

PGY1 Orientation Rotation Description

Preceptors:

Coordinating Preceptors: Shantel Mullin, PharmD, BCPS Track A, Macheala Jacquez, PharmD, BCACP Track B

Trainers: Pharmacy Operations, Clinic, and Unit-Based Pharmacists, Policy/ Process/ Technology Expert Pharmacists from across the UUH System

Hours: 0700-1700 (varies depending on day's activities)

Pager: (801) 339-7708 – Or unit pager for the assigned daily location. (Unit pager numbers are found in SmartWeb or on the Pharmacy Help Book.)

Site Description:

The University of Utah Hospital is a level I trauma center that serves critical and acute care patients in 488 beds, and is a referral hospital for a 6-state region. Over 140 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 100 inpatient and critical care beds, an infusion center, and several clinics. Clinics at the hospital and surrounding communities serve patients with pharmacy care both through retail pharmacies, Primary Care services, thrombosis services, and clinic-based services. The University Health Care system also includes a Drug Information Service, Home Infusion Service, Informatics Service, Neuropsychiatric Hospital, and Orthopaedic Hospital.

Role of the Pharmacist:

Pharmacists have both specialized operational and clinical roles across the Department of Pharmacy Services, and residents will interact with operational pharmacists and clinical pharmacists in the key areas where they will be staffing and rotating during the year. Clinical pharmacists serve in inpatient operations and community pharmacy distribution roles ensuring drug product is ordered, verified and dispensed correctly. These pharmacists oversee the work of pharmacy technicians and interns. Clinical pharmacists are also assigned to clinical sites in ambulatory care, acute care and critical care. In general clinical pharmacists in direct patient care roles evaluate patient treatment regimens and related test values and history to ensure patients are receiving the most therapeutically and cost effective treatments. This is achieved through daily interactions with the interdisciplinary teams. Residents receive an overview of the range of pharmacy roles throughout the system, but focus on key roles related to their longitudinal staffing experiences first.

Rotation Description:

This experience is designed to orient residents to pharmacy practice and operations at University of Utah Hospitals and Clinics. It is a combination of didactic orientation experiences and hands-on training primarily in the community, central and decentralized pharmacy service areas. Residents receive training on computer systems, the electronic

health record, policies and guidelines, department structure, pharmacy strategic initiatives, and requirements of the residency. The primary goal of orientation is to ensure that the resident can function as a pharmacist by the end of Orientation. Orientation ensures that residents understand the requirements of residency, the basics of workflow and patient care, and establish teaching and research expectations. Resident should understand their role as a licensed pharmacist in our health system, but also as a learner with oversight.

Expectations of the Resident:

Residents must attend orientation sessions as assigned and participate in learning activities. They must pass trainings in the EHR and complete training checklists of competency for operations and for clinical sites as assigned during the orientation time frame. Residents are expected to be on time, take personal responsibility for reading training materials, take ownership of patients assigned to them, and develop key knowledge and skills needed to staff in their assigned locations by mid-August. Residents must ask clarifying questions in each training location if they are uncertain what the expectations are and how to continue to improve.

Expected Progression

Week 1: Residents will be expected to complete UUH System orientation and Epic training in order to receive access to EPIC's inpatient, ambulatory and Beacon applications. Residents will participate in operations orientation for their respective operations staffing location.

Week 2: Begin learning clinical responsibilities in each respective staffing/longitudinal location on day and swing shifts. The resident should begin with working up a 1-2 patients and work to add a couple of patients per day. The teams will review common clinical issues that arise, and residents must incorporate this knowledge and integrate it into subsequent patient work-ups. The resident will learn how to accurately complete medication histories and document them in Epic. The resident will also then be able to review med histories completed by interns and technicians for accuracy and complete the reconciliation and documentation. Residents are expected to "know what they do and don't know." Residents must NEVER guess the responses to drug information questions. Residents will learn to use various paper and electronic resources to answer questions for providers and their team.

Week 3 (and first clinical rotation): Residents should work each day toward managing a full patient workload independently, but a full patient load will not be expected until August. The resident will be working with a pharmacist who will help the resident to increase their capacity for staffing requirements to meet the needs of each required staffing shift. The resident is expected to stay each day until assigned patients and daily tasks are complete for their shift.

Week 4/5: Residents will learn how to manage the operations of the pharmacy including management of orders, technicians, interns and general medication use process. Residents are expected to identify clinical problems, use available resources to problem-solve, correctly contact providers or other pharmacists for clarification, and manage drug information responses and urgent issues as they arise.

RLS Objectives

The goals selected to be taught and evaluated during this learning experience include:

R1.3.1 Prepare and dispense medications following best practices and the organization's policies and procedures
R1.3.2 Manage aspects of the medication-use process related to formulary management
R1.3.3 Manage aspects of the medication-use process related to oversight of dispensing
R3.2.2 Explain the elements of the pharmacy enterprise and their relationship to the health care system

Activities Evaluated:

Objective Number	Teaching Method(s)	Rotation Activities
Goal R1.3 Prepare, dispense, and manage medications to support safe and effective drug therapy for patient		
OBJ R1.3.1	Direct Instruct. Modeling Coaching Facilitating	<ul style="list-style-type: none"> Residents will review all P&T policies and select 2 policies to "own" all year. Residents will review cases of common policy issues that come up while rotating and staffing. Residents will have full orientation to their staffing locations and longitudinal clinical locations as assigned. They will shadow pharmacists and then begin to practice using databases, technology, and workflows in these areas to facilitate patients receiving meds efficiently and accurately per policy/guideline.
OBJ R1.3.2	Direct Instruct. Modeling Coaching Facilitating	<ul style="list-style-type: none"> As above AND: Residents will review orders for accuracy and alignment with UUH Formulary policies. Residents will review the formulary, learn to access the formulary, and make recommendations regarding the formulary and relevant drug shortages.
OBJ R1.3.3	Direct Instruct. Modeling Coaching Facilitating	<ul style="list-style-type: none"> Residents will learn the workflow of pharmacists, interns and technicians in typical staffing locations. Residents will oversee and double check the dispensing and medication history functions of interns and technicians to promote safety and efficiency. Residents will practice problem solving shortages and other medication dispensing problems.
R3.2 Demonstrate management skills		
OBJ R3.2.2	Direct Instruct. Modeling Coaching Facilitating	<ul style="list-style-type: none"> Residents will learn the UUH organizational chart and how it relates to the full system and to different departments within pharmacy Residents will review the pharmacy strategic plan and apply this as they select projects. Residents will learn how to interact with other members of the healthcare team when staffing operationally or when on clinical rotations.

Readings and Preparatory Work:

Residents will read the hospital and pharmacy department orientation manuals and staffing location checklists. Residents are responsible for reading the Residency Manual. Readings will be provided for specific in-services for the resident to read ahead of time. The resident is expected to know how to locate, interpret, and use online guidelines, policies and procedures from the department and from the Pharmacy & Therapeutics Committee. Residents taking ACLS training will be responsible to borrow an ACLS manual and read it prior to class. Residents will need to become CITI certified to be ready to submit project proposals to RAC and the IRB.

Typical Daily Activities:

The orientation and training schedule will be Monday through Friday. Days will start at 7AM and 8AM for day shift training and 3PM for swing shift training according to preset schedule. The first 2 weeks will be Epic training classes in the computer lab and orientation to staffing locations. The third week will overlap with PGY2s and include training on policies, procedures, staff expectations, resident expectations, etc. The clinical practice training days will occur later for 2 weeks either in the central operations/order-verification area (Track A) or Community Pharmacy and clinic areas (Track B) and decentralized clinics/units/pharmacy satellites based on staffing and longitudinal clinical rotation sites. Residents will be paired with a pharmacist expert/trainer for their training shifts. The resident will be responsible for coming to orientation prepared each day to learn the workflow and staffing requirements of the area. Residents will read all assigned readings and actively participate in orientation. They will be responsible for developing basic staffing skills by the end of the orientation months including evaluating patients, making recommendations, and managing daily operational and clinical workflow.

Evaluation:

The resident will receive oral feedback from preceptors daily as they learn each new skill or task. 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 complete and their competency checklist is completed at the end of August. This summative evaluation will be face-to-face and include comments from pharmacists who have worked most with the resident. The coordinating preceptor's evaluation will be recorded in PharmAcademic during a face-to-face evaluation. Residents will complete a learning experience evaluation and a preceptor evaluation with notes on all trainers in PharmAcademic.