2022-2023
Department of Pharmacy Services
PGY1 Pharmacy Residency Program
Residency Manual
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I. Introduction

Bayhealth’s Mission, Vision, and Values

Our Promise
We are driven to bring the nation’s best healthcare to our communities here at home.

Our Mission
To strengthen the health of our community, one life at a time.

Vision
To deliver the nation’s best healthcare to our communities here at home.

Values

Compassion: We are kind and caring to everyone we encounter.

Accountability: Each of us is responsible for our words, our actions, and our results.

Respect: We value everyone and treat people with dignity and professionalism.

Integrity: We build trust through responsible actions and honest relationships.

Teamwork: We achieve more when we collaborate and all work together.
As central and southern Delaware’s largest healthcare system, Bayhealth is comprised of Bayhealth Hospital-Kent Campus and Bayhealth Hospital-Sussex Campus, the freestanding Emergency Department in Smyrna, as well as numerous satellite facilities and employed physician practices encompassing a variety of specialties. Bayhealth is a technologically advanced, not-for-profit healthcare system with more than 4,000 employees and a medical staff of more than 400 physicians. Bayhealth is an affiliate of Penn Medicine for Heart and Vascular, Cancer, and Orthopedics.

In Fiscal Year 2019, Bayhealth recorded 105,181 emergency department visits, 19,844 patients admitted to beds, 2,193 births, and provided $64.8 million in unreimbursed care to patients.
WELCOME TO BAYHEALTH PGY1 PHARMACY RESIDENCY!!

The Bayhealth Postgraduate Year One (PGY1) Residency Program in ambulatory care settings is a one-year training program primarily focused on pharmacy’s expanding role in outpatient practice. The PGY1 resident will receive extensive education and training in treating patients through guided practice from experienced preceptors. The program is tailored to meet the needs and interests of individual residents.

The PGY1 residency program promotes experiences with patient interaction, interdisciplinary collaboration, project management, teaching, and development of oral and written communication skills. The variety of practice settings, along with the residency activities, help the PGY1 resident to be well rounded and prepared to apply for positions suited to their interests.

During the program, the PGY1 resident will participate in all aspects of our comprehensive pharmacy services. Learning experiences in family medicine, anticoagulation, diabetes management, research, and population health are offered. As a vital member of the healthcare team, the PGY1 resident will have the opportunity to enhance practice skills that are necessary to evaluate a patient’s medication regimen. Throughout the one-year program, the PGY1 resident will have numerous opportunities to provide education to patients and other health care professionals. The knowledge gained over the course of the program will enable the PGY1 resident to competently conduct a research project. Opportunities for teaching pharmacy students, medical residents, and earning a teaching certificate are available.

The PGY1 resident will acquire foundational skills needed to become a competent and confident clinical practitioner and future leader in pharmacy practice. Also, the PGY1 resident will gain experience in collaborative relationships with health care team members through proactive recommendations in the ambulatory care setting.

Bayhealth’s PGY1 pharmacy residency program is currently in pre-candidate status.
I. PGY1 Residency Program Purpose Statement

The purpose of the Bayhealth postgraduate year one residency program is to build upon the Doctor of Pharmacy (PharmD) education and contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions. Also, the program will assist the resident to become eligible for postgraduate year two (PGY2) pharmacy residency training and/or board certification, after successfully completing the residency year.

II. Program Overview

The PGY1 Pharmacy Residency is a 12-month program composed of various ambulatory care components and designed to develop the PGY1 resident into a highly skilled pharmacy practitioner with additional experience in the ambulatory care setting. Through general and specialty ambulatory care learning experiences, as well as experiences in acute care medicine and transitions of care, the PGY1 resident will be exposed to a variety of areas where pharmacists have a growing impact on patient care in clinical practice. The program was designed with the belief that the best ambulatory care providers are those who can fully understand the patient’s experience throughout the continuum of care including outpatient clinics, acute care institutions, and transitional care environments.

III. General Program Outcomes

At the completion of the Bayhealth PGY1 Residency program the resident will have gained the following skills:

- Direct patient care skills with a focus on family medicine, rehabilitation transitions of care, anticoagulation, etc.
- Population health management
- Teaching and precepting skills
- Project management and drug information
IV. Program Specific Goals

*Competency Area R1: Patient Care*

**Goal R1.1:** In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient care process.

- Objective R1.1.1: (Applying) Interact effectively with health care teams to manage patients’ medication therapy.
- Objective R1.1.2 (Applying) Interact effectively with patients, family members, and caregivers.
- Objective R1.1.3: (Analyzing) Collect information on which to base safe and effective medication therapy.
- Objective R1.1.4: (Analyzing) Analyze and assess information on which to base safe and effective medication therapy.
- Objective R1.1.5: (Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).
- Objective R1.1.6: (Applying) Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.
- Objective R1.1.7: (Applying) Document direct patient care activities appropriately in the medical record or where appropriate.
- Objective R1.1.8: (Applying) Demonstrate responsibility to patients.

**Goal R1.2:** Ensure continuity of care during patient transitions between care settings.

- Objective R1.2.1: (Applying) Manage transitions of care effectively.

**Goal R1.3:** Prepare, dispense, and manage medications to support safe and effective drug therapy for patients.

- Objective R1.3.1: (Applying) Prepare and dispense medications following best practices and the organization’s policies and procedures.
- Objective R1.3.2: (Applying) Manage aspects of the medication-use process related to formulary management.
- Objective R1.3.3: (Applying) Manage aspects of the medication-use process related to oversight of dispensing.
**Competency Area R2: Advancing Practice and Improving Patient Care**

**Goal R2.1: Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.**
- Objective R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.
- Objective 2.1.2 (Applying) Participate in a medication-use evaluation.
- Objective 2.1.3: (Analyzing) Identify opportunities for improvement of the medication-use system.
- Objective 2.1.4: (Applying) Participate in medication event reporting and monitoring.

**Goal R2.2: Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication use system.**
*(Ideally, objectives R2.2.1-R2.2.5 will be addressed through residents working on one quality improvement or research project; however, if this is not possible, all objectives must be addressed by the end of the residency year and can be addressed through work on more than one initiative.)*
- Objective R2.2.1: (Analyzing) Identify changes needed to improve patient care and/or the medication-use systems.
- Objective R2.2.2: (Creating) Develop a plan to improve the patient care and/or medication-use system.
- Objective R2.2.3: (Applying) Implement changes to improve patient care and/or the medication-use system.
- Objective R2.2.4: (Evaluating) Assess changes made to improve patient care or the medication-use system.
- Objective R2.2.5: (Creating) Effectively develop and present, orally and in writing, a final project report.

**Competency Area R3: Leadership and Management**

**Goal R3.1: Demonstrate leadership skills.**
- Objective R3.1.1: (Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.
- Objective R3.1.2: (Applying) Apply a process of on-going self-evaluation and personal performance improvement.
Goal R3.2: Demonstrate management skills.
- Objective R3.2.1: (Understanding) Explain factors that influence departmental planning.
- Objective R3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the healthcare system.
- Objective R3.2.3: (Applying) Contribute to departmental management.
- Objective R3.2.4: (Applying) Manage one’s own practice effectively.

Competency Area R4: Teaching, Education, and Dissemination of Knowledge

Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).
- Objective R4.1.1: (Applying) Design effective educational activities.
- Objective R4.1.2: (Applying) Use effective presentation and teaching skills to deliver education.
- Objective R4.1.3: (Applying) Use effective written communication to disseminate knowledge.
- Objective R4.1.4: (Applying) Appropriately assess effectiveness of education.

Goal R4.2: Effectively employ appropriate preceptors’ roles when engaged in teaching (e.g., students, pharmacy technicians, or other health care professionals).
- Objective R4.2.1: (Analyzing) When engaged in teaching, select a preceptors’ role that meets learners’ educational needs.
- Objective R4.2.2: (Applying) Effectively employ preceptor roles, as appropriate.

Competency Area E1: Pharmacy Research

Goal E1.1 Conduct and analyze results of pharmacy research.
- Objective E1.1.1 (Creating) Design, execute, and report results of investigations of pharmacy-related issues.

Competency Area E5: Management of Medical Emergencies

Goal E5.1 Participate in the management of medical emergencies.
- Objective E5.1.1 (Applying) Exercise skill as a team member in the management of medical emergencies according to the organization’s policies and procedures.
**Competency Area E6: Teaching and Learning**

**Goal E6.1 Demonstrate foundational knowledge of teaching, learning, and assessment in healthcare education.**
- Objective E6.1.1 (Understanding) Explain strategies and interventions for teaching, learning, and assessment in healthcare education.

**Goal E6.2 Develops and practices a philosophy of teaching.**
- Objective E6.2.1 (Creating) Develop a teaching philosophy statement.
- Objective E6.2.2 (Creating) Prepare a practice-based teaching activity.
- Objective E6.2.3 (Applying) Deliver a practice-based educational activity, including didactic or experiential teaching, or facilitation.
- Objective E6.2.4 (Creating) Effectively document one’s teaching philosophy, skills, and experiences in a teaching portfolio.

II. **Requirements for Successful Completion of Bayhealth’s PGY1 Pharmacy Residency**

The resident is expected to achieve all ASHP required educational outcomes and goals for the PGY1 Pharmacy Residency Program, as well as the elective goals selected by the Bayhealth Hospital residency program by the end of the residency year. The resident must also achieve 85% of the required and elective objectives under each educational goal in order to complete the residency program. The resident must have received a “satisfactory progress” rating on the remaining 15% of the required and elective objectives.

Activities required of the resident to meet these outcomes, goals, and objectives include, but are not limited to:

A. Development of a customized plan for the residency following an initial evaluation of career interests, prior experience, and areas of strength and weakness.

B. Compliance with learning experience expectations:
   a. meeting with the learning experience preceptor at the beginning of each learning experience to define individual goals and objectives for the learning experience.
A resident will receive a certificate of completion from the Bayhealth PGY1 Pharmacy Residency Program by completing the listed activities satisfactorily as decided by the Residency Program Director (RPD):

- All required learning experiences.
- All elective learning experiences.
- All scheduled learning experience presentations.
- Preceptor Development CE presentation.
- All scheduled day/evening, holiday, and weekend staffing requirements.
- Membership in the American Society of Health-System Pharmacists (ASHP)
- Completion of a major residency research project. Each PGY1 resident will submit an abstract and present the findings of their major project at the Eastern States Conference for Pharmacy Residents & Preceptors. Results of the major project must be submitted to the RPD in publishable format.
- Submissions of articles to departmental newsletters and editor for one submission of Pharmacy/Nursing Newsletter.
- Preparation and presentation of journal club to co-residents/students/healthcare professionals.
- Working assigned hours, (per ASHP duty hour requirements) minimum 8 hours per day.
- Completing PharmAcademic evaluations on a timely basis.
- Documenting all clinical interventions during the learning experience in the healthcare system.
- Provision of pharmacy staffing coverage, including distributive pharmacist functions. This will be achieved by working one weekend every third week and at other designated, prearranged times during the residency year.
- Provision of required presentations throughout the residency, including learning experience presentations, journal club presentations, and continuing education presentations to the pharmacy department/interprofessional team members.
By the end of residency, residents must have obtained either “Satisfactory Progress” (SP), “Achieved” (ACH), or “Achieved for Residency” (ACH-R) on all Learning Objectives. If a PGY1 resident has a “Needs Improvement” (NI) on any goal or objective, they must repeat it and obtain a SP, ACH, ACH-R on that particular goal or objective by the end of the residency year. The Residency Program Director will review the residents’ progress throughout the year to ensure the resident is on track to obtain a certificate.

In order to receive a residency certificate signifying successful completion of the residency, residents must also obtain ACH-R in the items listed below:

- R1.1.3 – Collect information on which to base safe and effective medication therapy.
- R1.1.4 – Analyze and assess information on which to base safe and effective medication therapy.
- R1.1.5 – Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).
- R1.1.6 – Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.
- R1.1.8 – Demonstrate responsibility to patients.
- R1.3.3 – Manage aspects of the medication-use process related to oversight of dispensing.
- R2.1.4 – Participate in medication event reporting and monitoring.
- R.3.2.4 – Manage one’s own practice effectively.
- R4.1.1 – Design effective educational activities.
- R4.2.1- When engaged in teaching, select a preceptor role that meets the learners’ educational needs.

The following definitions will be used in evaluating resident progress:

**Needs Improvement (NI)** – The resident’s performance could potentially result in patient harm; may unfavorably influence the reputation of the pharmacy profession and/or institution; and/or does not meet the requirements of “Satisfactory Progress,” “Achieved,” or “Achieved for Residency.”

**Satisfactory Progress (SP)** – The resident’s performance is adequate; however, he/she requires additional experience to perform the objective independently.

**Achieved (ACH)** – The resident’s performance is adequate and he/she can perform the objective independently.

**Achieved for Residency (ACH-R)** – The resident’s performance is consistently above adequate and he/she can consistently perform the objective independently. ACH-R can only be assigned.
by the Residency Program Director and not by any individual preceptor. The official Bayhealth PGY1 Residency Certificate will be withheld until all requirements are fulfilled.

Program Structure

The PGY1 Pharmacy Residency program’s structure is indicated in the table below. Learning experiences are scheduled in such a way that the PGY1 resident will have learning experiences to assist them in determining their interest areas, as well as evaluate opportunities to seek at ASHP Midyear if they decide to attend. The learning experiences may change throughout the course of the residency year as long as it is in the best interest of the PGY1 resident and the program.

III. Residency Learning Experience Schedule

<table>
<thead>
<tr>
<th>Required Learning Experiences</th>
<th>Elective Learning Experiences (3 weeks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• GHO Orientation/Training (4 weeks)</td>
<td>• Family Medicine II</td>
</tr>
<tr>
<td>• Family Medicine Clinic (5 weeks)</td>
<td>• Population Health II</td>
</tr>
<tr>
<td>• Anticoagulation Clinic (5 weeks)</td>
<td>• Atlantic Apothecary (Compounding)</td>
</tr>
<tr>
<td>• Population Health (5 weeks)</td>
<td>• Palliative Care</td>
</tr>
<tr>
<td>• Walk-in Clinic (3 weeks)</td>
<td>• Outpatient Oncology</td>
</tr>
<tr>
<td>• Diabetes Management (4 weeks)</td>
<td>• Outpatient Cardiology</td>
</tr>
<tr>
<td>• Leadership/Practice Management (4 weeks)</td>
<td>• Outpatient Infectious Disease</td>
</tr>
<tr>
<td>• Outpatient Pain Management (4 weeks)</td>
<td>• Pediatrics/Maternal Fetal Medicine</td>
</tr>
<tr>
<td>• Rehabilitation/Transitions of Care (4 weeks)</td>
<td>Any ONE of the following inpatient rotations:</td>
</tr>
</tbody>
</table>
<pre><code>                                                                                             | • Internal Medicine                                                |
                                                                                             | • Cardiology                                                      |
                                                                                             | • Infectious Disease                                               |
                                                                                             | • Critical Care                                                    |
                                                                                             | • Oncology                                                        |
                                                                                             | • Pharmacy Informatics                                             |
                                                                                             | • Emergency Medicine                                              |
                                                                                             | • Pain Management                                                  |
</code></pre>
If there is a lack of preceptor availability in the learning experience practice area, the learning experience schedule/availability is subject to change by the Residency Program Director. Elective rotations are to be scheduled in the second half of the residency year.

**Longitudinal Experiences:**

1. Family Medicine Clinic (two half-days per month)
2. Internal Medicine Clinic (one half-day per month)
3. Research Project
4. Teaching Certificate Program (optional)

**IV. Required**

1. Clinical research project for presentation at the Eastern States Residency Conference. The project should be of such quality that the written results may be submitted for publication in a peer-reviewed journal.
2. Three newsletter articles
3. One Bayhealth Pharmacy CE presentation
4. One Bayhealth Grand Rounds presentation
5. Three GME didactic lectures
6. One journal club discussion
7. Attendance at ASHP Midyear (optional) if pursuing a PGY2 residency. Must present a CE presentation from the conference to the pharmacy staff.

**Miscellaneous Projects**
- ACLS/BLS/PALS training (if choosing to complete ED elective)
- 4 community service/lecture/participation events
- Inter-professional in-service as requested

Please note that required projects are subject to change by a majority vote from Residency Steering Committee Members.
V. Required Meetings

VI. Staffing Responsibilities and Benefits

1. Staffing Responsibilities
   a. The pharmacy resident shall demonstrate proficiency as a clinical pharmacist through staffing of the Anticoagulation Clinic and serving as a member of the Medication Reconciliation pharmacy team.
      i. The normal assignment for the Anticoagulation Clinic will be an eight-hour shift per two-week pay period.
      ii. The normal assignment for the Medication Reconciliation pharmacy team will be every third weekend (one Saturday and one Sunday making the shift assigned). The weekend assignment may be scheduled at either Bayhealth campus depending on staffing needs.
      iii. The PGY1 resident will be required to work one (1) Summer holiday and one (1) Winter holiday with the Medication Reconciliation pharmacy team. The holiday assignment may be scheduled at either Bayhealth campus depending on staffing needs.
   b. This schedule is subject to change by the Residency Program Director.

2. Benefits
   a. Stipend.
   b. 15 days of paid time off which includes sick leave, vacation leave, paid holidays, and bereavement leave. Please note that Bayhealth has six paid holidays and any holiday not worked will be subtracted from the 15 days of paid time off.
   c. Financial support to selected professional meetings
   d. Payment of professional liability insurance.
3. Duty Hours
   a. Duty hours are defined as all scheduled clinical and academic activities related to the pharmacy residency program. This includes inpatient and outpatient care; in-house call; administrative duties; and scheduled and assigned activities, such as conferences, committee meetings, and health fairs that are required to meet the goals and objectives of the residency program. Duty hours must be addressed by a well-documented, structured process.

   Duty hours do not include: reading, studying, and academic preparation time for presentations and journal clubs; travel time to and from conferences; and hours that are not scheduled by the Residency Program Director or a Preceptor. Residents, Resident Program Director, and Preceptors have the professional responsibility to ensure they are fit to provide services that promote patient safety. The Residency Program Director (RPD) must ensure that there is not excessive reliance on the PGY1 resident to fulfill service obligations that do not contribute to the educational value of the residency program or that may compromise their fitness for duty and endanger patient safety. Providing the PGY1 resident with a sound training program must be planned, scheduled and balanced with concerns for patients’ safety and resident’s well-being.

   a. **Duty hours must be limited to 80 hours per week**, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting.

   IX. Resident Responsibilities
   
   a. Development of personal goals for the residency following an initial evaluation of career interests, prior experience, and areas of strength and weakness.
   
   b. To meet the residency requirements, it is expected that the PGY1 resident may have to work in excess of 40 hours per week. Thus, moonlighting outside of Bayhealth is strongly discouraged. Any moonlighting must be approved by the Residency Program Director.
   
   c. Compliance with learning experience expectations:
▪ Meeting with the learning experience preceptor to discuss individual goals and objectives for the learning experience.
▪ Completing assignments by the end of the learning experience.
▪ Informing the Residency Program Director of difficulties encountered in meeting goals and objectives or problems with preceptor.
▪ Assuming the responsibilities of the preceptor for the respective learning experience in his/her absence.
▪ Completing an evaluation of each learning experience, preceptor, and a self-evaluation at the conclusion of the learning experience that includes accomplishment of objectives and experiences gained with recommendations for improvement.

d. Completion of quarterly evaluations to be reviewed by the Residency Program Director. The purpose is to assure that the established residency goals are being achieved.

e. Provision of pharmacy staffing coverage.

f. Maintenance of active membership in the American Society of Health-System Pharmacists.

g. Completion of a major residency project.

h. Completion of required presentations throughout the residency year.

i. Maintain and complete a resident-portfolio of accomplishments.

j. Submission of articles to pharmacy newsletters.
k. Attendance at the Eastern States Conference for Pharmacy Residents and Preceptors. Attendance at ASHP Midyear (optional) if pursuing a PGY2 residency. The PGY1 resident must present a CE presentation to the pharmacy staff from the conference.

l. Attendance at applicable local pharmaceutical education programs is expected. The PGY1 resident may attend other professional meetings if the staffing schedule permits.

m. The PGY1 resident must meet all established deadlines cannot miss more than 2 deadlines on the completion schedule. Failure to comply may result in dismissal from the program.

n. Reading and following the Attendance and Dress Code Policies.

o. Following patient privacy laws and regulations.

X. Assessment of Learning Experiences

a. For each week of the learning experience, progress will be verbally discussed with the PGY1 resident.

b. The PGY1 resident is recommended to maintain a feedback diary throughout the residency year. Two entries per week are recommended. Feedback diary entries should be forwarded, via e-mail, to the preceptor and the Residency Program Director on a bi-weekly basis if maintained.

c. There will be a mid-point discussion between the preceptor and the PGY1 resident will be reviewed with the discussed verbally and in writing. If the mid-point discussion indicates that the PGY1 resident is not meeting learning experience goals (“needs improvement for goals), a written action plan will be discussed with the PGY1 resident for those goals. Failure by the PGY1 resident to address the items on the action plan may result in failure of those goals (“needs improvement”) for that learning experience.

d. There will be a summary evaluation by the preceptor which will be reviewed with the PGY1 resident by the last day of the learning experience.

e. If the PGY1 resident fails the majority of goals (“needs improvement”) for a rotation, the Academic and Organizational Provisions Resident Corrective Action and Discipline Policy (Exhibit “A” of the Residency AGREEMENT) will be followed.
f. The PGY1 resident will complete a self-evaluation by the last day of the learning experience, including longitudinal learning experiences. The self-evaluation will be submitted and discussed with the preceptor.

g. The PGY1 resident will complete an evaluation of the preceptor and learning experience and submit it to the Residency Program Director by the last day of the learning experience, including longitudinal learning experiences.

h. The Residency Program Director will conduct quarterly customized evaluations with the PGY1 resident.

i. Preceptors for longitudinal learning experiences will conduct quarterly evaluations with the PGY1 resident, as well as a summary evaluation. These evaluations will be reviewed with the PGY1 resident.
XI. Contact Numbers

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By signing this statement, I acknowledge that I have received and read this handbook and agree to abide by the policies contained herein.

_________________________  _______________
Resident Signature  Date

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