

## Appendix A Acute Care

# PGY1 Acute Care Pharmacy Residency Program Overview

National Matching Service Number: **176413**

<https://health.ucsd.edu/specialties/pharmacy/residency/Pages/pharmacypractice.aspx>

The UC San Diego Health Department of Pharmacy offers a one-year pharmacy practice residency in Acute Care beginning July 1.

### **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 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 in both the inpatient and outpatient settings, to a broad spectrum of patient populations including internal medicine, surgery, cardiology, oncology, solid organ transplant, bone marrow transplant, infectious diseases, nephrology and HIV/AIDS.

This pharmacy practice residency focuses on direct, multidisciplinary patient care in the acute care setting with elective opportunities available in the inpatient and outpatient settings. With additional learning and training opportunities in research and teaching, the program is tailored to the individual's needs and interests.

### **Purpose**

The purpose of the UC San Diego Health PGY1 Residency Program is to build on 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, eligible for board certification, and eligible for postgraduate year two (PGY2) pharmacy residency training.

### **Program Description**

The UC San Diego Health PGY1 Acute Care Residency Program provides trainees with an extensive experience in the art and science of pharmacy and in all aspects of the medication use process so they are able to achieve excellence in the medication-related care and treatment of their patients, research and teaching. Residents will be encouraged, trained and required to take ownership of the outcomes of their patients as they provide evidence-based contributions and recommendations in a multidisciplinary team acute care and transitional care environment.

Residents completing the UC San Diego Health PGY1 Acute Care Pharmacy Residency will be competent in the management of medication therapy for various disease states in a variety of health care settings and for diverse patient populations, primarily in the acute care environment. Residents will benefit from block and longitudinal learning experiences in the inpatient and ambulatory care settings with the majority of their training in the acute care setting, including medicine, critical care and several elective opportunities.

Resident pharmacists will have been trained and educated in teaching modalities and will have participated in a Teaching Certificate Program. Residents will have demonstrated proficiency in communication and in educating other health care professionals, patients, students and the community on medication related topics. Residents will have opportunities in precepting students on rotation and during Therapeutics Conferences at UCSD SSPPS. The resident will also be involved in a research project. Scientific writing is strongly emphasized and the preparation of a manuscript suitable for publication will be required.

Residents, also called Trainees and House Officers [see House Officer Policies and Procedures Document (HOPPD)], will have demonstrated professional maturity by evaluating and monitoring their own performance. They will have been trained in research methodologies and leadership skills. Graduates of this program will be prepared for adjunct faculty positions, direct patient care opportunities in acute care settings, advanced PGY2 programs and will be eligible to sit for board certification as a pharmacotherapy specialist. Pharmacy residents completing this program will be proficient in the areas of:

1. Patient care
2. Advancing practice and improving patient care
3. Understanding leadership and management skills

#### 4. Teaching, education, and dissemination of knowledge

**Number of residency positions available:** 12 new residents are accepted each year.

#### **House Officer Details:**

The annual stipend is currently \$50,500. Benefits include medical, dental, and vision insurance. In addition, vacation, sick and professional leave are provided. Please visit the UC San Diego Health Pharmacy Residency webpage for more information about duty hours, leave, benefits, position description, terms of dismissal, and more. Click on the House Officer Policy and Procedure Document:

<https://health.ucsd.edu/specialties/pharmacy/residency/Pages/Salary-and-Benefits.aspx>

#### **Candidate Eligibility Requirements:**

The UC San Diego Health PGY1 Acute Care residency program participates in the PhORCAS on line application process. Eligible candidates must apply through PhORCAS, completing all sections and must meet the following:

1. Graduate or candidate for graduation of an Accreditation Council for Pharmacy Education (ACPE) accredited degree program (or one in the candidate process), or have a Foreign Pharmacy Graduate Equivalency Committee (FPGEC) certificate from the National Association of Boards of Pharmacy (NABP); if a Foreign Pharmacy Graduate, candidate must hold a valid Visa that does not require sponsorship of any kind for the duration of the residency appointment or a "green card" and must be licensed as a pharmacist in the State of California
2. Licensed or eligible for licensure as a pharmacist in the state of California (notwithstanding the above for Foreign graduates)
3. Have  $\geq$  B or "pass" average in combined Therapeutics (or equivalent) courses and  $\geq$  C in any given Therapeutics course

All applicants will be evaluated and ranked according to specific criteria using established rubrics and video interviews (via Zoom or other online program) may be utilized; offers for an on-site interview with the RPD and interview team will be made. On-site interviews will be held during late January through February.

The UC San Diego Health PGY1 acute Care residency program participates in the ASHP Resident Matching Program. **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/ashprmp](http://www.natmatch.com/ashprmp)

#### **Application:**

Applications for the next incoming resident class will be accepted upon activation of the PhORCAS system in late November. Deadline for application is December 31<sup>st</sup>. Applications must be submitted through PhORCAS and include, in addition to completing all PhORCAS components, the following:

1. Letter of intent [see UC San Diego Health Acute Care Pharmacy residency website for prompt(s)]
2. Current Curriculum Vitae with all experiential completed and anticipated rotations as well as pharmacy work experience
3. Three electronic references, two of which must be from preceptors who can directly comment on your clinical and practice skills
4. Official pharmacy school transcript

#### **If matched with the UC San Diego Health Residency Program, matched residents must:**

1. Have successfully graduated from an ACPE accredited school of pharmacy with a Doctor of Pharmacy degree (International students: see above)
2. Obtain California pharmacy intern licensure prior to beginning of the residency appointment; offer may be rescinded if the resident does not have a California pharmacy intern license prior to July 1<sup>st</sup> of the appointment year
3. Obtain California pharmacist licensure within 90 days of the start of the residency program; failure to be a licensed pharmacist in California within 90 days of the start date of the residency will result in automatic resignation or implementation of a corrective action plan at the discretion of the RPD and upon advice from the RAC and PIC; the Corrective Action Plan is written by the Resident's Residency Program Director and must be adhered to by the Resident; the Corrective Action Plan may include, but is not limited to, changes in rotation and staffing schedules, and a paid or unpaid extension of the residency year

#### **Program Structure**



- Academia
- Administration (Acute or Am Care)
- Anticoagulation Management Clinic
- Antiretroviral/HIV Clinic
- Bone Marrow Transplant
- Burn ICU, Hillcrest
- Cardiology
- Cardiovascular ICU (CVC ICU; Anesthesia Critical Care Medicine: ACCM)
- Chronic Kidney Disease Clinics
- CT Transplant/Mechanical Assist Devices
- Diabetes Clinics
- Emergency Department (general and Geriatrics)
- Infectious Diseases
- Informatics
- Investigational drug services
- Jacobs Medical Center ICU (JMC MICU; Pulmonary Critical Care Medicine; PCCM)
- Medical ICU, Hillcrest
- Medicine, Hillcrest
- Medicine, La Jolla
- Moore's Cancer Center Clinics and Infusion Center (prerequisites: BMT or ONC)
- Neonatal ICU
- Neuro critical care
- Oncology (Acute care or infusion center)
- Pediatrics (General, ICU and/or Onc)
- Pharmacy Home Infusion Service
- Psychiatry (Inpatient)
- Solid Organ Transplant Clinics
- Student-run free clinics
- Surgical ICU, Hillcrest
- Transitions of Care (Heart failure and HIV)

Descriptions of each learning experience can be found in [PharmAcademic](#)

### Resident Learning Experiences and Rotation Schedule (Example)

Rotation	Dates	Rotation
1	7/1-7/15/xx	Orientation
2	7/18 – 8/19/xx	Training
3	8/22 – 9/23/xx	Medicine I
4	9/26 – 10/28/xx	Elective 1
5	10/31 – 12/9/xx	Ambulatory Care
6	12/12 – 2/3/xx	Elective 2

7	2/6 – 3/17/xx	Medicine 2
8	3/20 – 4/21/xx	Administration
9	4/24 – 5/26/xx	ICU
10	5/30 – 6/30/xx	Elective 3

**Staffing/Vacation/Educational leave:**

Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY1 residents to experience operations and patient care in a variety of areas/shifts under the supervision and with the support of preceptors and experienced staff pharmacists. PGY1 residents will staff 20 weekends (which includes 2 minor holiday weekends PLUS 1 major holiday weekend (Thanksgiving, Christmas, or New Year's), and eight Wednesday morning two hour coverage of the central pharmacy. The resident will get eight additional paid holidays off and 12 sick days for the academic year. Vacation time will be in accordance with GME rules and will be defined as 20 days of vacation; the resident is also eligible to receive 5 days for professional leave to attend meetings or conferences as assigned.

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\\_28XYFXGDfnhj0wd](https://ucsd.co1.qualtrics.com/jfe/form/SV_28XYFXGDfnhj0wd)

**Resident Project:**

The resident will be responsible for conducting a resident project throughout the academic year that will be completed and presented at the UC Collaborative Conference or an equivalent professional meeting. 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 process. The purpose of starting a second project is to facilitate subsequent residents who can then finish the projects that were started the previous year. A list of project ideas will be generated from preceptors and the resident is expected to select a project during the first month of the residency year. The resident will participate in a longitudinal Research Primer Course which has been developed by the UC San Diego Health Research Council to coach residents through the various aspects of the research process. Attendance, participation and completion of the Research Primer Course is mandatory.

**Assessment Strategy – PharmAcademic**

The PGY1 Acute Care Residency Program uses the ASHP on-line evaluation tool called PharmAcademic, which is available for all ASHP-accredited pharmacy residency programs. This system, which is technologically supported by the McCreadie Group, supports the ASHP Residency Standards, Competency Areas with corresponding Goals and Objectives.

Residents who are matched with this PGY1 program are entered into PharmAcademic prior to their arrival in July. 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 Standard Entering Interests Form
- Goal-Based Entering Interests Form

Residents' schedules and assigned Goals and Objectives 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 (as assigned)
- Resident Assessment of the Learning Experience
  - Resident assessment of Preceptor
  - Resident assessment of Learning Experience

Preceptors and residents are encouraged to exchange in on-going, daily verbal feedback throughout each rotation experience. Feedback may also be provided using the PharmAcademic Feedback option. The Resident and Preceptors are trained and reminded throughout the year to complete evaluations in a thorough (quantitatively and qualitatively) and timely manner. 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.

The Residents discuss their Program goals and interests quarterly (Quarterly Plan Development Update) with the RPD to evaluate where they are in meeting the residency and resident's goals and to set or modify goals for the remaining months of the residency program. Residents may choose to meet more often and as needed as their interests change throughout the year. 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 Resident completes the ASHP PharmAcademic exit evaluation. Residents also are required to complete an evaluation of the Residency Program.

The results of these year-end Program evaluations are reviewed by the RPD and discussed at RAC for potential merit and action plans are developed in an effort to achieve continuous quality improvement.

All evaluations must be completed within seven days of the assigned due date.

### Assessment Overview (PGY1 Acute Care)

*It is the resident's responsibility to ensure the timely completion of all evaluations (within seven days of the end of the learning experience or the evaluation due date).*

	Timing	Type of Assessment			
		Summative	Summative-Self	Resident assessment of Preceptor	Resident assessment of Learning Experience
Administration	Final	X		X	X
Am Care longitudinal clinic	Quarterly (Midpoint and final)	X		X	X
Am Care rotation	Final	X		X	X
Electives	Final	X		X	X
ICU	Final	X	X	X	X
Med Hillcrest	Final	X	X	X	X
Med La Jolla	Final	X	X	X	X
Operations/staffing	Quarterly	X	X	X	X
Orientation	Final	X	X	X	X
Professional Development	Quarter	X	X	X	X
Project	Quarterly	X	X	X	X
Teaching Certificate Program	Quarterly	X	X	X	X
Therapeutics Conference	Final	X	X	X	X
TOC	Final	X		X	X
Training	Final	X		X	X

### PGY1 Standards, Competency Areas, Goals and Objectives

Competency Areas of the Residency Program are based on Standards of PGY1 residency programs outlined by the American Society of Health-System Pharmacy (ASHP). The following is the list of standards as stated by ASHP:

- **Standard 1: Requirements and Selection of Residents**
  - This Standard is intended to help ensure success of residents and that exemplary pharmacists are identified for further development for the benefit of the profession and contributions to patient care. Therefore, residents must be pharmacists committed to attaining professional competence beyond entry-level practice, committed to attaining the program's educational goals and objectives, and supportive of the organization's mission and values.
- **Standard 2: Responsibilities of the Program to the Resident**
  - It is important that pharmacy residency programs provide an exemplary environment for residents' learning. This area indicates policies that must be in place to help protect residents and organizations during unusual situations that may arise with residency programs (e.g. extended leaves, dismissal, duty hours).
- **Standard 3: Design and Conduct of the Residency Program**
  - It is important that residents' training enables them to achieve the purpose, goals, and objectives of the residency program and become more mature, clinically competent practitioners, enabling them to address patients' needs. Proper design and implementation of programs helps ensure successful residency programs.
- **Standard 4: Requirements of the Residency Program Director and Preceptors**
  - The residency program director (RPD) and preceptors are critical to the residency program's success and effectiveness. Their qualifications and skills are crucial. Therefore, the residency program director and preceptors will be professionally and educationally qualified pharmacists who are committed to providing effective training of residents and being exemplary role models for residents.
- **Standard 5: Requirements of the Site Conducting the Residency Program**
  - It is important that residents learn to help institute best practices in their future roles; therefore, the organization conducting the residency must meet accreditation standards, regulatory requirements, and other nationally applicable standards, and will have sufficient resources to achieve the purposes of the residency program.
- **Standard 6: Pharmacy Services**
  - When pharmacy facilities and services provide the learning environment where residents are trained, it is important that they train in exemplary environments. Residents' expectations as they leave residency programs should be to strive for exemplary pharmacy services to improve patient care outcomes. Pharmacy's role in providing effective leadership, quality improvement efforts, appropriate organization, staffing, automation, and collaboration with others to provide safe and effective medication-use systems are reviewed in this section. This section encourages sites to continue to improve and advance pharmacy services and should motivate the profession to continually improve patient care outcomes

#### ASHP Definitions

- Competency Area: Categories of the residency graduates' capabilities; Competency areas fall into one of three categories:
  - Required: Four competency areas are required (all programs must include them and all their associated goals and objectives)
    - Competency Area R1: Patient Care
    - Competency Area R2: Advancing Practice and Improving Patient Care
    - Competency Area R3: Leadership and Management
    - Competency Area R4: Teaching, Education, and Dissemination of Knowledge
  - Additional: Competency area(s) other than the four areas required above that are required for all residents
  - Elective: Competency area(s) selected optionally for specific resident(s)
- Educational Goals (Goal): Broad statement of abilities
  - Please visit the ASHP website to find specific goals and objectives for PGY1 residencies. Click on the link for 'Required Competency Areas, Goals, and Objectives' or click the link here: <https://www.ashp.org/Professional-Development/Residency-Information/Residency-Program-Directors/Residency-Accreditation/PGY1-Competency-Areas>
- Educational Objective: Observable, measurable statement describing what residents will be able to do as a result of participating in the residency program.
- Criteria: Examples intended to help preceptors and residents identify specific areas of successful skill development or needed improvement in resident

The competency areas of the Residency Program are based on the standards above and are specified by ASHP. Residents must have documentation that the required AND additional competency areas were achieved by the end of the Residency Program. **Failure to complete required and additional competency areas will result in failure to obtain the residency certificate.** The following is a list of required and additional Competency Areas to be completed throughout the year:

- **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.
  - Goal R1.2: Ensure continuity of care during patient transitions between care settings.
  - Goal R1.3: Prepare, dispense, and manage medications to support safe and effective drug therapy for patients.
- **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.
  - 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.
- **Competency Area R3: Leadership and Management**
  - Goal R3.1: Demonstrate leadership skills.
  - Goal R3.2: Demonstrate management skills.
- **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).
  - Goal R4.2: Effectively employ appropriate preceptors' roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).
- **Competency Area E6: Teaching and Learning**
  - Goal E6.1: Demonstrate foundational knowledge of teaching, learning, and assessment in healthcare education.
  - Goal E6.2: Develops and practices a philosophy of teaching. UC San Diego Health PGY1 Acute Care Residency Program **Required** and **Additional** Competency Area goals and objectives:

For information about Goals and Objectives Taught/Taught and Evaluated in Learning Experiences, please visit [PharmAcademic](#), go to the 'Reports' tab, and click on 'Goals and Objectives Taught/Taught and Evaluated in Learning Experiences'.

**PGY1 Acute Care Residency Requirements for Completion/Graduation:**

- Candidates must meet eligibility requirements before interviewing and being matched
- California Board of Pharmacy Intern License must be obtained prior to the start of the Residency Program
- Successfully licensed as a pharmacist by the California Board of Pharmacy within 90 days of the start of the appointment year; see above
- Completion of all evaluations in PharmAcademic within 7 days of due date
- Completion of residency project
  - Abstract: as required
  - Platform presentation: at a suitable conference/meeting (as assigned)
  - Preparation of the residency project in manuscript format with final approval by the Research Council Chair or designee
- Completion of Teaching Certificate Program and all presentations/teaching activities required within
- Attendance at all SDPRL required meetings
- Successful completion of all learning experiences (learning objectives marked as SP, ACH or ACHR; no NI)

**NI:** Resident is not performing at an expected level at that particular time; significant improvement is needed

**S/P:** Resident is performing and progressing at a level that should eventually lead to mastery of the goal/objective

**ACH:** Resident can perform associated activities independently for this learning experience

**ACHR:** Resident can perform associated activities independently across the scope of pharmacy practice

- All R.1 objectives ACHR by the final evaluation
- $\geq 90\%$  ASHP goals and objectives marked as **ACHR** (as evaluated by individual rotation preceptors or by the RPD upon final review of the resident's progress)
- Completion of all required competencies
- Membership in the California Society of Health Systems Pharmacists and the American Society of Health-System Pharmacists
- Maintain professional standards throughout residency appointment



- Completion of residency research project, including presentation at a suitable conference/meeting and completion of a project “write-up” in manuscript format suitable for publication
- Completion of Pharmacy Research Primer Course
- If a required rotation must be repeated then elective time shall be used, if possible, or an extension may be necessary at the discretion of the RPD; if the above requirements are not met in full, the residency certificate may be withheld at the discretion of the Residency Program
- Twelve months minimum is required to complete the residency appointment. Three months maximum post the end of the residency appointment is allotted to successfully complete the residency graduation requirements to have the Certificate of Completion conferred; exceptions and continuation beyond three months is at the discretion of the Residency Program Director and Pharmacist-in-Chief and is reviewed on a case by case basis

### **Consequences of Failure to Meet Licensing Requirements**

- The UC San Diego Health Pharmacy Residency PGY1 Programs require all Residents to have obtained their California Intern Pharmacist License prior to the Appointment Residency Year; additionally, PGY1 Pharmacy Residents must obtain their Pharmacist License in California within 90 days of the start of the appointment year to maximize their learning opportunities; failure to be a licensed pharmacist in the State of California within 90 days of the start of the residency program will result in automatic voluntary resignation or implementation of a corrective action plan at the discretion of the RPD (and upon advice from the RAC and PIC); the Corrective Action Plan is written by the Resident’s Residency Program Director and must be adhered to by the Resident; the Corrective Action Plan may include, but is not limited to, changes in rotation and staffing schedules, and a paid or unpaid extension of the residency year (to ensure that a minimum of 2/3 of residency is completed as a pharmacist licensed to practice in the state of California, as required by ASHP-accredited residency programs)
- Once licensed, Residents must maintain a full and unrestricted license in order to continue their appointment; should a Resident’s license be placed on probation, his/her continuation in training will be at the discretion of the Program Director and the Pharmacist in Chief; appointments will not be made for Candidates/Residents who are on probation from the California Board of Pharmacy