



2022-2023

Department of Pharmacy Services
PGY1 Pharmacy Residency Program
Residency Manual



Accredited

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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.



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Bayhealth PGY1 Pharmacy Diversity, Equity, and Inclusion

Bayhealth's PGY1 Pharmacy Residency Program follows the institution's initiative towards Diversity, Equity, and Inclusion in the selection of applicants for the program. The current initiative, led by our Human Resources department and Organizational Development team, assists to infuse diversity, equity, and inclusion into all aspects of our organization and culture. Bayhealth believes that a diversified workforce, one which welcomes, values, appreciates different backgrounds, levels of experience, each other's strengths and uniqueness, is crucial to enhance creativity, drive innovation, and ensure we are delivering upon our vision of delivering the nation's best healthcare to our communities. Promoting inclusion assists us to create a collaborative, supportive, and respectful environment that increases the participation and contribution of every single employee. It allows for everyone to have a sense of belonging, be recognized, and work together. Inclusion comes from teams that collaborate across disciplines, identities, and cultures from around the globe. Facilitating a culture of respect, civility, tolerance, and improved cultural competency by creating an infrastructure for diversity awareness and ongoing cultural competency training.

Standards:

DRIVEN BY DIVERSITY EMPOWERED BY INCLUSION

At Bayhealth, we are driven by the diversity of our staff, volunteers, patients, and audiences at all levels. We build trusting and honest relationships through mutual respect and acceptance of others, regardless of age, sex, race, national origin, gender identity or expression, educational background, sexual orientation, religion, lifestyle, or physical ability. Collectively, our talents, strengths, life experiences, and individual differences of our employees not only represents our culture but our communities here at home. Embracing our differences empowers us to provide the best experience possible to everyone.



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**PROMISE OF RESPECT
AND FAIR TREATMENT**

Bayhealth is committed to treating all employees with respect and fairness. To demonstrate our commitment, we guarantee the right of every employee to voice their concerns and have those concerns heard in an atmosphere of respect and neutrality.

AFFIRMATIVE ACTION

Bayhealth is committed to a policy of affirmative action and we will facilitate the placement of qualified women, minorities, veterans, and individuals with disabilities at all levels of the organization. We believe to be successful in the marketplace, we must employ the best-qualified person for each position while promoting diversity within our workforce.

The commitment to equality and diversity is embedded in Bayhealth's Code of Conduct, which describes zero-tolerance for any form of discrimination, harassment, or retaliation. This commitment is strongly evident in Bayhealth's mission, vision, and values. Bayhealth will continue to strive to build a workforce culture that is welcoming, inspires innovation, professional growth, and respect for all.



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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 Orthopaedics.

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.

Kent Campus



Sussex Campus





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WELCOME TO BAYHEALTH PGY1 PHARMACY RESIDENCY!!

The Bayhealth Postgraduate Year (PGY1) One Residency Program is a one-year training program primarily in an inpatient healthcare practice setting. The PGY1 resident will receive extensive education and training in treating hospitalized patients through guided practice from experienced preceptors. The program is tailored to meet the needs and interests of individual residents.

During the program, PGY1 residents will participate in all aspects of our comprehensive pharmacy service. Learning experiences in acute care practice areas, ambulatory care, pharmacy leadership and management, research, and pharmacy systems are offered. As a vital member of the healthcare team, PGY1 residents will have the opportunity to enhance practice skills that are necessary to evaluate a patient's medication regimen. Throughout the one-year program, PGY1 residents will have numerous opportunities to provide education to patients and other health care professionals. In addition, PGY1 residents will gain experience in providing written responses to drug information questions. The knowledge gained over the course of the program will enable PGY1 residents to competently conduct a research project. In addition, PGY1 residents will be expected to conduct a medication utilization evaluation (MUE) and/or complete a project that will enhance medication safety. Opportunities for teaching pharmacy students and earning a teaching certificate are available.

PGY1 residents will acquire foundation skills needed to become competent and confident clinical practitioners and future leaders in pharmacy practice. Also, PGY1 residents will gain experience in collaborative relationships with health care team members through proactive recommendations during patient care rounds and while working as a decentralized pharmacy team member.

Bayhealth pharmacy started its PGY1 residency program in 2003. The program received ASHP accreditation in March 2005 and was re-accredited most recently in 2017.



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II. 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 outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, to help them become eligible for board certification, prepare for clinical acute care positions, adjunct faculty positions, or for postgraduate year two training in a focused practice area.

III. General Program Outcomes

At the completion of the Bayhealth PGY1 Residency program the PGY1 resident will be able:

- a. To provide quality patient care through collaborative working relationships with other healthcare providers
- b. To design, recommend, and monitor patient-specific treatment regimens.
- c. To provide concise, comprehensive, applicable, and timely response to drug information requests.
- d. To provide effective education to healthcare professional and patients.
- e. To demonstrate professionalism, leadership skills, responsibility, and ethical conduct.
- f. To identify medication safety issues and to improve medication systems to maximize patient safety.

IV. Program's 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.



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- 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.



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- 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.
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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



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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 activities.



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- 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.

V. Requirements for Successful Completion of Bayhealth PGY1 Pharmacy Residency

The PGY1 resident is expected to achieve all of the ASHP required educational outcomes and goals for PGY1 Pharmacy Residency Program and the elective goals selected by the Bayhealth Hospital residency program by the end of the residency year. The PGY1 resident must also achieve 85% of the required and elective objectives under each educational goal in order to complete the residency program. The PGY1 resident must have received a "satisfactory progress" rating on the remaining 15% of the required and elective objectives. Activities required of the PGY1 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. B. Compliance with learning expectations:
 - a. meeting with the 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 Bayhealth Hospital 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 (2)
- All scheduled learning experience presentations (6)
- Preceptor Development CE presentation.
- All scheduled day/evening, holiday, and weekend staffing requirements
- Membership in the American Society of Health-System Pharmacists (ASHP)
- Complete a Drug Formulary monograph and Drug Class review for system review presented at P&T meeting.
- Medication Use Evaluation (MUE) presented at P&T meeting.
- Completion of a major residency research project. Each PGY1 resident will submit an abstract of and present the findings of their major project at the Eastern States Conference/Professional podium. Results of the major project must be submitted to the Residency Program Director in publishable format.



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- 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 EPIC system.
- Provision of pharmacy staffing coverage, including distributive pharmacist functions. This will be achieved by working one weekend every third 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/inter-professional team members.
- Participation and attendance at monthly P&T meetings and provide three meeting minutes.

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, he/she must repeat the learning experience and obtain a SP, ACH, ACH-R on that particular goal or objective by the end of the residency year. The RPD will review the PGY1 residents’ progress throughout the year to ensure the PGY1 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.



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- 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 Pharmacy Residency Certificate will be withheld until all requirements are fulfilled.



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Program Structure

The PGY1 Pharmacy Residency program’s structure is indicated in the table below. Learning experiences are sequenced in such a way that the PGY1 residents have clinical learning experiences prior to Midyear in December, while taking the PGY1 residents’ requests into account. This is intended to assist the PGY1 residents in determining their interest areas as well as evaluate what opportunities to seek at the 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 residents and program.

VI. Residency Learning Experience Schedule

Required Learning Experience	Elective Learning Experience
<ul style="list-style-type: none">• General Orientation (2 weeks)• Pharmacy Systems (5 weeks)• Internal Medicine/Nutrition (8 weeks)• Oncology (4 weeks)• Leadership & Management (4 weeks)• Cardiology (4 weeks)• Critical Care (4 weeks)• Infectious Disease (4 weeks)• Rehabilitation (4 weeks)• Ambulatory Care (4 weeks)	<ul style="list-style-type: none">• Pharmacy Informatics/Economics (3 weeks)• Emergency Medicine (3 weeks)• Family Medicine (3 weeks)• Advanced Oncology (3 weeks)• Medication Reconciliation (3 weeks)

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 learning experiences are to be scheduled the last two months of the residency year.

Longitudinal Experiences:

1. Drug Information/Drug Policy Development and Monitoring/Formulary Management
2. Pharmacy Systems (i.e. staffing) I/ II/III
3. Research Project
4. Pain Management
5. Teaching Certificate Program (optional)
6. Leadership and Management I



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VII. Required

1. Clinical research project for presentation at the Eastern States Residency Conference/Podium Presentation. The project should be of such quality that the written results may be submitted for publication in a peer-reviewed journal.
2. One Drug Formulary Monograph and one Therapeutic Drug Class Review.
3. Design, implement, and complete one MUE project.
4. Complete one medication safety project (may be part of or related to MUE or research project).
5. Update one Policy and Procedure.
6. Three newsletter articles.
7. Two Bayhealth Pharmacy CE presentations.
8. One journal club presentation.
9. Attendance at Midyear (optional) if pursuing a PGY2 residency. Must present a CE presentation from seminar to pharmacy staff.

Miscellaneous Projects

- ACLS/BLS/PALS training (if choosing to complete ED elective)
- 2 community service/lecture/participation events
- Completion of two Technician PEARL presentations
- Nursing/Inter-professional in-service

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

VIII. Required Meetings

1. P&T Committee

IX. Staffing Responsibilities and Benefits

1. Staffing Responsibilities
 - a. The PGY1 resident shall perform and demonstrate proficiency as a Staff Pharmacist during the course of the Program.



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- a. The normal assignment will be eight hours of evening shift per two-week pay period or four hours of evening shift weekly. The evening shift assignment may be scheduled at either Bayhealth campus depending on staffing needs.
 - b. The normal weekend assignment will be every third weekend. This learning experience will include one Saturday and one Sunday for the shift assigned. The weekend assignment may be scheduled at either Bayhealth campus depending on staffing needs.
 - c. The PGY1 resident will be required to work one (1) Summer Holiday and one (1) Winter Holiday. The holiday assignment may be scheduled at either Bayhealth campus depending on staffing needs.
 - d. 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.
 - b. 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.
 - c. Residents, Program Directors, 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 PGY1 residents 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 PGY1 residents with a sound training program must be planned, scheduled and



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balanced with concerns for patients' safety and residents' well-being.

<https://wellbeing.ashp.org/Resources?loginreturnUrl=SSOCheckOnly>

- d. **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.

<https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.ashx>

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 will 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:
 - a) Meeting with the learning experience preceptor to discuss individual goals and objectives for the learning experience.
 - b) Completing assignments by the end of the learning experience.
 - c) Informing the Residency Program Director of difficulties encountered in meeting goals and objectives or problems with preceptor.
 - d) Assuming the responsibilities of the learning experience preceptor in his/her absence.
 - d) 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 and medication use evaluation.
- h. Completion of required presentations throughout the residency.
- i. Maintain and complete a resident-portfolio of accomplishments.
- j. Submission of articles to pharmacy newsletters



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- k. Attendance at the Eastern States Conference for Pharmacy Residents and Preceptors. Attendance at ASHP Midyear (optional) if pursuing a PGY2 residency. Resident must present a CE presentation to pharmacy staff from the seminar.
- l. Attendance at applicable local pharmaceutical education programs is expected. PGY1 residents may attend other professional meetings if the staffing schedule permits.
- l. The PGY1 resident must meet all established deadlines cannot miss more than 2 deadlines on completion schedule. Failure to comply may result in dismissal from the program.
- m. Reading and following the Attendance and Dress Code Policies.
- n. 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 rotation 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 required and longitudinal learning experiences. The self-evaluation will be submitted and discussed with the preceptor.



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- 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 required and longitudinal learning experience.
- 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.



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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

