

PGY1 Pharmacy Residency (Ambulatory Care Focus) Manual

2023 - 2024

This manual has been developed for the Pharmacy Residency Program at Froedtert Hospital to provide information on the policies, procedures, benefits, and other elements that may directly relate to the completion of our program. Questions regarding the manual may be addressed with the Residency Program Directors or the Residency Steering Committee. There may be changes to the policies and procedures at any time when deemed necessary. You will be informed of those changes accordingly.

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About Froedtert Health

Froedtert & the Medical College of Wisconsin

The Froedtert & the Medical College of Wisconsin (MCW) regional health network is a partnership between Froedtert Health and the Medical College of Wisconsin supporting a shared mission of patient care, innovation, medical research, and education. Our health network operates eastern Wisconsin's only academic medical center and adult Level I Trauma Center at Froedtert Hospital, an internationally recognized training and research center engaged in thousands of clinical trials and studies. The Froedtert & MCW health network, which includes ten hospital locations, more than 2,100 physicians, and more than 45 health centers and clinics, draws patients from throughout the Midwest and the nation. In our most recent fiscal year, outpatient visits were more than 1.7 million, inpatient admissions to our hospitals exceeded 58,000, and visits to our network physicians totaled 1.17 million.

Froedtert Hospital

Froedtert Hospital is a 711-bed academic medical center and a leading referral resource for advanced medical care. Froedtert Hospital also operates the region's only adult Level I Trauma Center. The Primary adult teaching affiliate of the Medical College of Wisconsin, Froedtert Hospital is a major training facility for more than 1,000 medical, nursing, and health technical students annually. It is also a respected research facility with more than 2,000 research studies, including clinical trials, every year.

Froedtert Menomonee Falls Hospital

Froedtert Menomonee Falls Hospital, founded in 1964 by the citizens of Menomonee Falls and surrounding communities, is a full-service hospital that specializes in cancer care, heart and vascular care, orthopaedics, women's health, and advanced surgical procedures. Since 2017, the hospital has been home to inpatient training for Medical College of Wisconsin residents as part of the Froedtert Menomonee Falls Hospital Family Medicine Residency Program. A three-year residency, the program includes 18 medical residents with six residents per class.

Visit *froedtert.com* for more information about the Froedtert & MCW Health Network.

Froedtert Health and the Medical College of Wisconsin have shared mission, vision, and values

- <u>Mission</u>: We advance the health of the people of the diverse communities we serve through exceptional care enhanced by innovation and discovery
- <u>Vision Statement</u>: We will be the trusted leader by transforming health care and connecting communities to the best of academic medicine
- Values:
 - Value People. We treat others with respect, knowing that their feelings, thoughts, and experiences are as important as our own.
 - Work Together. We collaborate across the enterprise to put forward our best.
 - Act Now. We take action to solve problems and move forward quickly.
 - o **Own It.** We take full accountability for our decisions, actions, and results.
 - o **Break Through.** We change the future of care with creativity and innovation.
 - Deliver Excellence. We set the standard that others aspire to by always asking "What more can we do?"

Pharmacy Department

- Mission:
 - The Pharmacy Department at Froedtert & MCW provides:
 - High-quality, cost-effective, comprehensive, patient-centered care in an atmosphere of communication and shared respect

- Life-long learning through the education of patients, students, residents, staff, and other health care professionals
- Research and discovery designed to enhance the quality and safety of medication use
- Vision Statement:
 - To improve the health of the community by achieving high-quality patient outcomes through appropriate use of medication therapy

Vizient Quality and Accountability Rankings

Vizient, an alliance of academic medical centers in the United States, provides rankings for academic medical center and affiliated hospitals based on quality, safety, and service. In 2022, Froedtert Hospital was recognized as a top performer in the 2022 Bernard A. Birnbaum, MD, Quality Leadership Ranking, achieving a rank of <u>10</u> out of 107 Academic Medical Centers. Vizient offers many resources to member hospitals as well as leadership and networking opportunities for pharmacists and pharmacy residents.







Froedtert & MCW Pharmacy Residency webpage: froedtert.com/pharmacy-residency

Departmental Information

Froedtert Health Pharmacy Solutions (FHPS)

FHPS focuses on outpatient pharmacy services including retail, specialty, and home infusion and includes a full-service PBM.

Froedtert Pharmacy Retail Services

- Froedtert Pharmacies provide services Monday through Friday with certain locations offering Saturday hours and the 92nd Street location operating 365 days a year.
- There are 12 retail pharmacy locations and 1 remote dispensing site with plans to expand locations in FY23.
- The three discharge pharmacies located within FMLH, FMFH, and FWBH are accredited by Community Health Accreditation Partner (CHAP), allowing Medicare Part B billing for approved DME products with additional locations being approved for billing Medicare Part B medications.
- Pharmacy staff working in the Froedtert Pharmacy Retail Stores are responsible for:
 - Prescription data entry, claims adjudication, medication profile review, assessment for clinical appropriateness, identification of interactions or possible adverse events, collaborating with interdisciplinary team members, product dispensing, final product verification, cash handling and point-of-sale transactions, counseling patients on prescription and over-the-counter medications
 - Fulfill duties outlined in the Clinical Pharmacist Practice Service and Medication
 Distribution and Control as applicable
 - Support patients through challenges in receiving their medications by utilizing available resources, such as patient assistance programs, prior authorizations, Froedtert Rx Savings Plan, approved interchange polices, and programs such as the Drug Repository Program, Diabetic Smart Start and Discount Programs, etc
 - Per Wisconsin State Law, pharmacists are required to counsel on new prescriptions when therapy changes are made, when requested by the patient or patient agent, or when the pharmacist deems necessary
 - Additional services available include Medication Therapy Management, Immunizations, Quality Interventions, Enhanced Refill Processing, and the Froedtert Rx App to assist patients in managing their medications

Froedtert Pharmacy Home Delivery & Specialty Services

Home Delivery

- Froedtert Pharmacy offers Home Delivery to seven states for no additional charge to patients.
- Before sending out any medications, the pharmacy staff proactively call patients to confirm their order, preventing missed doses and minimizing unwanted medication from being sent.

Specialty

- The Froedtert Pharmacy Specialty team manages high cost, often chronic medications used by
 our patients in and outside of our hospitals or clinics. Our Specialty Pharmacy touches a variety
 of areas within our health system and is URAC accredited. Each month a pharmacist reviews the
 patient's medical record to ensure their medications are appropriate and accurate.
- The Medication Access Team (MAT) is embedded with the specialty pharmacy service line and performs the following duties:
 - Acquire prior authorizations for specialty medications infused, administered, or dispensed at any of the Froedtert and the Medical College of Wisconsin campuses, health centers, or Froedtert Pharmacies
 - Obtain medication and/or financial assistance for patients who are uninsured or unable to afford their specialty medication
 - Collaborate with social work, case management, and financial counselors to ensure patient access to affordable medications

 Review of pending Medicare write-offs to correct potential billing errors and maximize reimbursement

Froedtert Pharmacy Home Infusion Services

- Provides a safe and effective option for patients to receive therapy via intravenous or other nonoral routes from the comfort of their own home or infusion suite
- The Home Infusion team includes registered nurses and pharmacists, and coverage spans the state of Wisconsin
- Home Infusion is accredited by the Joint Commission for home care services and is a certified Medicare provider for DME

Ambulatory Pharmacy Services

- Pharmacists are integrated into both primary care and specialty clinics across the Froedtert Health Enterprise
- Primary care pharmacists cover over 30 primary care clinics and specialty clinic pharmacists support over 10 specialty areas
- The ambulatory pharmacy department also comprises the Anticoagulation Clinics (a multidisciplinary team of pharmacists, nurses, and pharmacy technicians) and the pharmacist-led Anemia Clinic
- Ambulatory clinic pharmacists provide care to patients with a variety of chronic conditions through the use of Collaborative Practice Agreements with physicians
- Ambulatory pharmacy care is delivered to patients through office and virtual visits as well as telephone encounters
- In addition to direct patient referrals, ambulatory pharmacists work with nurses and medical assistants on enterprise-wide population management initiatives focused on a variety of disease states such as diabetes, hypertension, heart failure, COPD/asthma, and HIV PrEP
- Ambulatory pharmacists at Froedtert work closely with the pharmacy technician prior authorization team, as well as pharmacists within the Froedtert Health retail and specialty pharmacies to ensure patient access to medications
- Ambulatory clinics with pharmacist services include: Anemia, Anticoagulation, Behavioral Health, Cardiology, Dermatology, Endocrinology, Geriatrics, Gl/Hepatology, Infectious Diseases, Infusion Clinic, Metabolic Syndromes, Neurology, Oncology, Primary Care, Pulmonary Clinic, Rheumatology, and Solid Organ Transplant

Investigational Drug Services

- Pharmacy staff are responsible for the proper procurement, storage, labeling, dispensing, record keeping, and disposal of investigational drugs for all clinical research at Froedtert Hospital and clinics on the Froedtert Hospital campus
- Investigational drugs will only be dispensed to patients enrolled in an IRB-approved research study and only after informed consent has been completed and verified by a pharmacist
- Pharmacy staff are responsible for proper storage, labeling, dispensing, record keeping, and disposal of emergency use medications, medications available as a part of an expanded access program, and compassionate use medications
- Pharmacy staff will work with the clinical team as needed to facilitate authorization through the IRB, correspondence with the supplying company, and procurement of drug as needed
- Investigational Drug Service team members are responsible for preparing protocol summaries to facilitate after-hours dispensing of medications for clinical trials where necessary
- Investigational Drug Service team members are routinely available Monday through Friday 7:00 am to 5:30 pm. An Investigational Drug Service team member is available during the evening and weekends if needed for urgent situations

Center for Medication Utilization

- The Center for Medication Utilization (CMU) team promotes and ensures the safe, effective and
 fiscally responsible use of medications across the Froedtert & MCW health network. The team
 provides structure and support for the System Pharmacy and Therapeutics Committee and is
 integral to many critical medication management efforts across the health network, including:
 - Medication utilization management for medication spending and reimbursement across the health network
 - Effective medication shortage management to ensure patients and providers have access to the medications they need
 - o Formulary management with support for informatics and policy integration
 - Vigilance of safe medication use in accordance with regulatory requirements and best practices
 - Facilitation and oversight of medication guidelines, protocols, collaborative practice agreements, and clinical pathways
 - Development and maintenance of infusion pump libraries, user-friendly drug information resources, and communication tools
 - Continual monitoring of medication-use patterns and value-based care initiatives

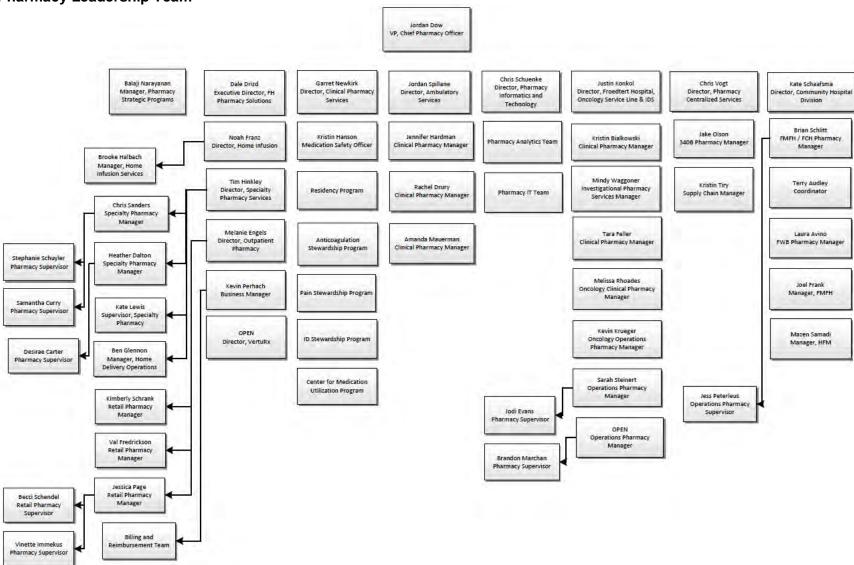
Pharmacy Informatics/Epic Willow Teams

- The Pharmacy Informatics and Epic Willow teams manage, implement, and design automation and technology including the electronic health record, distributive technologies, and ancillary programs across the Froedtert and the Medical College enterprise
 - Primarily responsible for the Epic Willow Inpatient application, Epic Willow Ambulatory application, medication related ancillary applications, medication related reporting, and training of pharmacy staff
 - Pharmacy Informatics and Epic Willow team members are routinely available Monday through Friday 8:00 am to 4:00 pm. A Pharmacy Informatics and Epic Willow team member is available during the evening and weekends if needed for urgent situations

Precepting and Teaching

- As part of an academic medical center, pharmacist duties include the following:
 - Daily teaching and incorporation of evidence-based learning into resident and student rotations
 - Evaluation and feedback for residents and students on a regular basis
 - Timely coordination of rotation activities
 - Effective use of residents, students, and interns as extenders of pharmacy care

Pharmacy Leadership Team



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Residency Program Leadership

Residency Program Leadership

Kristin Hanson, BSPharm, MS

Program Director for Residency Programs

Teri Mattek

Pharmacy Education Coordinator

PGY1 Residency Programs

Froedtert Menomonee Falls Hospital PGY1

- John Muchka, PharmD, BCPS
- Residency Program Director
- Brian Kasica, PharmD, BCPS
- Residency Program Coordinator

Froedtert Hospital (Acute Care Focus) PGY1

- Anne Zechlinski, PharmD, BCPS
- Residency Program Director
- Amanda Pilo, PharmD, BCPS
- Residency Program Coordinator

Froedtert Hospital (Ambulatory Focus) PGY1

- Mickey Hart, PharmD, BCACP
- Residency Program Director
- Jonathan White, PharmD, BCACP
- Residency Program Coordinator

Community-Based PGY1

- Melanie Engels, PharmD, MBA
- Residency Program Director
- Kevin Stutt, PharmD
- Residency Program Coordinator

Health System Pharmacy Administration and Leadership PGY1 and PGY2

- Justin Konkol, PharmD, MHA, BCPS, DPLA
- Residency Program Director
- Tara Feller, PharmD, MBA, MPH, BCPS, Kristin Tiry, PharmD, MHA
- Residency Program Coordinators

Medication Use Safety and Policy PGY1 and PGY2

- Kristin Hanson, BSPharm, MS
- Residency Program Director
- Daniel Kapp, PharmD, BCPS, BCOP, Taylor Mancuso, PharmD
- Residency Program Coordinators

Pharmacy Informatics PGY1 and PGY2

- Jill Zimmerman, PharmD, MS
- Residency Program Director
- Brian Dekarske, PharmD
- Residency Program Coordinator

PGY2 Residency Programs

PGY2 Ambulatory Care

- Amanda Mauerman, PharmD, BCACP
 - Residency Program Director
- Jonathan White, PharmD, BCACP
 - Residency Program Coordinator

PGY2 Critical Care

- Joel Feih, PharmD, BCCCP
 - Residency Program Director
- Kaitlin Cooper-Johnson, PharmD, BCCCP
 - Residency Program Coordinator

PGY2 Emergency Medicine

- Cathyyen Dang, PharmD, BCPS
 - Residency Program Director
- Jessica Feih, PharmD, BCCCP
 - Residency Program Coordinator

PGY2 Infectious Diseases

- Alison Gibble, PharmD, BCIDP
 - Residency Program Director
- Kelsey Zeeck, PharmD
 - Residency Program Coordinator

PGY2 Oncology

- Emma Carroll, PharmD, BCOP
 - Residency Program Director
- Stephanie Spitzer, PharmD, BCOP
 - Residency Program Coordinator

Residency Program Policies and HR Information

Residency Program - Resident Licensure
Residency Program - Scheduled, Unscheduled, and Extended Absences from Residency
Residency Program - Residency Program Completion

Residency Program – Resident Performance Improvement Planning and Corrective Action

Residency Program - Duty Hours

Residency Program - Pharmacy Resident Licensure

Name: Residency Program - Pharmacy Resident Licensure

Last Review Date: 12/30/2021 Next Review Date: 12/30/2024 Policy Number: 40310-004 Origination Date: 01/02/2013

Purpose: To define requirements related to licensure for pharmacy residents

Policy: Consequences of failure to obtain licensure within the expected timeframe will be determined by the Residency Program Director, Residency Coordinator, Director of Pharmacy and a representative from Human Resources.

Procedure:

- The pharmacy resident should submit appropriate documentation to the Wisconsin State Board of Pharmacy as soon as possible after learning they have matched with a Froedtert residency program.
- The resident must be fully licensed as a pharmacist (successfully pass the NAPLEX and MPJE exam and have an active pharmacist license) within 90 days of the beginning of the residency.
- If the resident is not licensed within 90 days of the beginning of the residency program, the following describes the outcome for the resident.
 - If the resident has taken, but not successfully passed either the NABPLEX or MPJE exam, or both, the Residency Advisory Committee (RAC) may consider allowing a 30 day extension, which will allow the resident to complete two-thirds of the residency as a licensed pharmacist.
 - i. If approved, this extension will be noted in the RAC minutes.
 - ii. If this extension is not approved, the resident will be dismissed.
 - o If the resident has not taken both the NAPLEX and MPJE exams within 90 days of the beginning of the program, the resident will be dismissed from the program.
- If a 30 day extension has been provided and the resident is still not licensed as a pharmacist, the following describes the outcome for the resident.
 - o If the resident has signed up to retake the test(s) but not successfully completed, the RAC may consider allowing an additional extension, not to exceed 90 days (i.e. 210 days after the beginning of the residency).
 - i. If approved, this extension will be noted in the RAC minutes, and the residency will be suspended until such time as the resident is licensed as a pharmacist. Once licensed, the residency will be extended by the amount of time as the extension to ensure that the resident completes 12 months of training and completes two-thirds of the residency as a licensed pharmacist. If the resident is not licensed as a pharmacist by the end of this extension, the resident will be dismissed.
 - ii. If this extension is not approved, the resident will be dismissed.
- Factors taken into consideration will include:
 - Reason(s) for the delay (within or beyond the resident's control)
 - Number of attempts to pass licensure exams
 - o Overall competency, ability and performance of the resident

Reference Details:

Approved by Residency Steering Committee Issuing Authority:

FMLH Pharmacy Operations Committee

Residency Program - Scheduled, Unscheduled, and Extended Absences from Residency

Last Review: March 26, 2021 Next Review: March 26, 2024

Description: Residency program completion, extended absences, leave, LOA, PTO, sick time, holiday

Policy number: 40310-005 Origination date: 9/13/2005

Purpose: To describe the requirements for residency completion and extended absences.

Policy:

- 1. Froedtert & the Medical College of Wisconsin PGY1 and PGY2 pharmacy residency programs are designed as 52-week programs of full time work. Combined PGY1/PGY2 pharmacy residency programs are designed as two consecutive 52-week programs. The non-traditional residency program allows the resident to meet the residency requirements over an extended period of time.
- 2. Residents may take up to a total of 21 days of time off (paid or unpaid) per year for vacation, interviews, sick time, and holidays. Residents taking time off in excess of 21 days or 168 hours per year will need to make up those days in order to complete their residency program and earn a residency certificate.
- 3. The residency program will be extended up to 12 weeks (with pay) beyond the original expected completion date to facilitate completion of all program requirements for residents with an approved Leave of Absence during the residency year. The length of the extension will align with the duration of the approved leave.
- 4. In the event of extended or multiple intermittent absences beyond an approved Leave of Absence, the option to extend the residency will be at the discretion of the Residency Program Director and manager. The residency program may be extended up to 12 weeks beyond the original completion date.
- 5. Absences of greater magnitude or frequency are considered too substantial of an interruption and will result in program dismissal without a residency certificate.

Procedure:

- 1. Residents will work with their program director, manager, and scheduler to request time off.
- 2. Residents may not schedule time off from staffing shifts. Unscheduled time off from a staffing shift may result in the make-up of that shift at a later date.
- 3. Approval and handling of absences, including paid time off (scheduled and unscheduled) will be done in accordance with Froedtert Health policies specific to the situation.
- 4. If an extension to the residency is a warranted, the duration of the extension will be determined by the amount of time missed.

Preparation: Kristin Hanson, BSPharm, MS Authorization: Residency Steering Committee

Pharmacy Department Policy and Procedure Committee

Residency Program – Residency Program Completion



FROEDTERT PHARMACY POLICY

Effective Date: June, 2021

Title: Residency Program: Residency Program Completion Revised Date:

Entities Impacted: FMFH (X) FMLH (X) FMCWCP () FWBH () Policy Number Pending

PURPOSE: Describe requirements for residency program completion

DEFINITIONS: I:\FMLH\PHARMACY\Residency Program\Steering Committee\Agendas and Notes

2020-2021\Notes\Updated definition of progress toward goals NI SP ACH ACHR

06.06.18 FINAL_.pdf

POLICY: Residents must meet all completion requirements prior to being awarded a residency certificate.

Each residency program maintains a list of completion requirements specific to that program.

Completion requirements are included in the residency manual and provided to residency candidates at the time of their interview with the program.

Progress on achieving completion requirements will be monitored by the Residency Program Director or designee and documented as a part of the resident's development plan at least quarterly.

Residents are required to complete all program specific completion requirements by the end of the residency program.

For residency programs with a Patient Care Competency Area (R1); all objectives within that competency area must be Achieved for Residency (ACHR) by the end of the residency program.

At least 70% of the other required objectives must be Achieved for Residency (ACHR) and Satisfactory Progress (SP) must be made on all remaining required objectives by the end of the residency program.

PROCEDURE:

RELATED POLICIES/PROCEDURES:

AUTHORS: Terry Audley, John Muchka, Kristin Hanson

Residency Program – Resident Performance Improvement Planning and Corrective Action

Name: Residency Program - Resident Performance Improvement Planning and Corrective Action

Last Review

Date: 06/26/2020

Next Review

Date: 06/26/2023

Policy

Number: 40310-002

Origination

Date: 08/10/2005

Purpose: To provide guidance on handling situations in which pharmacy residents are not meeting or

completing residency program requirements as expected.

Definitions: Residency Program Director (RPD) – The pharmacist on record with the American Society

of Health System Pharmacists (ASHP) who is responsible for the leadership of a pharmacy residency program. This pharmacist may or may not be a formal leader at Froedtert

Health.

Leader – The pharmacy resident's direct supervisor at Froedtert Health.

Mentor – A pharmacist assigned by the residency program director to assist with resident development during the residency year. The mentor is a Froedtert Health staff member who is typically not in a leadership role.

Advisor – A pharmacist assigned by the residency program director to assist with resident development and career planning during the residency year. The advisor is a Froedtert Health staff member who is typically in a leadership role.

Preceptor – A pharmacist who oversees a resident learner during a specific learning experience.

Policy:

- A. In order to earn a residency certificate at Froedtert & the Medical College of Wisconsin, residents must meet criteria outlined in policy AD25.000, Residency Program Completion and Extended Absences.
- B. F. The resident's mentor and/or advisor may be included depending on the circumstances.
- C. Coaching will be used to correct deficiencies or behaviors initially unless:
 - 1. The resident is having difficulty performing tasks required to independently staff in a pharmacist role.
 - 2. The behavior or action would result in corrective action or dismissal for a staff member per Froedtert policies and procedures.
 - As a Froedtert Hospital staff member, residents are expected to comply with all Froedtert Health Rules of Conduct and other Human Resource policies as outlined separately.
 - ii. Non-compliance with these policies will be handled by the resident's leader and the department's Human Resource liaison.
 - 3. A pattern of behavior has been established and has not improved with coaching.

Procedure: Coaching

- A. When a preceptor or other member of the pharmacy department identifies that the resident is not meeting expectations, this information shall be communicated directly to the resident, the resident's RPD and the resident's direct leader.
 - 1. In addition to verbal feedback, the preceptor should provide written feedback to the resident in Pharmacademic with clear direction for the improvements that are needed. "Needs Improvement" should be used to document deficiencies. The RPD and/or leader will investigate by following up with the resident's preceptor as well as other preceptors and pharmacists who have worked with the resident.
 - 2. The RPD and leader will schedule a meeting with the resident to initiate a coaching conversation regarding identified problem areas and issues. A list of areas for improvement and goals to be achieved will be defined at this meeting. The rotation schedule and/or learning experiences may be adjusted in order to provide the resident an opportunity to show improvement. The resident's mentor and or advisor may also be included at the discretion of the RPD and leader.
 - 3. The RPD and leader will write a formal plan with actionable goals that has a distinct timeline using the attached template. The resident and leader will sign off on this document. The leader will add this plan to the resident's personnel file.
 - 4. The RPD and leader will schedule follow-up meetings with the resident at two and four weeks to discuss progress with the plan. Meetings may be scheduled sooner or more frequently if appropriate. Feedback will also be gathered from the resident's preceptors. If sufficient progress has been made, this will be documented on the plan and updated in the file. Based on the nature of the areas for improvement, the RPD and leader will determine if additional follow-up is needed.

Formal Performance Improvement Plan

- B. At the end of the four-week time period, if it is determined that the resident has not made sufficient progress in improving performance, the RPD and leader may initiate a formal Performance Improvement Plan with the assistance of their human resources liaison. Action may start here for situations listed under section C above.
 - 1. The resident's leader will be responsible for discussing the situation with the department's HR liaison and their Director.
 - 2. The leader and RPD will meet with the resident to discuss all areas in which it is believed the resident is still not meeting expectations. An official Performance Improvement Plan will be initiated based on the areas for improvement identified and timelines discussed. The leader and the resident will sign off on this document. This document and sign off will go into the resident's file, and will also reflect the understanding that if progress is not made during the established time frame, there is a possibility of dismissal from the program that would exclude the resident from earning a residency certificate.

- 3. It is the responsibility of the resident to achieve the documented goals. The leader and/or RPD will schedule follow-up meetings with the resident based on the timelines established in the performance improvement plan. The resident's mentor and/or advisor may be included in these meetings at the discretion of the resident's RPD and leader.
- 4. At the end of this time frame, if it is determined that the resident has not made progress toward completion of the goals, the RPD and the resident's direct leader shall discuss dismissal of the resident from the program and/or termination of employment.
- 5. The director of pharmacy, along with the resident's leader, and the RPD will make the final decision regarding dismissal/termination in consultation with the department's Human Resource liaison.

ATTACHMENTS/APPENDICES:

Resident Coaching Documentation Template Performance Improvement Plan Template

Residency Program – Duty Hours

Title: Residency Program – Duty Hours				
Last Review Date: 12/28/2022	ew Date: 12/28/2022 Next Review Date: 12/28/2025			
Policy Number: 40310-006	Origination Date:			
Category: Residency				
Policy Owner: Kristin Hanson, Anne Zechlinski				
Authorizing Group: Pharmacy Residency Steering Committee & Pharmacy Policy Committee				
Supercedes:				
Synergy: FMLH and FMFH				
Description:				

PURPOSE

To ensure pharmacy residents are "fit for duty" by outlining a process for monitoring and tracking duty hours as a way to identify if and when interventions are needed to promote resident well-being and resilience and patient safety.

DEFINITIONS:

Duty Hours – Duty hours are defined as all scheduled clinical and academic activities related to the pharmacy residency program. Duty hours include:

- Training and orientation, time to complete required certifications (ex. ACLS, BLS)
- Patient care activities (rotation & staffing)
- Administrative responsibilities
- Committee appointments and assignments
- Scheduled conferences (Milwaukee Citywide, Midyear, GLPRC, etc.)
- Projects & tasks assigned by preceptors, program director or coordinator required to meet the goals & objects of the program
- Work to complete year-long residency project
- · Assignments for longitudinal rotations
- Select On-call responsibilities (see section D, below)

Duty hours do not include:

- Reading, studying & academic preparation time
- Travel time to & from off-site rotations
- Travel time to & from conferences
- Time to complete education, training or certification not required as part of residency program
- Resident & department social activities

Scheduled duty periods – Assigned duties, regardless of setting, that are required to meet the educational goals and objectives of the residency program. These duty periods are usually assigned by the residency program director or preceptor and may encompass hours which may be within the normal work day, beyond the normal work day, or a combination of both.

Moonlighting – Voluntary, compensated, pharmacy-related work performed outside the organization (external), or within the organization where the resident is training (internal), or at any of its related participating sites. These are compensated hours beyond the resident's salary and are not part of the scheduled duty periods of the residency program.

Bonus Shift – Terminology used at Froedtert & the Medical College of Wisconsin for "moonlighting shifts" that are periodically available to residents for additional compensation.

Continuous Duty – Assigned duty periods without breaks for strategic napping or resting to reduce fatigue or sleep deprivation.

Days Free – Calendar days with no scheduled residency-related activities. This includes weekends when not scheduled to staff.

POLICY:

- A. All Froedtert & the Medical College of Wisconsin pharmacy residency training programs abide by the requirements set forth in the American Society of Health System Pharmacists (ASHP) Pharmacy Specific Duty Hours and Accreditation Standards.
 - https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.pdf
 - Residents will review the ASHP Duty Hours document upon initiation of the residency training program.
 - During orientation, the RPD will review requirements related to duty hours with residents.
 Furthermore, the RPD will highlight and emphasize resident accountability and responsibility as it relates to patient safety and the importance of being "fit for duty."
- B. Maximum duty hours of work per week and duty-free times:
 - Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house activities and all moonlighting/bonus shifts.
 - Mandatory time free of duty: residents must have a minimum of one day in seven days free of duty (when averaged over four weeks).
 - The scheduling of resident staffing shifts will allow duty hours rules to be met.

C. Moonlighting/Bonus Shifts

- Any moonlighting/bonus shifts worked at Froedtert Health or externally are included within duty hours
- Once trained and licensed, residents may pick up bonus shifts at Froedtert Health as long as:
 - i. The resident obtains permission from RPD prior to picking up their first shift.
 - ii. The shifts do not interfere with residency program requirements.
 - iii. The resident is meeting or exceeding residency program requirements.
 - iv. The shift will not cause the resident to exceed duty hours.
- If a pharmacist believes the resident is showing signs of fatigue (excessive yawning, sedation, etc), the resident should be relieved of their duty. The pharmacist will notify the program director and the resident will be prohibited from moonlighting/bonus shifts for at least 4 weeks.
- Moonlighting/bonus shifts will be prohibited if it appears to be interfering with the resident's judgement or ability to achieve educational goals.
- External moonlighting is discouraged, however, if a resident chooses to moonlight, hours must be
 disclosed with duty hours. If it is identified that moonlighting is interfering with fitness for duty,
 residents will be required to end moonlighting responsibilities.

D. At-Home Call Programs

- Residency programs with call programs must have a documented structure that includes:
 - i. Level of supervision a resident will be provided based on activities expected to perform, level of residency training and timing during the year.
 - ii. Identification of a backup system if the resident needs assistance.
 - iii. Method to evaluate the impact of the call program to ensure there is not a negative effect on patient care or resident learning due to sleep deprivation or fatigue.
 - iv. A plan for how to proceed if residents' participation in call program affects performance during duty hours.
- At-home call programs must satisfy the requirement for one-day-seven free of duty, when averaged over four weeks. No at-home call can occur on the day free of duty.
- At home call hours are considered duty hours if:
 - i. The resident is called-in to work or to fill a shift. The hours spent working will be included in duty hours. This may include a shift that can be worked from home.

ii. The time spent by the resident on on-call related work activities during their assigned on-call hours count toward duty hours (i.e. taking calls, reviewing electronic health record, arranging sick call coverage, etc).

E. Duty Hours Tracking and Monitoring

- Residents are expected to self-monitor their duty hours and will complete a monthly attestation in Pharmacademic.
- RPDs will be alerted if a resident discloses work in excess of duty hours limits. The RPD is
 responsible for discussing the circumstances for duty hour excursion with the resident in
 order to identify strategies to comply with duty hours rules while meeting program
 requirements.
- Potential strategies include restricting bonus shifts/moonlighting, allowing time away, adjustment of deadlines for longitudinal work, or rotation/staffing schedule adjustments.

F. Promotion of well-being and resilience

- During orientation, residents will be provided with education on well-being, resilience, burnout
 and strategies to mitigate/reduce risk. Organizational resources (such as peer support groups
 and counseling services) available to residents will be also be discussed.
- Annually, a preceptor development topic will be dedicated to discussing these topics as well.
- Individual resident wellness strategies will be included as part the each resident's development plan and will be re-assessed at least quarterly at each resident's Residency Advisory Committee Meeting.

Standardized Definitions of Resident Performance Evaluations for use within PharmAcademic

Formal Evaluation

Standard definitions of progress toward achieving goals and objectives will allow for consistent interpretation and help provide consistent assessment and subsequent feedback for all Froedtert & the Medical College of Wisconsin pharmacy residents in all residency programs. The following definitions will be used for needs improvement (NI), satisfactory progress (SP), achieved (ACH), and achieved for residency (ACHR) will be used in all PharmAcademic evaluations.

NI = Needs Improvement

Definition: Resident <u>is not meeting</u> expectations. The resident is <u>performing below</u> the level that would be expected of a resident at this point in their training program as evidenced by meeting 1 or more of the following characteristics:

- Requires direct and repeated supervision, guidance, intervention, or prompting
- Make questionable, unsafe, or non-evidence-based decisions
- Fails to complete tasks in a time appropriate manner
- Fails to incorporate or seek out feedback
- Acts in an unprofessional manner

Preceptor Action: The preceptor is required to document criteria-based, specific comments within PharmAcademic, citing specific example(s) why NI was assigned, and providing direction on how the resident may improve their performance. When applicable, the preceptor should contact the RPD, RPC, and mentor early in the learning experience if resident performance concerns are noted. The resident's progress should be communicated to the preceptor team in a timely fashion, using whatever mechanism that residency program uses for preceptor communication (i.e. Residency Advisory Committee, etc.). The preceptor should determine when to reevaluate the goal/objective that for which a "NI" was assigned, ideally in about 4 months, and may necessitate a change in resident schedule.

SP = **Satisfactory Progress**

Definition: Resident <u>is meeting</u> expectations. The resident is <u>performing at</u> the level that would be expected of a resident at this point in their training program as evidenced by meeting the following characteristics:

- Requires infrequent supervision, guidance, intervention, or prompting
- Makes appropriate, safe, or evidence-based decisions with limited prompting or intervention from the preceptor
- Completes tasks in a time appropriate manner with limited prompting and guidance
- Incorporates feedback from preceptors with minimal prompting
- Acts in a professional manner

Preceptor Action: The preceptor is required to document criteria-based, qualitative written comments that are specific and actionable, and acknowledge the resident's skill progression within PharmAcademic.

ACH = **Achieved**

Definition: Resident <u>is consistently meeting</u> expectations. Resident is <u>independently performing at or above</u> the level of performance expected at the conclusion of the residency program. Resident displays all of the following characteristics:

- Appropriately seeks guidance when needed
- Consistently makes appropriate, safe, or evidence-based decisions on an independent basis
- Independently and competently completes assigned tasks
- Consistently demonstrates ownership of actions and consequences
- Accurately reflects on performance and can create a sound plan for improvement
- Acts in a professional manner

Preceptor Action: The preceptor must document criteria-based, specific comment(s) and example(s) within PharmAcademic to justify ACH.

ACHR = Achieved for Residency

Definition: Resident has demonstrated a sustained performance of independently meeting or exceeding expectations for the end of the year.

Note: Once a goal is marked as ACHR, further evaluation in future learning experiences is optional. If a resident regresses in performance after a goal is marked as ACHR, it may be unchecked by the RPD or RPC.

Who can mark as ACHR?

Documentation (within PharmAcademic) of a resident's achievement of a goal/objective for the residency program will be the responsibility of the RPD, RPC, and mentor. This can be done at any point throughout the year, ideally in coordination with a formalized process for resident evaluation such as monthly Residency Advisory Committee or quarterly evaluations / customized training plans.

Last revised 06.06.

Benefits

- PGY1 Stipend: \$49,920PGY2 Stipend: \$53,040
- PGY1 Non-traditional Stipend (annual): \$81,120
- Residents as full-time Froedtert employees are eligible for health, prescription drug, vision, dental, and life insurance, as well as disability coverage. Medical rate assistance program available.
- Other benefits include paid time off (PTO), employee assistance resources, discounted health club membership, and free on-site parking.
- Benefits information is located here: http://intranet.froedtert.com/?id=17947&sid=5

Resident Attendance Expectations

- Residents are expected to work at least 8 hours/day Monday-Friday
- Residents are expected to notify their program director and manager in advance (as soon as
 possible) in the event that they will not be on-site on a weekday (either due to PTO or work-from-home)
 - Residents must alert their preceptor and RPD in advance of planned work-from-home outside of the local area (i.e. > 60 miles from campus)
- The RPD and manager should be notified for the following circumstances:
 - o Resident is taking scheduled PTO (vacation, interview, etc.) or bereavement time
 - o Resident is off during the week with the intent of making up the day on a weekend
 - o Resident has an unscheduled absence (illness, emergency, etc.)

Paid Time Off

- Residents are allotted 21 vacation days (paid time off PTO). Residents are responsible for setting aside PTO for interviews and illness.
- Requests for time off must not fall on staffing days. If time off is needed during a staffing day, it is
 the resident's responsibility to identify coverage and communicate the switch.
- It is the responsibility of the resident to notify their RPD and rotation preceptor of days off.
- Residents are not allowed to take PTO during the last 4 weeks of employment. Exceptions may be considered, but must be discussed and approved by manager in advance.
- Requests for ≤ 2 days off must be made at the beginning of the rotation in which they fall.
- Requests for > 2 consecutive days off should be made as soon as possible or at least one month
 in advance to allow for any necessary rotation schedule adjustments.
- In the case of an absence on rotation, making up the rotation day on a weekend as opposed to using PTO will be assessed on a case-by-case basis at the discretion of the rotation preceptor(s).
- Resident is responsible for updating Kronos to reflect days off prior to sign-off by manager.
- Ambulatory residents should work with their RPD and manager to identify opportunities for vacation/PTO.
- Residents are allowed bereavement pay per Froedtert's policy. Time away for bereavement counts towards the 21 days away/year.

Holidays

 Froedtert Hospital recognizes six official holidays: Independence Day, Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, and Memorial Day.

- Residents who staff in areas that are open on holidays are required to staff up to two 10-hour holiday shifts during the residency year (described under Resident Staffing Requirements).
- Time off for holidays is subtracted from PTO.
- If a resident prefers not to take PTO on holidays when not assigned to "staff", the resident will discuss alternatives with residency program director.
- If an assigned holiday falls on a weekend, the resident can choose to either take a day
 off of rotation the week prior to or after the holiday OR count the holiday towards their
 weekend shift requirements. This should be arranged with the RPD and manager.

Unscheduled Absences

- For ambulatory rotation/retail staffing shifts:
 - Contact the on-call leader/coordinator at least two hours prior to shift start time (if possible) to notify them of illness/unscheduled absence (AmbPharm Scheduler: 414-805-6589; Retail pharmacy: 414-805-2631) regardless if you are on rotation or staffing
 - If staffing, the on-call leader/coordinator will seek coverage options for your scheduled shift. Depending on the circumstances, you may be asked to work an alternate shift to make up the missed staffing day.
 - If on rotation, the leader on-call will notify your preceptor(s), RPD, and manager
 of the absence. The resident may also send notification if desired.
- PTO will be used for unscheduled absences unless other arrangements are made with preceptors and your manager.

Bereavement

- Eligible staff may be granted a maximum of three scheduled work days, if necessary, to observe a period of bereavement when having suffered the loss of a:
 - o Parent
 - o Brother/Sister
 - Grandparent
- See Bereavement FH-HR.023 for additional details.

Bonus Shifts

- PGY1 and PGY2 pharmacy residents at Froedtert are eligible to pick up bonus staffing shifts to
 help meet department staffing needs. Residents will be paid a lump bonus sum for working a half
 shift (\$320) or full shift (\$640). Bonus shifts will be paid every other pay period for the
 preceding four weeks.
- The following criteria apply:
 - Shifts will be solicited and approved by a manager. Available shifts will be assigned and divided between interested residents per manager and residency program director discretion
 - Resident must be "meeting" or "exceeding" requirements of the residency program and meeting all applicable residency deadlines (i.e. low-performing residents should spend their time focusing on the residency program, not extra shifts)
 - Residents will only be able to pick up shifts that do not conflict with residency responsibilities. This will mean that they would be eligible to pick up weekend shifts (when not staffing as residents) or the PM position (1700-2100) of open shifts

- Shifts are paid as a bonus in half and full shift blocks (e.g. working from 1700 until 2130, instead of 2100, is still paid as a half bonus shift). Residents will not be mandated to work bonus shifts
- o ASHP (American Society of Health-System Pharmacists) duty hour guidelines apply
- Residents should report bonus shifts worked to their manager. For residents working bonus shifts in the inpatient setting at FMLH, they will be added to Humanity by the manager who has assigned the shift which will prompt payment

Professional Leave/Business Days

- Professional time will be granted to attend the ASHP Midyear Clinical Meeting, the Great Lakes Resident Conference, Wisconsin Pharmacy Resident Conference, and other meetings approved by the Residency Steering Committee.
- Additional days may be approved for the resident to use to attend other professional meetings; however, both approval by the resident's program director and manager must be obtained.
- Maximum time away from residency for professional leave/business day is 16 days

Professional Meeting Attendance and Funding

- Froedtert & MCW Residency Programs are committed to supporting residents to attend professional meetings.
- Funding (full or partial) for attendance at professional meetings may be available based on the financial situation of the organization.
- Funding, if available, may be used to offset expenses such as conference fees, airfare, lodging, and transportation to and from the airport (if applicable) up to the maximum allowed stipend amount.
- Residency program leadership will communicate available funding prior to registration deadlines for key meetings attended by residents.
- Residents may elect to self-fund in order to attend a meeting if funds from the organization are not available.

PGY1 Residents

- If funding is available, the following is expected of PGY1 level residents
 - Attend the ASHP Midyear meeting, Vizient Pharmacy Council meeting, and one regional residency conference
 - o Present a poster at the Vizient Pharmacy Council meeting
 - o Travel to the ASHP Midyear / Vizient Pharmacy Council meeting on Friday and participate at least through mid-day on Wednesday.
- In the event that a resident is unable to attend one of these meetings or if funding is not available, additional arrangements will be made to allow the resident to present a poster and a platform presentation in an alternative setting

PGY2 Residents

- Attendance at the ASHP Midyear meeting is optional for PGY2 residents (unless required by the specific PGY2 program).
 - PGY2 residents who elect to attend ASHP Midyear are expected to attend the Vizient Pharmacy Council meeting immediately prior to the ASHP meeting and present a poster at the Vizient meeting.
 - PGY2 residents are expected to travel to the ASHP Midyear / Vizient Pharmacy Council
 meeting on Friday and participate at least through mid-day on Wednesday. Exceptions
 must be discussed with RPD and manager for approval.
- If funding is available, PGY2 residents may use funding to attend a different professional meeting or residency conference per the discretion of their RPD (e.g. ACCP, SCCM, HOPA, UGM, XGM, etc.).

• In the event that a resident is unable to attend one of these meetings or if funding is not available, arrangements will be made for the resident to present a poster and a platform presentation in an alternative setting.

Expense Reports/Reimbursement

- To complete an expense report:
 - Froedtert Scout (main screen) → Departments → Finance → Expense Reimbursement Requests (link: https://fh.sp.froedtert.com/sites/1580/default.aspx) → New Form
 - Enter your information
 - Manager: Kristin Hanson
 - Select "Edit"
 - Enter a new line for each expense (flight, conference registration, hotel, etc) or can submit separate forms as these expenses arise



- To enter cost information:
 - Today's date
 - Description
 - Flight = air/rail/bus
 - Company = 3000
 - Company description = Froedtert Hospital (should auto-populate)
 - Acct Unit = 40310
 - Account unit description = Pharmacy Residency Program (should auto-populate)
 - Account no. = 866100
 - Account no. description = Prof Development/Seminar Expense (should autopopulate)
 - Amount = (per your receipt)
 - Business purpose = (flight/conference/registration/etc)
 - FINISH

Expense #1



- Repeat above step for additional expenses (or submit separate reports)
- Attach PDF file of receipt
- Submit form → You should receive an email shortly confirming your submission
- All expense reports for travel must be completed prior to the trip or within two weeks from the return date in order to ensure reimbursement.
- All original receipts must be kept and attached to the electronic request.
- Residents are expected to keep track of their stipends and not request reimbursement for amounts greater than the allotted stipend.
- Contact your manager and RPD prior to planning any travel or before applying for reimbursement.

Figure 2: Company Codes and Accounting Units for Travel Reimbursement

	Company	Accounting Unit	Account Number	Account Description
PGY1 FMF	2010	40310	866100	
PGY1 (Acute Care)	3000	40310	866100	
PGY1 (Am Care)	3000	40310	866100	
PGY1 (Admin)	3000	40310	866100	
PGY1 Community	1430	75050	866100	
PGY1 (MUSP)	3000	40310	866100	
PGY2 Admin	3000	75000	866100	Professional
PGY2 Am Care	3000	75010	866100	Development/Seminar
PGY2 Crit Care	3000	75000	866100	
PGY2 EM	3000	75000	866100	
PGY2 ID	3000	75000	866100	
PGY2 Informatics	1000	75002	866100	
PGY2 MUSP	3000	75000	866100	
PGY2 Oncology	3000	75020	866100	

PharmAcademic Evaluations

- All Froedtert residency programs utilize PharmAcademic for completion of resident performance evaluations.
- All evaluations should be completed by the last day of rotation or absolutely no later than the following Sunday.
- PharmAcademic evaluations are critical for monitoring both resident progress and rotation experiences and should be completed thoroughly.

Duty Hours Tracking Documents

- Residents are expected to self-monitor their compliance with duty hours per the Duty Hours Policy.
- Duty hours documentation/attestation should be completed monthly in PharmAcademic.
- Residents are expected to be proactive in notifying their RPD in anticipation of exceeding duty hours.
- Residents should avoid picking up moonlighting/bonus shifts that will cause them to exceed duty hours.

Resources for Residents

Laptops, Workstations, and Pagers

- Residents will be issued laptop computers, home work stations, and personal pagers to be used throughout the year
 - Laptops: Laptops should be used as a workstation while on rotation (including for clinical rotations) and can be used at home as well. Laptops should be stored in a secure location
 - Residents should not store documents containing Health Insurance Portability and Accountability Act (HIPAA) information directly on computer hard drives.
 These documents should instead be stored on the Froedtert Network and accessed via the VPN or remote access portal.
 - Residents should also password protect all documents containing Health Insurance Portability and Accountability Act (HIPAA) information (see example below "Example: How to Password-Protect Patient Data").
 - Workstations: A monitor, laptop docking station, mouse, and keyboard are issued for use at home.
 - Pagers: Pagers should be carried by the resident while on campus. Expected response time if paged is 15 minutes or less during business hours. Residents may have assigned "on-call" times when pagers need to be carried 24/7. Residents may download an app to manage pages on their phone.
- Any loss or damage to these items must be reported to the residency program director as soon as possible. The resident may be responsible for covering any fees related to loss or damage.
 Equipment must be returned at the end of residency training program.
- If there are issues with device performance (i.e. low battery life, missing applications, etc), the resident is responsible for contacting IT for fix through the myIT app (see Figure 4).
- If you need assistance in making the request, contact Deanna Zapfel, Administrative Coordinator, Deanna.zapfel@froedtert.com

Figure 3. How to Password Protect Patient Data

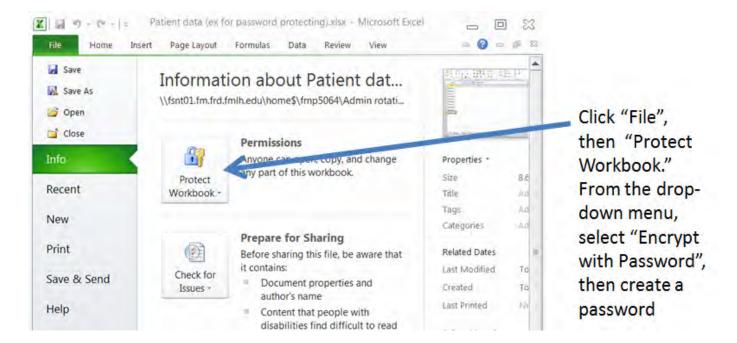
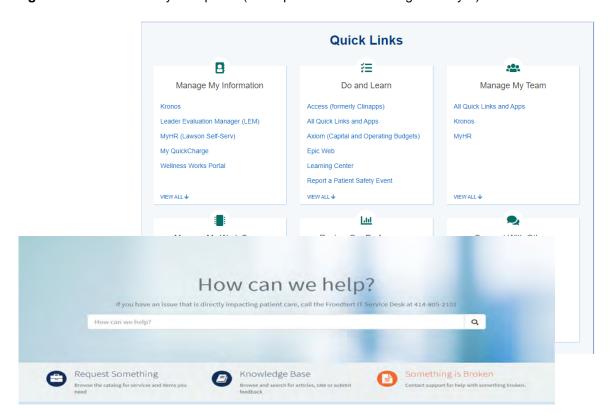


Figure 4. How to enter MyIT requests (Use Epic Credentials to Log In to MyIT)



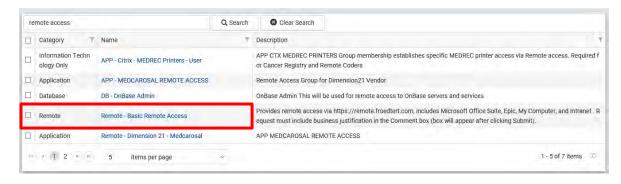
Something is Broken # | = Categories Request help from support for something that is broken. Access Dragon Issue Email / Outlook Issue APS Issue Report an Issue with Dragor Email / Outlook Issue (5 APS Additional Requests DRAGON Hardware View Details View Details IT Governance, Risk, and Complianc... Epic Issue Hardware/Software Issue Infor Issue Order guides infor Remote Work Request View Details View Details Software Phone Issue Report a Lost or Stolen Asset Something is Broken Report a lost or stolen Laptop Mobile or Storage device (F) Standard Changes Telephones & Mobile Devices

Figure 4 (Cont.). How to enter MyIT requests (Use Epic Credentials to Log In to MyIT)

VPN/Remote Access

- Residents must log in to the Automated Provisioning System (APS) in order to request remote access. Intranet link to APS
 - Use Froedtert Network Credentials to log in, and select "Request for Myself" under "My Access"
 - Type in "remote access" using search bar to find line item below (see screenshot). Select Remote – Basic Remote Access.

Figure 5. How to Request Remote Access via APS



Remote Access Portal (to access Froedtert network on a personal computer)

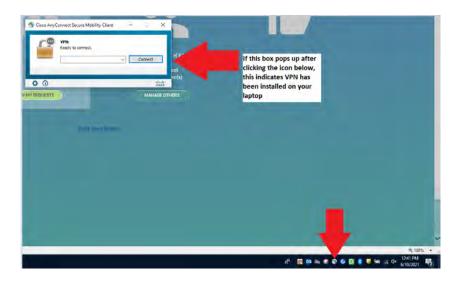
- To access remote portal, Citrix must be downloaded. The IT help desk may be contacted at (414) 805-2101 to assist with download if needed.
- The VIP App must be downloaded and used as a method for dual authentication. The app should be downloaded on a personal device while onsite at a Froedtert Campus in order to link it with an account. Step-by-step instructions for setting up the VIP app can be found here.
- Link to Froedtert remote desktop: https://remote.froedtert.com/

- Once logged in, the following applications should be available:
 - Epic
 - Microsoft Outlook, Excel, Word, PowerPoint, OneNote
 - Froedtert Intranet
 - Froedtert Network (H: Drive and I: Drive)

VPN (used to access the Froedtert network offsite on a Froedtert issued computer)

- In order to access the VPN, you will need access to the remote portal (above) and Cisco AnyConnect VPN Software on your laptop
- To see if you have the VPN software on your computer, click on the icon in Figure 6
- If you do not have the VPN application downloaded on your Froedtert issued laptop, request this
 application via a MyIT request under "Install Application" with the application being "Cisco
 AnyConnect VPN software"
- Instructions for logging into the VPN can be found here: https://link.pharmacy/residency/

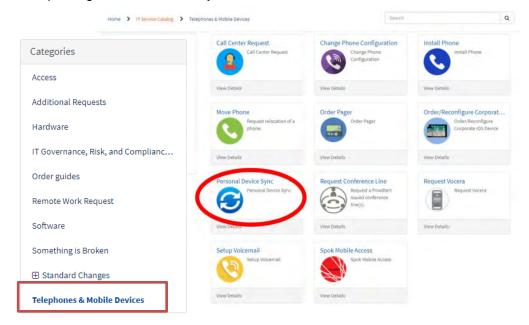
Figure 6. VPN Access



Personal Device Access

- Residents may access email on a personal device (phone or tablet). The Froedtert Health
 Personal Device User Agreement must be completed in order to set up access on the device.
 - This can be found on Scout (also referred to as the "intranet"). Open internet explorer:
 Homepage > Departments > Information Technology (Froedtert Health) > Froedtert
 Health Information Technology > Mobile Devices > MyITPortal

Figure 7: Requesting Personal Device Sync



- Once access request has been processed, the Outlook App can be used to access email and calendar Instructions on how to use the app are available on the IT website.
 - Android: http://intranet.froedtert.com/upload/docs/Froedtert%20Health/Departments/Information% 20Technology/Mobile%20Device%20Documents/Android%20Outlook%20Support%20Document%20for%20Personal.pdf
 - iOS: http://intranet.froedtert.com/upload/docs/Froedtert%20Health/Departments/Information% 20Technology/Mobile%20Device%20Documents/iOS%20Outlook%20Support%20Document%20for%20Personal.pdf

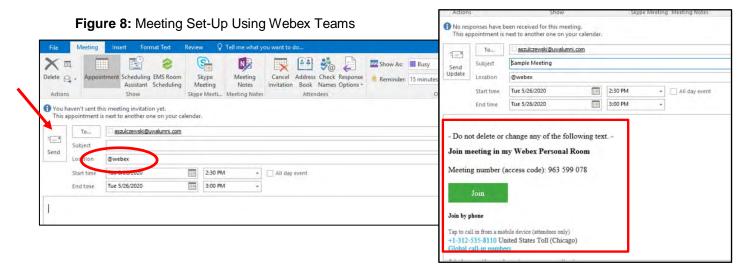
Workplace

- Workplace is the primary location for organizational communication. It is a work version of the Facebook platform.
- You will receive an email to set up a Workplace account.
- You should create a Workplace login using your Froedtert email address. You are also encouraged to download the Workplace app on your phone or tablet.
 - o https://froedtert.workplace.com/
 - o Downloading the Workplace Mobile app
- All employees are expected to keep up-to-date with organizational communications posted on Workplace.
- Employees are also encouraged to comment/like posts and post work-related content.

WebEx Teams

- All Froedtert employees have access to the WebEx and WebEx Teams platform to use for virtual meetings.
- In order to schedule a meeting using WebEx, create a calendar appointment and in the location, type @webex. Once the meeting is sent, login information will be populated within the body of the appointment.

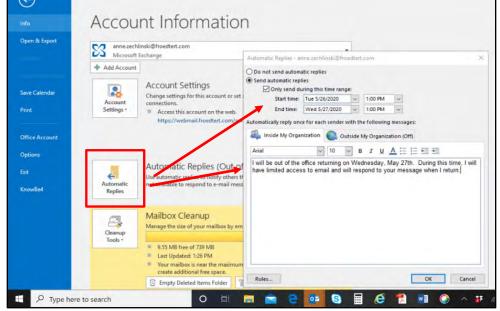
- Additional capabilities are available using the WebEx Teams Application. This should be available
 on all Froedtert computers. It can also be downloaded onto a personal computer from:
 https://www.webex.com/downloads.html/.
- User guides for Webex Teams are posted here: https://fh.sp.froedtert.com/cwt/cwt/index.html



Email Expectations

- Residents are expected to check Froedtert email daily Monday through Friday during the work week. Responses to email are expected within 24 "business hours" of receipt.
- The specified response time is not required during PTO/vacation, however residents should use an out-of-office alert to notify sender of absence. Residents are expected to follow-up on email as soon as possible upon return.
- It is expected that residents create an email signature using the Froedtert approved template (see link below). Directions on how to set up an email signature can be found on the Scout page under Marketing and Communications Department – Brand Resource Center http://intranet.froedtert.com/?id=17585&sid=5

Figure 9: Setting an Out of Office Alert (Automatic Reply)



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Dress Code

- The Froedtert Dress Code Personal Appearance Policy is posted here.
- In general, residents are expected to wear business casual attire while on rotation and staffing in decentral units, ambulatory clinics, outpatient pharmacies, or office environments.
- Scrubs are acceptable in the ED, OR, and pharmacy operations areas (central, day hospital, etc.). In the ED and pharmacy operations areas, residents may choose to wear their own scrubs or request Froedtert issued scrubs. In the OR, residents must wear Froedtert issued scrubs.
- More formal attire will be required for special events. For example, suits are required for presentations outside the organization (i.e. Midyear posters, Great Lakes Presentations)
- White coats are strongly encouraged when on a clinical rotation or when staffing decentrally.

White Coats

- Additional white coats may be ordered using the order form below.
 - https://datacollectionrb.sp.froedtert.com/sites/pharmacy/pharmacy/ layouts/15/WopiF rame.aspx?sourcedoc=/sites/pharmacy/pharmacy/Forms/Lab%20Coat%20Froedt%2 0Pharm%20order%20form%20Nov21.doc&action=default
 - The department will reimburse residents for embroidery, but the resident will be responsible for paying for the coat
- Deanna Zapfel, Administrative Coordinator, is the contact person for white coats should you need any additional coats throughout the year

Scrub Request Forms

- Froedtert issued scrubs must be worn in OR areas and may be worn in ED and pharmacy operational areas. The scrub request form is available on the Environmental Services site: http://intranet.froedtert.com/?id=26274&sid=1
- Complete form, obtain manager signature, and fax
- Contact Deanna Zapfel, Administrative Coordinator, with any questions

Business Cards

- Residents should place orders for business cards prior to <u>September</u> so that they arrive in time for recruitment season
 - This can be found on Scout https://fh-printservices.com/internal/
 - Use the following titles:
 - "PGY1 Pharmacy Resident"
 - "PGY1 Health-System Pharmacy Administration and Leadership Resident"
 - "PGY1 Medication Use Safety and Policy Resident"
 - "PGY2 (Program Name) Pharmacy Resident"

Residency Project Resources

Residency Project Sharepoint

- Information about research protocols, posters, and presentations can be found here
- There are also past resident project abstracts, posters, and presentations on this website that may serve as examples

MCW Biostatistics Support

 Residents will have the opportunity to seek statistics support for their projects through the MCW Biostatistics Department.

- The Pharmacy Research Committee will prioritize and approve resident projects for statistics support based on complexity of the statistics required, type of project, likelihood of publication, and other factors.
- This document describes process for requesting biostatistics support.

Presentation and Poster Templates

- Presentations
 - Froedtert Health has created a presentation template that should be used when preparing presentations to be shared internally and/or externally.
 - Residents should use the template with the Froedtert & Medical College of Wisconsin logo.
 - o Templates are located here: http://intranet.froedtert.com/?id=17587&sid=5
 - o Pharmacy-specific templates will be shared via the I: Drive or email
- Posters
 - The Pharmacy Research Committee has developed templates to be used for student, resident, and staff-presented posters.
 - Poster templates are located here: <u>I:\FMLH\PHARMACY\Residency</u> <u>Program\2022-2023\Posters and Poster Templates</u>
 - o Instructions for printing posters:
 - Go to Froedtert Scout page (main page) → Around Campus → Print Services
 - Click "FH Print Request Site"



Create a new account or log in to your account if you already have one



Select "Custom Orders"



Select "Large Format"



 Enter width and height as shown in the screenshot below (note that this is the opposite of the way it is displayed in PowerPoint).

Large Format Quantity: 1 Width (min. 11"/max. 54"): 36 LARGE (left to right margins) FORMAT Height (min. 56 11"/max. 200"); (top. to_bottom_margins) # of pages on original or in file: Please make sure to enter your order Ink: One Sided Color ♥ correctly. If you enter incorrect specs your order will be cancelled and you will need to place your order correctly. If you need help placing your order, please 262-532-5151/262-532-5152 or Substrate: Photo Satin Matte ♥ email printservices@froedtert.com. Used for posters, foam core mounting, and laminating. Here is a list of COMMON sizes: 16x20 18x24 Lamination: No V 20x22 22x28 Banner Finishing: None

Configure Item

22x28 Banner
24x36
Sizes below CAN'T be laminated:
48x36 (use for trifold foamcore)
60x36
72x36

Cancel Continue ►

Upload your file and enter a "Job Description"

Upload and Proof

Upload a file, name your job and include any instructions you think would be helpful. Back

Upload Artwork

window and select file.

**Please ensure your pop-up blocker is turned off to upload a file. **The file cannot be dragged and dropped into the arrow. **Please click on the arrow in the popup

Please make sure your document pages match the number of pages

listed on the previous screen. Otherwise you will need to re-upload your file.



- 36" x 56"
- 1 page
- · single sided
- full color

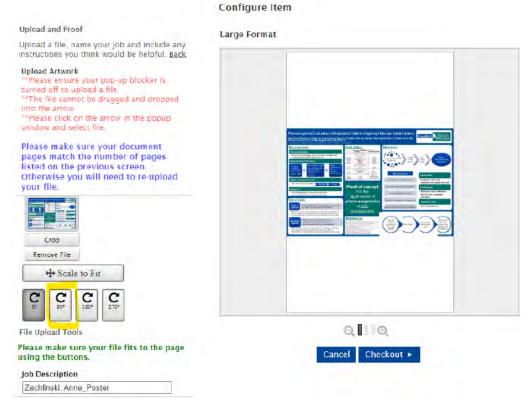
File Upload Tools

Please make sure your file fits to the page using the buttons.

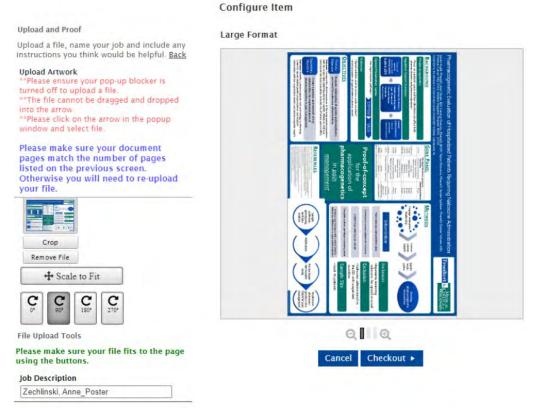
Job Description

Zechlinski, Anne_Poster

Make sure to rotate the image 90 degrees so that it fits on the page



Final image should look like this before you continue



Review final proof and "accept proof"





Complete billing and delivery information

kequestor information:

Your First Name: *	Anne	
Your Last Name: *	Zechlinski	
our Email Address: *	anne.zechlinski@froedtert.co	m

Billing Information:

Company Code: *	3000 - Froedtert Memorial Lutheran Hospital	~	
Accounting Unit / Cost Center:	40310 PHARMACY RESIDENCY PROGRAM		~

Use Company codes and Accounting Unit associated with your residency program (see table below)

Shipping Information:

Please check your shipping information to ensure proper delivery.

Please check this box if you would like Expedited production for this order.

A RUSH FEE of \$50 will apply.

CLICK HERE FOR TURNAROUND TIMES

If you select RUSH, please enter your need by date in the Comments section.

Shipping Method:	Choose "Pharmacy" for your department
Courier	Include your cell phone
Department: * [Pharmacy Requestor Phone: * [262-617-8631]	If you are at ISC, you can choose to pick up your poster at the copy center
Ship To:	



Choose the address where you would like items to be delivered. If you are on Froedtert campus choose 9200 W Wisconsin

Posters should get delivered to mail room on $1^{\mathfrak{A}}$ floor west hospital. You will get an email when they arrive.

	Company	Accounting Unit
PGY1 FMF	2010	40310
PGY1 (Acute Care)	3000	40310
PGY1 (Am Care)	3000	40310
PGY1 (Admin)	3000	40310
PGY1 Community	1430	75050
PGY1 (MUSP)	3000	40310
PGY2 Admin	3000	75000
PGY2 Am Care	3000	75010
PGY2 Crit Care	3000	75000
PGY2 EM	3000	75000
PGY2 ID	3000	75000
PGY2 Informatics	1000	75002
PGY2 MUSP	3000	75000
PGY2 Oncology	3000	75020

Additional General Information

Wisconsin Prescription Drug Monitoring Program (ePDMP)

- Residents should register with the Wisconsin Prescription Drug Monitoring Program as it will be a
 needed resource to carry out staffing duties as a pharmacist (note that you will need to be
 licensed in order to register)
- Prescribers are responsible for checking ePDMP prior to prescribing any controlled substances at discharge or for use in the ambulatory setting
 - Apply for access
 - Go to: https://pdmp.wi.gov/
 - Click "Register"
 - Select "Healthcare Professional"
 - Complete required fields including your license number
 - Select a username and password
 - Look for confirmation email from "noreply@pdmp.wi.gov"
 - Logging in
 - Go to: https://pdmp.wi.gov/
 - Type in username and password
 - Click "Patient Report" to look up a patient

Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) Certifications

 Froedtert offers certifications in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS)

- PGY2 residents in Critical Care and Emergency Medicine and PGY1 acute care, PGY1
 HSPAL, and PGY1 MUSP residents are required to maintain ACLS certification. ACLS is
 optional for other PGY2 residents.
- Residents are expected to complete ACLS training prior to starting ICU or ED rotations or staffing in these areas.
- BLS is required for all residents who will be working in the outpatient/retail settings in order to administer immunizations.

Enrollment

- Enrollment is completed through <u>The Learning Center</u> by searching for ACLS or BLS
- Prior to being able to access materials for the course, a manager must approve the resident's enrollment via The Learning Center
- Residents may take one project day to complete the course. Residents are responsible for scheduling Part 2 of ACLS/BLS based on their rotation/staffing schedule

Figure 10. Registration in The Learning Center for ACLS and BLS Training



ACLS

- Online portion takes about 7 hours and requires knowledge of CPR as well as ability to identify basic rhythms. This portion is very comprehensive and does take some preparation to pass. Some course materials are provided, although the use of other resources may be helpful
- "Megacode" portion (Part 2) is scheduled separately and occurs off-site (usually across the street within the WAC building). Participants are required to run a code without the assistance of others. This portion takes about 4 hours and occurs after the online portion is completed
- Completion of both portions of the course is required in order to pass

Parking

- Residents must adhere to their assigned parking location.
 - On Saturdays, Sundays, and <u>major</u> holidays, residents may park in patient parking structures (Parking area 1 on 92nd street and 3 on 87th street).
 - During off-Peak Times (Mon-Fri, 6PM-8AM), residents may park in parking area 1 or parking area 3. Must arrive AFTER 6PM and leave BEFORE 8AM.
- Residents are encouraged to use technology for participation in off-site meetings using WebEx in order to minimize travel time.
- Additional details about parking can be found in the <u>parking handbook</u>.

• Parking Scout Page: http://intranet.froedtert.com/?id=358&sid=1

Project Days

- Residents may be allocated project days at the discretion of their residency program director.
 These days are to be used for program-related projects and research activities.
- The number of days and when they can be taken will vary based on the residency program.
- Residents may choose to work remotely on their project days but should be available via WebEx, email, and/or cell phone.

Working Remotely

- Some pharmacy department staff have transitioned to work-from-home (WFH) full-time or in a hybrid model. Generally, residents will be expected to work-from-home if completing a rotation in these areas.
- All informatics team members are permanent WFH; center for medication use and stewardship pharmacists are currently in a hybrid model.
- If a resident intends to work-from-home in a location outside of the local area (ie, their home in the Milwaukee area), their RPD and/or manager must be contacted to approve this arrangement in advance.

Vizient Committee Involvement

- Residents may elect to join the Vizient Pharmacy Network Committees of their choosing at the start of the residency year
- This elective experience will provide residents the ability to participate in projects and network with individuals at academic medical centers across the country
- The Froedtert team has been involved in the following committees:
 - Ambulatory Pharmacy Development
 - o Business of Pharmacy Enterprise
 - o Cancer Care
 - Med Use Informatics and Technology
 - Professional Development Workforce
 - Quality Safety and Compliance
 - Research
 - Supply Chain Optimization

Academia Opportunities

- Academia and precepting opportunities are available through Concordia University of Wisconsin (CUW) School of Pharmacy, the Medical College of Wisconsin (MCW) School of Pharmacy, and University of Wisconsin-Madison (UW) School of Pharmacy
- An optional teaching certificate is available through the Medical College of Wisconsin

Research Certificate

- Residents have the option of completing a formal Pharmacy Research Certificate over the course of residency training.
- Residents are encouraged to discuss participation in the Research Certificate with their program director.

Pharmacy Society of Wisconsin Membership

- <u>Pharmacy Society of Wisconsin</u> membership dues are covered by Froedtert & the Medical College of Wisconsin for all pharmacy residents and staff.
- PGY1 residents who are in their first year of practice receive their first year of registration free regardless of employment and are encouraged to register with PSW and affiliate with Froedtert.

• PGY2 residents who are new to Froedtert will be added to Froedtert's member list within the first half of the residency year.

Wellness and Resilience Resources

- In addition to residency programming to address wellness, resilience, and prevention of burnout, Froedtert Health offers a variety of wellness resources to all employees.
- Many of these are listed on the Wellness Works intranet page: http://intranet.froedtert.com/wellnessworks
- The Employee Assistance Program (EAP) also offers a variety of services that are included within the Froedtert benefits package at no extra charge: http://intranet.froedtert.com/EAP

Excellence in Action

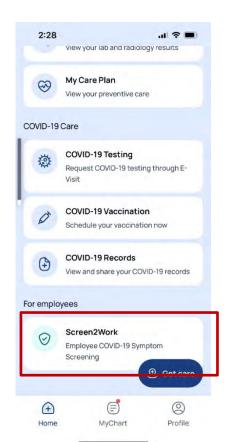
- This platform can be used to submit recognitions for fellow residents, other pharmacists/ pharmacy staff members, or other healthcare professionals or staff who went above and beyond to help you, a patient, or others.
- Link: http://intranet.froedtert.com/?id=24359&sid=5

COVID19 Resources and Guidance

- Information regarding COVID19 changes quickly. Employees are encouraged to visit the intranet pages below for the most up-to-date information. Residents are also encouraged to carefully review organizational and departmental communications regarding this topic as they are released.
- Information from Internal Occupational Health regarding COVID19 exposure or symptoms is available here.
- General information about COVID19 at Froedtert can be found here.
- Clinical resources about COVID19 can be found here.
- Froedtert residents will adhere to any Froedtert Health mandated business travel restrictions due to COVID19.
- All staff must wear a mask when working in patient care areas.

Figure 11. Froedtert & MCW Mobile App and Screen2work





Medical College of Wisconsin Teaching Certificate Program



The Medical College of Wisconsin (MCW) Pharmacy School Teaching and Learning Certificate Program offers an innovative and interprofessional learning environment that prepares the educators of the future for success in didactic and experiential settings.

PROGRAM BENEFITS

Innovative Our curriculum embraces active learning pedagogy, employing team-based learning (TBL) and utilizing technology to enhance the learning experience. Participants may gain experience with several educational platforms, including ExamSoft, TopHat, Storyline Articulate, GoAnimate!, and NeehrPerfect.

Interprofessional Collaborative, interprofessional learning is a cornerstone of MCW's teaching philosophy. Participants will have the opportunity to participate in interprofessional educational sessions with local health professions students, including physicians, nurses, medical interpreters, an esthesiologist assistants and others.



Flexible We provide on-demand, web-based learning sessions and a two-year program completion window to provide flexibility for participants to complete requirements at their own pace.

Personalized The small size of our program enables us to provide personalized support and feedback to program participants. All participants will have a formal mentor to encourage their professional growth throughout the program. Academic Educator Distinction is available for participants who desire additional training and experience to prepare for a career in academia.



TEACHING CERTIFICATE PROGRAM STRUCTURE

- · Participants may elect to complete the program requirements over 1 or 2 years
- · Required learning modules are provided as a combination of live educational seminars and recorded web-based
- Didactic learning opportunities are available in several core MCW Pharmacy School courses, including the longitudinal Patient Care Lab and the Integrated Sequence therapeutics classes

Residents

The program is designed to facilitate achievement of PGY1 and PGY2 ASHP residency program objectives relating to teaching and precepting



TEACHING CERTIFICATE REQUIREMENTS

At a minimum, participants will engage in the following activities at the MCW Pharmacy School:

- · Attend introductory session "boot camp" at the beginning of the academic year (July)
- Complete required monthly modules (live and remote sessions) offered)
- Deliver two hours of didactic lecture
- Lead one Patient Care Lab activity
- Facilitate six Patient Care Lab activities
- (Co)-Precept one IPPE/APPE student
- Develop a teaching portfolio and personal teaching philosophy

Available live/online modules include:

Teaching and Learning Styles . Curricular Design . Teaching with Technology . Evaluation and Assessment Strategies . Preceptor Essentials • Academia Structure, Rank & Promotion · Learning Objectives · Effective Presentations · Scholarship of Teaching and Learning . Interprofessional Education . And Many More!

PROGRAM COSTS

The cost of the program for practicing pharmacists is \$400. A discounted enrollment cost of \$100 is available for MCW Preceptors participating in the Preceptor Benefits Program, bronze-gold level. Complimentary enrollment is provided for pharmacists currently enrolled in a residency program.

WWW.MCW.EDU/PHARMACY | MCW PHARMACY SCHOOL | 8701 WATERTOWN PLANK RD. | MILWAUKEE, WI 53226

PHARMTEACHCERT@MCW.EDU | 414.955.7476 | 1 MCWSCHOOLOFPHARMACY | 2 MCWPHARMACY





Pharmacy Research Certificate Overview

Residents have the option to complete a formal Pharmacy Research Certificate over the course of their residency training. The certificate is optional for most residents. However, individual residency programs have the opportunity to require additional components as part of certificate completion; they may also require the certificate as part of residency completion requirements. Discuss with your Residency Program Director what his or her expectations are for the Pharmacy Research Certificate.

The purpose of the Pharmacy Research Certificate program is to enhance the research development curriculum at Froedtert & the Medical College of Wisconsin (MCW) and to provide rigorous training for those interested in pursuing a career with continued scholarly pursuits.

Goals and Objectives:

- 1. Increase comfort and awareness of the various research processes and resources available
 - a. Improve understanding of how to develop a research question
 - b. Improve understanding of research processes
 - c. Decrease barriers to research
 - d. Familiarize participants to research to increase the number of research mentors
 - e. Increase engagement in research
- 2. Improve quality of research project submissions
- 3. Improve the quality of research posters and presentations
- 4. Increase ability to apply appropriate statistical tests while writing a protocol and analyzing results

Program Leadership:

Chair .

Kristin Busse, PharmD, BCPS

Assistant Professor of Regulatory Sciences Medical College of Wisconsin, School of Pharmacy

Regulated Research Oversight Program Director Medical College of Wisconsin, Office of Research Medical College of Wisconsin

Medical College of Wisconsin 8701 W Watertown Plank Rd Milwaukee, WI 53226 kbusse@mcw.edu

Advisory Committee:

William J. Peppard, PharmD, BCPS, FCCM Pain Stewardship Coordinator
Froedtert & the Medical College of Wisconsin william.peppard@froedtert.com

Joel T. Feih, PharmD, BCCCP Clinical Pharmacist, Froedtert Hospital PGY2 Critical Care Pharmacy Residency Program Director Froedtert & the Medical College of Wisconsin joel.feih@froedtert.com

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Pharmacy Coordinator
PGY1 Pharmacy Residency Program Director
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Kajua Lor, PharmD, BCACP

Founding Chair/Associate Professor, Clinical Sciences Department Medical College of Wisconsin School of Pharmacy kblor@mcw.edu

Components for Completion of the Certificate:

- Attendance at 100% of Research Development Series sessions
- Active participation in Research Development Series sessions, whether joining live or virtual
- Completion of a brief quiz after each session [Required due 30 days after each session]
- Program evaluation and feedback [Required due 30 days after each session]
- Abstract submission [Required due 4/1/2024]
- Poster or oral presentation at a national-, regional-, or state-level meeting [Required due 6/1/2024]
- Poster presentation at MCW School of Pharmacy Research Forum in May [Required]
- Preparation of a manuscript suitable for publication in a peer-reviewed journal

Note: For Residents, Residency Program Director approval is required prior to granting the certificate. The Research Certificate is optional for most residents. However, individual residency programs have the opportunity to require additional components as part of certificate completion; they may also require the certificate as part of residency completion requirements. Discuss with your Residency Program Director what their expectations are for the Research Certificate.

Research Development Series (RDS):

Most sessions are approximately 1 hour long and will occur during a typical Academic Afternoon schedule. To achieve 100% attendance, participants will have to view the session either synchronously (in person or virtual) or asynchronously and complete a brief quiz. Sessions will be recorded and provided via Webex Teams.

Each session has associated objectives and recommended project activities. The participant is expected to complete the recommended project activities prior to the corresponding discussion session and then use the information from each session to modify and optimize that component of their residency project.

Timing	Topic
	Introduction to Projects at Froedtert & the Medical College of Wisconsin
	Developing a Research Question and Specific Aims
luby through	Institutional Review Board (IRB) and Institutional Research Processes
July through September	Introduction to Citation Managers and Practice Workshop
September Study Design 101	
once weekly)	Meta Analysis and Scoping Reviews
Office Weekly)	Statistics 101
	Applied Statistics
	Preparing and Delivering a Research Abstract
October	Data Management
January	Applied Statistics – Workshop
February	Manuscript Preparation
March	Open Access Publishing

Residents are encouraged to reach out to Research Certificate Program leadership with questions or for further discussion. An overview presentation will be provided during New Resident Orientation. If planning to participate, a commitment to the program will be required by mid-July.

Traditional Project Timeline

Fals (Manuals (Aurel) 0000	Marr 0000	I 2 0000
Feb/March/April 2023	May 2023	June 2023
Call for projects from staff Remind any potential project advisors to complete CITI training	Incoming residents to complete Collaborative Institutional Training Initiative (CITI) training	Finalized project list distributed to incoming residents
Resident action steps = none	Resident action steps Go to https://www.citiprogram.org/ and complete all modules for Group 1 - Biomedical Investigators, Co-Investigators and Study Coordinators	Resident action steps Review available projects and prepare questions to ask project leads once on-site
July 2023	August 2023	September 2023
 Project leads will present available projects to residents during orientation Residents submit project rankings (usually top 5-7) Projects are assigned Research team established Scoping of project and scoping presentation preparation begins 	Work with advisor and project team to scope project and develop protocol (template available)	Present protocol to Pharmacy Research Committee (PRC). Each resident is allotted 30 minutes to present their protocol and receive feedback PRC submits feedback that resident must respond to and return in order to obtain protocol approval Schedule initial biostats consult
Resident action steps	Resident action steps	Resident action steps
 □ Follow up with project leads to get any questions answered prior to submitting project rank list □ Submit rank list by deadline □ Build research team with help of project advisor □ Plan project and begin creating scoping presentation (template on residency SharePoint site) 	 Schedule and coordinate necessary team meetings Distribute protocol draft to project team two weeks prior to scheduled PRC presentation date 	 Send protocol draft to LaRae Bagnall and Research Committee Residents one week prior to PRC presentation date Respond to e-mail containing feedback within one week Distribute finalized protocol to team Complete e-bridge registration and submission
October 2023	November 2023	December 2023
Begin data collection after receiving protocol approval Draft Vizient poster abstract Submit Vizient poster abstract	Begin working on Vizient Poster Submit Vizient Poster after reviewed by research team	Vizient Meeting Midyear Meeting
Resident action steps	Resident action steps	Resident action steps
 □ Send abstract to project team 2 weeks prior to deadline □ Submit finalized abstract by deadline 	 □ Send to poster draft to project team 2 weeks prior to proof deadline □ Submit for proof printing by deadline □ Submit for final printing by deadline 	□ Present poster!
January 2024	February 2024	March 2024
Midpoint check-in with PRC (via email) Request full Biostats support if needed Develop WPRC/Great Lakes abstract (due between mid-Jan and Feb 1st)	Continue implementation and data collection for your project	Develop WPRC/Great Lakes slide set and presentation
Resident action steps	Resident action steps	Resident action steps
 Send abstract to team 2 weeks prior to submission deadline Send to RPD, at least 3 business days prior to submission deadline Submit abstract by deadline 	Continue working on project and providing updates to project team	Submit slide set to RPD and project team prior to deadline Complete practice presentations
April 2024	May 2024	June 2024
Great Lakes slide set submission WPRC/Great Lakes Conference	Develop project manuscript Present project at Froedtert (late May/early June)	Manuscript submission deadline Project wrap-up
Resident action steps □ Submit slide set prior to deadline if required □ Present at WPRC/Great Lakes Conference	Resident action steps □ Send to project team prior to deadline □ Send to mentor/advisor by deadline □ Update WPRC/GLs slide to include final data and analysis	Resident action steps Submit manuscript to RPD by deadline Close out study in eBridge, close out of project and tag off to project advisor

PGY1 Pharmacy Residency (Ambulatory Focus) Requirements

Staffing Experience

- Weekday staffing day once per week
 - Typically an 8-hour shift at 92nd St Pharmacy (once every four weeks, typically on Fridays), Home Delivery & Specialty Pharmacy (once every four weeks, typically on Fridays), or Anticoagulation Clinic (every other week, typically on Monday or Thursday)
- Weekday staffing weeks (Monday through Friday)
 - About four times per year residents will staff in one of the above staffing areas for a full week. Staffing weeks and sites are based on departmental needs.
- Weekend staffing every fourth week on average
 - Two eight-hour shifts per weekend on five weekends throughout the year
 - o One eight-hour shift per weekend on five weekends throughout the year
 - Weekends may be traded between residents with approval from the Residency Program
 Director and communication with Pharmacy Scheduler
- Holiday staffing
 - o Each resident will staff one major and one minor holiday
 - Major holidays: Thanksgiving, Christmas Day, New Year's Eve
 - Minor holidays (following Monday): Labor Day, Easter, Memorial Day
 - Holiday staffing generally includes the actual holiday in addition to one additional day surrounding the holiday (ie, "sensitive day")
- Staffing pulls
 - Each resident may be "pulled" from a rotation or project day to a staffing shift for up to 32 hours per residency year in order to alleviate staffing shortages in the case of sick calls, etc.
 - Pulls beyond this will be paid out as "bonus shifts"

Anticoagulation Clinic After Hours Pager

- PGY1 residents are expected to manage the Anticoagulation Clinic After Hours Pager 7 weeks throughout the year.
- The pager is a 24/7 service to patients of the Anticoagulation Clinic
 - During clinic hours (M-F 8a 5p), pages are directed to clinic staff
 - o Pages between 10p and 7a are rare (< 1/month)
- Please reference the <u>Anticoagulation Clinic Sharepoint</u> site for Up-to-date information regarding responsibilities while on call and the on-call schedule.

Staffing Preceptor

- Staffing preceptors are pharmacists paired with each resident. Their primary purpose is to
 provide residents guidance, feedback, and support throughout the year with an emphasis on
 training, development, and advancement
- Residents and staffing preceptors are expected to meet weekly during the training and orientation time period, then monthly.
- Staffing preceptors are assigned by Residency Program Director

Precepting Experiences

- PGY1 Pharmacy (Ambulatory Focus) Residents will participate in orientation activities for IPPE and APPE students beginning ambulatory or community rotations at Froedtert, on a rotating basis and in partnership with the PGY1 (Acute Care Focus) Residents.
- PGY1 Pharmacy (Ambulatory Focus) Residents may participate in precepting of IPPE and APPE students in a variety of roles, from informal to formal preceptorship

Required Experiences

Committee Membership

- Rotating involvement with Ambulatory Therapeutics, Medication Warnings & Alerts, Froedtert Health Enterprise Vaccine Committee, and Anticoagulation Clinic Daily Huddle Leader (options may change)
- Assignments such as small projects, taking of minutes, etc. may be required
- It is the resident's responsibility to ensure that they have appropriate calendar invites for each meeting and understand their responsibilities to each committee prior to the first scheduled meeting

Administrative Responsibility – options may change, more than one resident may be assigned to each

 Coordinated by Anne Zechlinski and Residency Program Director, with preferences submitted by each resident

Recruitment Events – options TBD annually

- Pharmacy Society of Wisconsin (PSW) Annual Meeting
- Medical College of Wisconsin
- Concordia University of Wisconsin
- University of Wisconsin Madison
- Illinois Council of Health-System Pharmacists (ICHP) Annual Meeting
- University of Minnesota
- University of Iowa
- University of Michigan

Other Experiences

Vizient Pharmacy & American Society of Health-system Pharmacists (ASHP) Midyear Clinical Meeting

- Occurs in early December
- Activities:
 - Vizient committee meeting and participation
 - o Midyear meeting attendance and participation
 - Poster presentation (at UHC meeting)
 - Resident recruitment at ASHP Residency Showcase
 - Others as required (e.g., participation with PPS interviews)

Wisconsin Pharmacy Residency Conference (April)

- A resident-specific portion of the Pharmacy Society of Wisconsin (PSW) Educational Conference that offers the opportunity for residents from Wisconsin to present their research projects to their peers and colleagues
- Activities:
 - Yearlong project presentation
 - o Attendance and active participation during other resident presentation
 - Others as required

Milwaukee Citywide Resident Events

 Citywide resident events occur at different pharmacy residency program sites throughout the Milwaukee area

Mentorship Experiences

Residency Mentor

- Residency mentors are pharmacists paired with each resident. Their primary purpose is to provide residents guidance throughout the year with an emphasis on development and education
- Residents and mentors are expected to meet approximately monthly.
- Mentors are chosen by the residents in close consultation with Residency Program Director

Leader Rounding

- Residents round with the Director of Ambulatory Pharmacy every other month. The primary
 purpose is to provide guidance throughout the year with an emphasis on overall professional
 development and career advancement.
- Residents round with the Residency Program Director monthly.
- Residents round with the Residency Program Coordinator every other month.

Evaluation & Documentation

- Contact primary preceptors for each rotation approximately 2 weeks prior to the start of each rotation with an introductory e-mail (see <u>pre-rotation communication expectations</u>)
- Evaluations should be completed in PharmAcademic by their assigned due dates and may include both midpoint and final evaluations as well as quarterly evaluations for longitudinal experiences
- In order to pass the residency, good progress must be demonstrated on all program goals as indicated by a level of "Achieved for the Residency" on at least 70% of required goals and "Satisfactory Progress" on all remaining required goals.
- Residents are responsible for monitoring their progress on residency objectives and must keep preceptors informed about objectives that should be focused on for each rotation

Pre-rotation Communication Expectations

Below are the elements that should be included in your communication as well as an example of an exceptional pre-rotation email.

Goals:

- In order for you and your preceptor to adequately prepare for your rotation, you must provide your preceptors with your <u>goals</u> for the rotation. You need to have at least 3-4 goals that you would like to work toward. Make sure that your goals are specific and appropriate for the time assigned to the rotation. For 1-2 week rotations, you may only have 1-2 goals.
- Example good goal: Become familiar with the selection and narrowing of antibiotic therapy and overall treatment of community acquired vs. hospital acquired pneumonia in the ICU setting
- Example poor goal: Improve knowledge of antibiotics too broad
- Example good goal: Increase comfort and confidence in making recommendations and interacting with physicians during patient care rounds
- Example poor goal: Increase confidence too broad

<u>Learning Style:</u>

- Additionally, it is helpful if you provide information about your learning style. Although you may or
 may not have taken a formal learning style assessment, you should still be able to provide a general
 description of what is most effective for you.
- Example: I like to be quizzed on new information, I am a hands on learner I learn by doing, I like to observe first prior to trying new things on my own

Schedule:

Notify your preceptors with any meetings, staffing days, and if a project day will be scheduled during the rotation. Since schedules are likely to change, make sure that you provide your preceptor with any updates on the first day and throughout the rotation.

Strengths and Opportunities for Improvement:

- The goal for this portion is to take feedback that you have received on previous rotations and communicate it to your next preceptors.
- Example: My identified strengths on my previous rotation were ability to thoroughly review a
 patient profile identify drug-related problems and ability to prepare topic discussions for
 students. Opportunities for improvement were my time management in working up patients,
 improving confidence by speaking up more on rounds, and looking up information prior to asking for
 the answer from my preceptor.

Example - Pre-Rotation Email

Goals:

- 1. Be able to **analyze** a complex patient and make drug therapy plans and interventions as needed.
- 2. Gain **confidence** in making recommendations to the team; enhance my **communication** skills.
- 3. Better understand the pharmacology and appropriate use of **antiepileptic drugs** in the critical care setting (indications, appropriate orders, side effects, therapeutic drug levels, etc.)
- 4. Better understand therapies for **common disease states** seen in the NICU (i.e., TBI, SAH, status epilepticus, CNS infections, brain tumors, stroke, neurological disorders, and common neurosurgical procedures).
- 5. Become more familiar with neurosurgical procedures and related medication use issues:
 - a. Which meds to hold, which meds are unnecessary/necessary (med rec)
 - b. Which meds are necessary to use with certain procedures or devices and which to avoid
- 6. Broaden and deepen my understanding of the appropriate use of **antibiotics**, especially in the NICU patient population and be able to recognize **pharmacokinetic** changes which occur in patients with traumatic brain injury, CNS infections, and other neurological states.
- 7. Become familiar with **NICU-specific orders** and better understand which drugs can/cannot be used on the regular hospital floors.
- 8. Gain a better understanding of **emergent situations** where certain meds are truly needed STAT; learn which meds need to come from central, and which are usually prepared in the ICU.

Expectations:

- Feedback on a daily basis if possible and warranted.
- Wrap-up on **Thursday 2/26** with some sort of feedback/evaluation of the week.
- Constructive criticism is ok (and helpful most of the time)!
- Decision on a NICU **project** early on so I have time to work on it while still in the NICU rotation.
- If there is something you think I should be doing and I'm NOT, please let me know right away so I
 can change/correct it!

Learning Style:

- Repetition.
 - I like to be able to WRITE things down and go back to them later, so if I take a lot of notes, that's why. I like to be able to see things later to remind me of what was talked about earlier.
 - o If asked a question, I like to have time to look into things I don't know or am not sure about.

Schedule:

- Monday, 2/23: No scheduled meetings
- Tuesday, 2/24:
 - o 1200-1300 Resident Candidate Interview Lunch
 - o DONE ON ROTATION BY 1615/1630 (central PM shift @ 1700)
- Wednesday, 2/25:
 - o 1130-1230 Resident Discussion
 - o 1230-1300 Rounding with Kristin Hanson
- Thursday, 2/26: 1330-1430 Med Error Committee Meeting
- Friday, 2/27: NOT ON ROTATION (Staff 8p/weekend)
- NOTE: Project Full Day will be Monday, March 2nd

Strengths:

- StrengthsFinder Top 5 ***
- Thorough profile review
- Precepting students

Areas for Improvement:

- Efficiency
- Confidence
- Looking up information before going to preceptor for answer