

**Outpatient Service Commitment Longitudinal Learning Experience:**

**Preceptor: Amanda Wright, PharmD, Valley Pharmacy Manager**

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**Hours: 6:30AM-6:00PM Monday through Friday, 6:30AM-4:00PM Saturday and Sunday**

1. **General Description:**

The outpatient service commitment longitudinal rotation is a rotation that is integrated into orientation and between residency clinical experiences. Training begins during orientation and continues for two weeks during the first rotation block. After the initial training period, the residents will spend three service weeks throughout the year performing staffing duties and participating in bedside delivery and medication/disease state education. Additionally, the resident will staff every third weekend longitudinally throughout the residency year.

Valley Pharmacy is an outpatient pharmacy located within the Cape Fear Valley Medical Center. Valley pharmacy provides comprehensive pharmaceutical care to our patients through many services, and the pharmacy’s unique location allows for it to serve the community, its employees, and patients being discharged from the facility. The pharmacy offers delivery of discharge patient’s medications to their rooms, allowing us to proactively address problems with prescriptions, coordinate payment options, and educate patients on their medications. Removing barriers to therapy enhances compliance and reduces hospital readmissions.

Pharmacy residents will receive initial training learning the Rx1 computer system, as well as the workflow of the pharmacy. After training objectives have been met, residents will complete three one-week service weeks as well as staffing every third weekend throughout the residency year. The bulk of the rotation will be spent evaluating the appropriateness of the medications being filled upon discharge, communicating problems to providers and offering solutions, delivering medications to patient’s bedsides, and providing thorough education on the medications and associated disease states. In addition, the resident will also gain experience in the duties of a pharmacist in charge to include inventory management, scheduling, staffing and supervision of technicians, controlled substance distribution, storage, and monitoring. Through the use of TeleTracking, the resident will identify patients that will be discharging throughout the day to prioritize workload to ensure patients receive their medications in a timely manner. Additionally, the resident will be exposed to the monthly reporting and demonstrate a basic understanding of the financial aspects of the pharmacy, including submission of monthly billing amounts to providers both within and outside of the pharmacy. Strong communication skills, effective interpersonal skills, good multitasking ability, and solid time management skills will be vital to the completion of this residency requirement.

The role of the preceptor will be dependent upon the resident’s performance and progression towards achieving the rotation objectives. Direct instruction and modeling of practice skills by the preceptor will be utilized during the beginning of the rotation. As the rotation progresses, the preceptor will transition to a coaching role in which the resident will be observed performing the activities of a staff pharmacist and educating patients. The preceptor will provide constructive feedback in both verbal and written formats as necessary to foster professional growth and development. During the initial training, feedback will occur at least weekly. Following orientation, the preceptor will provide feedback quarterly and as needed throughout the residency year (usually on Friday of staffing weeks).

By the end of the longitudinal outpatient learning experience, the resident is expected to be able to enter prescription details independently, to check prescriptions for completeness and accuracy, and to educate patients on medications and associated disease states. The preceptor will be available, if needed, for any issues/concerns and to complete a debriefing at the end of the day.

1. **Staffing Requirements:**

Areas in which the resident will be expected to gain proficiency include, but are not limited to the following:

* Medication order entry
* Evaluating appropriateness of medication therapy
* Communicating errors/omissions with providers and providing solutions
* Resolution for meeting the medication needs of patients that are unable to afford their medications including recommending and contacting providers for alternate, less expensive therapies, finding discounts available to patients, and working with Coordination of Care to provide coverage when necessary
* Checking filled prescriptions for accuracy and completeness
* Delivering prescriptions to discharge patients and providing medication/disease state counseling
* Identifying barriers to understanding medication therapies and providing solutions
* Scheduling and supervision of technician staff
* Maintaining proper inventory levels
* Inventory management
* Scheduling and staffing of technician staff
* Controlled substance accountability
* Monthly billing and financial accountability

1. **Goals and Objectives:**

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

R.1.1.1: Interact effectively with healthcare teams to manage patient’s medication therapy.

R.1.1.2: Interact effectively with patients, family members, and caregivers.

R.1.1.4: Analyze and assess information on which to base safe and effective medication therapy.

R.1.1.8: Demonstrate responsibility to patients.

R.1.2.1: Manage transitions of care effectively.

R.1.3.1: Prepare, dispense, and manage medications following best practices and the organization’s policies and procedures.

R.1.3.3: Manage aspects of the medication-use process related to the oversight of dispensing.

R.2.1.3: Identify opportunities for improvement of the medication-use system.

R.2.1.4: Participate in medication event reporting and monitoring.

R.3.1.1: Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.

R.3.1.2: Apply a process of ongoing self-evaluation and personal performance improvement.

R.3.2.1: Explain factors that influence departmental planning.

R.4.1.2: Use effective presentation and teaching skills to deliver education.

1. **Preceptor Interaction:**

The pharmacy resident will be supervised by the preceptor (pharmacy manager) during staffing weeks. For weekend staffing, the resident will be supervised by the weekend staff pharmacist. The preceptor and/or staffing pharmacist will be available at any time during service weeks/weekends to provide residents with assistance and feedback as needed.

1. **Communication:** 
   1. Daily meeting times during service weeks/weekends: resident to prioritize questions and problems to be discussed
   2. Email: residents are expected to read emails at the beginning, middle, and end of each day at a minimum for ongoing communications. This is appropriate for routine, non-urgent questions and problems
   3. Office extension: appropriate for urgent questions pertaining to patient care

**Expected progression of resident responsibility of this learning experience:**

**(Length of time spent in each area of training will be customized based on the resident’s progression and the timing of the residency year)**

**Initial training period:** During the initial training period, the pharmacy resident will be given the opportunity to become proficient in the use of Rx1, both for data entry and checking a prescription. The resident will also become familiar with the current workflow of filling, dispensing, and delivery of medications. The resident will gain familiarity with hospital information applications such as eHim and Teletracking. The expectation is that after completion of the training period, the pharmacist will be able to independently complete all aspects of the prescription filling process. Communication during this time will be face to face with direct supervision and modeling of tasks by the preceptor. Time will be scheduled daily to allow for feedback and to allow the resident to ask questions. Additional communication can be in the form of email or phone as needed.

**Weekend staffing:** During the longitudinal weekend staffing period, the resident will continue to build on skills learned during the training period. The resident will begin delivering medications to discharge patients and providing education. The resident will be expected to work independently, with daily coaching and feedback offered by the staff pharmacist.

**Longitudinal service block:** The resident’s longitudinal and three week service experience will build on previous learning with additional emphasis placed on management activities including schedule writing, supervision of staff, and financial reporting and accountability. The preceptor will be available for feedback and questions daily. During this time, the resident will be expected to work independently, completing the same tasks a staff pharmacist would.

1. **Evaluation Strategy:**

PharmAcademic will be the primary mode of evaluation documentation (see chart below). The resident is to complete the quarterly (1st and 3rd quarters), performance evaluations, a midpoint summative self-evaluation, a summative self-evaluation, preceptor evaluation, and learning experience evaluations. The preceptor will complete the summative evaluation of the resident. For all end of learning experience evaluations completed in PharmAcademic, the resident and the preceptor will complete them independently and save as a draft. A face to face evaluation will take place at the end of the learning experience to discuss the resident’s performance on the rotation and to discuss and compare evaluations. This discussion will also provide feedback on both performance of activities and accuracy of resident’s self-assessment skills. For areas marked as “Needs Improvement” or “Achieved”, both the resident and preceptor are to comment on why this rating was selected. Evaluations will be signed in PharmAcademic following the discussion. Throughout the month, verbal feedback will be given and the preceptor has the option of using PharmAcademic (“Provide Feedback to Resident” on individual resident page) to provide insight into the performance of patient care activities and/or administrative activities and skills. Formative feedback on resident progression towards achievement of goals will be used to adjust future rotation plans and activities.

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| **Type of Evaluation** | **Who Completes the Evaluation** | **When is the Evaluation Completed** |
| Written and Verbal Formative Feedback | Preceptor | Throughout rotation based on activities; resident to place written feedback into electronic portfolio |
| Self-evaluation | Resident | End of 1st and 3rd Quarter |
| Summative Self-evaluation | Resident | Midpoint and end of learning experience |
| ASHP Preceptor Evaluation | Resident | Midpoint and end of learning experience |
| ASHP Learning Experience Evaluation | Resident | End of learning experience |
| Summative Evaluation | Preceptor | Quarterly |