

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

Benefits

Stipend: \$49,000 per 12 months

Benefits:

- Residents are allowed up to 80 hours of paid time off (PTO) (40 hours between July – December and 40 hours between January – June) and 11 paid holidays as determined by RIPCPC management. PTO includes vacation and sick time. The 11 paid holidays are: New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Columbus Day, Thanksgiving, Day after Thanksgiving, Christmas Day. Time off requires advanced approval and is not guaranteed.
- Work travel related expenses reimbursed per IRS issued standard mileage rates
- Travel, hotel and conference expenses covered for required conference or meeting; capped at \$100/day for food and non-alcoholic beverages. Arrangements MUST be reviewed by the Pharmacy Director prior to finalization
- 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).

Employment Requirements

- Background check performed by RIPCPC
- Obtain Rhode Island Pharmacist License
- Proof of liability insurance
- Copy of Current Pharmacist License
- Verification of PGY1 Residency Completion
 - 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.
- 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. (Enclosed)
- 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 Responsibilities

Professional Conduct

It is the responsibility of the resident as a representative of the RIPCPC / Integra Department of Pharmacy and the profession of pharmacy to uphold the highest degree of professional conduct. The resident will display an attitude of professionalism in all aspects of his/her daily practice

Chain of Command

The residency "chain of command" generally consists of the following: preceptor → Residency Program Director → Residency Program Manager / Director of Pharmacy → RAC. However, keep in mind, that in some instances, the chain of command may be different (i.e. some managers are also preceptors – in this instance, they should be contacted first). If working with persons outside the pharmacy department, the resident will make sure all appropriate parties within the department have been briefed before contacting or providing information to parties outside of the department of pharmacy.

Professional Dress and Hygiene

All residents are expected to dress and present themselves in an appropriate professional manner whenever they are in the institution or attending any function as a representative of RIPCPC / Integra. Residents are expected to adhere to a business casual dress code for all rotations, administrative time, project meetings, and activities unless otherwise specified by leadership. Residents are reminded to avoid all scented health and beauty products (perfumes, scented lotions, colognes, etc.) as patients and colleagues may have chemical sensitivities which can be triggered by exposure to fragrances.

Employee Badges

While working, all employees are required to wear identification cards above the waist, in a manner such that name, picture, and department are clearly visible. The I.D. card is only to be worn by the individual authorized to wear his/her I.D. card. It is the responsibility of an employee losing his/her I.D. to have it replaced immediately.

Patient Confidentiality/HIPAA

Patient confidentiality will be strictly maintained by all residents. Any consultations concerning patients will be held in privacy with the utmost concern for the patients' and families' emotional as well as physical well-being. All patient care activities are subject to and should always abide by HIPAA regulations. Please keep in mind that HIPAA also encompasses 18 peers, preceptors, and staff. NEVER access any aspect of a chart without the patient's written permission if you are not involved in their care. Personal devices, including cell phones, should never be used to record images of patients. Only equipment that is owned, leased, controlled or approved by RIPCPC / Integra should be used to photograph or video patients.

Consent to photograph is obtained from the patient/patient's representative for photographs or video for clinical, educational, or identification purposes.

Attendance

Residents are expected to attend all functions as required by the Director of Pharmacy, Residency Program Director, and rotation preceptors. The resident is solely responsible for their assigned practice commitments and is responsible for assuring that these service commitments are met in the event of an absence. All leave requests should be discussed in advance with the involved preceptors to assure that service responsibilities can be fulfilled. An excused absence is defined as a paid day off discussed with and signed off by the respective rotation preceptor and program director.

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
Interests/Career Goals: (any specific interest, elective rotations, and future careers)				
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)				

Resident Progression: (including % residency goals and objectives achieved, customized plan)				
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					
7	Complete scholarly project abstract	1		0/0/1/0				
8	Complete scholarly project poster/platform presentation	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 4 professional newsletter articles	4	Varies	~1/1/1/1				
19	Complete 2 public health related newsletter articles	2	Varies	~1/0/1/0				
20	Complete 10 public health related social media posts	10	~Monthly	2/3/3/2				
21	Complete at least six self-reflections	6+	Monthly for first 3 months and then quarterly	~3/1/1/1				
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 and Acknowledged by RAC				
	Q1	Q2	Q3	Q4
Cardiology				
Endocrinology				
Geriatrics				
Psychiatry				
Pulmonology				
Rheumatology				
Nephrology				
Gastroenterology				
Neurology				
Pediatrics				
Dermatology				
Men's Health				
Women's Health				
Infectious Disease				
Hematology-Oncology				

Initial Plan :

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

First Quarter Update:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

Second Quarter Update:

Resident Signature: _____

Date: _____

Residency Program Director Signature: _____

Date: _____

Reviewed by RAC Date: _____

Third 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: _____