Appendix D Critical Care

PGY2 Critical Care Pharmacy Residency Program Overview

National Match Service: 509952
http://health.ucsd.edu/specialties/pharmacy/residency/Pages/critical_care.aspx

The UC San Diego Health Department of Pharmacy offers a one-year specialty residency in critical care pharmacy practice beginning August 1st or upon licensure in California (see below).

Scope:
UC San Diego Health consists of three acute care hospitals ( UC San Diego Medical Center in Hillcrest, Sulpizio Cardiovascular Center, and Jacobs Medical Center which includes former Thornton Hospital) and associated outpatient clinics. UC San Diego Health is also affiliated with Rady Children's Hospital-San Diego, the Veterans Affairs San Diego Healthcare System, and the Sharp Memorial Hospital Joint Blood and Marrow Transplant Program. The Health System is affiliated with the UC San Diego School of Medicine and the UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS). The Department of Pharmacy provides clinical services at all three hospitals, including ICU services in the surgical, medical, burn, neonatal and cardiovascular ICUs, as well as assorted other clinical services.

Purpose:
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:
UC San Diego Health is a university-affiliated teaching hospital which provides the unique capability to engage each of our residents in direct patient care activities, research, administration and project management, and teaching. Our PGY2 critical care pharmacy residency program emphasizes critical care pharmacotherapy, safe medication distribution, didactic and practical teaching, and pharmacy leadership. Graduates from our program have taken a wide variety of critical care, emergency department and academia positions. Graduates will be prepared to sit for the Board Certified Critical Care Pharmacy (BCCCP) exam.

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required, or core, ICU learning experiences, with the expectation that the resident will handle all aspects of the medication process from ordering to administration and follow up. Primary responsibilities include rounding with the ICU team(s), designing, recommending, monitoring, and evaluating patient-specific therapeutic regimens that incorporate the principles of evidence-based medicine, addressing all pharmacokinetically-monitored medications, being an active member of the Code Blue team, validating pharmacy orders for ICU patients, and overseeing and directing PGY1 resident and pharmacy student activities. This integration of staffing and clinical services prepares residents for any type of practice environment they may encounter in their future jobs by emphasizing the development of essential skills required for an advanced pharmacy practitioner: independent practice skills, multi-tasking and prioritization.

Teaching activities may include regular didactic presentations, leading ICU conferences for fourth year pharmacy students, involvement with UC San Diego SSPPS courses (e.g., conference leader for third year therapeutics course [optional], participation in Critical Care elective [required]), and, as warranted, clerkship preceptorship of PGY1 pharmacy practice residents and fourth-year UCSD pharmacy students. The ability to work independently and to supervise pharmacy students and residents will be emphasized. The resident will also be involved in a research project. Scientific writing is strongly emphasized and the preparation and submission of a manuscript suitable for publication will be expected.

Number of residency positions available: 2
Resident Pay and Benefits: Refer to UC San Diego Health Pharmacy Residency website (https://health.ucsd.edu/specialties/pharmacy/residency/Pages/Salary-and-Benefits.aspx) for details on salary and benefits.

Requirements of Residents Prior to Starting the Program:
If matched with the UC San Diego Residency Program, matched candidates must have all of the following:

1. Graduated from an ACPE-accredited school of pharmacy with a Doctor of Pharmacy degree
2. Successfully completed an ASHP-accredited PGY1 pharmacy residency.
   a. Upon receipt of application to the program, the RPD will reach out to the PGY1 program director to assess good standing in the program
   b. A signed residency certificate will be required prior to beginning residency.
3. Obtained California pharmacy licensure prior to beginning residency.
   a. The residency is expected to begin on the last Monday of July, or first Monday of August, depending on the Human Resources orientation schedule. However, the resident must have obtained their California pharmacist license prior to beginning residency (absolute deadline to start is November 1st).
   b. If the resident is not licensed by November 1st, they will be dismissed from the residency. The residency offer may be rescinded if the resident does not take the California Board of Pharmacy law exam prior to August 1st or does not pass the California Board of Pharmacy law exam on the first attempt.

Application:
All applicants must be enrolled in the Resident Matching Program. To facilitate this enrollment process and for further information, please visit the following website: www.natmatch.com/ashpmp. Applications will be accepted when PhORCAS opens and due by December 31st.

1. Letter of intent: We no longer use a letter of intent to evaluate candidates. Instead, we will be asking all candidates to complete an online supplemental application. PhORCAS will require you to submit a letter of intent; please upload a blank document. The UCSDH supplemental application can be found at this link: https://ucsd.co1.qualtrics.com/jfe/form/SV_brXXVaKVum7wofz
2. Current Curriculum Vitae with all experiential completed and anticipated learning experiences as well as pharmacy and non-pharmacy work experience.
3. Three electronic references are required. At least two of the references should be from preceptors or supervisors who can directly comment on your clinical practice skills.

Note: Please have recommendation writers complete the electronic reference form within PhORCAS with detailed characteristic and narrative comments. One to two areas of improvement or constructive feedback that the recommender feels the candidate should continue to work on as a PGY2 resident should be identified. No separate letter of recommendation is required.

Prior to an onsite interview, a virtual interview in early January is required for non-UC San Diego Health PGY1 residents. On-site interviews will be held late January through early March.

Program Structure 2022-2023 Academic Year:
- 2-4 weeks of orientation/training/research (duration determined by the resident’s previous experience)
- Core (required) learning experiences: (Block, 4 weeks each)
  o Unit/shift based learning experiences;
    ▪ C1 (Surgical and Trauma ICU)
    ▪ C2 (Burn ICU and Burn step down)
    ▪ C3 (Medical ICU)
    ▪ J1 (Mixed neuro/medical/oncology ICUs)
    ▪ S1 (Primarily cardiovascular)
    ▪ Repeat core (resident choice)
- Elective learning experiences: (Block, 4 weeks each)
  o Typically service-based ICU experiences
    ▪ See full list below
- Staffing (16 weekends, annually) (Longitudinal, 12 months)
- Resident project/research (Longitudinal, 12 months)
  o Includes participation in Research Primer Series
- Practice Management (Longitudinal, 12 months)
  o Committee Participation (alternate Code Blue 6 months and Critical Care MERP 6 months)
Core Learning Experiences (aka Core Rotations):
Descriptions of each learning experience can be found in PharmAcademic

PGY2 residents will gain the skills to function as the primary ICU pharmacist during their required learning experiences with the expectation that the resident will handle all aspects of the medication process from ordering to administration and follow up. Because required ICU experiences will focus on developing the skills necessary to effectively be the lead ICU pharmacist, they will primarily be assigned in the first half of the residency year. Rather than focusing on a specific team, the PGY2 resident will be expected to identify medication-related issues and manage the therapeutic plan of every patient in the unit, regardless of the primary service. The resident will be expected to build relationships with each medical team in the ICU and work proactively with other disciplines (i.e. physicians, nurses, respiratory therapists, dieticians, social workers, and case managers) to achieve efficient work flow and medication delivery. Daily activities will include: participation in rounds, carrying the Code Blue emergency pager as assigned by the Pharmacist’s schedule, reviewing each patient’s profile for appropriateness of drug therapy, performing pharmacokinetic monitoring on all therapeutically monitored drugs (TDM), validating pharmacy orders on all ICU patients, and overseeing and directing PGY1 resident and pharmacy student activities. This integration of staffing and clinical services prepares residents for any type of practice environment they may encounter in their future jobs by emphasizing the development of essential skills required for an advanced pharmacy practitioner: independent practice skills, multi-tasking and prioritization.

Elective Learning Experiences (aka Elective rotations):
Descriptions of each learning experience can be found in PharmAcademic

There are a wide variety of learning experiences the resident can choose their five electives from; and one elective must be a repeat of a required ICU learning experience. Electives can be selected from the list below and any of the required ICU learning experiences may be repeated again as a general elective. Elective learning experiences (except repeat core) generally allow the PGY2 resident to learn about being a service-based pharmacist. This will allow the resident the flexibility to tailor their PGY2 experience to an area of interest. Elective learning experiences will generally be scheduled in the second half of the residency year (after the required ICU learning experiences are completed). New experiences may be created on a case-by-case basis if the resident has an interest in a practice area not covered by the elective learning experiences below.

- Repeat required ICU
- Abdominal Transplant
- Administration
- Anesthesia Critical Care Medicine (ACCM)
- Bone Marrow Transplant
- Cardiology
- Cardiothoracic Transplant/Mechanical Assist Devices
- Emergency Department (ED)
- Informatics/Epic
- Geriatric ED
- Infectious Diseases
- Neuro critical care
- Neonatal ICU
- Pediatric ICU (Rady’s)
- Pulmonary Critical Care Medicine (PCCM)
- Trauma

Staffing:
Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY2 residents to cover 1-3 ICU’s simultaneously. The residents may also cover the Emergency Department after completion of the Emergency Department elective and discussion with the pharmacists in that practice area. The PGY2 critical care residents are required to staff 16 weekends (which includes 1 minor holiday weekend PLUS 1 major holiday (Thanksgiving, Christmas, or New Year’s). To help provide more formative feedback, residents are expected to seek
feedback from at least one staff member each weekend they staff. The feedback will be solicited via an online survey which can be found on the Pharmacy’s intranet page.

**Resident Project/Research:**
The resident will be responsible for conducting a resident project throughout the academic year that will be completed and presented at the UC Collaborative Annual Pharmacy Leadership Conference, or an equivalent conference. A Resident Research Primer Course has been developed by the UC San Diego Health Research Council to coach residents through the various aspects of the research process. PGY2 critical care residents who have not previously completed the Research Primer Course are required to attend. PGY2 critical care residents who have previously completed the Research Primer Course will required to attend some, but not all, meetings. They will be required to complete all competencies. Passing competency score is 80%.

More information can be found in the Resident Manual. If time allows, the resident will be involved with the initiation of a second project. This initiation phase will involve defining the study design, writing up the protocol and beginning the IRB approval phase. The purpose of starting a second project is to facilitate subsequent critical care residents who can then finish the projects that were started the previous year. A list of project ideas will be generated from the ICU preceptors and the resident is expected to select a project during the first month of the residency year.

Research time will be given during the resident year. During research weeks, the resident is expected to be onsite for at least 8 hours daily; preferably between 6:00 am and 6:00 pm. Any excursions from this time must be accounted for by requesting time off via the leave adjustment form [https://ishare.ucsd.edu/sites/RX/HR%20documents/Leave_Adjustment_Form.pdf](https://ishare.ucsd.edu/sites/RX/HR%20documents/Leave_Adjustment_Form.pdf)

**Practice Management:**
The PGY2 resident will track their progress and development in the areas practice management and clinical quality improvement projects (if not a part of year-long resident project), medication use evaluation, order set review (and/or formulary monograph). Quarterly, the RPD and resident will complete a summative evaluation via PharmAcademic and update the resident’s customized training plan to track the resident’s progress. Items which are included and evaluated in this longitudinal rotation include:

- **Committee Participation:** The resident will be required to participate in committees relevant to critical care patient management at UCSDH in a longitudinal manner; 6 months in Code Blue and 6 months in Critical Care MERP. The Code Blue and Critical Care Medication Error Reduction Plan (MERP) Committees review medication use and strive to find ways to reduce errors and improve Code Blue (cardiac arrest) response at UCSDH. The resident will work with the pharmacist assigned to that committee to be an active participant through meeting attendance and investigating medication related events and solutions.

- **Practice Management:** The resident will be required to complete a formulary monograph or order set review and medication use evaluation. Each resident will be required to complete at least one annually. Residents may collaborate with the other critical care resident for completion. The projects will be larger in nature than PGY1 Pharmacy resident projects and be focused on critical care topics.

- **Critical Care Appendix:** The resident will demonstrate an understanding of the critical care relevant diseases and conditions and have the ability to design appropriate treatment regimens and treat and assess outcomes. For some diseases and conditions, direct patient care is required. For the other diseases and conditions, the resident will demonstrate understanding of the diseases and condition via didactic instruction, case-based application, simulation, or other appropriate approach. For these diseases and conditions, the resident will demonstrate an understanding of signs and symptoms, epidemiology, risk factors and etiology, pathogenesis, pathophysiology, clinical course, and a comprehensive pharmacotherapy treatment plan. The resident’s progress in covering disease states listed in the Critical Care Appendix (topics listed individually in learning experience descriptions) will be tracked through attestation during core, unit-based learning experiences and quarterly in the customized training plan.

- **Effective Education:** The resident will have opportunities to provide effective education through presentation of grand rounds (1 required during residency, may be done with co-resident), clinical forums (4 required during residency), journal clubs (4 required during residency), in-services (5 required during residency), didactic teaching opportunities (SPPS 274 Critical Care elective and ART facilitation/lecture) and submission of a manuscript for publication.
Grand Rounds: The resident will deliver a 1-hour CE lecture to the pharmacy staff regarding a topic in critical care. This presentation may be made in collaboration with their PGY2 Critical Care Pharmacy co-resident, with each resident presenting approximately 30 minutes of material. Please refer to the Residency Manual for more information on timelines, expectations, and evaluation strategies. An on-demand PharmAcademic evaluation by the RPD or preceptor will be used to track Grand Rounds completion. Progression towards completion of graduation requirements will be tracked via quarterly Effective Education PharmAcademic evaluation, customized training plan, and via discussion with preceptors at quarterly RAC meetings.

Clinical Forums: Residents are required to present four clinical forums during the year at our Pharmacy Clinical Forum. Clinical Forums are clinically-focused, 20-minute presentations based on a recent patient case. The resident is encouraged to discuss topics related to the ASHP Supplemental Appendix for an Advanced Practice Residency in Critical Care for these presentations. All Clinical Forum presentations need to be presented to the project preceptor at least one week in advance for feedback and comments. Failure to do so will result in delay of the presentation. Please refer to the residency manual for more information and evaluation strategies. An on-demand PharmAcademic evaluation by the RPD, learning experience preceptor, or clinical preceptor will be used to track Clinical Forums. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and via discussion with preceptors at quarterly RAC meetings.

Journal Clubs: Residents are required to present four journal club presentations during the year. Journal Club topics should be focus on critically analyzing a recently published journal article related to critical care pharmacotherapy. During the second half of the year, the resident may choose to facilitate a PGY1 Journal Club in lieu of performing the final two of their required journal club presentations. Presented journal clubs must be presented to the project preceptor at least one week in advance for feedback and comments. Failure to do so will result in delay of the presentation. For facilitation, the resident assumes the role of the clinical preceptor and should critically analyze the article, coach the PGY1 resident through their analysis, and facilitate the discussion on the day of the presentation. Facilitators should provide feedback on their analysis and thoughts of the PGY1 one week prior to their presentation. Please refer to the residency manual for more information and evaluation strategies. An on-demand PharmAcademic evaluation by the RPD, learning experience preceptor, or clinical preceptor will be used to track Journal Clubs. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and via discussion with preceptors at quarterly RAC meetings.

In-services: Nursing or provider in-services will be required on all core learning experiences and when designated by the learning experience description. Other interdisciplinary in-services may be required at the discretion of the preceptor. More information can be found in learning experience descriptions (see PharmAcademic). Summative learning experience evaluations completed by the preceptor will be used to track individual in-services. Progression towards completion of graduation requirements will be tracked via the Effective Education PharmAcademic evaluation, customized training plan, and via discussion with preceptors at quarterly RAC meetings.

Teaching - Skagg’s School of Pharmacy and Pharmaceutical Sciences: Involvement with UCSD’s School of Pharmacy will vary but the resident is required to participate in the Critical Care elective (SPPS 274) leading case conferences and the ACLS hands-on learning experience at the Sim Lab. The resident may be asked to write up cases for therapeutics conference based on real patients and prepare exam questions based on the lectures presented. PGY2 Critical Care residents may also choose to be a conference leader for one of the therapeutics course for 3rd year pharmacy students. Residents will also have multiple opportunities to directly precept students who are currently on rotation with the resident. If the resident has the opportunity to give a lecture in a course, an on-demand PharmAcademic evaluation will be completed by Course Faculty. Progression towards completion of graduation requirements will be tracked via the Practice Management and Effective Education PharmAcademic evaluation, customized training plan, and via discussion with preceptors at quarterly RAC meetings.

BCCCP Lecture Series (aka Critical Care Bootcamp): Critical care residents will be encouraged, but not required, to research and deliver at least one 120-minute lecture on various didactic topics throughout the year. These topics will be related to the BCCCP Preparatory Review Course and will be relevant to the patient population they are currently involved with from a learning experience perspective, when possible. All parties are welcome to attend but the core ICU pharmacists are
strongly encouraged to attend. This lecture series is held in conjunction with the San Diego Veteran’s Affairs and Scripps Mercy PGY2 critical care residents, giving the residents the opportunity to network with other critical care pharmacists in the area.

**Teaching Certificate:**
Participation in the Teaching Certificate program is optional and will be discussed on a case by case basis. Please refer to the Residency Manual for more information on these topics. If the resident elects to complete the Teaching Certificate, the RPD will work with the PGY1 RPD to add the resident to expected events.

**Publication Submission:**
The resident will be required to submit a manuscript for publication by the end of their residency year. The purpose of this requirement will be the development of scientific writing and communication skills. The types of publishable literature can include any of the following types of manuscripts. Previous residents have completed case Reports with a review of relevant literature, primary research/original research, medication Use Evaluation, meta-analysis of a disease state or therapy, or review articles.
# Resident Learning Experiences and Rotation Schedule (2019-2020 Example)

**A minimum of 80% of rotation time must be completed on block learning experiences**

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<tr>
<th>Learning Experience</th>
<th>Dates</th>
<th>Resident #1</th>
<th>Resident #2</th>
<th>Presentation Schedule or other items</th>
<th>Committee work</th>
<th>Research Primer Course</th>
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<td>JC #1</td>
<td>Meeting #3: 8/26/20xx</td>
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¹Research week 1
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<td><strong>Admin catch up and PGY2 candidate review</strong></td>
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**Meeting #8:** 1/27/20xx

**Meeting #9:** 3/9/20xx
Orientation
2 - 3 weeks (internal candidates=2 weeks, external candidates=3 weeks)

Required learning experiences
C3/MICU (4 weeks), C1/SICU (4 weeks), C2/BICU (4 weeks), S1/CT-ICU (4 weeks), J1/PCCM/SCC (4 weeks).

Supplemental learning experiences
Admin, Abdominal transplant, BMT, cardiology, CT txp/VAD, Emergency Department, Geriatric ED, Informatics/Epic, Infectious Disease, NICU, NCC, PCCM, ACCM, trauma, pediatric ICU

Staffing
PGY2 CC residents are required to staff 16 weekends during their PGY2 year. This includes one major and one minor holiday. Scheduled training weekends are also included. Voluntary training weekends are not included. To help provide more formative feedback, residents are expected to seek feedback from at least one staff member each weekend they staff. The feedback will be solicited via an online survey https://ucsd.co1.qualtrics.com/jfe/form/SV_e9Zcl1CCEMbnw1v

Research
3 weeks. During research weeks, the resident is expected to be onsite for at least 8 hours daily; preferably between 6:00 am and 6:00 pm. Prior to each research week, the resident and RPD will meet to discuss required ‘deliverables’ for the week, depending on the resident project progress. Any excursions from this time must be accounted for by requesting time off via the leave adjustment form https://ishare.ucsd.edu/sites/RX/HR%20documents/Leave_Adjustment_Form.pdf

Admin time
Ad Hoc; when returning from conferences or as assigned, remainders of weeks should be used for admin projects. They are not considered off time unless vacation has been requested via leave adjustment form https://ishare.ucsd.edu/sites/RX/HR%20documents/Leave_Adjustment_Form.pdf

Committee
Code Blue (2nd Thursday/month) noon-3pm, Hillcrest; Critical Care MERP (2nd Monday of odd months), 11:30-12:30 Jacobs

Vacation/Weekend Makeup
A minimum of 80% of rotation time must be completed on block learning experiences. When preceptors are on a minimum schedule and may not be available to provide constructive feedback, residents will not be permitted to make up days missed from learning experiences. All vacation requests, including this time period, should be documented with a leave adjustment form (https://ishare.ucsd.edu/sites/RX/HR%20documents/Leave_Adjustment_Form.pdf) before the time is taken
Local/Regional/National Meetings:
The residents will have the opportunity to attend various professional meetings throughout the year. The annual travel stipend is variable, based on funding. In the past, residents have received a set stipend for the year which they can use at their discretion for registration, travel, accommodations, etc. The cost of attending UC Collaborative Annual Pharmacy Leadership Conference (or an equivalent conference) will be deducted from the travel stipend, along with any other conferences the resident chooses to attend. Residents are encouraged to attend a specialty meeting (e.g. Society of Critical Care Medicine Annual Congress). Attendance at UC Collaborative Annual Pharmacy Leadership Conference (or an equivalent conference) to present their resident project is mandatory.

Assessment Strategy – PharmAcademic:
The PGY2 Critical Care Specialty Residency Program uses the ASHP on-line evaluation tool called PharmAcademic, which is available for all ASHP-accredited pharmacy residency programs.

Residents who are matched with our program are entered into PharmAcademic prior to their arrival in August. The incoming resident completes two pre-residency questionnaires that help the Residency Program Director (RPD) design a residency year that is tailored to the specific needs and interests of the resident:

- ASHP Entering Interests Form
- Entering Objective-Based Self-Evaluation

The RPD uses the ASHP Entering Interest Form and Entering Objective-Based Self-Evaluation form to create residents customized training plan. The Residency Requirement Checklist and Customized Training Plan will be discussed and modified (as necessary) through a collaborative effort between the RPD and resident. In addition, the resident may request schedule modifications throughout the residency year and the RPD will make all efforts to accommodate these requests. Assessment tools will be adjusted as changes are made. The RPD will share changes to the Residency Requirement Checklist and Customized Training Plan via PharmAcademic automatic emails to scheduled preceptors and during quarterly PGY2 Critical Care Residency Advisory Council (RAC) meetings.

Residents’ schedules are entered into PharmAcademic. For each learning experience, the following assessments are completed:

- Preceptor Assessment of Resident: Summative (for each learning experience)
- Resident Self-Assessment: Summative-self (for each learning experience)
- Resident Assessment of the Learning Experience
  - Resident assessment of Preceptor(s)
  - Resident assessment of Learning Experience

Preceptors and residents are encouraged to exchange in on-going, daily verbal feedback throughout each learning experience. Residents are expected to provide constructive feedback to the preceptor in their PharmAcademic evaluation at the end of the learning experience. This feedback, along with Preceptor self-evaluation, is helpful in developing worthwhile and relevant preceptor development programming. The Resident and Preceptors are trained and reminded throughout the year to complete evaluations in a thorough (quantitatively and qualitatively) and timely manner (within 7 days of learning experience end). To this end, evaluations may be used, not only as assessment tools, but as tools that Preceptors may turn to for help in guiding Residents to improve, grow and achieve the residency programs and the residents’ goals and objectives for the residency year. The RPD reviews all evaluations and solicits verbal feedback from preceptors and residents to provide guidance to help the resident maximize the residency experience.

Residents’ will be required to complete a PGY2 Critical Care Program Evaluation during the 3rd quarter. Feedback will be discussed at the PGY2 Critical Care RAC meeting and agreed upon changes will be incorporated into the next academic year structure.
Assessment Overview (PGY2 Critical Care)

*It is the resident’s responsibility to initiate the evaluation process with each rotation preceptor prior to the end of each learning experience and to schedule at least quarterly meetings with the residency director.*

<table>
<thead>
<tr>
<th>Learning Experience</th>
<th>Frequency</th>
<th>Resident Self-Assessment (summative)</th>
<th>Preceptor Assessment of Resident (summative)</th>
<th>Resident Assessment of Preceptor and Experience</th>
<th>On-Demand</th>
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<tbody>
<tr>
<td>Orientation</td>
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<td>Required LE</td>
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<td>Supplemental LE</td>
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<td>Grand Rounds</td>
<td>Per experience</td>
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<td>Clinical Forum</td>
<td>Per experience</td>
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<tr>
<td>Journal Club</td>
<td>Per experience</td>
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<td>Teaching</td>
<td>Spring Quarter</td>
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<td>End</td>
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<td>Effective Education</td>
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<td>Resident Skills and Knowledge</td>
<td>Beginning and end of residency</td>
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<td>Program Evaluation</td>
<td>3rd quarter of residency</td>
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</table>

PGY2 Critical Care Competency Areas, Goals and Objectives (2016 Standard):

- Educational Outcome: broad categories of the residency graduates’ capabilities.
  - Outcome R1: Patient Care
  - Outcome R2: Advancing Practice and Improving Patient Care
  - Outcome R3: Leadership and Management
  - Outcome R4: Teaching, Education, and Dissemination of Knowledge
Educational Goals: Goals listed under each outcome are broad sweeping statements of abilities.

Educational Objectives: Resident achievement of educational goals is determined by assessment of the resident’s ability to perform the associated educational objective below each educational goal.

The resident is encouraged to read detailed information about each goal at the ASHP website (click on Critical Care Pharmacy (PGY2), 2016)
https://www.ashp.org/Professional-Development/Residency-Information/Residency-Program-Directors/Residency-Accreditation/PGY2-Competency-Areas

For information about Goals and Objectives Taught/Taught and Evaluated in Learning Experiences, please visiting PharmAcademic, go the ‘Reports’ tab, and click on ‘Goals and Objectives Taught/Taught and Evaluated in Learning Experiences’.

**PGY2 Critical Care Residency Requirements for Completion/Graduation:**

- Successful completion of learning experiences, including any required presentations listed in learning experience description: all learning experience objectives marked satisfactory progress (SP), ACH or achieved for residency (ACHR) by the final evaluation. Any expectations of the residents that are not met or learning objectives with needs improvement (N/I) from an on-demand or scheduled evaluation will result in a meeting between the learning experience preceptor, RPD, and resident and a plan of correction will be formulated. Failure to complete the plan of correction, may result in disciplinary action. Please refer to program structure for all components of required learning experiences, including projects, presentations, and research.

- ≥90% of RLS objectives marked “Achieved for the Residency” by the end of the year (as evaluated by individual rotation preceptors or by the RPD upon final review of the resident’s progress). All patient care related objectives (Outcome R1: Patient Care) must be achieved.

- Creation and completion of required projects and presentations. Please review structure for complete list of required presentations

- Twelve months minimum is allotted to successfully complete the core requirements. If a core learning experience must be repeated, then elective time shall be used. If the above requirements are not met in full by 90 days after the residency end, the residency certificate may be withheld at the discretion of the residency director.