

Rotation Name: Orientation to University of Utah Hospitals and Clinics

Rotation Preceptors: Shantel Mullin, PharmD, BCPS (Coordinating Preceptor) all Operational and Decentralized Clinical Pharmacists; and all Policy, Process, and Technology Expert Pharmacists from across Pharmacy Services

Site Description:

University of Utah Hospitals and Clinics is comprised of 4 hospitals and numerous outpatient ambulatory clinics and retail pharmacies. The University of Utah Hospital is a level I trauma center that serves critical and acute care patients in 425 beds, and is a referral hospital for a 5-state region. Over 100 FTEs of pharmacy staff serve the patients of University Hospital, and the residents are a part of patient care and multi-disciplinary teams. The Huntsman Cancer Institute also serves patients with 50 inpatient beds, an infusion center, and several clinics. Clinics at the hospital and surrounding communities serve patients with pharmacy care through retail pharmacies, MTM services, thrombosis services, and clinic-based services. The University Health Care system also includes a Drug Information Service.

Rotation Description: Residents will learn the basics of University Health Care's pharmacy system, medication and departmental policies and procedures, and skills needed to serve as a clinical pharmacist during rotations and staffing requirements throughout the residency year. Training focuses on organizational and department structure, workflow, resident and pharmacist responsibilities and requirements, and appropriately using technology for patient care, research, and other residency requirements.

Residents completing a PGY1 residency at University of Utah Hospitals and Clinics will attend abbreviated sessions of the orientation program, and will have the opportunity to provide training sessions during orientation.

Readings and Preparatory Work:

Residents will read the hospital and pharmacy department orientation manuals and checklists. Readings will be provided electronically for specific services prior to the day of training, such as the overview of infectious disease and pharmacodynamics with Don Alexander . The residents will be asked to read articles for journal club, literature evaluation, and other activities. They will also determine their Myers-Briggs and Color Code preferences.

Typical Daily/Weekly/Monthly Activities:

The orientation and training schedule will be Monday through Friday for the first 4 weeks of residency for the PGY1 resident. Days will start at 8 AM for classes and at 7 AM for Clinical Practice training days. The first 2 weeks will largely be classes in the pharmacy conference room related to policies, procedures, staff expectations, technologies, resident expectations, meeting staff, etc. Some days will be spent in the computer training lab and in the residents' office. The Clinical Practice training days will occur in the second 2 weeks either in the central operations/order-verification area of the Hospital or on decentralized units/pharmacy satellites. Residents will be paired with a pharmacist expert/trainer for their training shifts. The residents will also train in a decentralized location on a weekend (2 day shifts), and at least 2 other weekend or swing shifts of their choice. Day shifts begin at 7 AM and swing shifts begin at 3 PM.

Project / Presentation Description:

- Maintain training progress documentation

Evaluation:

The resident will receive oral feedback from preceptors as the resident learns each new skill or task. The resident will keep a portfolio of their training progress to turn in to the orientation coordinator weekly. The training manual contains check sheets for each centralized or decentralized preceptor to sign when the resident demonstrates the skills necessary to work in the assigned area. The resident will have a final summative evaluation after their training shifts are over, and they have worked at least one regular staffing shift on their own. This summative evaluation will be face-to-face and include comments from pharmacists who have worked most with the resident. The evaluation will be recorded in ResiTrak.

Goals and Objectives and Rotation Activities

Goal R2.2 Identify opportunities for improvement in the organization's medication-use policies or processes.		
OBJ R2.2.1 (Comprehension) Compare and contrast the feasibility and effectiveness of the range of methods that can be used by the drug information specialist to identify opportunities for improvement in a medication-use policy or process.	Residents review all MUEs and guidelines for the hospital, and discuss differences between the U and other organizations where they have worked or rotated. Residents practice ADR and ADE reporting in the Patient Safety Net System.	<ul style="list-style-type: none"> • Instruction • Modeling • Coaching • Facilitation
OBJ R2.2.2 (Evaluation) Identify opportunities for improvement in a medication-use policy or process based on the analysis of adverse drug events (ADEs).	Residents are expected to provide suggestions for improvement.	
OBJ R2.2.3 (Evaluation) Identify opportunities for improvement in a medication-use policy or process based on the conduct of a medication-use project or a comparison with benchmarking data.		
OBJ R2.2.4 (Analysis) Identify emerging trends and issues in medication use external to an organization.		
OBJ R2.2.5 (Analysis) If applicable, identify emerging trends and issues in medication use within one's organization.		

Goal R3.2 Exercise superior communications skills.		
OBJ R3.2.1 (Application) Use effective negotiation skills to resolve conflicts.	The resident will learn to utilize superior communication skills.	<ul style="list-style-type: none"> • Instruction • Modeling • Coaching • Facilitation
OBJ R3.2.2 (Characterization) Demonstrate a commitment to advocacy for optimal care of patients through the assertive and persuasive presentation of patient care issues to members of the organizational leadership, health care team, the patient, and/or the patient's caregivers.	The resident learns CPOE, pharmacy order verification and order entry, Omnicell, D-21 med checks, etc. in centralized and decentralized locations. Central operations training, IVC overview, NBICU pearls, patient care documentation, Med Reconciliation, policy and procedure overviews, scavenger hunts, etc.	
OBJ R3.2.3 (Application) Use group participation skills when leading, facilitating, or working as a member of an interdisciplinary committee or informal work group.	Centralized and Decentralized Clinical Practice Training, Medication Reconciliation, Vaccine Screening process, Systems training, Therapeutic Plan development (PHARME), Efficiency training and practice, Staffing shift training, etc. Each resident will turn in samples of documentation, patient work-ups, and pass quizzes on staffing requirements.	
OBJ R3.2.4 (Synthesis) Develop strategies for dealing with challenging communications situations.		
OBJ R3.2.5 (Analysis) Determine the appropriate type of communication, and the medium and organization for it, using an understanding of the target audience, the characteristics of the information to be communicated, effectiveness, efficiency, customary practice and the recipient's preferences.		
OBJ R3.2.6 (Application) Use listening skills effectively in performing job functions.		