

1

Disclosure Statement

Jennifer Luciano has no financial relationships with ineligible companies.

2

Learning Objectives

1. Discuss how ACPE standards, the NAPLEX blueprint, and Entrustable Professional Activities (EPAs) guide the development of clinical competence in students, specifically in the context of patient care.
2. Describe the Pharmacist Patient Care Process (PPCP) and its key components.
3. Explain how the PPCP framework is applied in experiential education and clinical rotations.

3

Evolution of Pharmacy Practice



4

Concurrent Evolution of the Pharmacist's Role

"Soda Fountain" era: 1920 - 1949	Customer turned patient era: 1950 - 1979	Pharmaceutical Care era: 1980 - 2009	Current (evolving) era: 2010 - present
<ul style="list-style-type: none"> Compounding and dispensing medication Ethical standards prevent talking to customers about their medication Front-end store sales 	<ul style="list-style-type: none"> Dispensing medications Mix of non-clinical and clinical activities Patient counseling emerges 	<ul style="list-style-type: none"> Wider acceptance of patient care activities outside of dispensing Begin to establish responsibility for aspects of patient health Patient counseling widely accepted and mandated Immunizations 	<ul style="list-style-type: none"> Continued rise in patient care and non-dispensing activities Responsibility and accountability for medication and patient outcomes (recognition as providers of care) Pharmacists Patient Care Process (PPCP) Patient-centered care Team-based care

ACPE: Accreditation Council for Pharmacy Education
AACP: American Association of Colleges of Pharmacy



Courtesy of Kathryn Wheeler

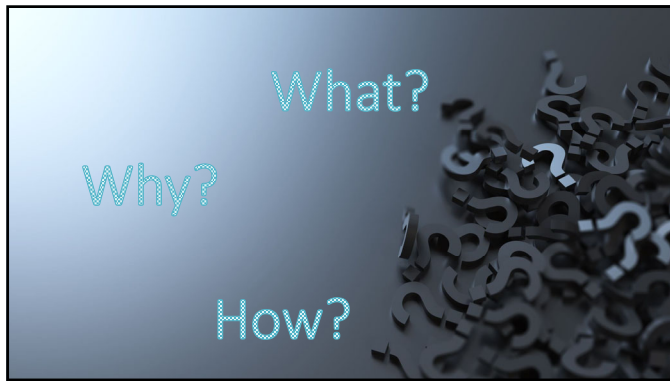
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Current (evolving) era: 2010 - present

- Continued rise in patient care and non-dispensing activities
- Responsibility and accountability for medication and patient outcomes (recognition as providers of care)
- Pharmacists Patient Care Process (PPCP)
- Patient-centered care
- Team-based care

- 2014 Joint Commission establishes Pharmacist Patient Care Process
- 2016 ACPE Standards: require PPCP (standard 10)
Require assessment of 3 competencies: team, APPE, practice readiness
- 2016 AACP approves first EPAs, "practice readiness" (optional) definition
- 2021 New NAPLEX blueprint implemented – greater PPCP emphasis
- 2022 AACP approves new COEPA, moving towards required EPAs, greater PPCP emphasis
- 2025 New NAPLEX blueprint implemented – Even greater PPCP emphasis

6



7

What is the PPCP?

Joint Commission of Pharmacy Practitioners:

- Academy of Managed Care Pharmacy (AMCP)
- Accreditation Council for Pharmacy Education (ACPE)
- American Associate of Colleges of Pharmacy (AACP)
- American College of Apothecaries (ACA)
- American College of Clinical Pharmacy (ACCP)
- American Pharmacists Association (APhA)
- American Society of Consultant Pharmacists (ASCP)
- American Society of Health-System Pharmacists (ASHP)
- National Alliance of State Pharmacy Associations (NASPA)
- National Association of Boards of Pharmacy (NABP)
- National Community Pharmacists Association (NCPA)

PPCP: Pharmacist Patient Care Process

8

Pharmacists Patient Care Process (PPCP)

Pharmacists' Patient Care Process
Pharmacists use a patient-centered approach in collaboration with other providers on the health care team to optimize patient health and medication outcomes.

Using principles of evidence-based practice, pharmacists:

- Collect**
The pharmacist assures the collection of the necessary subjective and objective information about the patient in order to understand the relevant medical/medication history and clinical status of the patient.
- Assess**
The pharmacist assesses the information collected and analyzes the clinical effects of the patient's therapy in the context of the patient's overall health goals in order to identify and prioritize problems and achieve optimal care.
- Plan**
The pharmacist develops an individualized patient-centered care plan, in collaboration with other health care professionals and the patient or caregiver that is evidence-based and cost-effective.
- Implement**
The pharmacist implements the care plan in collaboration with other health care professionals and the patient or caregiver.
- Follow-up: Monitor and Evaluate**
The pharmacist monitors and evaluates the effectiveness of the care plan and modifies the plan in collaboration with other health care professionals and the patient or caregiver as needed.

9

Why it is important:

1. Promote consistency across the profession

2. Provide a framework for delivering patient care in any practice setting

3. Be a contemporary & comprehensive approach to patient-centered care

4. Be applicable to a variety of patient care services delivered by pharmacists

GOALS of the PPCP

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10

PPCP

How can I help my patient?

Collect: What do I know?

Assess: What do I think is going on?

Plan: What can I do to impact the outcome?

Implement: Go do it! Measure impact

Follow-up/Evaluation: How can we do better?

SCIENTIFIC METHOD
PURPOSE <small>State the problem.</small>
RESEARCH <small>Find out about the topic.</small>
HYPOTHESIS <small>Predict the outcome to the problem.</small>
EXPERIMENT <small>Develop a procedure to test the hypothesis.</small>
ANALYSIS <small>Record the results of the experiment.</small>
CONCLUSION <small>Compare the hypothesis to the experiment's conclusion.</small>

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11

ACPE Standards 2025

Standard 2.1.m Entrustable Professional Activities: The program develops and assesses the achievement of professional activities a graduate can perform routinely designed to gain the trust of the healthcare team and the public.

12

Entrustable Professional Activities

Table 2: Revised 13 ENTRUSTABLE PROFESSIONAL ACTIVITIES (EPAs)¹⁻¹⁰

Activity
1. Collect information necessary to identify a patient's medication-related problems and health-related needs.
2. Assess collected information to determine a patient's medication-related problems and health-related needs.
3. Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment. ¹¹⁻¹³
4. Contribute patient-specific medication-related expertise as part of an interprofessional care team.
5. Answer medication-related questions using scientific literature.
6. Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.
7. Fulfill a medication order.
8. Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test. ¹⁴
9. Monitor and evaluate the safety and effectiveness of a care plan.
10. Report adverse drug events and/or medication errors in accordance with site-specific procedures.
11. Deliver medication or health-related education to health professionals or the public. ¹⁵
12. Identify populations at risk for prevalent diseases and preventable adverse medication outcomes. ¹⁶
13. Perform the technical, administrative, and supporting operations of a pharmacy practice site.

EPAs are activities not assessments. EPAs delineate essential tasks of a pharmacist that a PharmD graduate can be entrusted with. EPAs 1-10 are aligned with the Pharmacist Patient Care Process (PPCP) and colored according to the PPCP steps.¹⁷ See Figure 1. EPA 1 aligns with Collect, EPA 2 aligns with Assess, EPA 3 aligns with Plan, EPA 4 aligns with Implement, and EPA 5 aligns with Monitor.¹⁸ Abbreviated words are listed in Table 3 that includes a glossary of terms, definitions, and references.

13



14

New NAPLEX Blueprint beginning May 1, 2025

2021 Content Areas	Approx. Exam Weight
1. Obtain, interpret, or Assess Data, Medical, or Patient Information	18%
2. Identify Drug	14%
3. Develop	35%
4. Perform	14%
5. Compensate	11%
6. Develop or Manage Practice or Medication-Use Systems to Ensure Safety and Quality	7%

NABP® Content Domain Weights

The table below provides the approximate percentages of exam questions associated with each content domain. Percentages represent the approximate number of questions that can be expected on the exam.

Content Domain	Approximate Percentage of Exam Questions
1. Foundational Knowledge	15% (15 questions)
2. Medication Use Process (Assessment and Monitoring)	40% (40 questions)
3. Person-Centered Assessment and Treatment Planning	5% (10 questions)
4. Professional Practice	5% (10 questions)
5. Pharmacy Management and Leadership	5% (10 questions)

PPCP primarily present in Area 1 and Area 3: 53%

PPCP at a minimum involved in Domain 2 and 3: 65%

[NAPLEX-Content-Outline.pdf](#)

15

Level	Description
Observe Only	Learner is permitted to observe only. Even with direct supervision the learner is not entrusted to perform the activity or task.
Direct Supervision	Learner is entrusted to perform the activity or task with direct and proactive supervision. Learner must be observed performing task in order to provide immediate feedback.
Reactive Supervision	Learner is entrusted to perform the activity or task with indirect and reactive supervision. Learner can perform the task with out direct supervision but may require assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of activity or task.
Intermittent Supervision	Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform task. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance.
General Direction	Learner is entrusted to independently decide what activities and tasks need to be performed. Learner entrusted to direct and supervise the activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goal.

Levels of Entrustability

Heimer, Stuart T. et al.

16

Question

Joey is an IPPE student under your supervision this month. He observes as you meet with a patient who has a question about various options to treat psoriasis. You tell the patient you will get back to him about medications covered by his plan, out of pocket costs, the time burden associated with treatment, and potential adverse effects. Joey wants to help. What can Joey do?

- Collect information, asking for help if or when he needs it
- Observe how you collect information but assess independently
- Collect information only under direct and proactive supervision

17

Requirements of Schools of Pharmacy

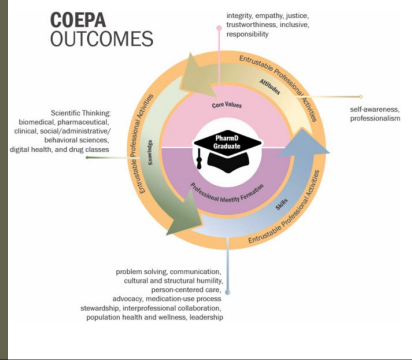
- Students are required to meet practice readiness definitions prior to graduating. Students should meet the expected level of **reactive supervision** on each of the EPAs prior to graduation.
- Schools of pharmacy have varying methods for defining APPE readiness, Team Readiness and Practice readiness.
- Many schools like ours has adopted these EPAs as the point of measuring the student's readiness during rotations. Therefore, they are tied directly to the evaluation criteria.

18

Put all together ...

... get a “Practice Ready” graduate!

Courtesy of Kathryn Wheeler



19



What does all this academic talk mean for preceptors?

20

Remember.....

This isn't new- it's just putting a name to a process that pharmacists have been utilizing for years.

During the didactic curriculum, the PCPP is taught in different ways.

- Therapeutic modules
Case based scenarios asking students to identify a medication related problem and provide a recommendation
- Skills based courses
OTC- gather patient information, assess the situation, determine if a patient is a self-care candidate, and make recommendations.
Ambulatory- Through writing of a SOAP note

21

Question

Phoebe is an APPE student in her first clinical rotation. She aspires to obtain an industry fellowship and Hope to receive the best grade possible on this rotation with the least work. She says, "I don't plan to work in a clinical position, so this is not a priority for me. What is the BEST answer?

- The PPCP is not just applicable to clinical situations. It structures processes for all kinds of projects, not just clinical challenges.
- Most students who aspire to work in industry do not get fellowships, and you need to know the PPCP if you land in an actual pharmacy.
- Say nothing. Allow Phoebe to do minimal work.

22

Collect

The information gathering step.

This is the subjective AND objective information

- ☐ From the patient or caregiver
 - ☐ Utilizing open ended questions to avoid "yes" or "no" answers
- ☐ From the patient's chart
 - ☐ Review of vitals, notes, tests and laboratory results
- ☐ From other sources
 - ☐ Medication reconciliation



23

Collect

Review the information collected by the student

- ☐ Challenge them by asking them questions about the information
- ☐ Ask them to justify information that they gathered and its importance
- ☐ If something is missing, ask the student to go back and collect more

24

Assess

Review the information gathered:

- ☐ Ask the student to review the patient's medications for appropriateness
 - ☐ Indication, dosing, adverse effects, drug interactions, What is the indication for each medication?
- ☐ Factors that impact access to care
- ☐ Cultural, socioeconomic, health literacy, patient goals, barriers to adherence
- ☐ Assess the patient's laboratory values and vitals
 - ☐ Do these indicate anything?
- ☐ What evidence supports their assessment?



WSU ILU XXX3 P&P Process for Pharmacists

25

Assess

- ☐ Prioritize
 - ☐ What's most urgent to tackle and why?
- ☐ Appropriate descriptors for each medication related problem
 - ☐ Controlled/uncontrolled
 - ☐ Acute/chronic
 - ☐ Does the student need to go back and collect more information?

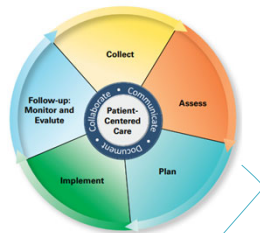


26

Plan

The plan should reflect recommendations from the most recent evidence-based clinical practice guidelines.

- Pharmacists should focus on
- ☐ Optimization of care in a safe, effective, and cost-effective manner.
 - ☐ Address medication-related problems and optimize medication therapy
 - ☐ Set specific, measurable, achievable, realistic, and timed (SMART) goals in the context of the patient's healthcare goals and access to care
 - ☐ Involve patients to engage in education, empowerment, and self-management
 - ☐ Support non-pharmacologic interventions as appropriate



WSU ILU XXX3 P&P Process for Pharmacists

27

Plan

- ☐ Ensure that students are applying evidence-based medicine practices
 - ☐ Have the identified the most appropriate guideline? Are there other guidelines that the student should look at and compare?
 - ☐ Do they need to look at primary literature?

- ☐ Challenge the student to look at all the treatment options and determine pros and cons for each
- ☐ What other factors may come into play selecting a medication?
- ☐ What should they monitor for?
- ☐ Challenge the student to go beyond what may be indicated as first line or what a physician may have suggested.

WSU ILU XXX3 P&P Process for Pharmacists

28

Plan- Smart Goal reminders

When creating an action plan for patients, pharmacists should aim to set goals that are SMART.

- Specific instructions provide other clinicians with accurate information about the patient.
- Measurable outcomes provide clinicians the ability to evaluate the patient's progress and whether the plan requires adjustments
- Achievable and realistic goals
- A timeline for the plan ensures healthcare providers routinely follow up with their patient



29

Implement

- "Go do it step"
- ☐ Educate that patient or caregiver
 - ☐ Provide counseling as appropriate

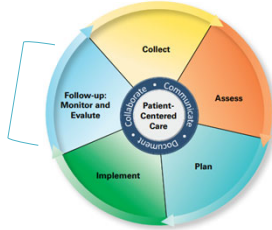


30

Follow-up: Monitor and Evaluate

This should be noted in a SOAP note, but the real work comes when the patient returns

- ☐ How is the plan working?
- ☐ Is there new information to collect?
- ☐ Do we need to make any modifications to the plan?



31

Question

Rachel is her last APPE rotation before graduation. YAY! She works up a patient who has a cardiac issue. She collects much appropriate information, and her assessment is almost perfect. She makes one statement that seems "off" to you. She recommends using a medication that is no longer first-line treatment. What is the MOST LIKELY cause for her omission?

- A. She relied on only one guideline for evidence
- B. She collects too much information and is confused
- C. She is hyper-focused on cost, not effectiveness

32

Goal

PPCP creates a structured process for students to apply skills of patient to patient

Taking the time to go through this process and question students creates and emphasizes the critical thinking process.

33

Tips for Successful Precepting

- Do I need to assess this every time?
- No- it can be formal like a soap note but this also happens informally during regular conversations.
- Do not always need to be complex
- Don't forget to ask WHY!
- Model for the student how you would work through a patient centered care plan
- It's okay to challenge their thought process
- Encourage interprofessional collaboration

34

Thank you!

35



Questions

36

References

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