



Lloyd L. Gregory School of Pharmacy PHR 4512 Pharmacy Missions

*“All authority in heaven and on earth has been given to me. Therefore **go** and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit, and teaching them to obey everything I have commanded you. And surely I will be with you always, to the very end of the age.” Matthew 28:18-20*

Preceptor Name:

Contact Information: Office Number
Office Phone Number:
Email:

Course Description:

This elective rotation exposes students to pharmacy in an international or domestic missions-related setting. This rotation is designed to allow the student to participate in the activities associated with a mission hospital, clinic or other health related outreach, serving primarily in a pharmacy role, while using it as a platform for Christian evangelism. The student will be expected to serve in a pharmacy related setting, while having opportunity to participate in evangelistic outreach areas, and actively showing God's love to the patients within that pharmacy setting. The student will be expected to develop the skills necessary to meet the spiritual as well as physical needs of their patients in order to provide complete pharmaceutical care.

Prerequisites:

Prior approval from Pharmacy Missions faculty. An interview for the selection process may be utilized.

Textbook(s) and Other Learning Materials:

1. Stevens D. *Jesus MD*. Grand Rapids, MI: Zondervan 1 ed; 2001; or similar book addressing either medical missions experiences or appropriate to the area being visited.
2. Drug Information Handbook by Lexi-Comp.
3. The Holy Bible
4. Experiential Policies and Procedures Manual.
5. Culturally appropriate evangelistic material(s).
6. Taketomo. Pediatric drug information by Lexi-Comp.
7. Alternative medicine resource (Natural Medicine Comprehensive Database or Lexi-Comp Natural Product).

Learning Outcomes:

Upon completion of the rotation, the student should be able to:

1. Discuss how to determine prevalent diseases in various areas of the world.
2. Identify common diseases in the area visited and provide appropriate treatment recommendations.
3. Describe common home remedies and/or complementary alternative medications (CAM) used in the area visited.
4. Communicate effectively and professionally with the patients, staff, other care professionals, preceptor, and team members.

5. Describe the steps involved in planning a medical missions trip, including the importance of team dynamics.
6. Provide effective pharmaceutical care to patients within a cross-cultural setting as appropriate.
7. Describe the daily workings of a pharmacy setting in the context of the missions field experience.
8. Develop an understanding and appreciation for healthcare within another culture and/or language as appropriate.
9. Develop an evangelistic tool to use in the pharmacy as a platform for evangelism.
10. Discuss how the missions experience has influenced the student's spiritual, personal and professional life.
11. Discuss the life a medical missionary and how he/she used the platform of medicine to promote physical and spiritual well-being.

Measures of Outcomes:

Learning outcomes from this rotation are measured via completion of one team building activity, one formulary list for medications to be used on the missions field, one location/demographic, location/therapeutic, or location/alternative medicine presentation on the location of interest, one evangelistic tool, at least one devotional on the mission field, daily journal entries, one reflective essay, one patient case presentation, one completed manuscript about the missions experience, and one informal book discussion about medical missions.

Requirements of the Rotation:

Students are expected and required to:

1. Attend all required activities
2. Review experiential policies and procedures manual. Students are expected to abide by policies and procedures as outlined in this manual.
3. Maintain patient confidentiality – Failure to do so **will result in failure of the rotation.** Though HIPAA regulations do not exist outside of US borders, the student is expected to uphold the regulations as though he/she was practicing in the US (as applicable).
4. Implement one team building activity that was developed by the student.
5. Develop a formulary for medications to be used on the missions field.
6. Develop a working knowledge of the local culture of the people in which they will be serving.
7. Prepare an evangelistic tool that may be used within the context of the pharmacy environment which is culturally appropriate.
8. Present a location/demographic, location/therapeutics, and/or location/alternative medicine presentation as determined by the preceptor.
9. Lead *at least* one devotional while on the missions field.
10. Maintain a journal throughout the entire rotation which discusses items such as daily activities, spiritual and professional growth, and emotions associated with missions activities.
11. Write a reflective essay after returning from the trip about on spiritual and professional growth while on the missions field.
12. Present a case presentation as determined by the preceptor.
13. Participate in discussions (i.e. Book Club) and team activities.
14. Complete one article collaboratively with other students on the Pharmacy Missions APPE rotation to be submitted to a journal as specified by the preceptor.
15. Write a reflective essay about a book on medical missions, such as Jesus MD or Miracle at Tenwek, or a missions book appropriate to the area being visited.
16. Explain the Biblical basis for missions when asked (The Great Commission).
17. Develop a Powerpoint presentation about the trip to use for Pharmacy Chapel in the fall.
18. Develop a gift for the Gregory family.

Evaluation:

There will be two formal evaluations during the rotation: a midterm evaluation at the end of the second week and a final evaluation on the last day of the rotation. Additional feedback may be given either verbally or in writing as deemed appropriate by the preceptor and/or student.

The SUCCESS grading tool will be used for preceptor evaluation of the student. See below chart for competencies along with weights for this rotation.

All competencies will be evaluated using the following scale:

E = Excellent command of competency. Always demonstrates knowledge and application of skill set; with minimal guidance. 90% and above

C = Competency. Usually demonstrates knowledge and application of skill set; needing moderate guidance. 70-89.5%

D = Deficiency. More often than not, unable to demonstrate knowledge and application of skill set; needing constant guidance. < 70%

Competency	Description	Rotation Activity	Course Weight
#1	Compare drug distribution systems for various practice settings A. Ensure correct use of medications B. Clarify prescription order C. Label and perform final check D. Document adverse drug reactions E. Outpatient prescription processing F. Medication counseling G. Ordering, purchasing, and inventory H. Storage and disposal of medications		__0__%
#2	Disease state knowledge A. Identify and synthesize patient problems B. Prevent medication related problems C. Delivery of pharmaceutical care within clinical practice guidelines D. Identify target population in disease prevention & detection E. Detect disease in target population through screening and other strategies	Location presentation Case presentation Missions trip	__5__%
#3	Drug Therapy Evaluation and Development A. Synthesize pt history, lab and PE to identify problems B. Conduct renal dosing adjustments and compare methods C. Conduct therapeutic drug monitoring and compare methods D. Conduct IV to PO switch and compare methods E. Review treatment options with complementary and alternative medicines F. Conduct antibiotic utilization review and compare methods G. Clear, complete, and precise documentation in medical record	Missions trip Case presentation	__15__%
#4	Monitor for Endpoints A. Therapeutic endpoints for patient (cure, maintenance, prophylaxis) B. Monitoring plan for specific patient C. Rationale for monitoring plan with reliable documentation and referencing D. Evaluate and alter plan as patient needs change E. Drug therapy changes based on progress toward endpoint	Missions trip Case presentation	__5__%

Competency	Description	Rotation Activity	Course Weight
#5	Patient Case Presentations A. Prepared in timely fashion B. Follows patients and maintains information C. Verbally presents data in organized fashion D. SOAP documentation E. Appropriate verbal and nonverbal mannerism in presentations F. Proper tone and projection G. Ability to answer questions logically and accurately	Case presentation	__10__%
#6	Patient Interviews A. Proper introduction* B. Optimize environment C. Purpose and structure of interview D. Verify patient* E. Reason for interview F. Proper vocabulary, cultural sensitivity, and feedback to patient* G. Organized delivery H. Answers patient questions appropriate and correct*	Missions trip	__5__%
#7	Patient Education and Counseling A. Speaks clearly with volume, tone, rate, and enunciation* B. Terminology specific to patient C. Non-verbal communication D. Accurate and pertinent information with detail* E. Information for patient's social and financial needs F. Feedback to pt regarding questions and concerns G. Determines patient level of understanding H. Demonstrate empathy I. Concern for pt well-being J. Retrieve and evaluate new information to benefit the patient	Missions trip	__5__%
#8	Drug Information A. Utilize best resource for drug related request B. Compare resources used in other countries C. Use other resource centers D. Generate answers in timely and systematic approach E. Use primary, secondary, and tertiary references	Location presentation Formulary Missions trip	__5__%
#9	Formal Oral Presentations A. Content correct presentation based on assignment B. Communicated correct information that is useable by audience C. Verbal and non-verbal communication skills D. Audiovisual aids and technology that enhance delivery and understanding E. Appropriate use of time F. Generated feedback to the audience G. Demonstrates sufficient knowledge base for topic H. Synthesizes above to present and provide deeper understanding to the audience	Location presentation Team building activity Case presentation Devotional	__10__%
#10	Formal Written Presentations A. Writing is concise and relevant B. Topic is organized C. Presentation and format adheres to guidelines D. Personal Reflection is insightful	Journal Reflective essay Article	__10__%

Competency	Description	Rotation Activity	Course Weight
#11	Professional Team Interaction A. Dress B. Sensitivity to patient and family** C. Respect for other Health Care Professionals (HCPs) D. Interpersonal skills in team interactions E. Active participant F. Assist team members in meeting patient needs G. Resolve disagreements with civility H. Provides accurate, organized, and pertinent information relevant to the team's current or future tasks* I. Follow-up of questions J. Confidence in interaction with HCPs K. Retrieve new information for the benefit to other HCPs	All activities	_10_%
#12	Professionalism/ Motivation A. ID and respect others B. Pharmacist code of ethics* C. Defends ethical decisions through analysis of ethical/moral principles D. Sensitivity to confidentiality* E. Attendance* F. Punctual G. Completed assignment on time H. Accommodates to change in work flow I. Initiate additional learning opportunities J. Synthesize new information in order to decide a course of action	All activities	_10_%
#13	Demonstrate Sensitivity and Tolerance for Culturally Sensitive Issues and Manage Them Appropriately A. Assess the religious and socio-economic value system that affect need and adherence B. Identify communication tools to accommodate culturally diverse populations C. ID cultural differences that affect professional interactions D. ID alternative measures to improve verbal and non-verbal interactions between patient and pharmacist	All activities	_10_%

*Some skills are classified as "**critical skills**," and students must show competency in these. Despite achieving competency in all other skills for that main competency area, a student can potentially fail a competency area if they do not achieve competency in the critical skill. Such skills are ones that would produce harm to a patient or to the practice site were the student to perform at the level defined as "deficiency." These critical skills are designated on the complete list of competencies and skills.

Attendance:

Attendance is a vital part of the practicum and is mandatory. Failure to participate in the assigned number of hours (i.e. a minimum of 160 hours) will result in an "Incomplete" grade for the clerkship. Due to the nature of this clerkship, failure to attend the missions trip in its entirety *may* result in failure of this clerkship. Each excused absence will be made up at the discretion of the preceptor. However, make-up assignments and dates will be at the discretion of the preceptor and may include time beyond the assigned month. Unexcused absences and tardiness may result in loss of one letter grade or failure.

Dress Code:

Unless otherwise stated, students are required to follow the dress code set forth in the Experiential Policies and Procedures Manual. Additionally, a clean, white lab coat with a name badge should be worn at all times. **While on the mission field**, students are expected to abide by the dress code set forth by the mission organization *or* Palm Beach Atlantic University, whichever is most strict. Failure to abide by the dress code may result in a one letter grade reduction. Repeated offenses (i.e., > 1 offenses) may result in a failure of the rotation.

Professionalism:

Professionalism is mandatory at all times. At a *minimum* this includes maintaining patient confidentiality; abiding by the dress code; treating mission team members, preceptor, missionaries, and locals with

respect and courtesy; and following the proper chain of command. Refer to Experiential Policies and Procedures Manual for further detail.

Academic Dishonesty:

The Palm Beach Atlantic University academic dishonesty policy will be strictly enforced within the School of Pharmacy. The policy reads as follows:

Academic dishonesty is the intentional misrepresentation of all or part of one's work to deceive for personal gain, or assisting another to do the same. Academic dishonesty includes, but is not limited to, cheating, plagiarism, fabrication, and submission of work all or any part of which was developed in response to the assignment of another professor or was created by a person other than the student submitting the assignment. The University community views academic dishonesty as a serious academic offense and a failure of character and personal integrity. Due to the academic nature of the offense, Faculty, Academic Deans, and Provost are responsible for determining an appropriate response within the following guidelines:

- a. *The faculty member is responsible for determining that a student has committed academic dishonesty and for communicating in writing with supporting documentation any such incidents with the Dean of his or her school. The Dean will notify the Office of Student Accountability who will record the offense in the student's file. On first offense, the student **must** receive a zero grade for the assignment, and **may**, at the discretion of the faculty member or the policy of any of the Schools of the University, receive a failing grade for the particular course.*
- b. *Upon any further offense during the student's academic career at Palm Beach Atlantic University, the student **will** be placed on Academic Suspension and **may** be expelled. Decisions on expulsions will be made in consultation with the Dean and Office of Student Accountability, in accordance with the particular school's policy.*
- c. *Students who wish to may appeal the decision regarding Academic Dishonesty may file an academic complaint and the matter will be treated within the established Grievance Policy.*

Plagiarism is using, stating, offering, or reporting as one's own, an idea, expression, or product of another without the proper credit to its source. A direct quote should be cited and placed in quotation marks. However, the student should also know that if the ideas of others are used, these must be referenced or he/she will be guilty of an act of plagiarism.

For example...

For a direct quote: "Ask not what your country can do for you, ask what you can do for your country."¹

For a non-direct quote: You should consider how you can aid your country; rather than using your country.¹

It is the policy of the School that acts of plagiarism or any other acts of academic dishonesty, on any assignment, quiz, or examination, will minimally result in a grade of zero (0) on the assignment, quiz, or examination. The failing grade and incident of cheating will be reported to the Associate Dean.

Acts of academic dishonesty within the School of Pharmacy may result in consequences beyond those described in the policy above. A single flagrant act of academic dishonesty committed by a student in the School of Pharmacy may result in Academic Suspension or dismissal from the School of Pharmacy. Such action shall be determined according to policies and procedures set forth in the school's APS Code of Student Conduct.

Students are subject to the policies and procedures set forth by the University, the School of Pharmacy, and the Experiential Policies and Procedure Manual.

PHA 4512 – Pharmacy Missions Team Development Activity Evaluation Form

Criteria	Depth of Thought	Creativity of Activity
Excellent (9-10)	Team building activity reflects considerable insight. The activity is easily implemented and is designed to enhance team dynamics. Overall impression is deep and thoughtful.	Creativity is demonstrated from development of the activity. The activity promotes team building. Concepts are easy to follow. Organization is present and appropriate. The idea was not merely adapted from a previous activity.
Acceptable (7-8)	The team building activity reflects some insight. The activity is somewhat practical to implement in a group setting and mostly involves enhancing team dynamics. Overall impression is light to medium thought.	Creativity is present with portions of the activity. The activity mostly gets the idea of building team unity across. Ideas are good and concepts can be followed. Organization is basically present, but it could be better.
Unacceptable (0-6)	The team building activity reflects little to no insight. The activity is not something practical to implement in a group setting and/or does not enhance team dynamics. Overall impression of tool is shallow and “thrown together”.	There is no creativity present with this activity. The idea of team building is not clear and/or present. Ideas could be better. Concepts are not easily followed. Organization is poor. The idea was adapted from a previously developed tool.

Subtotals _____

Student Name: _____

Evaluator: _____

Grand Total: _____/20

Outpatient Case Presentation Evaluation Form
APE _____



Student: _____

Evaluator: _____

Date: _____

Score	Assessment
0	<ul style="list-style-type: none"> ▪ Not able to appropriately and effectively apply information ▪ Substantial/extensive gaps in core knowledge present in either verbal/ written format ▪ Unable to assess, solve, and/or answer basic/ fundamental issues and/or problems ▪ Unable or inconsistently produces a product of acceptable quality despite multiple preceptor attempts at redirection and guidance
1	<ul style="list-style-type: none"> ▪ Inconsistently able to appropriately and effectively apply information ▪ Significant gaps in core knowledge present in either verbal/ written format ▪ Inconsistently able to assess, solve, and/or answer basic/ fundamental issues and/or problems ▪ Inconsistently produces a product of acceptable quality despite preceptor attempts at redirection and guidance
2	<ul style="list-style-type: none"> ▪ Usually able to appropriately apply basic information ▪ A few negligible gaps in knowledge present in either verbal/ written format ▪ Can assess, solve, and answer basic issues and problems ▪ Consistently produces an acceptable product with comprehensive preceptor guidance and multiple redirections
3	<ul style="list-style-type: none"> ▪ Consistently able to appropriately and effectively apply basic information ▪ No gaps in knowledge present in either verbal/written format ▪ Can assess, solve, and answer moderate issues and problems ▪ Consistently produces a good quality product with usual, typical, and expected preceptor guidance and redirection
4	<ul style="list-style-type: none"> ▪ Consistently able to appropriately and effectively apply information ▪ No gaps in knowledge present in either verbal/written format ▪ Can assess, solve, and answer higher issues and problems ▪ Consistently produces an excellent and accomplished product with minor preceptor guidance and redirection

Criteria	Assessment	x % Wt	Score
1. Introduction of Patient Case <ul style="list-style-type: none"> • Patient ID'ed - age, sex, race, • Chief complaint stated correctly • History of present illness • PMH- diseases, hospitalizations, or surgeries pertinent to the current illness. Date of dx if pertinent included • FH- Provided • SH – Included • Allergies • ROS- stated what the patient reported (if documented) • Vitals- Wt, Ht, BMI, HR, BP, Temp, RR listed, pain scale • Medication history prior to initial visit given • Pertinent physical exam (PE) per disease state 	0 1 2 3 4	x 0.20	
Comments:			

<p>2. Discussion of the disease state/clinical issue</p> <ul style="list-style-type: none"> Clearly defined disease state using appropriate terms, problem list in order of importance Stated etiology and other possible causes of disease Demonstrates <u>thorough</u> understanding of pathophysiology Provides clinical manifestations of disease discussed; pertinent laboratory markers Discusses diagnosis and differential diagnosis Provides appropriate Non-pharm & pharm. tx options Addresses special population considerations Mentions prognosis of disease state Follow-up and suggested clinical monitoring/ patient education 	<p>0 1 2 3 4</p>	<p>x 0.20</p>	
<p>Comments:</p>			
<p>3. Comparative discussion with integration of primary literature</p> <ul style="list-style-type: none"> Discuss, critique, and compare your patient's presentation and therapy to the "classic" or "textbook" presentation and therapy discussed in section II. Comment on the appropriateness of your patient's therapy and what should have or might have been done or not done differently. Discusses rationale for drug discontinuation During this segment of the presentation include data from <u>one</u> primary article that relate specifically to the patient case. The article should focus on the same specific drug therapy focus topic. The article should be clinical trials. Use the following format: <ul style="list-style-type: none"> Citation (AMA format) Objectives Methods Results Brief critique Author's conclusions Your conclusion/clinical implications-apply this to the patient. The article should be limited or summarized in no more than 1-2 slides. These should be "MINI" journal clubs summarizing pertinent primary literature 	<p>0 1 2 3 4</p>	<p>x 0.25</p>	
<p>Comments:</p>			
<p>4. Conclusion/Spirituality</p> <ul style="list-style-type: none"> Brings it all back together and summarizes patient case How did being on the missions field effect your decision? Cost considerations/Limitations to medications on the medical missions field How did this experience impact you professionally and spiritually? Include pictures to share your experience 	<p>0 1 2 3 4</p>	<p>x 0.05</p>	
<p>Comments:</p>			

<p>5. Presentation and Communication Skills</p> <ul style="list-style-type: none"> • Presentation length is appropriate (30-35 min) • Demonstrates direct eye contact • Proper vocal tone and rate • Absence of distractions such as “ums”, “you know”, “basically” • Absence of non-verbal movements that are distracting • Uses professional terminology • Well prepared, handout not read • Presented information in a logical sequence • Clearly explains figures, tables, charts, etc • Dressed appropriately 	<p>0 1 2 3 4</p>	<p>x 0.15</p>	
<p>Comments:</p>			
<p>6. Ability to Answer Questions</p> <ul style="list-style-type: none"> • Answers are logical • Answers are accurate • The student can think on his/her feet. May theorize if unsure of answer, but indicates such 	<p>0 1 2 3 4</p>	<p>x 0.10</p>	
<p>Comments:</p>			
<p>7. Handout</p> <ul style="list-style-type: none"> • Enhances the impact of presentation • Demonstrates professional quality and appearance • Free of grammatical, spelling, and punctuation errors • References include at least 3 primary literature resources and are relevant • Proper citation format (AMA Manual of Style) 	<p>0 1 2 3 4</p>	<p>x 0.05</p>	
<p>Comments:</p>			

Total=

4.0 =100%	3.2 =85%	2.4 = 76%	1.6 =64%	0.7 =23%
3.9 =98%	3.1 =84%	2.3 = 75%	1.5 =62%	0.6 =18%
3.8 =96%	3.0 =83%	2.2 = 74%	1.4 =60%	0.5 =15%
3.7 =92%	2.9 =82%	2.1 = 73%	1.3 =58%	0.3 =9%
3.6 =90%	2.8 =81%	2.0 = 72%	1.2 =48%	0.2 =6%
3.5 =89%	2.7 =80%	1.9 = 70%	1.1 =43%	0.0 =0%
3.4 =87%	2.6 =78%	1.8 = 68%	1.0 =38%	
3.3 =86%	2.5 =77%	1.7 = 66%	0.8 =28%	

Percentage Grade: _____

90-100	Excellent
89-70	Competent
≤ 69	Deficient

Success Correlation: _____ (see competencies 2A-F, 3A-F, 4A-F, 5C, 5E-G, 8A-C, 9A-I, 10A-D, 11A, 11G, and 12G)

**PHA 4512 Pharmacy Missions Rotation
Formal Location and Therapeutics Presentation Evaluation Form**

1. Performance (16 pts, 2 pts each) _____ pts
 - A. Time (10 min per student)
 - B. Eye contact
 - C. Vocal tone
 - D. Proficiency in public speaking (little to no "ums", "you know", "basically")
 - E. Non-verbal communication (no distracting mannerisms)
 - F. Handout not read
 - G. Visual aids (ease of use, including charts and tables read clearly)
 - H. Dress (professional with neat, white lab coat & name badge)

2. Discussion (40 pts, 2 pts each unless otherwise specified) _____ pts
 - A. Objectives
 - B. Location – location, population size, picture of flag, other local/state/national symbols
 - C. Location – predominant religion and economy (i.e. industrial, technological, farming, etc.)
 - D. Location – common diseases, death rates, birth rates (4 pts)
 - E. Location – Vaccination/preventives necessary (i.e. malaria, Hepatitis A, yellow fever, etc.)
 - F. Disease – Pathophysiology
 - G. Disease – Diagnosis
 - H. Disease – Pertinent guidelines
 - I. Disease – Goals of therapy
 - J. Disease – Non-pharmacological therapy
 - K. Disease – Pharmacotherapy- MOA, use, side effects, CI, DI, dosing, monitoring parameters (14 pts, 2 pts each)
 - L. Cost considerations – How do we obtain the meds?
 - M. Conclusion(s) and synopsis

3. Handout (10 pts, 2 pts each) _____ pts
 - A. Formatting
 - B. Grammar, spelling, and punctuation
 - C. References provided
 - D. Proper citation format (AMA Manual of Style)
 - E. References relevant and current

4. Questions (12 pts, 4 pts each) _____ pts
 - A. Answered logically
 - B. Answered accurately
 - C. Answered clearly

Presenter: _____

Evaluator _____

Total Points _____ / 78 pts

PHA 4512 – Evangelism Tool Evaluation Form

Criteria	Depth of Thought	Creativity of Activity	Faith Integration
Excellent (9-10)	Evangelism tool reflects considerable insight. The tool is easily implemented in a pharmacy setting and is adapted to the language/culture of the visiting country. Overall impression is deep and thoughtful.	Creativity is demonstrated from development of the evangelism tool. Concepts are easy to follow. Organization is present and appropriate. The idea was not merely adapted from a previous evangelism tool.	The tool allows for spiritual aspects to be disseminated. The tool is consistently linked to Biblical concepts.
Acceptable (7-8)	The evangelism tool reflects some insight. The tool is somewhat practical to implement in a pharmacy setting and is mostly adapted to the language/culture of the visiting country. Overall impression is light to medium thought.	Creativity is present with portions of the tool. Ideas are good and concepts can be followed. Organization is basically present, but could it could be better.	The activity mostly promotes dissemination of spiritual aspects. The tool is mostly linked to Biblical concepts.
Unacceptable (0-6)	The evangelism tool reflects little to no insight. The tool is not something practical to implement in a pharmacy setting and/or does not adapt to the language/culture of the visiting country. Overall impression of tool is shallow and “thrown together”.	There is no creativity present with this tool. Ideas could be better. Concepts are not easily followed. Organization is poor. The idea was adapted from a previously developed tool.	The idea of faith and spirituality are not clear and/or present. The tool is not clearly linked to Biblical concepts.

Subtotals _____

Student Name: _____

Evaluator: _____

Grand Total: _____/30

PHA 4512 – Pharmacy Missions Reflective Essay Evaluation

Criteria	Depth of Thought	Quality of Entries	Integration of Faith	Grammar and Punctuation
Excellent (9-10)	Essay reflects considerable insight. In-depth descriptions of personal, professional and spiritual growth are included. Overall impression is deep and thoughtful.	Excellence is clear for the essay as a whole. Entry provokes thought and consideration in the reader. Word choices were superb. Concepts are easy to follow. Organization is present and appropriate.	Essay includes a discussion of scripture, missions experiences related to faith, prayer requests, and/or prayers and clearly establishes a connection between the author and his/her faith.	Sentence structure, spelling, and punctuation are appropriate, with only 1-2 minor errors.
Acceptable (7-8)	Some insight is present, but the essay could clearly have gone deeper into the topic(s). Some descriptions of personal, professional, and spiritual growth are expressed. Overall impression is light to medium thought.	Moments of excellence are present in the essay as a whole; however, it provokes little to no thought or consideration in the reader. Word choices are good. Concepts can be followed. Organization is basically present, but could it could be better.	Essay includes some discussions of scripture, missions experiences related to faith, prayer requests, and/or prayers; however, the discussions are not clear and evident. Integration of the concepts is a little fuzzy, but some insight is present.	Some major errors in sentence structure, spelling and/or punctuation are noticeable, but such errors are not excessive.
Unacceptable (0-6)	Essay has little to no insight present and few, if any descriptions of personal, professional and spiritual growth are made. Overall impression of essay is shallow.	Few, if any, moments of excellence are present in the essay as a whole. It provokes no thought or consideration in the reader. Word choices could be better. Concepts are not easily followed. Organization is poor.	Essay fails to include discussions of scriptures, missions experiences related to faith, prayer requests, and/or prayers; Little to no integration or insight is present.	Numerous errors in sentence structure, spelling, and/or punctuation are noticeable and significantly detract from the quality of the essay.

Subtotals _____

Student Name: _____

Grand Total: _____/40

Evaluator: _____

PHA 4512 – Article Evaluation Form

Criteria	Depth of Thought	Quality of Article	Integration of Faith	Grammar and Punctuation
Excellent (9-10)	Article reflects considerable insight. In depth descriptions of missions activities, outings, quotes from team members, etc. are included. Overall impression is deep and thoughtful.	Excellence is clear for the article as a whole. The article provokes thought and consideration in the reader. Word choices were superb. Concepts are easy to follow. Organization is present and appropriate.	The article includes a discussion of scripture and missions experiences related to faith clearly establishes a connection between the authors and his/her faith(s).	Sentence structure, spelling, and punctuation are appropriate, with only 1-2 minor errors.
Acceptable (7-8)	Some insight in article is present, but the article could clearly have gone deeper into the topic(s). Some descriptions of missions activities, outings, quotes from team members, etc. are included. Overall impression is light to medium thought.	Moments of excellence are present in the article as a whole; however, it provokes little to no thought or consideration in the reader. Word choices are good. Concepts can be followed. Organization is basically present, but it could be better.	The article includes some discussions of scripture and missions experiences related to faith; however, the discussions are not clear and evident. Integration of the concepts is a little fuzzy, but some insight is present.	Some major errors in sentence structure, spelling and/or punctuation are noticeable, but such errors are not excessive.
Unacceptable (0-6)	Article has little to no insight present and few, if any descriptions of missions activities, outings, quotes from team members, etc. are made. Overall impression of essay is shallow.	Few, if any, moments of excellence are present in the article as a whole. It provokes no thought or consideration in the reader. Word choices could be better. Concepts are not easily followed. Organization is poor.	The article fails to include discussions of scriptures and missions experiences related to faith; Little to no integration or insight is present.	Numerous errors in sentence structure, spelling, and/or punctuation are noticeable and significantly detract from the quality of the essay.

Subtotals _____

Student Name: _____

Grand Total: _____/40

Evaluator: _____