F. Evaluations

1. Experiential Education Advisory (EEAC) /Quality Assurance (QA) Committee

The EEAC/QA committee was formed by the OEE in 1995. Committee membership includes preceptors from various practice settings and experiential faculty. The Director of Experiential Education acts as chair. The OEE consults the committee for input about matters that concern rotations, for example; developing a new evaluation form, testing new on-line databases, etc. The committee also reviews site and preceptor evaluations as a QA measure.

2. Preceptor Evaluations of Students

Evaluation of students is an important part of their learning experience. Evaluations of the student by the preceptor should be performed both formally and informally. Formal evaluation is performed by completing a written evaluation, reviewing it with the student, and discussing strengths and areas for improvement with the student. Informal evaluation is performed by providing day to day verbal feedback to the student. Both are important to mentor the student to develop them into competent practitioners of patient centered care.

a. How to complete Evaluations
   i. Preceptors will receive an e-mail from E*Value when an evaluation is ready to complete. Clicking on the hyper-link will take preceptors directly to the evaluation
   ii. Alternately preceptors can log in to E*Value and use the top menu bar to access evaluations
   iii. Only the preceptor to whom the student is assigned will be able to complete the evaluation

b. IPPE rotations are graded on a pass/fail grading system. IPPE preceptors will fill out a final evaluation of the student at the end of the rotation. Any score less than a score of 2 will result in a failing grade for the student

c. APPE rotations are graded on a letter grade system (A-F), on an accelerated scale (See the APPE section)

d. For APPE rotations, preceptors will complete both a mid-point and final evaluation. The mid-point should be used by both the student and preceptor to clarify expectations, identify student strengths and areas that need improvement, develop a plan to reach the level expected, and/or identify items that the student has yet to be exposed to
   i. Only the final evaluation will be used in determining the student’s grade. For community, institutional and selective rotations, the preceptor’s final evaluation will count as fifty percent (50%) (Conversion scale) of the student’s final grade. The other 50% is from student projects and/or tests administered by the OEE
   ii. The final Medicine and Ambulatory Care rotation evaluation can be used to determine 100% of a student’s grade
3. **Student Evaluation of Site and Preceptor**

After completing each rotation, students will have the opportunity to evaluate IPPE and APPE rotation sites and preceptors. Feedback from students to sites and preceptors can help preceptors make improvements to their rotation. The information provided will also be used by the Office of Experiential Education to continually evaluate our program. The information will be shared with the site/preceptor at the completion of each semester, in an anonymous, aggregate form. The COP and OEE make every attempt to protect student anonymity in the evaluation process, but due to the individual setting of rotations, students are sometimes identifiable.

Evaluations will be completed and available for viewing by preceptors in E*Value.

Example Evaluation forms:

1. [Student Evaluation of Site](#)
2. [IPPE Student Evaluation of Preceptor](#)
3. [APPE Student Evaluation of Preceptor](#)

4. **Student Nomination for Preceptor Recognition**

The Pharmacy Practice department annually recognizes outstanding preceptors in various practice settings. Students have the opportunity to nominate volunteer and adjunct preceptors during rotations by completing a form in E*Value.

Suggested criteria for the awards include the following:

1. The preceptor demonstrated an interest and ability to teach
2. The preceptor was enthusiastic about their practice area and inspired interest in pharmacy practice
3. The preceptor was knowledgeable in their response to questions and their approach to therapy
4. The rotation activities were structured and well organized
5. The preceptor encouraged me to participate in independent problem solving and asked questions that stimulated critical thought