



2020-2021

Department of Pharmacy Services  
PGY1 Residency Program

Residency Manual

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## **I. Introduction**

The Bayhealth Postgraduate Year (PGY1) One Residency Program is a one-year training program primarily in an inpatient healthcare practice setting. The PGY1 resident will receive extensive education and training in treating hospitalized patients through guided practice from experienced preceptors. The program is tailored to meet the needs and interests of individual residents.

During the program, residents will participate in all aspects of our comprehensive pharmacy service. Rotations in acute care practice areas, ambulatory care, pharmacy management, research, and pharmacy systems are offered. As a vital member of the healthcare team, residents will have the opportunity to enhance practice skills that are necessary to evaluate a patient's medication regimen. Throughout the one-year program, residents will have numerous opportunities to provide education to patients and other health care professionals. In addition, residents will gain experience in providing written responses to drug information questions. The knowledge gained over the course of the program will enable residents to competently conduct a research project. In addition, residents will be expected to conduct a medication utilization evaluation (MUE) and/or complete a project that will enhance medication safety. Opportunities for teaching pharmacy students and earning a teaching certificate are available.

Residents will acquire foundation skills needed to become competent and confident clinical practitioners and future leaders in pharmacy practice. Also, residents will gain experience in collaborative relationships with health care team members through proactive recommendations during patient care rounds and while working as a decentralized pharmacy team member.

Bayhealth pharmacy started its PGY1 residency program in 2003. The program received ASHP accreditation in March 2005 and was re-accredited most recently in 2017.

## **II. General Program Outcomes**

At the completion of the Bayhealth PGY1 Residency program the resident will be able

- a. To provide quality patient care through collaborative working relationships with other healthcare providers
- b. To design, recommend, and monitor patient-specific treatment regimens.
- c. To provide concise, comprehensive, applicable, and timely response to drug information requests.
- d. To provide effective education to healthcare professional and patients.
- e. To demonstrate professionalism, leadership skills, responsibility, and ethical conduct.
- f. To identify medication safety issues and to improve medication systems to maximize patient safety.

### III. PGY1 Residency Program Purpose Statement

The purpose of the Bayhealth postgraduate year one residency program is to build upon the Doctor of Pharmacy (PharmD) education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, to help them become eligible for board certification, prepare for clinical acute care positions, adjunct faculty positions, or for postgraduate year two training in a focused practice area.

### IV. Program's Goals

#### *Competency Area R1: Patient Care*

**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.
- Objective R1.1.2 (Applying) Interact effectively with patients, family members, and caregivers.
- Objective R1.1.3: (Analyzing) Collect information on which to base safe and effective medication therapy.
- Objective R1.1.4: (Analyzing) Analyze and assess information on which to base safe and effective medication therapy.
- Objective R1.1.5: (Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).
- Objective R1.1.6: (Applying) Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.
- Objective R1.1.7: (Applying) Document direct patient care activities appropriately in the medical record or where appropriate.
- Objective R1.1.8: (Applying) Demonstrate responsibility to patients.

**Goal R1.2: Ensure continuity of care during patient transitions between care settings.**

- Objective R1.2.1: (Applying) Manage transitions of care effectively.

**Goal R1.3: Prepare, dispense, and manage medications to support safe and effective drug therapy for patients.**

- Objective R1.3.1: (Applying) Prepare and dispense medications following best practices and the organization's policies and procedures.
- Objective R1.3.2: (Applying) Manage aspects of the medication-use process related to formulary management.
- Objective R1.3.3: (Applying) Manage aspects of the medication-use process related to oversight of dispensing.

## ***Competency Area R2: Advancing Practice and Improving Patient Care***

### **Goal R2.1: Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.**

- Objective R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.
- Objective 2.1.2 (Applying) Participate in a medication-use evaluation.
- Objective 2.1.3: (Analyzing) Identify opportunities for improvement of the medication-use system.
- Objective 2.1.4: (Applying) Participate in medication event reporting and monitoring.

### **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.**

*(Ideally, objectives R2.2.1-R2.2.5 will be addressed through residents working on one quality improvement or research project; however, if this is not possible, all objectives must be addressed by the end of the residency year and can be addressed through work on more than one initiative.)*

- Objective R2.2.1: (Analyzing) Identify changes needed to improve patient care and/or the medication-use systems.
- Objective R2.2.2: (Creating) Develop a plan to improve the patient care and/or medication-use system.
- Objective R2.2.3: (Applying) Implement changes to improve patient care and/or the medication-use system.
- Objective R2.2.4: (Evaluating) Assess changes made to improve patient care or the medication-use system.
- Objective R2.2.5: (Creating) Effectively develop and present, orally and in writing, a final project report.

## ***Competency Area R3: Leadership and Management***

### **Goal R3.1: Demonstrate leadership skills.**

- Objective R3.1.1: (Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.
- Objective R3.1.2: (Applying) Apply a process of on-going self-evaluation and personal performance improvement.
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### **Goal R3.2: Demonstrate management skills.**

- Objective R3.2.1: (Understanding) Explain factors that influence departmental planning.
- Objective R3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.
- Objective R3.2.3: (Applying) Contribute to departmental management.

- Objective R3.2.4: (Applying) Manage one's own practice effectively.

#### ***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.
- Objective R4.1.2: (Applying) Use effective presentation and teaching skills to deliver education.
- Objective R4.1.3: (Applying) Use effective written communication to disseminate knowledge.
- Objective R4.1.4: (Applying) Appropriately assess effectiveness of education.

**Goal R4.2: Effectively employ appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).**

- Objective R4.2.1: (Analyzing) When engaged in teaching, select a preceptors' role that meets learners' educational needs.
- Objective R4.2.2: (Applying) Effectively employ preceptor roles, as appropriate.

#### ***Competency Area E1: Pharmacy Research***

**Goal E1.1 Conduct and analyze results of pharmacy research.**

- Objective E1.1.1 (Creating) Design, execute, and report results of investigations of pharmacy-related issues.

#### ***Competency Area E5: Management of Medical Emergencies***

**Goal E5.1 Participate in the management of medical emergencies.**

- Objective E5.1.1 (Applying) Exercise skill as a team member in the management of medical emergencies according to the organization's policies and procedures.

#### ***Competency Area E6: Teaching and Learning***

**Goal E6.1 Demonstrate foundational knowledge of teaching, learning, and assessment in healthcare education.**

- Objective E6.1.1 (Understanding) Explain strategies and interventions for teaching, learning, and assessment in healthcare education.

**Goal E6.2 Develops and practices a philosophy of teaching.**

- Objective E6.2.1 (Creating) Develop a teaching philosophy statement.
- Objective E6.2.2 (Creating) Prepare a practice-based teaching activity.
- Objective E6.2.3 (Applying) Deliver a practice-based educational activity, including didactic or experiential teaching, or facilitation.
- Objective E6.2.4 (Creating) Effectively document one's teaching philosophy, skills, and experiences in a teaching portfolio.

## V. Residency Rotation Schedule

Core Rotations	Elective Rotations*
<ul style="list-style-type: none"><li>• General Orientation (1 week)</li><li>• Pharmacy Systems (5 weeks)</li><li>• Internal Medicine/Nutrition (8 weeks)</li><li>• Oncology (4 weeks)</li><li>• Leadership &amp; Management (4 weeks)</li><li>• Cardiology (4 weeks)</li><li>• Critical Care (4 weeks)</li><li>• Infectious Disease (4 weeks)</li><li>• Rehabilitation (4 weeks)</li><li>• Ambulatory Care (4 weeks)</li></ul>	<ul style="list-style-type: none"><li>• Pharmacy Informatics/Economics (3 weeks)</li><li>• Emergency Medicine (3 weeks)</li><li>• Advanced Oncology (3 weeks)</li><li>• Advanced Diabetes Care (3 weeks)</li><li>• Medication Reconciliation (3 weeks)</li></ul>

If there is a lack of preceptor availability in the rotation practice area, the rotation schedule/availability is subject to change by the Residency Director. Elective rotations are only to be scheduled the last several months of the residency year.

### Longitudinal Experiences:

1. Drug Information/Drug Policy Development and Monitoring/Formulary Management
2. Pharmacy Systems (i.e. staffing) I/ II/III
3. Research Project
4. Pain Management
5. Teaching Certificate Program (if applicable)

## VI. Required Projects

1. Clinical research project for presentation at the Eastern States Residency Conference. The project should be of such quality that the written results may be submitted for publication in a peer-reviewed journal.
2. One in-service (Interdisciplinary)
3. One Formulary Monograph and one Therapeutic Drug Class Review
4. Design, implement, and complete one MUE project
5. Complete one medication safety project (may be part of or related to MUE or research project)
6. Update one Policy and Procedure
7. Two community service projects/lectures
8. Three newsletter articles
9. One Bayhealth Pharmacy CE
10. PRMC CE Grand rounds
11. One journal club presentation
12. Two technician PEARL presentations

13. Attendance at Midyear (optional) if pursuing a PGY2 residency. Must present a CE presentation from seminar.

Please note that required projects are subject to change by a majority vote from Residency Steering Committee Members.

## VII. Required Meetings

1. P&T Committee

## VIII. Staffing Responsibilities and Benefits

### 1. Staffing Responsibilities

- a. The Pharmacy Resident shall perform and demonstrate proficiency as a Staff Pharmacist during the course of the Program.
- a. The normal assignment will be eight hours of evening shift per two-week pay period or four hours of evening shift weekly. The evening shift assignment may be scheduled at either Bayhealth campus depending on staffing needs.
- b. The normal weekend assignment will be every third weekend. This rotation will include one Saturday and one Sunday for the shift assigned. The weekend assignment may be scheduled at either Bayhealth campus depending on staffing needs.
- c. The resident will be required to work one (1) Summer Holiday and one (1) Winter Holiday. The holiday assignment may be scheduled at either Bayhealth campus depending on staffing needs.
- d. This schedule is subject to change by the Residency Program Director.

### 2. Benefits

- a. Stipend.
- b. 15 days of paid time off which includes sick leave, vacation leave, paid holidays, and bereavement leave. Please note that Bayhealth has six paid holidays and any holiday not worked will be subtracted from the 15 days of paid time off.**
- c. Financial support to selected professional meetings
- d. Payment of professional liability insurance.\

### 3. Duty Hours

- a. Duty hours are defined as all scheduled clinical and academic activities related to the pharmacy residency program. This includes inpatient and outpatient care; in-house call; administrative duties; and scheduled and assigned activities, such as conferences, committee meetings, and health fairs that are required to meet the goals and objectives of the residency program. Duty hours must be addressed by a well-documented, structured process.
- b. Duty hours do not include: reading, studying, and academic preparation time for presentations and journal clubs; travel time to and from conferences; and hours that are not scheduled by the residency program director or a preceptor.



- c. Residents, program directors, and preceptors have the professional responsibility to ensure they are fit to provide services that promote patient safety. The residency program director (RPD) must ensure that there is not excessive reliance on residents to fulfill service obligations that do not contribute to the educational value of the residency program or that may compromise their fitness for duty and endanger patient safety. Providing residents with a sound training program must be planned, scheduled and balanced with concerns for patients' safety and residents' well-being.
- d. **Duty hours must be limited to 80 hours per week**, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting

## IX. Resident Responsibilities

- a. Development of personal goals for the residency following an initial evaluation of career interests, prior experience, and areas of strength and weakness.
- b. To meet the residency requirements, it is expected that the PGY1 residency will have to work in excess of 40 hours per week. Thus, moonlighting outside of Bayhealth Medical Center is strongly discouraged. Any moonlighting must be approved by the Director of the Residency Program.
- c. Compliance with rotation expectations:
  - a) Meeting with the rotation preceptor to discuss individual goals and objectives for the rotation.
  - b) Completing assignments by the end of the rotation.
  - c) Informing the Residency Director of difficulties encountered in meeting goals and objectives or problems with preceptor.
  - d) Assuming the responsibilities of the rotation preceptor in his/her absence.
  - e) Completing an evaluation of each rotation experience, preceptor, and a self-evaluation at the conclusion of the rotation that includes accomplishment of objectives and experiences gained with recommendations for improvement.
- d. Completion of quarterly evaluations to be reviewed by the Residency Director. The purpose is to assure that the established residency goals are being achieved.
- e. Provision of pharmacy staffing coverage.
- f. Maintenance of active membership in the American Society of Health-System Pharmacists.
- g. Completion of a major residency project and medication use evaluation.
- h. Completion of required presentations throughout the residency.
- i. Maintain and complete a resident-portfolio of accomplishments.
- j. Submission of articles to pharmacy newsletters.
- k. Attendance at the Eastern States Conference for Pharmacy Residents and Preceptors. Attendance at applicable local pharmaceutical education programs is expected. Residents may attend other professional meetings if the staffing schedule permits.
- l. Resident must meet all established deadlines cannot miss more than 2 deadlines on completion schedule. Failure to comply will result in dismissal from the program.
- m. Reading and following the Attendance and Dress Code Policies.

- n. Following patient privacy laws and regulations.

## **X. Assessment of Learning Experiences**

- a. For each week of the rotation, progress will be verbally discussed with the PGY1 resident.
- b. The PGY1 resident is recommended to maintain a feedback diary throughout the residency year. Two entries per week are recommended. Feedback diary entries should be forwarded, via e-mail, to the preceptor and the Residency Director on a Bi-weekly basis if maintained.
- c. There will be a mid-point discussion between the preceptor and resident will be reviewed with the discussed verbally and in writing. If the mid-point discussion indicates that the PGY1 resident is not meeting rotation goals (“needs improvement for goals), a written action plan will be discussed with the PGY1 resident for those goals. Failure by the PGY1 resident to address the items on the action plan may result in failure of those goals (“needs improvement”) for that rotation.
- d. There will be a summary evaluation by the preceptor which will be reviewed with the PGY1 resident by the last day of the rotation.
- e. If the PGY1 resident fails the majority of goals (“needs improvement”) for a rotation, the Academic and Organizational Provisions Resident Corrective Action and Discipline Policy (Exhibit “A” of the Residency AGREEMENT) will be followed.
- f. The PGY1 resident will complete a self-evaluation by the last day of the rotation, includes longitudinal rotations. The self-evaluation will be submitted and discussed with the preceptor.
- g. The PGY1 resident will complete an evaluation of the preceptor and rotation and submit it to the Director of the Residency Program by the last day of the rotation, includes longitudinal rotations.
- h. The Director of the Residency Program will conduct quarterly customized evaluations with the PGY1 resident.
- i. Preceptors for longitudinal rotations will conduct quarterly evaluations with the PGY1 resident, as well as, a summary evaluation. These evaluations will be reviewed with the PGY1 resident.

## **XI. Requirements for Program Completion**

Completion of the PGY1 residency program is attained by:

- a. Achieving 85% or greater of the Pharmacy Systems I and II goals.
- b. Achieving 85% or greater of all other rotation goals.
- c. Submission of the final paper for the residency project to the Director of the Residency Program.
- d. Completion of 85% of the required projects listed in section VI of this manual.

The official Bayhealth Medical Center Residency Certificate will be withheld until all requirements are fulfilled.

## **XII. Phone Numbers**

Cheri R. Briggs, BS, PharmD, MBA, SSGB Senior Director of Pharmacy Services	Phone: 744-7020 (KGH)
Erika Rust, PharmD, BCPS Site Manager KGH	Phone: 744- 6103 (KGH)
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Carl Popelas, Pharm.D, BCOP Clinical Manager	Phone: 744-6950 (KGH) 430-5447 (MMH)
Madeline (Lynn) Byrne, Rph, CCP Ambulatory Care Pharmacy Manager Community Residency Program Director PGY1	Phone: 744-6617 (KGH) 430-5153 (SUSSEX)
Kidane Geda, PharmD, MBA Business Manager	Phone: 744-6753 (KGH)

By signing this **statement**, I acknowledge that I have received and read this handbook and agree to abide by the policies contained herein.

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Resident Signature

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Date