricular

Students are required to identify and participate in a certain number of extracurricular interprofessional activities throughout their degree. **In the first year, students choose activities to familiarize themselves with key concepts and to explore how other members of the team might view health and patient care.** The setting may or may not involve a high degree of interaction, (e.g., a lecture or panel presentation).

In second and third year, students are asked to actively engage with people in different professions. The context for the interaction should be health related and involve resolving/discussing matters related to health or patient care. The setting is usually clinical, or at least oriented to practitioners or student clinicians, (e.g., a conference or workshop).

In addition to participating in extracurricular events students are required to submit reflections on their competency development and experiences in collaborative environments.

Co-op work terms

Students report significant interprofessional experiences and opportunities while out on co-op. This is also when students make the most of extracurricular events by attending workshops, going to conferences, and engaging in activities involving other professions. The reflection exercise cements learning.

Throughout their degree, students acquire increasing degrees of expertise in the six interprofessional competencies identified by the Canadian Interprofessional Health Collaborative (CIHC) as critical to becoming a valued member of a team.

For more information please visit: <https://uwaterloo.ca/pharmacy/waterloo-pharmacy-ipe>