PGY1 Residency: Ambulatory Care Focus Program

Program Purpose: PGY1 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D) education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for postgraduate year two (PGY2) pharmacy residency training.

Program Description: This ambulatory care focus PGY1 residency program develops the pharmacotherapy skills that will prepare a pharmacist to provide medication management services in virtually any ambulatory care setting. Disease state management, patient education, and oral/written communication are emphasized.

A large ambulatory care clinical pharmacy team supports monthly and longitudinal learning experiences for its residents. Learning opportunities include, but are not limited to, primary care, medical specialty clinics, anticoagulation, mental health, home based primary care, geriatrics, HIV, oncology, pain, nursing home consulting, and acute care medicine. Management and leadership activities are longitudinal and include pharmacy and therapeutics (P&T) committee meetings, formulary management, drug information and literature evaluation, and completion of a medication use evaluation (MUE) and drug monograph. A research project will also be designed and implemented with the assistance of pharmacy preceptors and staff.

This program is highly flexible and allows individual advancement based on personal interests, motivation and ability, including the opportunity to co-precept Pharm.D students from colleges of pharmacy during APPE rotations.

The residency is fully accredited by ASHP and participates in the Residency Matching program. National Matching Services number is 145513.

Training Site: Phoenix VA Health Care System (PVAHCS), includes a VA Medical Center in central Phoenix and several community based outpatient clinics (CBOCs) throughout the Phoenix valley. A team of about 65 clinical pharmacy specialists provide direct patient care in a variety of settings, including ambulatory care, acute care, long-term care, and psychiatry. The pharmacy service also provides clerkships for students from multiple Colleges of Pharmacy. PVAHCS is an accredited provider of continuing education – both ACPE and medical CME. Educational opportunities include continuing education lectures, grand rounds, and an optional teaching certificate program through Midwestern University.

Program Goals: Upon completion of the PGY1 Ambulatory Care Focus Residency, the resident shall be able to:
1. Provide personalized pharmaceutical and ambulatory care services to promote ethical, caring, trusting relationships and enhance patient outcomes in all settings.
2. Educate and engage patients in their health and wellness.
3. Work collaboratively within an interdisciplinary team to provide optimal patient care.
4. Demonstrate confidence and function competently and independently.
5. Demonstrate problem solving and leadership skills
6. Develop knowledge of drug information systems, MUEs, formulary management and program development.
7. Contribute well-designed research to the professional literature.
8. Develop a foundation in effective time management and other organizational skills.
9. Be proficient in written and oral communication.

Responsibilities: The primary responsibility of the Ambulatory Care Resident is to provide pharmaceutical care and perform drug therapy monitoring for all patients assigned by the preceptor. The resident will rotate through clinical rotations and be under immediate supervision of a designated preceptor, until such time that the resident is prepared to assume more independent functions. The resident works in the outpatient pharmacy as part of weekend staffing activities to gain medication distribution experience. The resident is also responsible for the development and completion of all assigned residency projects, including a research project.

Evaluation Process: The Residency Learning System (RLS) is used as the formal evaluation tool. Self-evaluations based on residency goals and objectives allow the resident to monitor and evaluate his/her own progress throughout the course of the residency year. At the conclusion of each learning experience, both the preceptor and resident will complete and discuss a formal Summative Evaluation. Quarterly evaluations are completed with the residency director/coordinator to monitor overall progress and to set goals during the year.

Fringe Benefits: 13 days paid annual leave (vacation leave), 13 days paid sick leave, 10 paid Federal holidays, paid administrative leave for approved conferences, lab coat, free parking, and subsidized health insurance plan options.

Applicant Qualifications: The applicant should possess or be a candidate for a Pharm.D degree from an accredited college of pharmacy and must be eligible for licensure in any state. The applicant must be a US citizen at the time of submitting their application.
Does the program participate at the ASHP Midyear in the Residency Showcase? In PPS?
We participate every year in the Residency Showcase at the Midyear Clinical Meeting. We do not participate in PPS.

What is the rotation schedule like?
There are a total of twelve month-long rotations, as well as longitudinal rotations. The longitudinal rotations offer the resident continuity and longitudinal exposure in various clinical practices.

<table>
<thead>
<tr>
<th>Month Rotations:</th>
<th>Longitudinal Experiences:</th>
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<tbody>
<tr>
<td>Orientation</td>
<td>Primary care clinic (1 day every other week for 12 months)</td>
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<tr>
<td>Formulary Management</td>
<td>Mental Health Inter-professional Training Clinic (1/2 day per week for 2 months)</td>
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<tr>
<td>Three primary care rotations (at the main Medical Center and/or CBOCs)</td>
<td>Anticoagulation (30 patients for 6 months)</td>
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<td>Outpatient Mental Health</td>
<td>Smoking cessation patient education class</td>
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<tr>
<td>Medical Speciality Clinic</td>
<td>Weekend Staffing (every 3rd weekend)</td>
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<tr>
<td>Home Based Primary Care</td>
<td>Formulary Management</td>
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<tr>
<td>Anticoagulation Clinic</td>
<td>Literature Evaluation / Journal Club</td>
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<tr>
<td>Acute Care</td>
<td>Leadership</td>
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<td>Two electives</td>
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Is the program flexible?
Yes! One of the first things that we do with the new residents is establish their personal goals and document these on their Customized Residency Plan. This document is updated quarterly by the resident and the program director. The 2 electives are resident-driven and many options are available.

What electives are available?
Any of the required month rotations can be repeated as an elective. Other common electives that residents have chosen in the past include HIV Clinic, women’s clinic, pain clinic, substance abuse rehabilitation program (SARRTP), inpatient mental health, oncology, long term care, palliative care, emergency room, management, pharmacy informatics and academia. Electives can be designed around your specific interests.

What are the staffing requirements?
Every third weekend you will staff in the outpatient pharmacy. Activities include order verification, inventory control, medication distribution, drug information and discharge education.

Is there an opportunity for a teaching certificate?
Midwestern University College of Pharmacy offers a teaching certificate program each year that the residents have an opportunity to participate in and complete. The program is an elective longitudinal experience and involves both didactic and experiential activities and development of a teaching philosophy and portfolio.

Is the learning experience preceptor a pharmacist or a physician?
Your primary rotation preceptor is ALWAYS a pharmacist. You may have other pharmacy and non-pharmacy preceptors involved, but there will always be an assigned go-to pharmacist preceptor. We have over 65 clinical pharmacists who serve as preceptors; most have completed a residency and/or have specialty certifications.

What is the setup of primary care services?
Each primary care clinic has several multidisciplinary patient-aligned care teams (PACTs), which include a primary care provider (MD, NP, or PA), RN, LPN/NA and medical support assistant (MSA), as well as clinical pharmacy specialists, who each provide pharmacy services for up to 3 PACTs. Other ancillary services provided in each clinic include mental health, nutrition and social work. There is one primary care clinic at the main Medical Center campus. All other primary care services are provided at the CBOCs.
What services do the medical specialty clinics include?
Medical specialty clinic covers a multitude of areas including (but not limited to): cardiology, pulmonary, neurology, endocrinology, rheumatology, oncology.

Do you have pharmacy-run clinics?
The anticoagulation clinic is 100% pharmacist run. While we do not have specific pharmacy run clinics for other common chronic disease states, each clinical pharmacy specialist has a scope of practice within their specialty area. Clinical pharmacy specialists who work as part of the multidisciplinary PACTs have a scope of practice that allows him/her to initiate or adjust medications to achieve therapy goals for lipids, hypertension, diabetes, smoking cessation, etc. Each PACT pharmacist has face to face and telephone pharmacy appointments as a mid-level practitioner to provide disease state and medication management for the patients in their clinic. Residents fulfill similar responsibilities as the PACT pharmacist under supervision of their preceptor during each primary care clinic rotation and longitudinal experience. Also, there are clinical pharmacy specialist teams who support the pharmacy needs of patients and providers in the medical/surgical specialty clinics and the mental health clinic.

Are there teaching opportunities?
Yes. We are affiliated with multiple colleges of pharmacy as a rotation site for 4th year pharmacy students. If you would like to precept a student, the residency director/coordinator will try to coordinate this opportunity during a primary care rotation. Midwestern University College of Pharmacy offers a teaching certificate program that residents may complete longitudinally. Residents are also involved in group patient education classes for smoking cessation. Residents give two formal presentations for staff development.

What projects and presentations are required?
Residents are required to complete a residency research project. You will prepare a research manuscript in publishable format and present your research findings to the Phoenix VA pharmacy team, as well as to attendees of an end of the year pharmacy conference. You will provide two other formal presentations to the pharmacy staff – the second presentation will be ACPE accredited for CE. You will also be involved with the design, data collection, and analysis for a MUE. You will be assigned to write a medication monograph. There may be additional presentations and projects of a less formal nature associated with each rotation.

How is the residency research project process supported?
A list of topics is generated by the staff yearly. You can select a topic from this list or you can select your own. If you select your own topic, it must be approved (able to be completed in the 1-year time frame, applicable to ambulatory care and of value to the institution). The writing of the proposal, completion of the IRB approval paperwork, analysis of the results and formal preparation of the presentation/poster/manuscript is supported by at least one preceptor and one formulary management specialist.

What are the licensure requirements?
You can be licensed in any state in the US when completing your residency at a VA facility. The state licensure process should be completed as early as possible, preferably prior to the start of the residency. The resident should be licensed within 90 days of their appointment to the program; licensure is required within 120 days.
I. The PVAHCS PGY1 Ambulatory Care Focus Program Application must be completed through the PhORCAS Service at http://www.ashp.org/phorcas.

II. Applications must be received by January 1, 2018.

III. Please review the following application requirements prior to completing/submitting applications:

1. **Essay** (this replaces a formal letter of intent)
   a. Answer the following questions in 300 words or less for each response
   i. Why are you pursuing residency training? More specifically, why are you pursuing this ambulatory care focus residency?
   ii. What are your career goals (short and long term)? Why would you be a good candidate for this program?
   b. **NOTE:** If applying for more than one program at PVAHCS, provide a short paragraph regarding your interest in multiple programs.

2. **Curriculum Vitae**, which should include the following information:
   a. Pertinent educational experiences, including brief descriptions of clerkships/APPEs, clinical activities and projects/presentations.
   b. Work experiences with a description of hours worked during the summer and/or school year.
   c. Extra-curricular activities, membership and/or leadership in professional organizations, publications and research in which you have participated.

3. **Recommendations / References**
   a. Three completed PhORCAS Standardized Reference forms are required
   b. No formal letters should be included

IV. All correspondence and questions can be sent to:

Courtney Pawula, PharmD, BCPS
Residency Director
PGY1 Residency: Ambulatory Care Focus Program
Clinical Pharmacy Section 119
Phoenix VA Health Care System
Midtown CBOC
5040 N 15th Ave
Phoenix, Arizona 85015
Courtney.Pawula@va.gov