

SJHS PGY1 Pharmacy Residency Learning Experiences

Experience	Required or Elective	Block or Longitudinal	Length in weeks	Site	Preceptor
Academia/Teaching	Required	Longitudinal <small>(Evaluated as one 12 week quarter and three 13 week quarters)</small>	51	FMC, Hospital, Universities	Ed Sheridan, Lisa Ribble-Fay
Administration	Required	Longitudinal <small>(Evaluated as one 12 week quarter and three 13 week quarters)</small>	51	Hospital	Lisa Ribble-Fay/ Appropriate Preceptor
Adult Medicine	Required	Block	3	Hospital	Lisa Ribble-Fay
Ambulatory Pharmacotherapy	Required	Block	4	FMC	Ed Sheridan/Katherine Clark
Critical Care- Introduction	Required	Block	2	Hospital	Angela Mann
Critical Care- Core	Required	Block	4	Hospital	Angela Mann
Faculty Practice	Required	Block	4	Hospital	Michael Wysong/Joseph Meszaros
Longitudinal Patient Care Quarters 1-4: <small>(Includes Staffing, Nutrition Support, Transition of Care and Patient Care)</small>	Required	Longitudinal <small>(Evaluated as one 12 week quarter and three 13 week quarters)</small>	51	Hospital	Lisa Ribble-Fay
Neonatal Intensive Care Unit Introductory Service	Required	Block	2	Hospital	Michael Wysong
Nutrition Support- Introduction	Required	Block	2	Hospital	Michael Wysong
Main Pharmacy Operational Processes	Required	Block	5	Hospital	Joseph Meszaros
Orientation	Required	Block	3	Hospital	Ed Sheridan, Lisa Ribble-Fay
Infectious Disease/ Pharmacokinetics- Introduction	Required	Block	4	Hospital	Appropriate Preceptor
Practice Management	Required	Longitudinal <small>(Evaluated as one 12 week quarter and three 13 week quarters)</small>	51	Hospital	Ed Sheridan, Lisa Ribble-Fay
Residency Project	Required	Longitudinal <small>(One project week per quarter)</small>	51	Hospital	Appropriate Preceptor
Transitions of Care	Required	Block	3	Hospital	Janice Fields
Ambulatory Pharmacotherapy	Elective	Block	4	FMC	Ed Sheridan/Katherine Clark
Advanced Adult Medicine	Elective	Block	3	Hospital	Angela Mann
Cardiology	Elective	Block	4	Hospital	Angela Mann
Home Infusion Pharmacy	Elective	Block	3	Hospital	Daniel Cline
Infectious Disease	Elective	Block	4	Hospital	Laura Gillespie
Informatics	Elective	Longitudinal <small>(Evaluated as one 12 week quarter and three 13 week quarters)</small>	51	Hospital	Linda Lim
Neonatal Intensive Care Unit Advanced Service	Elective	Block	4	Hospital	Michael Wysong/ Joseph Meszaros

Example Structure/Sequencing of SJHSPGY1 Pharmacy Residency Learning Experiences

1	2											
06/17	06/19											
Orientation												
3	4	5	6	7	8	9	10	11	12	13	14	15
06/26	07/03	07/10	07/17	07/24	07/31	08/07	08/14	08/21	08/28	09/04	09/11	09/18
Orientation	Adult Medicine			Main Pharmacy Operational Process				Transition of Care			Project	
Longitudinal Patient Care Experiences: Staffing, Nutrition Support, Transitions of Care, Patient Care Longitudinal Non-Patient Care Experiences: Academia, Administration, Practice Management, Residency Project												
16	17	18	19	20	21	22	23	24	25	26	27	28
09/25	10/02	10/09	10/16	10/23	10/30	11/06	11/13	11/20	11/27	12/04	12/11	12/18
Infectious Disease/ Pharmacokinetic Dosing			Nutrition Support		Critical Care Introduction		Critical Care Core			Project		
Longitudinal Patient Care Experiences: Staffing, Nutrition Support, Transitions of Care, Patient Care Longitudinal Non-Patient Care Experiences: Academia, Administration, Practice Management, Residency Project												
29	30	31	32	33	34	35	36	37	38	39	40	41
12/25	01/01	01/08	01/15	01/22	01/29	02/05	02/12	02/19	02/26	03/05	03/12	03/19
PTO	Ambulatory Pharmacotherapy			Neonatal Intensive Care Unit Introductory		Elective- Home Infusion		Project	Faculty Practice			
Longitudinal Patient Care Experiences: Staffing, Nutrition Support, Transitions of Care, Patient Care Longitudinal Non-Patient Care Experiences: Academia, Administration, Practice Management, Residency Project												
42	43	44	45	46	47	48	49	50	51	52	53	54
03/26	04/02	04/09	04/16	04/23	04/30	05/07	05/14	05/21	05/28	06/04	06/11	6/18
Faculty Practice	Project	Elective -Infectious Disease				Elective -Neonatal Intensive Care Unit			Elective- Cardiology			
Longitudinal Patient Care Experiences: Staffing, Nutrition Support, Transitions of Care, Patient Care Longitudinal Non-Patient Care Experiences: Academia, Administration, Practice Management, Residency Project												

BLOCK ROTATION LEARNING DESCRIPTION EXAMPLE: FACULTY PRACTICE

Competency Assessment

Rotation: Faculty Practice Experience

Training Objectives:

Are noted below per ASHP accreditation standards.

General Description:

Faculty Practice Experience (FPE) is a four-week learning experience. FPE provides the resident with the opportunity to provide direct patient care in a centralized and decentralized clinical pharmacist model across general medicine, medical/oncology, medical/surgical, and progressive care units. The pharmacy resident will provide clinical pharmacy services on the floor (pharmacokinetic dosing, renal dosing adjustments, medication regimen/chart review, medication histories, etc.) and will attend interprofessional rounds (IPRs). Close communication is kept among specialties and the clinical pharmacist will be working regularly with these members of the health-care team to identify and resolve medication-related problems, develop/update protocols, and serve on various committees. The PGY-1 pharmacy resident is expected to be able to operate independently by the end of the experience.

The role of the pharmacist:

The role of the pharmacist is to be responsible for ensuring safe and effective medication use; interacting with patients and their family members, physicians, and nurses; participation on organizational, pharmacy department, and nursing unit-based medication policies and continuous quality improvement initiatives/committees.

Resident Expectations:

The pharmacy resident will be responsible for identifying and resolving medication therapy issues for their patients and will work toward assuming care of the majority of patients on the units throughout the learning experience. The resident will provide and document therapeutic drug monitoring services for patients on their team receiving drugs requiring monitoring including, but not limited to, aminoglycosides and vancomycin, total parenteral nutrition (TPN), and anticoagulation therapy.

Preceptor Interaction*

07:30 AM 1 with preceptor

07:45 AM cy huddle

08:00 AM – 10:30 AM alized pharmacy services on floor, work up assigned patients

10:30 AM – 11:30 AM

11:30 AM – 04:00 PM alized pharmacy services on floor as needed, discuss assigned patients, topic discussions, journal clubs, case presentations, education services, and project time

* Typical daily schedule, however changes will likely occur secondary to meetings, educational activities, off days, etc., whereby resident and preceptor will adjust as needed

Training/ Milestones:

(Length of time resident spends in each of the phases will be customized based upon resident's abilities and timing of the learning experience during the residency year)

- I. Week prior to start of rotation: Preceptor will review FPE learning activities and expectations with resident (resident is responsible for setting up this meeting).
- II. Day 1: Preceptor will orient resident to patient care areas, medical staff, and day to day activities.
- III. Week 1: Resident to work up approximately 1/4 - 1/3 of the team's patients and present to/discuss with preceptor daily.
- IV. Weeks 2-3: Resident will work up 1/3 – 1/2+ of the team's patients and discuss problems with preceptor daily. Each week the resident is expected to take over the responsibility of working up more of the team's patients, continuing to discuss identified problems with preceptor daily. The preceptor will continue to facilitate the resident in any way necessary to help grow and enhance the residents' clinical skills, interdisciplinary/patient relationships, etc.
- V. Week 4: The resident will provide clinical pharmacy services independently with the preceptor serving as a reference as needed.

Feedback and Evaluations:

Feedback will be continuous during the course of this experience. There will be an informal face to face midpoint preceptor assessment and resident self- assessment. The end of rotation evaluations will also be discussed face to face. Within a week from the completion of the experience, the resident will complete a self-assessment, assessment of the rotation, assessment of the preceptor in pharmacademic; the preceptor will conduct a final summative assessment of the resident in pharmacademic.

- Achievement in competency is what determines a trainee the ability to practice independently. To be considered "competent" in this rotation, the trainee must verbally give 10 patients to the preceptor that includes the pertinent information outlined in the tasks. *These patients will be signed by the preceptor and kept in the binder or as an electronic copy.*
- Each designated goal of this rotation must be checked / signed off

Please note the 10 designated patients below along with diagnosis.

Saint Joseph Regional Medical Center, Mishawaka IN
ASSESSMENT. ROTATION: Faculty Practice Experience

Department of Pharmacy

COMPETENCY

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<u>Competency Areas, Goals and Objectives</u>		<u>Rotation Activities</u>	<u>Competency Established</u>	
Competency Area R1:	Patient Care		Reviewer To Date/Initial when Task/ Goal Completed	
Goal R1.1	In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient care process.			
Objective R1.1.1	(Applying) Interact effectively with health care teams to manage patients' medication therapy.		<ul style="list-style-type: none"> • Meet with preceptor for pharmacy rounds daily to review identified medication-related problems and make evidence-based recommendations for solutions • Round with hospitalists, specialists, and ancillary staff during inter-professional rounds (IPRs) <ul style="list-style-type: none"> ○ Discuss assigned patients' care and provide recommendations • Work with providers to resolve medication related issues and serve as a medication resource for medication reconciliation, optimization and/or streamlining. Discuss patient care concerns and medication recommendations with nurses, physicians, and other providers to effectively resolve medication issues and manage drug therapy • Respond to healthcare providers' requests for drug information in a timely manner 	
Objective R1.1.2	(Applying) Interact effectively with patients, family members, and caregivers		<ul style="list-style-type: none"> • Perform medication/allergy histories on patients as appropriate <ul style="list-style-type: none"> ○ Clarify home medication discrepancies ○ Interview patients, family members, and caregivers to get home medication lists ○ Clarify allergy history and type of reaction to medications on request • Respond to patient or family requests for drug information in a timely manner (as identified by nursing, physicians, or during patient care) 	
Objective R1.1.3	(Analyzing) Collect information on which to base safe and effective medication therapy.	<ul style="list-style-type: none"> • Conduct a medication profile review on assigned patients daily <ul style="list-style-type: none"> ○ Review patient labs, imaging, medications, IV fluids, medical record, etc. to collect pertinent 		

		<ul style="list-style-type: none"> ○ information to base patient care decisions <ul style="list-style-type: none"> ○ If applicable, interview patients in preparation to dose heparin, kinetics (vancomycin and aminoglycosides), and/or TPN, as appropriate ● Accurately gather and organize patient specific information daily on assigned patients <ul style="list-style-type: none"> ○ Prioritize problems for concise discussion with preceptor ● Collect pertinent information for drug information requests from providers, patients and/or staff 	
Objective R1.1.4	(Analyzing) Analyze and assess information on which to base safe and effective medication therapy.	<ul style="list-style-type: none"> ● Accurately analyze and assess patient specific information on assigned patients <ul style="list-style-type: none"> ○ Identify any medication related problems (duplicate therapy, inappropriate dosing, inappropriate drug therapy, antimicrobial stewardship, drug-drug interactions, etc.) ○ Recommend solutions to identified problems to preceptor ● Continuously review and scrutinize patient-specific medication orders, medication administration records, and pertinent clinical data daily ● Critically interpret current literature and investigate disease state guidelines to help provide up-to-date evidence-based care on a patient-specific basis 	
Objective R1.1.5	(Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).	<ul style="list-style-type: none"> ● Based on appropriate medical record review, initiate patients on dosing regimens designed to achieve target levels (eg. therapeutic aPTT's or vancomycin/AG levels; normalization of electrolytes/nutritional status in patients on TPN) and develop patient-specific care plans outlining the patients acute and chronic concerns and recommend solutions to identified problems <ul style="list-style-type: none"> ○ Determine when follow-up levels are needed, if applicable, and order them as appropriate ○ Adjust patients' dosing regimens based on follow-up levels, pertinent lab work, or changes to patients status ● Contact prescribers with recommended changes to medications or monitoring plans if needed based on patients' clinical status 	
Objective R1.1.6	(Applying) Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.	<ul style="list-style-type: none"> ● Where appropriate, adjust dosages, frequencies and/or formulations of medications based on established collaborative protocols and policies <ul style="list-style-type: none"> ○ Provide therapeutic drug monitoring services for patients receiving drugs requiring monitoring including, but not limited to, aminoglycosides and vancomycin, anticoagulation therapy, and TPN <ul style="list-style-type: none"> ▪ All kinetic, anticoagulation, and TPN consults will be reviewed with the 	

		<p>preceptor until such time that the preceptor deems the resident is able to perform these tasks on their own</p> <ul style="list-style-type: none"> ○ Adjust dosages of medications per the renal dosing policy ○ Convert IV to PO medications if patients qualify for conversion based on the IV to PO policy ○ Order or recommend necessary labs to effectively monitor specific drug therapy as appropriate (eg. CK for daptomycin, hgb for epopoeitin, SCr for vancomycin, etc.) <ul style="list-style-type: none"> ● Discuss with physicians and providers via notes, haiku, and/or direct discussion, recommendations regarding changes to therapeutic regimens and monitoring plans 	
Objective R1.1.7	(Applying) Document direct patient care activities appropriately in the medical record or where appropriate.	<ul style="list-style-type: none"> ● Compose an accurate, concise kinetics notes and ivents documenting direct patient care activities within time frame to be useful for: <ul style="list-style-type: none"> ○ Recommendations to improve the patient’s treatment plan or drug therapy monitoring ○ Therapeutic dose monitoring consults (initial and follow-up notes) ○ Per protocol changes and pharmacy to dose/review consults 	
Objective R1.1.8	(Applying) Demonstrate responsibility to patients.	<ul style="list-style-type: none"> ● Prioritize and work to resolve all existing or potential medication therapy issues prior the end of the day and communicate with following pharmacist any pending issues that still need to be resolved (heparin documentation, PRN sheet, direct discussion, etc.) ● Identify and report medication events (ADE or medication errors) <ul style="list-style-type: none"> ○ May be initiated by pharmacy personnel or by other health care professionals ○ Document errors in the appropriate system (VOICE, etc.) and follow up as needed ● Respond to patient or family requests for drug information and/or medication counseling/resources in a timely manner 	
Goal R1.2	Ensure continuity of care during patient transitions between care settings		
Objective R1.2.1	(Applying) Manage transitions of care effectively	<ul style="list-style-type: none"> ● Perform admission medication reconciliation and assure medication discrepancies for assigned patients are resolved, as appropriate <ul style="list-style-type: none"> ○ Communicate any issues with physicians and pharmacists as appropriate ○ Collect an accurate medication history by interviewing patients, family, and caregivers; calling pharmacies or physicians’ offices; and/or 	

		<ul style="list-style-type: none"> getting medication lists from external care facilities as needed <ul style="list-style-type: none"> ○ Use the handoff tool to pass along information to the next day's pharmacist if further action for the medication reconciliation is needed • Communicate with providers and pharmacists during transitions of care levels in the hospital (eg: intensive care unit to step-down unit) • Optimize pharmacy dosing services during transitions of care during admission and discharge <ul style="list-style-type: none"> ○ Contact facilities to collect dosing information at admission (home TPNs, home infusions, outpatient infusions) ○ Optimize therapy and communicate with outpatient providers to ensure continuity of care at discharge for home infusion/outpatient infusion services (setting up cyclic TPNs, optimizing pharmacokinetic dosings for ease of outpatient administration, communicating care plans with outpatient infusion providers, etc.) 	
Competency Area R4:	Teaching, Education, and Dissemination of Knowledge		
Goal R4.1	Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups)		
Objective R4.1.1	(Applying) Design effective educational activities	<ul style="list-style-type: none"> • Prepare disease state reviews for discussion with preceptor as assigned • Assist with precepting general medicine APPE or IPPE students • Complete miscellaneous educational activities as they arise during the rotation 	
Objective R4.1.2	(Applying) Use effective presentation and teaching skills to deliver education	<ul style="list-style-type: none"> • Lead teaching/topic discussions with preceptors on assigned disease states. • Assist in the education of pharmacy students as necessary • Respond to healthcare providers, patient or family requests for drug information in a timely manner 	
Objective R4.1.3	(Applying) Use effective written communication to disseminate knowledge	<ul style="list-style-type: none"> • Compose an accurate, concise pharmacokinetic notes/ivents documenting direct patient care activities and therapeutic drug monitoring within time frame to be useful <ul style="list-style-type: none"> ○ Recommendations to improve the patient's treatment plan or drug therapy monitoring ○ Therapeutic dose monitoring consults (initial 	

		<ul style="list-style-type: none"> and follow-up notes) <ul style="list-style-type: none"> ○ Per protocol changes and pharmacy to dose/review consults • Develop discussion handouts to use while leading topic discussions with preceptors on assigned disease states • Effectively communicate with providers, nurses, and other medical providers using written communication (haiku, notes) • Respond to healthcare providers, patient or family requests for drug information • Accurately and concisely document home medication lists • Write-up MUE analyses and recommendations or other outcomes measures for patients as necessary • Review current literature and prepare drug monographs for non-formulary drug requests as necessary 	
Objective R4.1.4	(Applying) Appropriately assess effectiveness of education	<ul style="list-style-type: none"> • Assess audience understanding of education, by addressing questions/concerns regarding educational activities from audience (pharmacy student teaching, in-service, etc.) • Review feedback and self-reflect on performance for areas for improvement 	

EXAMPLE LONGITUDINAL LEARNING DESCRIPTION: Longitudinal Practice Management, Administration, Residency Project, Academia/Teaching Experience

General Description

The Practice Management, Administration, Project and Academia/Teaching experiences will happen over a 51 week period. These experiences have the potential to take place in conjunction with pharmacists practicing in both the inpatient and outpatient setting. All objectives for these experiences are denoted below.

All documented resident progress will take place face to face at the Monthly Resident Progress Meetings, Quarterly Midpoint in PharmAcademic and End Quarter PharmAcademic Assessment. Informal evaluations will be continuous during the course of this experience. The resident will complete a self-assessment, assessment of the rotation, assessment of the preceptor in pharmacademic; the preceptor will conduct a final summative assessment of the resident in pharmacademic.

Practice Management	
Site(s)	FMC, Hospital
Pharmacists role	The pharmacists will help facilitate, mentor and participate when discussing various methods of practice and utilization of management tools with the residents. The pharmacist will have a strategic time organizational method to maintain his/her practice.

The scope of practice and structure of pharmacy services is complex. There are many stakeholders and pharmacists must interact with a variety of health professionals on a daily basis. To be successful in this environment the pharmacist resident must gain expertise in managing his or her pharmacy practice. The pharmacy resident will be expected to explore generalities of practice management by reading books, reviewing articles and discussing these issues with preceptors. (Examples of topics include personal mission statement, time management, project management etc.) The pharmacy resident will have opportunities in all rotations to hone their ability to manage their practice and observe how the preceptor manages his or her practice. However, because some topics may not be experienced during the course of a

specific rotation, practice management will have longitudinal components as weekly topics and as required projects as part of the longitudinal experience. The PGY-2 ambulatory care pharmacy resident assesses, revises, and maintains the longitudinal curriculum.

Administration	
Site(s)	FMC, Hospital
Pharmacists role	The pharmacy director/manager is responsible for oversight of all pharmacy related operations of the hospital. They are accountable for both the clinical and financial performance of the department.

A working administrative skill set is as important to a pharmacist as a patient care skill set. In this rotation, the PGY-1 pharmacy resident will develop his/her own department budget, great a business plan based in his/her perceived next practice and conduct a SWOT analysis as the first step to prioritizing a new initiative.

Residency Project	
Site(s)	FMC, Hospital
Pharmacists role	Review IRB submissions, guide residents in creating a timeline, and being available for residents to check in for progress meetings of their projects. Preceptors are also to review Great Lakes Pharmacy Residency Conference Slides, as well as review material for posters submitted for ASHP Midyear or other local, state, or national meetings. Preceptor is also to help guide resident on the creation of their manuscript..

The pharmacy resident will complete a pharmacy residency project that is either research or performance improvement based. The project will be relevant and useful to the respective site. The pharmacy resident will present the final project at Great Lakes Residency Conference in April (required) and at ASHP Midyear in December (if interim data is available). The PGY-1 resident will take necessary steps during the course of the residency to publish the article in an appropriate journal. The PGY-2 resident is required to publish.

Past resident projects:

Pharmacy Medication Education Impact on Hospital Readmission Rates, Impact of Fair Balance Pharmacology Updates on Sources Family Medicine Residents Utilize to Obtain Information Regarding Medication, Continuous Quality Improvement Of Ambulatory Medication Safety: MIDAS Reporting, Opportunities To Serve The Underserved: A Hospital Based Medication Assistance Program, Prescription Methods Assessment Project (a multi-center, national, double dummy clinical trial), Evaluation Of A Pharmacist Managed Medication Review Clinic, Medication Reconciliation Failure Mode and Effect Analysis, Diabetes Group Visits, Antibiotic Stewardship, Team Based Learning in a family medicine residency program, increasing colorectal cancer screening through an informational mailer, multisite preceptor development, pharmacist involvement in obtaining NCQA certification, Global health training postgraduate pharmacy, Renal effects of vancomycin and pip/tazo, and REMS.

Academia/Teaching Experience	
Site(s)	FMC, Hospital, Manchester University, Purdue University
Pharmacists role	Teach didactic lectures and labs at Purdue and Manchester University Colleges of Pharmacy. Additionally, precept students from the respected colleges of pharmacy, in addition to precepting medical residents on rotation at the Family Medicine Center.

At the completion of this longitudinal experience, the pharmacy resident will be able to effectively and efficiently precept pharmacy students independently. The pharmacy resident will design, organize, and precept PharmD candidates for at least one complete APPE rotation. Additionally, the resident will evaluate the PharmD candidate and assist them in the self-

evaluation process. By the end of this experience, the pharmacy resident will be able to effectively present didactic lectures to pharmacy students and family medicine resident physicians. The pharmacy resident will create, administer and grade examination questions for nursing or pharmacy students. The pharmacy resident will have met the requirements for the Indiana Pharmacy Resident Teaching Certification by completion of the residency program. (Patient education will be addressed on specific direct patient care rotations.)

Disease States:

A variety of disease states will be discussed in topic discussions and clinical learning sessions during didactics in both the practice management and academic experiences.

Preceptor Interaction/Communications:

The resident will need to set meetings at the beginning of each quarter to review the learning description with the responsible preceptor/faculty. A calendar will need to be presented or discussed at the beginning of each quarter.

Training/ Milestones:

Practice Management:

Quarter 1: The resident will observe faculty modeling and actively participate in formal PM sessions. The resident will identify a MUE, Drug class evaluation and drug monograph to be completed by the end of the year. Actively self-evaluate your time management/ organizational skills.

Quarter 2: The resident will observe faculty modeling, receive faculty coaching and actively participate in formal PM sessions. The resident identify and finalize a timeline for MUE, Drug class evaluation and drug monograph to be completed by the end of the year. Actively self-evaluate your time management/ organizational skills

Quarter 3: The resident will Lead with coaching and actively participate in formal PM sessions. Progression of required MUE, Drug class evaluation and drug monograph to be completed by the end of the year will be assessed. Actively self-evaluate your time management/ organizational skills

Quarter 4: The resident will independently facilitate and actively participate in formal PM sessions. If not done in prior quarter, the resident will complete his/her MUE, Drug class evaluation and drug monograph to be completed by the end of the year. Actively self-evaluate your time management/ organizational skills

Administration: Due to the nature of the rotation, much of the tasks will be completed upon active discussion with the preceptor and application of material. The resident pharmacist will be expected to schedule all necessary discussions with the preceptor and be actively engaged in these discussions. The resident pharmacist will complete required projects independently with review by the preceptor upon completion, with the preceptor available as a resource during their development. Throughout the 4 quarters the resident will have discussion with the pharmacy director, manager, supervisor and clinical coordinator regarding operational process, clinical process, state and national regulations including (but not all inclusive) to Joint commission and state board of pharmacy/health visits, budgets, employee relations with hiring, firing and due processes, and meeting processes. When the resident completes his/her residency, he or she will be able to navigate many of the administration process within the hospital pharmacy.

Project:

Quarter 1: Resident will identify a project, create a timeline identifying the implementation, collection tool , evaluation , presentation and publication, submit an IRB application.

Quarter 2: Resident will actively collect data, lead and/or participate in meetings developed around identified project.

Quarter 3: Resident will complete data collection and begin to analyze data. Proactively set up practice lectures for GLPC.

Quarter 4: Resident will complete data analysis, formulate GLPC presentation. Present data analysis at the local institution and GLPC. A complete manuscript will be drafted for submission.

Academia/ Teaching Experience:

Quarter 1: The resident will receive direct instruction, observe modeling and receive coaching activities from his/her preceptors regarding students. The resident will develop teaching materials, learn about different types of learners .

Quarter 2: The resident will continue to develop teaching materials as needed and if possible teach different types of learners with reflection on these experiences. The resident should expect coaching from faculty as growth progresses.

Quarter 3: The resident will continue to develop teaching materials as needed and if possible teach different types of learners with reflection on these experiences. The resident should expect coaching with more facilitating from faculty as growth progresses

Quarter 4: The resident will be able to independently facilitate effective and efficient precepting during this quarter of the residency. The resident should be able to complete the requirements for the Indiana Pharmacy Resident Teaching Certificate.

Quarter 1

PRACTICE MANAGEMENT			
Goal R2.1 Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.	Competency Established		Additional COMMENTS
OBJ R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.			
Attend a didactic on the development of MUM, drug class evaluation, and drug monograph. An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements.			
Goal R 3.1 Demonstrate leadership skills.			
OBJ R3.1.1(Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.			
<ul style="list-style-type: none"> ○ Will utilize/practice the following skills : initial brainstorming, compassionate listening of others, timely follow-up and ownership/accountability ○ The faculty will model self-assessment in major responsibilities. Additionally, description of the thought process of self-assessment will be part of the summative midpoint evaluation 			
OBJ R3.1.2 (Applying) Apply a process of on-going self-evaluation and personal performance improvement.			
<ul style="list-style-type: none"> ○ Will develop a self -evaluation system and discuss the self-evaluation quarterly with a preceptor 			

Goal R3.2 Demonstrate management skills.			
OBJ R 3.2.4 (Applying) Manages one’s own practice effectively.			
<ul style="list-style-type: none"> ○ Will reflect on organized readings and mentors within the profession regarding organization of practice ○ Will discuss two different techniques and skills attempted during this quarter. ○ Will develop a calendar prior to each focused experience to share with respective preceptors 			
PROJECT			
Goal R2.2 Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication use system.			
OBJ 2.2.1 (Analyzing) Identify changes needed to improve patient care and/or the medication-use systems.			
<ul style="list-style-type: none"> ○ The resident will identify and define an area of need that can serve as the subject for the residency project. Also note the graduation responsibilities for PDCA cycle 			
OBJ 2.2.2 (Creating) Develop a plan to improve the patient care and/or medication-use			
<ul style="list-style-type: none"> ○ The resident will conduct a literature review to find published materials on how similar issues have been addressed. This background information will be presented to the preceptor. ○ The resident will develop a detailed plan to address to impact the area of need, as well as a detailed timeline for implementation, collection tool, evaluation, presentation, and publication 			
ADMINISTRATION			
Goal R3.2 Demonstrate management skills.			

OBJ 3.2.1 (Understanding) Explain factors that influence departmental planning.			
<ul style="list-style-type: none"> Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director 			
OBJ R 3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.			
<ul style="list-style-type: none"> Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director. 			
ACADEMIA/TEACHING EXPERIENCE			
Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).			
Obj R4.1.2 (Applying) Use effective presentation and teaching skills to deliver education.			
<ul style="list-style-type: none"> Will create teaching philosophy. Will summarize resident approach to building rapport with learners. Will ensure the content and delivery of any education is commensurate with a pharmacy residency graduate. Will conduct enough educational opportunities to qualify for IPTeC. Identify areas of strength and areas targeted for improvement after completing several teaching tasks. 			
OBJ R4.1.3 (Applying) Use effective written communication to disseminate knowledge.			
<p>Will identify four formal drug information questions throughout the residency year. Will discuss with the preceptor the open ended questions utilized, the process of obtaining, retrieving, evaluating and the clinical relevance of the literature.</p> <p>Will share, discuss and self-evaluate with the preceptor the communication method (oral/written) that was used to relay the information answer.</p>			
OBJ R 4.1.4 (Applying) Appropriately assess effectiveness of education.			
Will outline assessment requirements for APPE rotation in rotation description. Will Submit exam questions for			

<p>all assigned lectures. Will Discuss student performance on exam questions and explain how to improve future questions. Gives timely, honest, helpful, kind feedback to students, colleagues, faculty and patients in a supportive manner</p>			
<p>Goal R4.2: Effectively employs appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).</p>			
<p>OBJ R4.2.1 (Analyzing) When engaged in teaching, select a preceptors' role that meets learners' educational needs.</p>			
<p>Will read Bloom's taxonomy on the different levels of learners. Will Provide example to preceptor of when each role and what type of learner.</p>			
<p>OBJ R4.2.2(Applying) Effectively employ preceptor roles, as appropriate.</p>			
<p>Will be directly observed using the different preceptor roles. Will also reflect with faculty when different roles have been used in situations not directly observed.</p>			

Quarter 2

PRACTICE MANAGEMENT			
Goal R2.1 Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.	Competency Established		Additional COMMENTS
OBJ R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.			
Attend a didactic on the development of MUM, drug class evaluation, and drug monograph. An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements.			
OBJ 2.1.2(Applying) Participate in a medication-use evaluation.			
<ul style="list-style-type: none"> o Progress Reviewed: An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements. 			
OBJ R 2.1.4 (Applying) Participate in medication event reporting and monitoring.			
Will schedule a session with our ADR and Medication Error Report individuals to learn more about our reporting process			
Goal R3.1: Demonstrate leadership skills.			
OBJ R 3.1.1. (Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.			
Will demonstrate reflection and self-assessment in daily activities and responsibilities. The resident Will conduct formative and summative self-assessments			
OBJ R 3.1.2 (Applying) Apply a process of on-going self-evaluation and personal performance improvement.			
Will develop a self -evaluation system and discuss the self-evaluation quarterly with a preceptor			

PROJECT			
Goal R2.2: Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication use system.			
OBJ 2.2.3 (Applying) Implement changes to improve patient care and/or the medication-use system.			
○ Resident successfully implements the change in an organized fashion with Clear communication to those involved or affected			
ADMINISTRATION			
Goal R3.2 Demonstrate management skills.			
OBJ R 3.2.1 (Understanding) Explain factors that influence departmental planning.			
Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.			
Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.3 (Applying) Contribute to departmental management.			
Will prepare a budget Will discuss with the director staff development, staff training, scorecard development/use, employee evaluation system, discipline and corrective action process,			

ACADEMIA/TEACHING EXPERIENCE			
Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).			
Obj R4.1.2 (Applying) Use effective presentation and teaching skills to deliver education.			
<ul style="list-style-type: none"> Will create teaching philosophy. Will summarize resident approach to building rapport with learners. Will ensure the content and delivery of any education is commensurate with a pharmacy residency graduate. Will conduct enough educational opportunities to qualify for IPTeC. Identify areas of strength and areas targeted for improvement after completing several teaching tasks. 			
OBJ R4.1.3 (Applying) Use effective written communication to disseminate knowledge.			
Will identify four formal drug information questions throughout the residency year. Will discuss with the preceptor the open ended questions utilized, the process of obtaining, retrieving, evaluating and the clinical relevance of the literature.			
OBJ R 4.1.4 (Applying) Appropriately assess effectiveness of education.			
Will share, discuss and self-evaluate with the preceptor the communication method (oral/written) that was used to relay the information answer.			
Goal R4.2: Effectively employs appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).			
OBJ R4.2.1 (Analyzing) When engaged in teaching, select a preceptors' role that meets learners' educational needs.			
Will read Bloom's taxonomy on the different levels of learners. Will Provide example to preceptor of when each role and what type of learner.			
OBJ R4.2.2(Applying) Effectively employ preceptor roles, as appropriate.			
Will be directly observed using the different preceptor roles. Will also reflect with faculty when different roles have been used in situations not directly observed.			

Quarter 3

PRACTICE MANAGEMENT			
Goal R2.1 Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.	Competency Established		Additional COMMENTS
OBJ R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.			
Progress Reviewed: An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements.			
OBJ 2.1.2(Applying) Participate in a medication-use evaluation.			
<ul style="list-style-type: none"> Progress Reviewed: An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements. 			
OBJ R 2.1.3(Analyzing) Identify opportunities for improvement of the medication-use system.			
Will have identified a MUE, time lined a resolution and work on implementation at this point			
Goal R3.1: Demonstrate leadership skills.			
OBJ R 3.1.2 (Applying) Apply a process of on-going self-evaluation and personal performance improvement.			
Will re-evaluate the self-evaluation process and modify as necessary.			
Goal R 3.2 Demonstrate management skills.			
OBJ R 3.2.4 (Applying) Manages one’s own practice effectively.			
Will reflect on organized readings and mentors within the profession regarding organization of practice Will discuss two additional different techniques and skills attempted during this quarter. Will develop a calendar prior to each focused experience to share with respective preceptors			

PROJECT			
Goal R2.2: Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication use system.			
OBJ 2.2.1 (Analyzing) Identify changes needed to improve patient care and/or the medication-use systems.			
<ul style="list-style-type: none"> ○ The resident will identify and define an area of need that can serve as the subject for the residency project. Also note the graduation responsibilities for PDCA cycles. 			
OBJ R 2.2.4 (Evaluating) Assess changes made to improve patient care or the medication-use system			
The resident will present results of the intervention as well as next steps for maintenance or further improvements			
ADMINISTRATION			
Goal R3.2 Demonstrate management skills.			
OBJ R 3.2.1 (Understanding) Explain factors that influence departmental planning.			
Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.			
Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.3 (Applying) Contribute to departmental management.			
Will prepare a budget Will discuss with the director staff development, staff training, scorecard development/use, employee evaluation system, discipline and corrective action process,			

ACADEMIA/TEACHING EXPERIENCE			
Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).			
OBJ R 4.1.1.(Applying) Design effective educational activities.			
<ul style="list-style-type: none"> ○ Will develop rotation description for APPE students. Will design a rotation schedule that allows the presence of the majority of his/her colleagues. Will Incorporate (and discuss with preceptor) more than one educational tool / assignment approach in the following settings: small group discussion, classroom didactic session, Will Implement techniques to differentiate between education targeting patients, medical residents, medical students and pharmacy students. Discuss these techniques with preceptor. Will Discuss with preceptor the resident’s approach to selecting breadth and depth of information necessary for various teaching settings. 			
Obj R4.1.2 (Applying) Use effective presentation and teaching skills to deliver education.			
<ul style="list-style-type: none"> ○ Will create teaching philosophy. Will summarize resident approach to building rapport with learners. Will ensure the content and delivery of any education is commensurate with a pharmacy residency graduate. Will conduct enough educational opportunities to qualify for IPTeC. Identify areas of strength and areas targeted for improvement after completing several teaching tasks. 			
OBJ R4.1.3 (Applying) Use effective written communication to disseminate knowledge.			
Will identify four formal drug information questions throughout the residency year. Will discuss with the preceptor the open ended questions utilized, the process of obtaining, retrieving, evaluating and the clinical relevance of the literature.			
OBJ R 4.1.4 (Applying) Appropriately assess effectiveness of education.			
Will share, discuss and self-evaluate with the preceptor the communication method (oral/written) that was used to relay the information answer.			

Goal R4.2: Effectively employs appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).			
OBJ R4.2.1 (Analyzing) When engaged in teaching, select a preceptors' role that meets learners' educational needs.			
Will read Bloom's taxonomy on the different levels of learners. Will Provide example to preceptor of when each role and what type of learner.			
OBJ R4.2.2(Applying) Effectively employ preceptor roles, as appropriate.			
Will be directly observed using the different preceptor roles. Will also reflect with faculty when different roles have been used in situations not directly observed.			

Quarter 4

PRACTICE MANAGEMENT			
Goal R2.1 Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.	Competency Established		Additional COMMENTS
OBJ R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.			
Progress Reviewed: An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements.			
OBJ 2.1.2(Applying) Participate in a medication-use evaluation.			
Progress Reviewed: An MUM, drug class evaluation, and drug monograph needs to be completed by the end of the year. This will be monitored with the rest of the graduation requirements.			
Goal R3.1: Demonstrate leadership skills.			
OBJ R 3.1.1 (Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.			
Will demonstrate reflection and self-assessment in daily activities and responsibilities. The resident Will conduct			

formative and summative self-assessments			
OBJ R 3.1.2 (Applying) Apply a process of on-going self-evaluation and personal performance improvement.			
Will re-evaluate the self-evaluation process and modify as necessary.			
Goal R 3.2 Demonstrate management skills.			
OBJ R 3.2.4 (Applying) Manages one’s own practice effectively.			
Will reflect on organized readings and mentors within the profession regarding organization of practice Will discuss different techniques and skills attempted during the residency year Will develop a calendar prior to each focused experience to share with respective preceptors			
PROJECT			
Goal R2.2: Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication use system.			
OBJ 2.2.2 (Creating) Develop a plan to improve the patient care and/or medication-use system.			
<ul style="list-style-type: none"> The resident will conduct a literature review to find published materials on how similar issues have been addressed. This background information will be presented to the preceptor. The resident will develop a detailed plan to address to impact the area of need, as well as a detailed timeline for implementation, collection tool, evaluation, presentation, and publication 			
OBJ R 2.2.4 (Evaluating) Assess changes made to improve patient care or the medication-use system			
The resident will present results of the intervention as well as next steps for maintenance or further improvements			
OBJ R 2.2.5(Creating) Effectively develop and present, orally and in writing, a final project report.			
Will successfully present the project to GLPRC or SJRMC. will write a manuscript of the project based on the requirements of the journal to which it will be submitted. By May 1st			

ADMINISTRATION			
Goal R3.2 Demonstrate management skills.			
OBJ R 3.2.1 (Understanding) Explain factors that influence departmental planning.			
Will participate in major departmental and hospital-wide process changes Will discuss JACAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.			
Will participate in major departmental and hospital-wide process changes Will discuss JCAHO, ASHP best practices, budget preparation with the pharmacy director.			
OBJ R 3.2.3 (Applying) Contribute to departmental management.			
Will prepare a budget Will discuss with the director staff development, staff training, scorecard development/use, employee evaluation system, discipline and corrective action process,			
OBJ R 3.2.4 (Applying) Manages one's own practice effectively.			
Will reflect on organized readings and mentors within the profession regarding organization of practice Will discuss different techniques and skills attempted during the residency year			
ACADEMIA/TEACHING EXPERIENCE			
Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).			
OBJ R 4.1.4 (Applying) Appropriately assess effectiveness of education.			
Will Outline assessment requirements for APPE rotation in rotation description. Will Submit exam questions for all assigned lectures. Will Discuss student performance on exam questions and explain how to improve future questions. Gives timely, honest, helpful, kind feedback to students, colleagues, faculty and patients in a supportive manner			

<p>Goal R4.2: Effectively employs appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).</p>			
<p>OBJ R4.2.1 (Analyzing) When engaged in teaching, select a preceptors' role that meets learners' educational needs.</p>			
<p>Will read Bloom's taxonomy on the different levels of learners. Will Provide example to preceptor of when each role and what type of learner.</p>			
<p>OBJ R4.2.2(Applying) Effectively employ preceptor roles, as appropriate.</p>			
<p>Will be directly observed using the different preceptor roles. Will also reflect with faculty when different roles have been used in situations not directly observed.</p>			