Inpatient Clinical Management
PGY2 - Health-System Pharmacy Administration (87405)

Faculty: Ruelle, Sonya; Tyler, Linda S.

Site:
University of Utah Hospitals and Clinics

Status: Active
Required

Description:

Preceptor: Sonya Ruelle, RPh, MBA

Duration of rotation: 4 weeks

Rotation Description:
Residents will receive a broad overview of the leadership and management issues in the Pharmacy Department with a focus on issues that affect inpatient care practice. The resident will attend interdisciplinary meetings on units with the clinical pharmacist associate with that area. The resident will also attend system-wide safety and other administrative meetings with the department leaders. The resident will develop a good understanding of pharmacy's critical role in the organization. The resident will experience how clinical services directly impact the organization through quality, safety, core measures, creating and updating policies, and identifying opportunities to optimize clinical services.

Site Description:
University of Utah Hospitals & Clinics (UUHC) is comprised of 4 hospitals, 12 free standing clinics, 16 retail pharmacies, 4 infusion centers, ambulatory clinic services, home infusion service, and a comprehensive drug information service. The ambulatory care network includes the Community Clinics located throughout the Salt Lake Valley and the four surrounding counties that provide both primary and specialty care, plus the specialty clinics and infusion room at University Hospital. Community Pharmacies are located at each of the following Hospitals: University Hospital, University Neuropsychiatric Institute, Huntsman Cancer Hospital, and University Orthopaedic Center. University Hospital and HCH provide comprehensive transitions of care services as well.

The resident will be working primarily at University Hospital.

Role of the Pharmacist:
The inpatient clinical manager applies administrative aspects to clinical services. Areas of focus include credentialing and privileging, clinical service development, clinical guideline development, and quality standards. The manager facilitates the planning, directing and coordination of performance improvement activities, resolving inpatient safety concerns, and coordinating responsibilities to ensure the continuous high quality patient care. The pharmacy leaders ensure employee engagement and satisfaction, identify inefficient processes, and complete audits of payroll and scheduling.

Expectation of Learners:

Expectations of the resident:
The resident will lead and present at least two meetings. The resident will complete several inpatient projects to
apply key concepts and understand how to justify pharmacy services. Residents will keep a journal on rotation to capture their questions, observations, and insights. These notes will serve as discussion points with the preceptor. Residents who ask a lot of questions get the most from their rotation. For each meeting, the resident is expected to identify 3 positive things and 3 things that could be improved. Think about both the meeting content and the process of the meeting. Also note the opportunities to improve the medication use system.

Pre-rotation preparation:

No reading is required prior to the start of rotation. Residents need to contact the preceptor 1-2 weeks before the rotation starts to confirm start date and provide the preceptor any scheduling of vacation days, appointments, etc. in order to coordinate the rotation schedule. In particular, be sure to bring a copy of your customized plan and your individual goals for the rotation. Ideas for projects and audits should be shared ahead of time.

Typical Daily/Weekly/Monthly Activities:

Usual time for rotation is 8:00 am to 4:30 pm. However, it is very important to be flexible based on what is going on in the department and meetings: 7 am or late in the afternoon/evening are likely to happen several times in the rotation. The schedule will be reviewed every Monday morning to develop a plan for the week.

Project/Presentation Description:

The resident will have the opportunity to work on a wide range of relevant administrative, quality, safety or management projects during the rotation. Projects will be concentrated on topics and initiatives that will enable the resident to work with different critical care areas within the department of pharmacy as well as departments and various health practitioners throughout the entire organization. Projects opportunities will be driven by current events in the department/organization, including MUE, gap analysis, proposal development for new service, budget and FTE justification and allocation, and will require a presentation.

Residency Progression:

Time frame

Resident progression

Pre-rotation and Day 1

Confirm with preceptor starting dates and time for first day.

Come prepared to discuss resident progress to date, goals, and personal objectives for the rotation.

Review rotation description with preceptor.

Check off rotation orientation checklist.

Week 1

Attend meetings with preceptor or other assigned meetings.

Participate in daily huddles throughout the rotation as available.

Start working through readings. Complete 50% of the readings this first week.

Set up topic discussion and evaluation appointments.

Get project assignments. Your preceptor will help you get your MUE, medication event investigation, and audit project assignments.
Week 2
Continue to attend meetings with preceptor as assigned.
Complete 75% of the readings
Signpost on projects. Get additional project assignments.
Complete audit assignments.
Discuss assigned topics with preceptor.
Complete 40% or more of the goals for the rotation.

Week 3
Attend selected meetings.
Complete remaining readings.
Discuss assigned topics with preceptor.
Apply readings to rotation activities.
Signpost on projects.

Week 4
Attend selected meetings.
Complete projects. Present selected projects to appropriate stakeholders. Prepare written project reports.
Present Journal club for preceptors.
Facilitate a meeting (such as a Daily Huddle, journal club, department meeting).
Discuss assigned topics with preceptor.
Discuss ideas for improving the medication use process and a plan for implementing the change.
Complete all goals for the rotation. Work with RPD to develop a plan to address any areas that need improvement.
Complete evaluation in PharmAcademic prior to the end of rotation using evaluation template for both the resident and preceptor.

Evaluation:
The resident will have discussions with the preceptor at least multiple times per week. Weekly, usually Friday morning will serve as a place for providing feedback to the resident about performance and activities during the week and making adjustments to the rotation as needed.

The resident and preceptor will discuss progress at the midpoint, together evaluating progress in completing goals, interpersonal communication, project and time management, and ability to work independently. Resident strengths and opportunities will be discussed. The resident needs to come prepared with the list of their projects to date, but no other preparation is needed.

A final summative evaluation will be completed, usually on the last day of rotation. Prior to the evaluation meeting, the resident needs to complete the self-evaluation, evaluation of learning experience, and preceptor evaluation in PharmAcademic. The final evaluation will be conducted in PharmAcademic. The resident needs to
be sure to use the template for evaluations in preparing their evaluations.

<table>
<thead>
<tr>
<th>Goal R1.3</th>
<th>Manage a pharmacy’s direct patient care services.</th>
<th>Activities</th>
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<tr>
<td>OBJ R1.3.1</td>
<td>(Evaluation) Based on one’s own assessment of the scope of the pharmacy’s current services for its capacity to meet the needs of all patients served by the health system, identify any needed services.</td>
<td>Taught and Evaluated Plan for FTE expansion and defense in budget process.</td>
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| Goal R1.4 | Participate in the development and coordination of medication-use policy initiatives. | |
| OBJ R1.4.3 | (Synthesis) Oversee the completion of a medication-use evaluation (MUE). | Taught and Evaluated Complete MUE |

| Goal R2.5 | Understand how to coordinate a health system’s medication safety oversight program. | |
| OBJ R2.5.1 | (Comprehension) Explain the components of an effective system for tracking, trending, and reporting adverse drug events (ADEs). | Taught and Evaluated Quality improvement and RL review and define actionable steps. |
| OBJ R2.5.2 | (Comprehension) Explain the organization's patient safety program and how it fits with the pharmacy’s medication safety program. | Taught and Evaluated Attend and participate in med safety. Participate in Willow work order review. |

| Goal R2.6 | Apply methods for measuring and improving internal and external customer satisfaction with pharmacy services. | |
| OBJ R2.6.1 | (Synthesis) Contribute to an assessment of customer satisfaction with a specific aspect of pharmacy services. | Taught and Evaluated Discussion of clinical management. Participate in Willow work order review. Plan for FTE expansion and defense in budget process. |
| OBJ R2.6.2 | (Synthesis) Create a proposal for the improvement of a specific area of pharmacy services. | Taught and Evaluated Attend and Participate in Critical Care Committee, with possible presentation. Plan for FTE expansion and defense in budget process. |

| Goal R6.1 | Demonstrate the personal leadership qualities and commitments necessary to advance the profession of pharmacy. | |
| OBJ R6.1.10 | (Characterization) Consistently use good judgment in the conduct of professional relationships. | Taught and Evaluated Lead the CC/CV team meeting. Participate in interviewing and or onboarding process. Participate in Willow work order review. |

| Goal R6.3 | Demonstrate business skills required to advance the practice of pharmacy. | |
| OBJ R6.3.4 | (Application) Use effective negotiation skills to resolve conflicts. | Taught and Evaluated Lead the CC/CV team meeting. Participate in Willow work order review. |

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