PGY2 Ambulatory Care Pharmacy Residency UPMC Presbyterian Shadyside

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Purpose Statement

PGY2 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D.) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists in specialized areas of practice. PGY2 residencies provide residents with opportunities to function independently as practitioners by conceptualizing and integrating accumulated experience and knowledge and incorporating both into the provision of patient care or other advanced practice settings. Residents who successfully complete an accredited PGY2 pharmacy residency are prepared for advanced patient care, academic, or other specialized positions, along with board certification, if available.

Program Description

The PGY2 Ambulatory Care Pharmacy Residency Program at UPMC Presbyterian Shadyside develops independent ambulatory care pharmacists that are leaders in collaborative practice models with physicians and interprofessional teams. Program graduates will be well prepared to manage the diverse medication and health related needs of patients in the ambulatory setting; be highly skilled to design and deliver educational programs to students and practicing health care professionals; and be prepared to perform practice-based research. All program graduates will be competitive in obtaining a position within an ambulatory clinic, institutional-based physician practice, or community-based physician's office, as well as clinical faculty position at the level of assistant professor at school of pharmacy or medicine and obtain board certification. The program provides residents with learning experiences in a variety of practice settings. This provides the resident ability to develop patient care and program management skills within different practice models, including specialty-focused and general medicine practices.

Program Structure Summary

The PGY2 Ambulatory Care Program provides a variety of primary care and specialty clinics at UPMC Presbyterian and Shadyside hospitals. The block rotations are 8 weeks in length. Primary care clinics include both family medicine and internal medicine and required specialty clinics include cardiology and geriatrics. Two longitudinal rotations, each 6 months in length gives a longer-term immersion into a family medicine and cardiology clinic. In addition to patient care activities, residents will conduct a research/quality improvement project with participation in the Resident Research Series and experience a variety of teaching experiences. Residents may also participate in the Teaching Mastery Program.

The program also collaborates with the other Presbyterian/Shadyside based Ambulatory Care Programs for shared experiences and discussion sessions to foster resident and preceptor collaboration.

ASHP Residency Goals and Objectives

The ASHP Competency areas and Goals for this program are listed below. This link to the full document which outlines the objectives assessed for each area.

https://www.ashp.org/-/media/assets/professional-development/residencies/docs/pgy2-ambulatory-care-residency-competency-areas-goals-objectives.ashx?la=en

Competency Area R1: Patient Care

Goal R1.1: Provide comprehensive medication management to ambulatory care patients following a consistent patient care process.

Goal R1.2: Design and/or deliver programs that contribute to public health efforts or population management.

Competency Area R2: Advancing Practice and Improving Patient Care

Goal R2.1: Manage the development or revision, and implementation, of proposals related to the ambulatory care setting.

Goal R2.2: Demonstrate ability to conduct a research project.

Competency Area R3: Leadership and Management

Goal R3.1: Demonstrate leadership skills.

Goal R3.2: Demonstrate management skills in the provision of care for ambulatory care patients.

Goal R3.3.: Manage the operation of an ambulatory care pharmacy service.

Competency Area R4: Teaching, Education, and Dissemination of Knowledge

Goal R4.1: Demonstrate excellence in providing effective medication and practice-related education.

Goal R4.2: Effectively employ appropriate preceptor roles when engaged in teaching students, pharmacy technicians, or fellow health care professionals in ambulatory care.

Competency Area E6: Continuity of Care

Goal R6.1: Ensure continuity of care during ambulatory care patient transitions between care settings.

Professional Development Experiences

- 1. Pharmacotherapy Updates: Lecture Series & Continuing Education (1 presentation)
- 2. Research Project and participate in the Residency Research Series
- 3. Teaching experiences: Teaching Mastery Certificate Program OR meeting minimum teaching requirements outlined below.
- 4. Professional Development Discussion Series

<u>Learning Experiences PGY2 Ambulatory Care</u>
Orientation first 4 weeks to institution and pharmacy policy and procedures; program structure evaluation and expectations; clinical and operations practice; and teaching and research programs.

Primary Care Required	Shadyside Family Health Center: 8-week block
	Shea Medical Center: 8-week block
	Matilda Theiss Family Health Center:
	Longitudinal 1 day per week(Fridays) – 6 months
Specialty Required	Heart and Vascular Institute: 8-week block
	SeniorCare Shadyside and Benedum Geriatrics clinics: 8 week block
	Heart and Vascular Institute:
	Longitudinal – 6 months 1 day per week (3 m Heart Failure Discharge/3 mo HTN/Lipid)
Pharmacy	11 Month Longitudinal
Operations	EPITOME II education and discharge counseling Every 3 rd weekend
Teaching and	Teaching Experiences: 1. Serve as primary preceptor for one APPE student
Precepting	2. Simulation Evaluation - 2 sessions
	3. Small Group Facilitation - 2 sessions
	Large Group Instruction (excludes PULSE)
	1-30 min session to pharmacists/pharmacy staff
	2-30 min session to non-pharmacy health care providers/ learner
	Residents may elect to participate in the PittPharmacy Mastery of Teaching Certificate Program (highly encouraged if no program as PGY1)
Research	PittPharmacy Research Series: Research seminars, small group mentoring,
	project development including protocol, project execution including data analysis. Deliverables: Manuscript and presentation at Resident Research Day.
Professional	11 month Longitudinal
Development	Includes Discussion Series monthly that focuses on professional growth as a
Series Elective	ambulatory care clinician. Elective rotation may be block or longitudinal. Core rotations may also be selected for added
Opportunities	experience.
	Academia: University of Pittsburgh School of Pharmacy
	Administration/General Internal Medicine/Pharmacogenomics
	Center for Care of Infectious Diseases: PACT/HIV Clinic Center for Liver Diseases -Hepatitis C Consult
	Palliative Care
	Research: UPMC Center for Value Based Medicine
	Starzl Transplant Institute (Solid Organ) UPMC Health Plan Managed Care

Learning Experience Preparation Expectations

Residents are expected to review the learning experience description and contact the preceptor at least one week prior to the scheduled start date. The resident should provide any potential scheduling conflicts for teaching or presentations outside the scope of the learning experience, confirm any preparation to be done prior to arrival and verify location, time for first day.

By the end of the first week of the learning experience the resident and preceptor will discuss the Rotation Start Check list, which will be completed by the resident in PharmAcademic, cosigned by the preceptor and RPD.. This check list will facilitate discussion of the following:

- Resident expectations for the learning experience for practice, projects and professional conduct.
- Description practice site, pharmacist role and resident responsibilities.
- Individualized resident objectives for this learning experience and identified strategies to achieve these objectives.
- Resident schedule, including outlined conflicts, review of PTO.
- Wellness assessment

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PTO Guidance: Per RXPS-11064 Resident Paid Time Off requests should be made 14 days prior to scheduled PTO. For requests >3 consecutive days residents are encouraged to submit as soon as dates are known to allow preceptors and RPD to discuss impact of time away from the site and schedule changes are beneficial for required experiences if needed for time exceeding three consecutive days.

Evaluation Strategies

Routine feedback on progression of skill development occurs many ways through an experience, both verbally and written. The Formative Evaluation is a structured, scheduled midpoint evaluation to provide feedback to the resident on how they are meeting expected clinical skills for the learning experience. This allows for early identification of areas of improvement and time within the learning experience for the resident to incorporate feedback to meet individual goals. ASHP Summative evaluations are completed at rotation end and for rotations greater that 6 months at the intervals defined below. The standard ASHP Evaluation criteria is utilized, Needs Improvement (NI), Satisfactory Progress (SP), Achieved (ACH) and Achieved for Residency (ACHR). The Evaluation Criteria, Definitions and Remediation section above in the overall manual describes in detail the criteria and process.

Evaluation Process Outline

Learning Exp. Length	4-6 Weeks	8 Week	3 Months	6 Months	>6 Months
Preceptor					
Formative Evaluation Form	Week 2/3	Week 4	Week 4	Week 4	Week 4
ASHP Summative Evaluation	End of Rotation	End of Rotation	End of Rotation	Month 3 and End of Rotation	Months 3, 6, 12*
Resident					
Rotation Start Check List	By end week 1	By end week 1	By end week 1	By end week 1	By end week 1
ASHP Summative Self Evaluation		End of rotation first and last required clinical rotation		End of first Longitudinal	
ASHP Preceptor Evaluation	End of Rotation	End of Rotation	End of Rotation	End of Rotation	End of Rotation
ASHP Learning Experience Evaluation	End of Rotation	End of Rotation	End of Rotation	End of Rotation	End of Rotation

^{*}For residents that are not progressing as expected by month 6, a 9-month summative or midpoint feedback will be scheduled to assess resident progression.

Requirements for Successful Completion

A residency certificate will be awarded when the following requirements are *successfully* completed according to the criteria defined in the corresponding sections of the residency manual and documented on the attached form:

Requirement	Date Completed	
Pass the exams for licensure as a pharmacist in the State of Pennsylvania by October 31st of the program year (N/A if resident holds PA License on hire)		
Completion of orientation requirements, including University Research Modules and UPMC Pharmacy Competencies.		
Completion of all required residency practice-based learning experiences with meets "ACHR" on all Competency Area R1 Objectives and ACHR of 80% of remaining objectives with no unresolved "NI" on any objective at end of the program.		
Completion of all PharmAcademic Evaluations		
Completion PULSE Presentation		
Completion of Resident Research Project with summary in manuscript format		
Presentation of research project at PittPharmacy Resident Research Day		
Completion of Teaching Requirements 1. Serve as primary preceptor for one APPE student 2. Simulation Evaluation - 2 sessions 3. Small Group Facilitation - 2 sessions 4. Large Group Instruction (excludes PULSE) • 1-30 min session to pharmacy students • 1-30 min session to pharmacy staff • 2-30 min session to non-pharmacy health care providers/ learner		
Submission of Residency Portfolio including: -Copy of updated CV -Completion of PharmAcademic Residency Portfolio (presentations, representative work, reflections) -Documentation of Research project (copy of protocol, IRB documents, data, analysis, manuscript)		

Email to the RPD and Residency Coordinator prior to program completion: Forwarding contact information: Address, Phone # , Email address.

Please review this material an Ambulatory Care Pharmacy R	d sign below if you accept the terms esidency Program at UPMC.	and conditions of the PGY2
Resident: Print Name	Resident: Signature	Date

Program Director: Signature

Program Director: Print Name

Date