

Experiential Learning and Professionalism (ELP)

H1N1 Contingency Planning

September 9, 2009

Goal:

The goal of the ELP H1N1 Contingency Plan is to reduce health risks to student pharmacists while completing experiential courses and to ensure that experiential educational goals are met.

Background:

ELP courses currently exceed the hours required for licensure as stated by the Maryland Board of Pharmacy. (Specifically the Board requires 1000 hours of ACPE accredited school-supervised training.) In addition, P4 rotations exceed the 40-45 hours per academic credit in that students complete 200 hours over five weeks.

Existing Policy:

Attendance Policy:

Extenuating circumstances may arise that require students to miss rotation time. It is at the preceptor's discretion to determine if the absence is excused or unexcused. Time missed for all unexcused absences must be made up, and repeated unexcused absences will result in an "F" for the rotation (see professionalism criteria). Additionally, time missed for excused absences will also need to be made up if the minimum number of rotation hours cannot be met. Examples of excused absences include:

- ◆ Medical illness of student or family member (The preceptor may request a physician's note for confirmation.)
- ◆ Death of an immediate family member
- ◆ Participation in a professional activity (e.g. attendance at national meetings) which must be approved by the preceptor prior to participation

For students on APPE rotations, attendance at case presentation or ambulatory clinic may also cause the student to be absent from the rotation site. In such situations, the student is expected to still be present at the site to the extent possible, even if it is only for two to three hours. Students must notify preceptors of absences as soon as possible and before the anticipated absence (or, at a minimum, within 2 hours of the time the student was supposed to be onsite). The student should leave the preceptor a voicemail message with the reason for the absence and anticipated date of return.

Recommendations:

- Students will respond to site-specific requirements for H1N1, rather than campus directives, as is the current practice for holiday hours, inclement weather, etc.
- The existing attendance policy will be applicable to most cases.

- Students are expected to comply with site-specific recommendations to prevent infection and limit the spread of disease.
- Preceptors are asked to notify ELP if a student misses 40 hours or more for a full-time P4 rotation.
- Students are allowed to complete between 10 and 20% of rotation requirements off-site. Examples include drug information questions, case presentation preparation, projects, research, etc.
- Case presentations may be conducted via WebEx in situations where UMB limits campus access or when a student is home-bound due to personal or family illness.
- For significant extended absences, ELP personnel, in consultation with the coursemaster(s), will develop a student-specific remedial plan of action to complete course requirements. Such plans may include additional time at the site during off months or the holiday break in order to assure timely progression.
- P1, P2, and P3 students are not likely to be affected to the same degree as P4 students because IPPE rotations are of shorter duration and/or longitudinal. As is the standard procedure, ELP personnel, in consultation with the coursemaster(s), will develop a student-specific plan of action to complete course requirements.
- APPE 455 Longitudinal Ambulatory Clinic (1 credit) already has up to 3 weeks in which a student can miss clinic, because he/she completes 12 out of 15 possible clinic sessions over three consecutive five-week rotation blocks.

Actions:

- The ELP director will communicate the recommendations to students and preceptors.
- All are encouraged to acquire appropriate immunizations and to take precautions as recommended by the Centers for Disease Control and Prevention (CDC) and Immunization Action Coalition (IAC).
- Students and preceptors are encouraged to provide H1N1 education to patients and their communities and, if properly trained, to immunize.

