

Pharmacy Residency Program Conducted at Sites within RIPCPC/Integra: Resident Expectations and Requirements for Successful Program Completion

Licensure Expectations and Requirements

Expectation: The pharmacy resident should submit appropriate documentation for licensure to the Rhode Island State Board of Pharmacy as soon as possible after learning they have matched for the RIPCPC PGY-2 residency program.

Requirement: The resident must be fully licensed as a pharmacist in the state of Rhode Island within 90 days of the beginning of the residency.

- If the resident is unable to meet the above deadline due to extenuating circumstances beyond their control, they must request an extension in writing to the RAC. In order to satisfy the ASHP requirement that two-thirds of the residency is completed as a licensed pharmacist in Rhode Island, the maximum number of days granted in the extension will be 30 days.
- If approved, the resident will be notified in writing how many additional days have been granted to obtain their pharmacist's licensure in the state of Rhode Island.
- If this extension is not approved, the resident will be dismissed.
- Failure to meet the above requirements results in termination of the resident from the residency program.

Verification of PGY1 Residency Completion

Requirement:

- PGY2 residents must provide their RPD with verifiable proof of PGY1 residency completion prior to starting their program or within ten (10) days of starting their PGY2 program.
- Verifiable proof is a copy of the resident's PGY1 graduation certificate. If this is unavailable, the PGY2 RPD receiving verbal or written confirmation of PGY1 program completion from the PGY1 RPD is acceptable.
- PGY2 residents with an ASHP-sanctioned PGY1 exception must provide this documentation during the application process in PhORCAS. If this is not possible, it must be provided to their PGY2 RPD prior to starting their program
- Failure to meet the above requirements results in termination of the resident from the residency program.

Expectations of Commitment and Benefits

Each pharmacy resident is expected to complete a minimum of twelve months of training that is equal to a full-time equivalent. The resident must also fulfill the program requirements as specified in the Program Graduation Requirements/Residency Program Document and comply with all program, department, and organization expectations. The decision to allow a resident to remain in the residency program who is unable to meet the above commitment due to extenuating circumstances, will be handled on a case-by-case basis.

- In the event a resident needs to request a leave of absence, the resident must discuss the impact of this leave on their ability to complete the program as well as the program's ability to support an extension with their RPD and the RAC. Leaves of absence will be granted in accordance with RIPCPC's Leave of Absence Policy and per Rhode Island state law. This extension would be uncompensated. If the resident is allowed to remain in the program, their graduation date will be adjusted to meet the minimum of twelve months of training.
- In the event a resident is not meeting program expectations as determined by the RPD for reasons such as performance, the RPD and the RAC will determine on a case-by-case basis whether the resident will be allowed to remain in the program and have their program extended for a time not to exceed thirty (30) days in order to allow the resident additional time to fulfill the program requirements, or whether the resident will be terminated from the program. This extension would be uncompensated. The decision will be communicated to the resident in writing. Failure to complete requirements by the end of the extension will result in termination and the resident will not be granted a certificate
- Only residents that complete the minimum of twelve months of residency training equal to a full-time equivalent and fulfill the program requirements, including those specified in the Program Graduation Requirements/Residency Program Tracking Document, are granted a residency certificate and considered graduates of the program

Termination Resignation or Dismissal

Employment at RIPCPC is on an "at-will" basis. This means that the employment relationship may be ended at the choice of either party, with or without notice, and with or without cause, at any time. Termination ends the resident's participation in the Pharmacy Residency Program prior to completion of the minimum twelve months. If at any time it is necessary for an employee to resign his or her employment with the Company, RIPCPC requests at least two weeks' notice.

Employees who are discharged or resign will receive their final paycheck on the next regular payday. Final paychecks will include all wages accrued but not paid through the date of separation.

When an Employee's employment with RIPCPC terminates, for whatever reason, the Employee is required to immediately return all Company-owned property used during his/her employment, and all documents, flash drives, disks, and other materials containing proprietary or confidential information belonging to the Company. This includes without limitation, keys, credit cards, computers, vehicles, communication devices, uniforms, identification cards or badges, and any other equipment, materials, or items purchased, leased, owned, or otherwise belonging to RIPCPC.

Duty Hour Expectations

- The PGY-2 Residency Program conducted at Rhode Island Primary complies with the current duty hour standards set forth by ASHP.
- It is the resident's responsibility to ensure they comply with the duty hour standards.

Moonlighting

The work of the department is the resident's most important commitment. Working outside the residency program (moonlighting) is strongly discouraged, especially at the beginning of the residency.

- Moonlighting must be approved by the residency program director and director of pharmacy. Hours worked will be reported on a weekly basis by each resident on the attached tracking document.
- Moonlighting must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program.
- Moonlighting hours must be counted towards the 80-hour maximum weekly hour limit.
- The maximum moonlighting hours allowed is 16 hours per week.

Additional Candidate Information

- Pharmacy residents are considered full time employees of RIPCPC, and as such, the resident and their eligible dependents are eligible to participate in RIPCPC's benefit programs (paid time off, medical/dental/vision insurance).
- Residents are allowed up to 80 hours of paid time off (PTO) (40 hours between July – December and 40 hours between January – June) and 9 paid holidays as determined by RIPCPC management. PTO includes vacation and sick time. The 9 paid holidays are: New Year's Day, President's Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Thanksgiving, Day after Thanksgiving, Christmas Day. Time off requires advanced approval and is not guaranteed.
- The Pharmacy Residency programs participate in the Residency Matching Program ("The Match").
- After "The Match", employment as a pharmacy resident is still contingent upon the applicant satisfying RIPCPC's employment eligibility requirements.
- Failure to have successfully completed a PGY-1 residency with a verifiable certificate by the start of the program will result in rescindment of the offer.
- At healthcare facilities in Rhode Island, healthcare workers are required to be immunized against preventable diseases. Pharmacy residents must provide documentation of immunizations at the start of the residency program and in accordance with the RIPCPC immunization policy.
- All residents must start on the pre-determined start date. Refer to the program director for the exact pre-determined start date as adjustments in start date are not allowed.

Resident Customized Training Plan and Progression Summary

	Initial Plan: July	1 st Quarter Update: October	2 nd Quarter Update: January	3 rd Quarter Update: April
Strengths (Knowledge, skills, and abilities related to educational goals/objectives and being a professional)				
Areas for Improvement: (Knowledge, skills, and abilities related to educational goals/objectives and being a professional)				
Interests/Career Goals: (any specific interest, elective rotations, and future careers)				
Resident Progression: (including % residency goals and objectives achieved, customized plan for any graduation requirement marked as "behind")				
Direct patient care experiences* See tracking of direct patient care experiences below				

RIPCPC/Integra PGY2 Pharmacy Residency Program Tracking Document

Completion of program requirements will be documented below to demonstrate resident progression toward fulfillment of graduation requirements. The resident will upload elements to an electronic binder. Progression will be assessed quarterly by the Residency Program Director and documented in a development plan.								
	Requirement	Quantity Required	Comments	Expected (Q1/Q2/Q3/Q4)	Behind Schedule			
					On Schedule			
					Q1	Q2	Q3	Q4
1	RI Pharmacy License	2		1/0/0/1				
2	Successful completion of all required learning experiences		Varies					
3	Achieve for residency 90% of all required objectives for residency (29 objectives)	27						
4	Achieve for residency, 100% of all critical objectives required by program (8 R1 objectives)	8						
5	Deliver three ambulatory care presentations	3	Varies					
6	Lead two journal clubs	2	Varies					
7	Complete scholarly project abstract	1		0/0/1/0				
8	Complete scholarly project poster	1		0/0/1/0				
9	Submit first draft manuscript	1		0/0/1/0				
10	Complete final manuscript	1		0/0/0/1				
11	Present Scholarly Project to RIPCPC Pharmacy Committee	1		0/0/0/1				
12	Present Scholarly Project at local/national conference/meeting	1		0/0/0/1				
13	Attend ≥ 85% pharmacy department staff meetings (excluding PTO)	~40/48		~ 12/12/12/12				
14	Attend ≥ 85% RIPCPC monthly staff meetings (excluding PTO)	~10/12		~ 3/3/3/3				
15	Attend ≥ 85% of payor -based meetings (excluding PTO)	~10/12		~ 3/3/3/3				
16	Attend ≥ 85% of pharmacy committee meetings (excluding PTO)	~10/12		~ 3/3/3/3				
17	Complete Residency Program Portfolio	1						

18	Complete 6 newsletter article	6	Varies					
19	Deliver one patient medication related group class	1	Varies					
20	Formal drug information question response using appropriate template	2+	Varies					
21	Complete at least ten self-reflections	10+	Monthly	~3/3/3/3				
22	Attend four practice management roundtables	4	Quarterly	1/1/1/1				
23	Complete quarterly objective-based self-evaluation in PharmAcademic	4	Quarterly	1/1/1/1				
24	Complete documentation of weekly duty hours in ADP	Varies	Weekly					
25	Complete required preceptor and learning experience evaluations	28	Varies					
26	Complete eight required ambulatory care appendix diseases documentation	8	Varies					

Tracking of Required PGY2 Objectives:

RIPCPC PGY2 Ambulatory Care Required Objectives	Q1	Q2	Q3	Q4
R1 Patient Care				
R1.1 Provide comprehensive medication management to ambulatory care patients following a consistent patient care process.				
R1.1.1 Interact effectively with health care teams to collaboratively manage ambulatory care patients' medication therapy.				
R1.1.2 Interact effectively with ambulatory care patients, family members, and caregivers.				
R1.1.3 Collect information to ensure safe and effective medication therapy for ambulatory care patients.				
R1.1.4 Analyze and assess information to ensure safe and effective medication therapy for ambulatory care patients.				
R1.1.5 Design, or redesign, safe and effective patient-centered therapeutic regimens and monitoring plans (care plans) for ambulatory care patients.				
R1.1.6 Ensure implementation of therapeutic regimens and monitoring plans (care plans) for ambulatory care patients by taking appropriate follow-up actions.				
R1.1.7 Document direct patient care activities appropriately in the medical record, or where appropriate.				
R1.1.8 Demonstrate responsibility to ambulatory care patients for patient outcomes.				
R1.2 Design and/or deliver programs that contribute to public health efforts or population management.				
R1.2.1 Design and/or deliver programs for patients that focus on health improvement, wellness, and disease prevention (e.g., immunizations, health screenings).				
R2 Advancing Practice and Improving Patient Care				
R2.1 Manage the development or revision, and implementation, of proposals related to the ambulatory care setting.				
R2.1.1 Prepare or revise a protocol (e.g., work flow, scope of practice, collaborative practice agreement, or clinical practice protocols) related to ambulatory care.				

R2.1.2 Contribute to the development of a new ambulatory care pharmacy service or to the enhancement of an existing service.				
R2.2 Demonstrate ability to conduct a research project.				
R2.2.1 Identify a scholarly question related to clinical practice, education, or healthcare that would be useful to study and can be completed within the PGY2 residency year.				
R2.2.2 Develop a plan or research protocol for the project.				
R2.2.3 Collect and evaluate data for the project.				
R2.2.4 When applicable, implement the project.				
R2.2.5 Assess changes or need to make changes based on the project.				
R2.2.6 Effectively develop and present, orally and in writing, a final project report suitable for publication.				
R3 Leadership and Management				
R3.1 Demonstrate leadership skills.				
R3.1.1 Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.				
R3.1.2 Apply a process of ongoing self-evaluation and personal performance improvement.				
R3.2 Demonstrate management skills in the provision of care for ambulatory care patients.				
R3.2.1 Manage one's own ambulatory care practice effectively.				
R3.3 Manage the operation of an ambulatory care pharmacy service.				
R3.3.1 Effectively manage ongoing operational functions of the service.				
R3.3.2 Assure that the service operates in accord with legal and regulatory requirements.				
R4 Teaching, Education, and Dissemination of Knowledge				
R4.1 Demonstrate excellence in providing effective medication and practice-related education.				
R4.1.1 Design effective educational activities related to ambulatory care.				
R4.1.2 Use effective presentation and teaching skills to deliver ambulatory care related education to pharmacy or interprofessional attendees, including complex topics to expert drug therapy audiences.				

R4.1.3 Use effective written communication to disseminate knowledge related to ambulatory care.				
R4.1.4 Assess effectiveness of education related to ambulatory care.				
R4.2 Effectively employ appropriate preceptor roles when engaged in teaching students, pharmacy technicians, or fellow health care professionals in ambulatory care.				
R4.2.1 When engaged in teaching related to ambulatory care, select a preceptor role that meets learners' educational needs.				
R4.2.2 Effectively employ preceptor roles, as appropriate, when instructing, modeling, coaching, or facilitating skills related to ambulatory care.				
E6 Continuity of Care				
E6.1 Ensure continuity of care during ambulatory care patient transitions between care settings.				
E6.1.1 Manage transitions of care effectively for ambulatory care patients.				

Tracking of resident direct patient care experiences (8 must be covered):

Residents will utilize the patient care area tracking tool in PharmAcademic to document a deidentified patient encounter and description of the disease state addressed.

Progress will be assessed at monthly RAC meetings with opportunity provided for topic discussions in up to 2 areas the resident is unable to have sufficient patient/disease state interaction to be considered proficient.

Proficiency Demonstrated				
	Q1	Q2	Q3	Q4
Cardiology				
Endocrinology				
Geriatrics				
Nephrology				
Psychiatry				
Pulmonology				
Rheumatology				
Nephrology				
Gastroenterology				
Neurology				
Pediatrics				
Dermatology				
Men's Health				
Women's Health				
Hematology-Oncology				

Initial Plan:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

1st Quarter Update:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

2nd Quarter Update:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

3rd Quarter Update:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

Signed for Completion End of Quarter 4:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

