

## **PGY2 Infectious Diseases Pharmacy Residency Program Overview**

National Matching Service Code: 509655

[https://health.ucsd.edu/specialties/pharmacy/residency/Pages/infectious\\_diseases.aspx](https://health.ucsd.edu/specialties/pharmacy/residency/Pages/infectious_diseases.aspx)

The UC San Diego Health Department of Pharmacy offers a one-year specialty residency in infectious disease pharmacy practice beginning August 1<sup>st</sup>.

**Scope:**

UC San Diego Health (UCSDH) 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. UCSDH is also affiliated with Rady Children's Hospital-San Diego, the Veterans Affairs San Diego Healthcare System and the Sharp Memorial Hospital Joint Bone and Marrow Transplant Program. In addition, UCSDH is affiliated with the UCSD School of Medicine and the UCSD Skaggs School of Pharmacy and Pharmaceutical Sciences. The Department of Pharmacy provides clinical services at all three hospitals and assorted other clinical services. Clinical services include surgical, trauma, medical, burn, neurocritical, neonatal and cardiovascular ICUs, in addition to internal medicine, surgery, cardiology, oncology, solid organ transplantation and bone marrow transplantation, and HIV/AIDs and others.

The Infectious Diseases (ID) service provides broad inpatient coverages, including: two General Inpatient ID services (one at Hillcrest and one in La Jolla), a Hematology and Oncology ID Service which includes coverage of Bone Marrow Transplant patients in La Jolla, a Solid Organ Transplant ID Service in La Jolla and an HIV/AIDs ID Service in Hillcrest. This specialty residency balances direct patient care, research, and teaching opportunities and is tailored to the individual's interest within the infectious diseases and antimicrobial stewardship discipline. Primary service responsibilities include antimicrobial stewardship, active participation in microbiology laboratory rounds, and acting as an active and essential member of the Infectious Diseases Consultation Service and the Antimicrobial Stewardship Program.

**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:**

A primary goal of the UC San Diego Health PGY2 Infectious Diseases Pharmacy Residency is to train and educate pharmacists in the delivery of exemplary pharmaceutical care to patients with infectious diseases. This residency embraces the concept that infectious diseases pharmacy practitioners share in the responsibility and accountability for optimal drug therapy outcomes. Infectious diseases pharmacy residents must function independently as practitioners through conceptualizing, integrating, and transforming accumulated experience and knowledge into improved drug therapy for patients and overall antimicrobial stewardship. The resident(s) will engage in various learning experiences with depth, allowing them to understand and appreciate the implications of medication therapy used in various disease states commonly encountered in this volatile patient population. These advanced practitioners will demonstrate leadership and practice management skills, and will develop proficiency in communication through educating other health care professionals, patients, and students on infectious diseases issues. The practitioners will develop the skills necessary to conduct an infectious diseases research project as well as demonstrate professional maturity by strengthening their personal philosophy of practice, monitoring their own performance, and exhibiting commitment to the profession. Graduates of this specialized program will create working career plans and possess intense, focused marketable job skills that should prepare them for career opportunities in Infectious Diseases and Antimicrobial Stewardship in addition to any advanced pharmacy practitioner: independent practice skills, multi-tasking and prioritization.

This specialty residency balances service, research, and teaching opportunities and is tailored to the individual. Primary service responsibilities include antimicrobial stewardship, attending daily microbiology laboratory rounds, and participation with the Infectious Diseases Consultation Service. A broad range of electives are available for the resident to select from in addition to a variety of longitudinal clinical practice sites. Teaching activities include regular didactic presentations, leading ID-related therapeutics conferences in the UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences, and, as warranted, clerkship preceptorship of first-year pharmacy practice residents and fourth-year UC-San Diego pharmacy students in their clinical infectious diseases learning experience. The ability to work

independently and to supervise pharmacy students and residents will be emphasized. A residency project will be completed and presented at the UC Leadership Collaborative Conference. Scientific writing is strongly emphasized and the preparation and submission of a manuscript will be expected. Residents will be required to staff 16 weekends covering inpatient medicine patients or operational shifts.

### **Program Outcomes**

Our Infectious Diseases (PGY2) Pharmacy residents **completing** this program will be advanced practitioners proficient in the areas of:

- **Demonstrating leadership and practice management skills.** Our graduating residents will effectively strengthen their knowledge, skills, and abilities in all key areas of practice management. These areas would include, among others, exploring their own professional growth improving the quality of one's own self-assessment, developing effective negotiation skills to resolve conflicts, and demonstrating a commitment to advocacy for the optimal care of patients.
- **Optimizing the outcomes of patients with infectious diseases by providing evidence-based medication therapy as an integral part of an interdisciplinary team.** By consistently using an efficient and comprehensive pharmacy practice methodology, our graduating residents will become leaders in medication safety and have enhanced patient outcomes by integrating patient- and evidence-based disease-specific pharmacotherapy at the level of an advanced practitioner in various critical care settings.
- **Demonstrating excellence in the provision of training, including preceptorship, or educational activities for health care professionals and health care professionals in training.** Our graduating residents will become proficient in educating health care professionals, patients, and students on infectious diseases topics. Our residents will also be able to provide concise and accurate responses to requests for infectious diseases drug information from health care providers.
- **Demonstrating the skills necessary to conduct an infectious diseases pharmacy research project.** Our graduating residents will be engaged in multiple projects related to infectious diseases throughout the year including a continuous quality improvement (CQI) project and at least one formal research project. Enhanced project management skills and familiarity of technological systems will support the resident throughout these endeavors.
- **Demonstrating the skills required to function in an academic setting.** The resident prepares and delivers a formal didactic lecture within to pharmacy students at the Skaggs School of Pharmacy and Pharmaceutical Sciences on a topic relevant to the specialized area of pharmacy residency training.

**Number of residency positions available:** 1 resident is accepted each year.

### **House Officer Details:**

The annual stipend is currently \$54,000. 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>

### **Requirements:**

This specialty residency program participates in the ASHP Resident Matching Program. **If matched with the UCSD 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 practice residency
3. Obtained California pharmacy licensure prior to beginning residency (absolute deadline to start = November 1<sup>st</sup>). The residency offer may be rescinded if the resident does not take the CPJE prior to August 1<sup>st</sup> or does not pass the CPJE 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/ashprmp](http://www.natmatch.com/ashprmp). Applications will be accepted when PhORCAS opens and due by December 31<sup>st</sup>. Applications should be submitted through PhORCAS and include the following:

1. Letter of intent. Please address the following items in your letter of intent and how you will play a role in these items. Your letter of intent should be no more than 2 pages in length.
  - Address where you feel infectious diseases pharmacy will be in 5 years.
  - Address your vision of an infectious diseases pharmacist practicing at the top of their license.
2. Current *Curriculum Vitae* with all experiential completed and anticipated rotations as well as pharmacy work experience.
3. Three electronic references are required. At least 2 of the letters should be from preceptors or supervisors who can directly comment on your clinical and 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 (via Zoom, GoToMeeting, Skype or other modality) in early/mid January is required for non-UC San Diego Health PGY1 residents. On-site interviews will be held during late January through early March. For residents applying for the 2019 – 2020 academic year, onsite interviews will be held 2/1/19 and 2/22/19.

### **Program Structure (2019 – 2020)**

- 2-4 weeks of orientation/training/research (duration determined by the resident's previous experience)
- 7 required learning experiences (2 – 6 weeks in length):
  - General Infectious Diseases (ID) Service 4 – 5 weeks (determined by resident goals)
  - Antimicrobial Stewardship 1 (2 - 4 weeks, determined by resident goals)
  - Antimicrobial Stewardship 2 (advanced) (3 – 4 weeks, determined by resident goals)
  - HIV (3 – 6 weeks, determined by resident goals)
  - Hematology/Oncology/BMT ID Service (BMT ID) (3 – 6 weeks, determined by resident goals)
  - Solid Organ Transplant (SOT) / Ventricular Assist Device (VAD) ID Service (3 – 6 weeks, determined by resident goals)
  - Foundations in microbiology laboratory (4 weeks)
  - Advanced Infectious Diseases (4 – 5 weeks, determined by resident goals)
- 2 – 3 weeks research time (including time provided during orientation)
- 3 elective blocks (3 – 4 weeks each)
- Longitudinal Clinic Learning Experience(s) (one half-day per week): clinic of resident's choice (e.g. HIV/HCV co-infection clinic)
- Resident project (Research Primer Series will be required, if not previously completed)
- Staffing (16 weekends annually, includes one minor and one major holiday)
- Practice Management and Effective Education / Teaching / Presentations
  - Committee Participation and Involvement: Antimicrobial Utilization Committee (meets at least 1x quarterly), Infection Control Committee (1<sup>st</sup> Wednesday, Quarterly), and at least two Pharmacy and Therapeutics (P&T) Committee Meetings
  - Grand Rounds
  - Medication Utilization Evaluation (at least 1 required)
  - Quality Improvement Initiative (e.g. order set review, guideline update, formulary monograph (can be associated with MUE) (at least 1 required)
  - Journal Club Presentation (at least 2 required)
  - Presentations to health care professionals or those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Rounds) (at least 3 required)
  - Teaching at UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences
    - Therapeutics Conference Leader
    - Didactic Lecture on Microbiology / Infectious Diseases Topic
- Publication submission

### **Elective Rotations (aka supplemental learning experiences):**

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

The resident will have an opportunity to choose from 3 electives of 3 – 4 weeks in duration in an area dependent on the resident's previous experience and goals. Areas of excellence include Critical Care (Medicine CCU, Burn ICU, Surgical ICU, Neurocritical Care ICU), Bone Marrow Transplant, Hematology/Oncology, Hepatology, Cardiothoracic Transplant and Abdominal Transplant Services, HIV inpatient and outpatient services, Transitions of Care, and Information Services. The elective choices allow the resident the flexibility to tailor their PGY2 experience to an area of interest. The primary focus during these elective rotations would be the infectious diseases associated with these patient populations.

**Mock-Up Resident Learning Experiences and Rotation Schedule (2019 – 2020)**

**\*\*A Minimum of 80% of rotation time must be completed on block rotations\*\***

Month	August	August	August	August	Aug/Sep	Sept	Sept	Sept	Sept	Sep/Oct	October	October	October	Oct/Nov
Dates	1 – 2	5 – 9	12 – 16	19 – 23	26 – 30	2 – 6	9 – 13	16 – 20	23 – 27	30 – 4	30 – 4	7 – 11	14 – 18	21 – 25
Learning Experience	Orient	Orient	Orient	Orient	ID Gen	ID Gen	ID Gen	ID Gen	ID Gen	Research week	ASP1	ASP1	HIV	HIV
Practice Management						ICC			AUC	JC1		Clin Forum		
Longitudinal clinic					HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM
Research primer	Mtg 1	Mtg 2	Mtg 3	Mtg 2.1	Mtg 4		Mtg 5	Mtg 6	Mtg 7	Mtg 8		Mtg 9		

ICC (Infection Control Committee) meets on the 1<sup>st</sup> Wednesday quarterly from 4-5:30pm alternating between Hillcrest MPF 4-450 (Multi-Purpose Facility) and JMC 1-603  
 AUC (Antimicrobial Utilization Committee) meets at least quarterly: planned every 2 months on the 4<sup>th</sup> Thursday of the Month in Hillcrest 1:30 – 3:00 pm

Month	Nov	Nov	Nov	Nov	Nov	Dec	Dec	Dec	Dec	Dec/Jan	Jan	Jan	Jan	Jan
Dates	28 – 1	4 – 8	11 – 15	18 – 22	25 – 27	2 – 6	9 - 13	16 – 20	23 – 27	30 – 3	6 – 10	13 – 17	20 – 24	27 – 31
Learning Experience	HIV	HIV	Research week	Micro	Micro	Micro	Micro	Micro	Vac or Staff	Vac or Staff/Ad	BMT	BMT	BMT	BMT
Practice Management			AUC			ICC							AUC	Clin Forum
Longitudinal clinic	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	HIV/HCV Friday PM	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD
Teaching											SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk
Research primer		Mtg 10												

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 AUC (Antimicrobial Utilization Committee) meets at least quarterly: planned every 2 months on the 4<sup>th</sup> Thursday of the Month in Hillcrest 1:30 – 3:00 pm

Month	Feb	Feb	Feb	Feb	March	March	March	March	Mar/Ap	April	April	April	Ap/May	May
Dates	3 – 7	10 – 14	17 – 21	24 – 28	2 – 6	9 – 13	16 – 20	23 – 27	30 - 3	6 – 10	13 – 17	20 – 24	27 – 1	4 – 8
Learning Experience	BMT	SOT	SOT	SOT	SOT	Research week	ASP2	ASP2	ASP2	Elect1	Elect1	Elect1	Elect1	Elect2
Practice Management	Interviews	Interviews	Interviews		ICC	JC2		AUC	Clin Forum					
Longitudinal clinic	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD
Teaching	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	SSPPS ½ day/wk	Optional	Optional	Optional	Optional	Optional	Optional
Research primer	Mtg 11													

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 AUC (Antimicrobial Utilization Committee) meets at least quarterly: planned every 2 months on the 4<sup>th</sup> Thursday of the Month in Hillcrest 1:30 – 3:00 pm

## **Mock-Up Resident Learning Experiences and Rotation Schedule (2019 – 2020) (page 2)**

**\*\*A Minimum of 80% of rotation time must be completed on block rotations\*\***

Month	May	May	May	June	June	June	June	Jun/Jul	July	July	July	July
Dates	11 – 15	18 – 22	25 – 29	1 – 5	8 - 12	15 – 19	22 – 26	29 – 3	6 – 10	13 – 17	20 – 24	27 – 31
Learning Experience	Elect2	Elect2	Elect2	Adv ID	Adv ID	Adv ID	AdvID	AdvID	Elect3	Elect3	Elect3	Elect3
Practice Management			AUC	ICC					ASP train PGY1		AUC	
Longitudinal clinic	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD	Clinic TBD
Teaching	Optional	Optional	Optional	Optional	Optional	-	-	-	-	-	-	-
Research primer												

ICC (Infection Control Committee) meets on the 1<sup>st</sup> Wednesday quarterly from 4-5:30pm alternating between Hillcrest MPF 4-450 (Multi-Purpose Facility) and JMC 1-603

AUC (Antimicrobial Utilization Committee) meets at least quarterly: planned every 2 months on the 4<sup>th</sup> Thursday of the Month in Hillcrest 1:30 – 3:00 pm

### Longitudinal and Part of ID Core Rotations:

- Micro Rounds on Tuesdays, Wednesdays, Fridays: 11 – 12 pm (location per ID fellow) (allow some flexible per SOT ID attending schedule/plans)
- Attend ID Rounds on Thursdays from 3 – 5 pm
  - 1st and 3rd Thursday of the Month at the VA
  - 2nd and 4th Thursday of the Month at Hillcrest AVRC

**Longitudinal Clinic:** In addition to the acute care learning experience, the resident will participate in a longitudinal clinic of their choice during their residency. This clinic involvement will be a ½ day per week and will give the resident a chance to view the outpatient management of patients on a long term basis. It is highly encouraged that the resident participates in the HIV/HCV co-infection clinic.

**Staffing:** Staffing will be incorporated into the residency experience with weekend shifts that provide the opportunity for PGY2 residents at UCSDH. The PGY2 resident will be invited to staff 16 weekends (which includes 1 minor holiday weekend PLUS 1 major holiday (Thanksgiving, Christmas, or New Year's)). The resident will get 13 paid days for holidays 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 PLUS 5 days for professional leave to attend meetings or conferences. Please refer to the [House Officer Policy and Procedure Document](#) for more detailed information about vacation. 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 [Qualtrics survey](#).

**Resident Research Project:** The resident will be responsible for conducting a research 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 ID residents who have not previously completed the Research Primer Course are required to attend. More information can be found in the Resident Manual, Appendix S. 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 Infectious Disease residents who can then finish the projects that were started the previous year. A list of project ideas will be generated from the preceptors and 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](#).

**Practice Management and Effective Education / Teaching / Presentations:**

The PGY2 resident will track their progress and development in the areas of ongoing antimicrobial stewardship initiatives, practice management, clinical quality improvement projects (if not part of a year-long resident project), medication use evaluation, orderset review (and/or formulary monograph), and effective education or training to health care professionals or those in training through this longitudinal experience. Quarterly, the RPD and resident will complete a summative evaluation via PharmAcademic and update the resident's customized training plan, as needed. Items which are included and evaluated in this longitudinal rotation include committee participation (Antimicrobial Utilization Committee, Infection Control Committee), Quality improvement opportunities (orderset or guideline creation or review), and the resident's progress covering disease states listed in the ID Appendix and associated with the ASHP supplemental standard for an Advanced Practice Residency in Infectious Diseases.

Effective education opportunities which will be evaluated will include grand rounds, presentations to health care professionals or those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Rounds) (at least 3 required), didactic forums or inservices, journal clubs (at least 2 required during residency) and teaching opportunities (SSPPS Therapeutics Conference Leader and Didactic lecture of an Infectious Diseases related topic at SSPPS).

**Grand Rounds:** The resident will deliver a 1-hour CE lecture to the pharmacy staff regarding a controversial topic in infectious diseases. The grand rounds presentation needs to be presented to the project preceptor at least 2 weeks in advance for feedback and comments. A full "run-through" presentation must be scheduled at least one week in advance of the planned presentation to provide a seamless educational lecture. Please refer to Appendix J in the Residency Manual for more information and evaluation strategies. An on-demand PharmAcademic evaluation will be used to track Grand Rounds completion.

**Presentations to health care professionals and those in training:** The resident is required to present at least 3 presentations to health care professionals and those in training (e.g. Pharmacy Clinical Forum, Infectious Disease Grand Rounds) that are separate from learning experience-related presentations and at least 2 Journal Clubs. Clinical Forums are typically clinically focused 20- minute presentations based on a recent patient case or pertinent topic. The resident is encouraged to discuss topics related to the ASHP supplemental Appendix for an Advanced Practice Residency in Infectious Diseases for those presentations. Journal Club topics should be focused on critically evaluating a recently published journal article related to Infectious Disease or Antimicrobial Stewardship.

All topics and presentations should be presented to the project preceptor at least 1 week in advance for feedback and comments. Please refer to Appendix K (Journal Club) and Appendix M (Clinical Forum) for more information and evaluation strategies. An on-demand PharmAcademic evaluation will be used to track Clinical Forums and Journal Clubs.

**Medication Utilization Evaluation:** The resident will complete at least one Medication Utilization Evaluation related to antimicrobial stewardship and quality improvement. An MUE topic will be determined in the first 2 months of the residency year. This MUE may be associated with the Continuous Quality Improvement project.

**CQI Project:** The resident will start and finish at least one Continuous Quality Improvement project during this academic year. CQI topics will primarily be generated from the core preceptors and be strongly related to the infectious diseases population and/or antimicrobial stewardship initiatives. A list of project ideas will be presented to the residents on during the first month of residency. Selection of a topic will need to be finalized by the end of the second month of residency.

**Meetings:** The resident 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. IDWeek (IDSA), Infectious Diseases Association of California (IDAC) Symposia). Attendance at UC Leadership Collaborative Conference (or an equivalent conference to present their research) is mandatory.

**Didactic Forums/ Inservices:** In addition to the grand rounds, the resident will be required to research and deliver a 20-minute weekly to bi-monthly discussion on various didactic topics throughout the year. These topics will be related to the ASHP supplemental standard for an Advanced Practice Residency in Infectious Diseases and will be relevant to the patient population they are currently involved with from a rotational perspective. These presentations will be given during pharmacy student/preceptor rounds or to the core clinical pharmacy staff.

**Teaching Certificate:** Participation in the Teaching Certificate program is optional and will be discussed on a case by case basis. Please refer to Appendix N in the Residency Manual for more information on these topics.

#### **Teaching - Skaggs School of Pharmacy and Pharmaceutical Sciences:**

Involvement with UC San Diego's School of Pharmacy will vary depending on the preceptor but it is anticipated that the resident will participate in case conferences as a conference leader. There will also be an opportunity to provide didactic lecture(s) on an Infectious Disease related topic, and may include preparing the lecture syllabus and exam questions and working with a SSPPS Faculty Member. Direct student precepting would occur while on rotation with UC San Diego pharmacy students jointly with the preceptor and direct precepting of PGY1 residents on rotation.

**Publication:** The resident will be required to write a manuscript suitable 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:

- Case Reports with a review of relevant literature
- Primary research/original research
- Medication Use Evaluation
- Meta-analysis of a disease state or therapy
- Review article

#### **Assessment Strategy – PharmAcademic:**

The PGY2 Infectious Diseases Specialty 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 McCreddie Group, supports the ASHP Residency Learning System (RLS).

Residents who are matched with this PGY2 specialty 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 Standard Entering Interests Form
- Goal-Based Entering Interests Form

Residents' schedules and assigned RLS Goals are entered into PharmAcademic. We have chosen to use the PharmAcademic evaluation tools for our Learning Experiences. 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
  - Resident assessment of Learning Experience

Preceptors and residents are encouraged to exchange in on-going, daily verbal feedback throughout each rotation (learning experience). Six-week block rotations have a mid-point summative evaluation as well. 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 Update and Customized Training Plan) with the RPD Form to evaluate where they are in meeting the residency goals and to set or modify goals for the remaining six months of the residency program. Residents may meet 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 complete the ASHP PharmAcademic exit evaluation. Residents also are requested to complete a year-long evaluation of the Residency Program.

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



### Assessment Overview (PGY2 Infectious Diseases)

*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.*

Learning Experience	Frequency	Resident Self-Assessment (summative)	Preceptor Assessment of Resident (summative)	Resident Assessment of Preceptor and Experience	On-demand	Feedback via Pharm Academic
Orientation	Per learning experience	✓	✓	✓		
Required LE	Per learning experience	✓	✓	✓		
Longitudinal Clinic	Per learning experience	✓	✓	✓		
Supplemental LE	Per learning experience	✓	✓	✓		
Grand Rounds	Per experience				✓	✓
Presentations to health care professionals and those in training	Per experience				✓	✓
Journal Club	Per experience				✓	✓
Teaching	Longitudinal	✓	✓			
Research	Quarterly	✓	✓			
	End			✓		
Staffing	Quarterly	✓	✓			
	End			✓		
Practice Management and Effective Education or Teaching	Quarterly	✓	✓			
	End			✓		
	Per experience (as appropriate*)				✓	✓
Resident Skills and Knowledge	Beginning and end of residency				✓	
Program Evaluation	End of Residency				✓	

\* On-demand evaluations may be requested after inservices or presentations at required meetings. Intermittent on-demand evaluations may continually track progress of the ongoing CQI project. Feedback will also be provided via PharmAcademic

#### **PGY2 Infectious Diseases Competency Areas, Goals and Objectives:**

- 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 under [Required Competency Areas, Goals and Objectives for Postgraduate Year Two \(PGY2\) Infectious Diseases Pharmacy Residencies \(2017\)](#).
- 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 Infectious Residency Requirements for Completion/Graduation:**

- Successful completion of all core rotations (all rotation goals marked SP or ACH by the final evaluation)
- ≥90% of RLS goals 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.
- Twelve months maximum is allotted to successfully complete the core requirements. If a core rotation must be repeated, then elective time shall be used. If the above requirements are not met in full, the residency certificate may be withheld at the discretion of the residency director.
- Completion of a pharmacy residency project, including presentation at a suitable conference/meeting and completion of a project ‘write-up’ in a manuscript suitable for publication (does not need to be submitted for publication)
- Submission of a manuscript for publication (does not have to be accepted).
- If not completed during a UC San Diego PGY1 residency program, resident will be required to complete a Research Primer Course and demonstrate competence as defined by the Research Council. If necessary, a remediation plan will be designed for residents who do not demonstrate competence.
- Creation and completion of required presentations: at least 2 journal clubs, at least 3 presentations to health care professionals and those in training, 1 Grand Rounds.
- Teaching opportunity by delivering a didactic lecture and participation as a workshop facilitator.

Last updated 12/28/18