History of Scholarship at SPH Pharmacy Department

• Clinical pharmacy and a clinical teaching affiliation with Albany College of Pharmacy started in the early 1970’s
• Non-accredited pharmacy residency program from 1992 to 1999 and graduated several pharmacists. This residency program was abandoned mostly because of funding difficulties.
• The St. Peter’s Hospital PGY1 Residency Program is accredited by ASHP since July 1, 2012
  Inception of this program was July 1, 2012 with four PGY1 Residents

Purpose of the PGY1 Pharmacy Residency at St. Peter’s Hospital:

The PGY1 pharmacy residency program builds on the resident’s Doctor of Pharmacy education and outcomes to contribute to the development of the clinical pharmacist who will be:
• 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.

PGY-1 Residency Features

• St. Peter’s Hospital offers a comprehensive residency with an emphasis on pharmaceutical care.
• An important goal is to help the resident formulate and achieve their next professional career step upon completion of the of the PGY1 residency program.

PGY-1 Residency Features

• The program allows for added emphasis on teaching and learning as well as practice based research.
• Residents are actively involved in all aspects of the pharmacy services and quality improvement functions.
• Residents will receive BLS and ACLS training and certification, and will participate in rapid response codes.
• Residents will complete a major year-long project with written manuscript.
• Residents will complete the Teaching and Learning Program in affiliation with the Albany College of Pharmacy and Health Sciences (ACPHS). Teaching at the college, pharmacy department and precepting Pharm.D. students are required.
PGY-1 Residency Features

- The St. Peter's Hospital pharmacy residency program will conduct an objective assessment of pharmacy practice competencies in the initial stage of foundational residency training.
- Entering residents are requested to refresh expertise in sterile product preparation and technique, non-sterile compounding preparation and technique, performing dosing calculations including infusion drip-rates, medication safety procedures, including, but not limited to, identifying potential look-alike and sound-alike drugs and other medication error prevention techniques.
- Attending NYS board exam preparation seminars including Part III review and are strongly encouraged

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PGY-1 Pharmacy Residency Learning System

1. Preceptor evaluation of resident attainment of the goals and objectives of training
2. Resident self-evaluation of attainment of the goals and objectives of training
3. Resident evaluation of the quality of the preceptor and of the learning experience

Progress Scoring

- Achieved: The resident has fully accomplished the ability to perform the educational goal or the objective. No further instruction or evaluation is required.
- Satisfactory Progress: This applies to an educational goal or objective whose achievement requires skill development during more than one learning experience. In the current learning experience, the resident has progressed at the required rate to attain full ability to perform the goal by the end of the program.
- Needs Improvement: The resident's level of skill on the goal or objective does not meet the preceptor's standards of either "Achieved" or "Satisfactory Progress," whichever applies.

St. Peter’s Hospital Pharmacy Residency competency areas, goals, and objectives

St. Peter’s Hospital PGY1 competency areas
1. Patient Care
2. Advancing Practice and Improving Patient Care
3. Leadership and Management
4. Teaching, Education, and Dissemination of Knowledge
5. Management of Medical Emergencies

St. Peter’s Hospital

- Competency Area R1: Patient Care

E.g. Goal R1.1: In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient care process.

Objective R1.1.1: (Applying) Interact effectively with health care teams to manage patients’ medication therapy.

Objective R1.1.2: (Applying) Interact effectively with patients, family members, and caregivers.

Source: PharmAcademic St. Peter’s Hospital PGY1 Program

2/12/2016
### St. Peter's Hospital

#### Pharmacy Residency competency areas, goals, and objectives

| R1 Patient Care |  
|----------------|---
| R1.1.1 Communicate with the health care team to provide safe and effective patient care in a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient-centered care process | TE - T - T |
| R1.1.2 Deliver patient-oriented care that is safe, effective, timely, efficient, and equitable | TE - T - T |
| R1.1.3 Collect information on patient safety and effective medication therapy in order to prevent medication errors and adverse drug effects | TE - T - T |
| R1.1.4 Identify and monitor information on patient safety and effective medication therapy | TE - T - T |
| R1.1.5 Develop and maintain safe and effective patient-centered therapeutic regimens and monitoring plans (care plans) | TE - T - T |
| R1.1.6 Ensure implementation of therapeutic regimens and monitoring plans (care plans) | TE - T - T |
| R1.1.7 Document discharge patient care activities appropriately in the medical record or where appropriate | TE - T - T |
| R1.1.8 Demonstrate responsibility to patients | TE - 2 - T |
| R1.2.1 Manage transitions of care effectively | TE - 2 - T |
| R1.2.2 Manage aspects of the medication-use process related to formulary management | TE - 2 - T |
| R1.2.3 Manage aspects of the medication-use process related to oversight of dispensing | TE - 2 - T |

**Source:** PharmAcademic St. Peter's Hospital PGY1 Program

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

Goal E5.1 Participate in the management of medical emergencies

**OBJECTIVE E5.1.1** Exercise skill as a team member in the management of medical emergencies according to the organization's policies and procedures

### St. Peter's Hospital

#### Pharmacy Residency competency areas, goals, and objectives

- Additional Competency Area: E5 Management of Medical Emergencies

Goal E5.1 Participate in the management of medical emergencies

**OBJECTIVE E5.1.1** Exercise skill as a team member in the management of medical emergencies according to the organization's policies and procedures

### St. Peter's Hospital

#### Requirements for Successful Completion and Certificate

Certificates will only be awarded to residents who have completed the following:

1. Completed 80% or more objectives scored as achieved for residency (ACHR) and all other objectives marked as “satisfactory progress” or “achieved” in PharmAcademic (https://www.pharmacademic.com/).

2. Completed the following:

   - Certificate Requirements for Successful Completion and Certificate
   - Pool Completion of Objectives scored as achieved
   - Objective scores at Satisfactory progress
   - Objective scores at Achieved

3. Completed the following:

   - TE - T - T
   - TE - T - T
   - TE - T - T
   - TE - T - T
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   - TE - T - T
   - TE - T - T

### St. Peter's Hospital

#### Requirements for Successful Completion and Certificate

Continued:

2. Turned in a formal written manuscript of their year-long project to the RPD and project Preceptor.
3. Completed all required activities, projects and presentations for residency
4. Turned in a completed electronic e-portfolio including files of required written projects, presentations, assignments and activities.
5. Turned in identification badge, equipment, pager, keys, phone and other hospital property prior to receiving the certificate.

- Residents that fail to complete program requirements and comply with all conditions of the residency program shall not be awarded a certificate of completion of the residency program. All required items for completion must be successfully completed by 18 months from the beginning of the residency.

### PGY1 Pharmacy Residency Director and Preceptors

#### Requirements

The residency program director (RPD) and preceptors are critical to the residency program’s success and effectiveness.

They are expected to be professionally and educationally qualified pharmacists who are committed to providing effective training of residents and being exemplary role models for residents.

### PGY1 Pharmacy Residency Director and Preceptors

#### Requirements

RPDs serve as role models for pharmacy practice, as evidenced by:

- E.g. 4.3.b. demonstrating ongoing professionalism and contribution to the profession;

**Should have been demonstrated within the last five years:**

- Serving as a reviewer
- Presentation/poster/publication in professional forums
- Active service, beyond membership, in professional organizations at the local, state, and/or national level (e.g., leadership role, committee membership, volunteer work)

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3/21/2016
4.6 Pharmacist Preceptors’ Eligibility

Pharmacist preceptors must be licensed pharmacists who:

• have completed an ASHP-accredited PGY1 residency followed by a minimum of one year of pharmacy practice experience; or
• have completed an ASHP-accredited PGY1 residency followed by an ASHP-accredited PGY2 residency and a minimum of six months of pharmacy practice experience; or
• without completion of an ASHP-accredited residency, have three or more years of pharmacy practice experience.

4.8 Preceptors’ Qualifications

E.g. 4.8.a. demonstrating the ability to precept residents’ learning experiences by use of clinical teaching roles (i.e., instructing, modeling, coaching, facilitating) at the level required by residents

Tool: Residents evaluations of preceptors and their learning experiences.

4.8.c. recognition in the area of pharmacy practice for which they serve as preceptors;

Examples:

• active BPS certification
• competency in a practice area as determined by credentialing by the institution if applicable, or multi-disciplinary certification in disease or patient care management recognized by the Council on Credentialing in Pharmacy
• formal recognition by peers as a model practitioner (e.g., professional fellow, recognition as pharmacist of the year, institutional service award winner); or multidisciplinary certification in disease or patient care management within the past seven years.

Residency Advisory Committee

1. Jeffrey Kennicutt, PharmD, FASHP, Chairman
2. Daniella Ferri, PharmD, BCPS
3. Tom Lombardi, PharmD, FASHP
4. Jennifer Hebner, PharmD, BCPS
5. Bruce Zannitto, RPh
6. Carley Bevevino, PharmD, BCPS
7. Amilee Poucher, PharmD, BCPS

Ad Hoc members:

Residents
Allan Patnode, RPh
Nancy Newkirk, MS, RPh
Tracy Collins, CPhT

Resident Development Committee

• Weekly meeting – 2 hours
• Chairperson: Chief Resident
• RPD and RPC
• Preceptors: Ad Hoc
• Agenda:
  • Career development
  • Progress and concerns
  • Open issues Q+A
  • Longitudinal rotation focus on
    • Pharmacy Practice Management
    • Research Project
    • Staffing
  • and ACPHS Teaching and Learning Training Program

PGY1 Pharmacy Residency Learning Experience Structure

<table>
<thead>
<tr>
<th>Rotation Type</th>
<th>Rotation Type</th>
<th>Rotation Type</th>
<th>Rotation Type</th>
<th>Rotation Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Development</td>
<td>Pharmacy Practice Management</td>
<td>Project Development</td>
<td>Pharmacy Practice Management</td>
<td>Project Development</td>
</tr>
<tr>
<td>Research Project</td>
<td>Pharmacy Practice Management</td>
<td>Research Project</td>
<td>Pharmacy Practice Management</td>
<td>Research Project</td>
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<tr>
<td>Longitudinal Rotation focus on Pharmacy Practice Management</td>
<td>Research Project</td>
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<td>Research Project</td>
<td>Longitudinal Rotation focus on Pharmacy Practice Management</td>
</tr>
<tr>
<td>Ambulatory Care / Chronic Care</td>
<td>Longitudinal Rotation focus on Pharmacy Practice Management</td>
<td>Ambulatory Care / Chronic Care</td>
<td>Longitudinal Rotation focus on Pharmacy Practice Management</td>
<td>Longitudinal Rotation focus on Pharmacy Practice Management</td>
</tr>
</tbody>
</table>
**Research/Practice-Related Project**

- **Topic Selection**
  - Research Project can be chosen from pre-designed projects by staff members at St. Peter's Hospital, or created and facilitated by the residents themselves.
- **Eligible content**
  - Research
  - Process of Care Improvement
- **IRB approval**
- **Project presentation** (NYSCHP Residency Conference, SPH Medical Grand Rounds)
- **Project manuscript**

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**ACPHS Teaching and Learning Program**

**Program Goal:** To foster knowledge and skill development in various aspects of teaching and learning which includes PGY1 Competency Area R4: Teaching, Education, and Dissemination of Knowledge

**Program Cost:** SPH Residents are enrolled free of charge. Participants, however, may incur travel costs to complete the required live teaching experiences at their respective ACPHS campus.

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**ACPHS Teaching and Learning Program Objectives**

1. Explain considerations related to live classroom instruction, including teaching strategies, learning styles, assessment of learning, and student engagement.
2. Develop lesson plans for assigned classroom instruction experiences, under the direction of an assigned faculty mentor.
3. Design and deliver classroom instruction in a live classroom setting, under the direction of an assigned faculty mentor.
4. Describe key elements to providing effective facilitation of student learning in both the classroom and experiential settings.
5. Facilitate student learning in the small classroom (group) setting.
6. Compare and contrast teaching and learning approaches related to classroom instruction with experiential and continuing education.
7. Provide formative and/or summative assessments related to a classroom lecture, small group facilitation, continuing education program, or experiential education.
8. Create a Teaching Philosophy statement for inclusion in a personal Teaching Portfolio.
9. Write a personal reflection on Teaching Experiences, for inclusion in a personal Teaching Portfolio.

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**Staffing Central Pharmacy Rotation**

- **2 weekdays shifts per month** (Tuesday and Thursday)
- **Every 4th weekend** (Saturday and Sunday) – Starting September
- **Order entry / order validation and dose checking**
- **Consult Service:** medication reconciliation and pain consults primarily
- **Nights – None**
- **Holidays** –
  - Scheduled paid leave day off: Independence Day and Labor Day
  - Inter-resident switching schedules – allowed with permission of RPC or RPD

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**Pharmacy Practice Management**

- **Management (Human Resources, Evaluations, Financials) and Leadership (Leading yourself and others)**
- **Journal Club**
- **Clinical Decision Support for Pharmacy and Therapeutics Committee** (rotated quarterly)
- **Medication Safety** (rotated quarterly)
- **Chief Pharmacy Resident** (rotated quarterly)
- **Drug Use Policy/Regulatory**

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**Program Rotations**

http://www.sphcs.org/prp
NYS Pharmacist Licensure

- Residents must hold a New York State (NYS) Intern Permit by July 1 & pharmacist licensure by 90th day of the program.
- Residents may apply for NYS Part III licensure with the Resident Program Certification of Completion of Pharmacy Practice Residency Competencies or NYS form 4b.
- More information regarding NYS licensure may be found at: http://www.op.nysed.gov/prof/pharm/pharmlic.htm.

Duty Hours

- Follow ASHP guidelines for resident duty hour requirements
- Duty hours include all in-house activities and all moonlighting (on campus or off-campus)
- 80 hours per week (maximum),
  - Averaged over any two sequential pay periods
  - Minimum of 1 in every 7 days free of duty averaged over any two sequential pay periods (14 days per pay period)
  - 8-10 hours of free of duty between scheduled duty

Moonlighting does not apply to duty hours

- Internal or external must not interfere with ability to achieve educational goals and objectives
- Opportunities to pick up extra shifts at SPH
  - Paid as “full fledged pharmacist”, commensurate with experience
  - Requires pharmacist licensure in NY
  - Limited to areas where resident has completed training
  - Available beginning in September

Stipend & Benefits

- Stipend - $40,000
- Medical, Dental, and Life Insurance
- 16 Paid Leave Days (see next slide)
- Educational Allowance
- Travel Allowance
  - ASHP MCM
  - Residency Conference
- Contribution to Tax-Deferred Retirement Program
- Cafeteria Discount

Paid Leave & Educational Leave

- 16 days of Paid Leave time apply to:
  - Vacation
  - Personal
  - Sick
  - Interview days
  - Non-worked holidays
- Additional leave days: Professional/Educational Leave (attendance at program-required professional/educational conferences/training do NOT affect paid leave)
  - BLS training and testing (1 day)
  - ACLS training and testing (2 days)
  - ASHP Midyear Clinical Meeting (4 days)
  - Residency/Preceptor Conference (3 days)
Thank you for your sincere interest in our program.

We seek to provide a highly effective program that builds on Doctor of Pharmacy education and outcomes to contribute to the development of the highest practicing clinical pharmacists.

We offer you our best wishes in your professional pursuits.