



### Mercy Health – Fairfield Hospital PGY1 Pharmacy Residency Overview

Craig Ratermann, PharmD, BCPS Residency Program Director, Clinical Coordinator

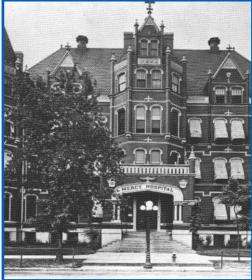


### Mercy Beginnings





Mercy Hospital 1961



Mercy Hospital, 1903

Hurm House, 1892 The first Mercy (Cincinnati) hospital







Groundbreaking 1976

#### **Operating Room**, 1908

# **Hospital Overview**

- •230 bed community hospital
  - Average daily census 200
  - 200+ major cardiovascular procedures annually (CABG, AVR, TAVR)
  - 28 OR/Procedure Rooms including Endoscopy, General and Cardiothoracic Surgery and Interventional Radiology
  - 2 ICUs, 18 beds each including Cardiovascular, Med-Surg, and Pulmonary.
  - 50,000 annual ER visits

### **Recognized Nationally**

- Get With The Guidelines Stroke Gold Plus
- Joint Commission Advanced Certification for PSC
- Healthgrades America's 50 Best Hospitals 2023
- Beckers "Great Hospitals in America" for 2023 (July)
- Magnet Designation for Nursing Excellence (3<sup>rd</sup> Designation 2023)
- Joint Commission Gold Seal Approval for Heart Failure Certification
- AHA Get With The Guidelines Gold Heart Failure
- Nationally Accredited Breast Imaging Center of Excellence
- The Joint Commission Certificate of Distinction, Joint Replacement
- Bariatric Surgery Accreditation through Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- Lung Cancer Screening Center of Excellence

### **Mercy Health – Fairfield Hospital**



- America's 100 Best Gastrointestinal Surgery™ (2024, 2023, 2022)
- America's 100 Best Pulmonary Care™ (2024, 2023, 2022)



### **PGY1 Residency Purpose**

•Build upon Doctor of Pharmacy (PharmD) education and outcomes

•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 postgraduate year two (PGY2) pharmacy residency training

## **Mercy Health- Fairfield Hospital**

- •Why do a residency at Fairfield?
  - Full 8-year accreditation upon 1<sup>st</sup> survey.
  - Family culture
  - Desire for growth
  - Trusted part of our team
  - Professional relationship building

## **Past 5 years Achievements:**

- •Upgraded IV room facilities/Brand New Pharmacy
- •Five specialized pharmacists: Surgery, ER, Internal Medicine, ICU, Oncology
- •Eight BCPS certified pharmacists
- •Increased APPE student acceptance (Findlay, UC, ONU, Butler, MUSC, Lipscomb, Creighton)
- •Poster presentations with our interns, residents, pharmacists.
- •Attendance at ASHP midyear, NPPC, OSHP, ACCP
- •Publications in international journals
- •Presented at International Bariatric Surgery Conference in Madrid, Spain

# Long Term Goals: 5 years

- Residency program development
  - New rotations
- Preceptor/Staff development
  - Specialized board certifications (BCACP, BCOP, BCCP)
  - Research and presentations
    - Published studies/research
    - Poster presentations
- •Full rounding services w/ inpatient medical residency
- •Increased code coverage i.e. 2<sup>nd</sup> shift

# **Diverse Opportunities**

#### •Fairfield Rotations

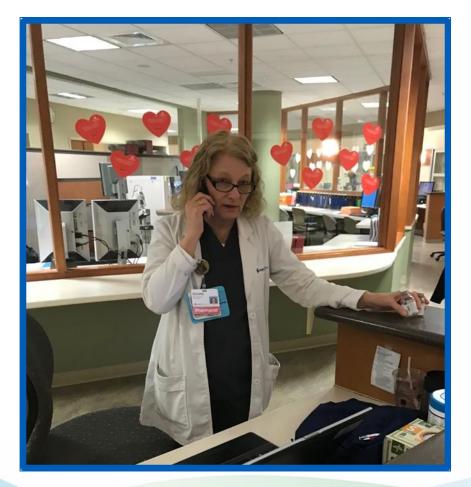
- Orientation
- Staffing
- Internal Medicine
- Cardiology
- Surgery
- Critical Care
- Emergency Medicine
- Oncology
- Ambulatory Care
- Infectious Disease
- Research
- Administration
- Drug Policy and Development
- Patient Safety

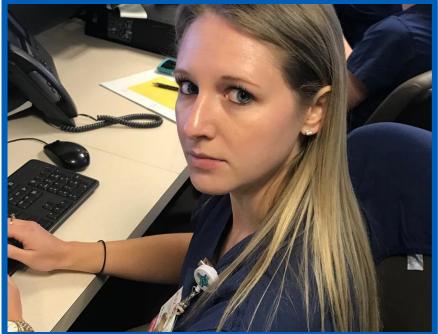
#### •Elective Outside Rotations

- Population Health
- Bone Marrow Transplant



### **Rules & Regulations**





### **Resident Licensure**

 It is expected that the resident will obtain Ohio licensure within 30 days of their official start date

 Failure to obtain Ohio licensure within 90 days from their official start date will result in dismissal from the residency program



### **Duty Hours & Moonlighting**

•Duty hours must be limited to 80 hours per week, inclusive of in house activities and moonlighting

•Minimum of one day in seven days free of duty

• Residents are off duty every other weekend

•Should have 10 hours free of duty between scheduled duty, must have a minimum 8 hours

Max of 32 hours of moonlighting per month
As long as the resident does not exceed the 80-hour limit

### **Duty Hours & Moonlighting**

•If resident elects to moonlight:

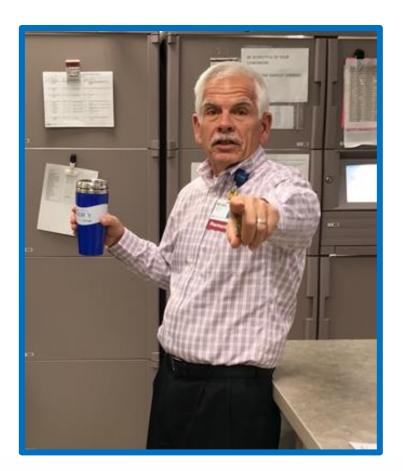
- Notify the RPD of the type and number of moonlighting hours by submitting a *Moonlighting Request Form* at least one week in advance.
- Notify current rotation preceptor of the type and number of moonlighting hours

•Moonlighting must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program

•If preceptor(s) feels the resident's overall performance is adversely affected, the RPD will be notified and a meeting will be set up

- The resident will no longer be allowed to moonlight during that rotation
- This decision can be re-evaluated later in the year

### **Applications & Interviews**



### "We want you!"

## Recruitment

- Listing on ASHP Residency Directory
- •Website
- Attendance of Residency Showcases
  - University of Findlay
  - Ohio Northern University
  - University of Cincinnati
  - ASHP Midyear
  - OSHP



### **Residency Candidate Screening Evaluation Form**

- Leadership
- Work Experience
- Clinical Experience
- Written Communication Skills
- References
- Correspondence
- Interest

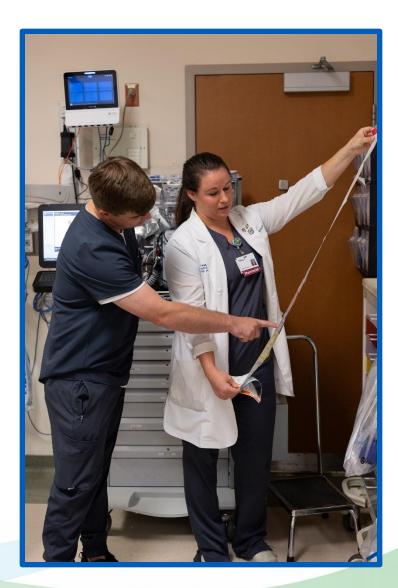


MERCY HEALTH - FAIRFIELD HOSPITAL

## Interviews

#### •4 Interview Days in February

- Program overview
- Tour of the facility
- Rotating Interview with Preceptors
- Q&A with current residents
- Lunch with RPD, a current resident



### **Leadership Roles**

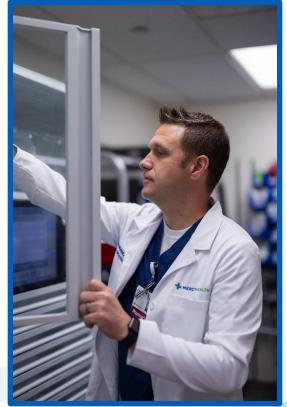




### **Residency Advisory Committee (RAC)**

•Residency Advisory Committee Members for 2024-2025 include:

- Residency Program Director
  - Craig Ratermann, PharmD, BCPS
- Director of Pharmacy Services
  - Jeremy Wolfe, PharmD
- Preceptors/Liaisons
  - Sarah Smith, PharmD, BCPS
  - Kelly Schaub, PharmD, BCCCP
  - Ellie Gillespie, PharmD, BCPS
  - Brockman Sanders, PharmD, BCPS
  - Lein Ghuniem, PharmD



### **Preceptors**

•Members of the clinical and/or administrative staff who serve as preceptors for the various required, longitudinal, and elective rotations

•Preceptors provide:

- Assistance and guidance for achieving competency areas, goals and objectives
- Evaluate the resident's progress during rotations
- Serve as role models

### **MHF Preceptors**

- 2015 & 2019 UF Preceptor of the Year Award
- 2022 UC APPE Preceptor of the Year
- 12 Sunshine Awards
- 7 Partners in Nursing Awards







 APPE precepting: University of Findlay, Ohio Northern University, University of Cincinnati and Butler University

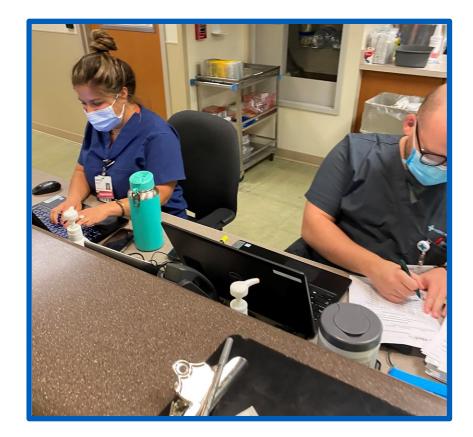


•Each resident assigned a liaison by the RPD at the beginning of the year

•Monitor the resident's progress throughout the residency year including:

- MHF PGY1 Residency Program Orientation Checklist
- Customized development plan updated quarterly
- Coordinate research project and deadlines

### **Learning Experiences**





# **Required Rotations**

- Orientation
- Internal Medicine
- Pharmacy Administration
- Emergency Medicine
- •Surgery
- Critical Care
- Research Month



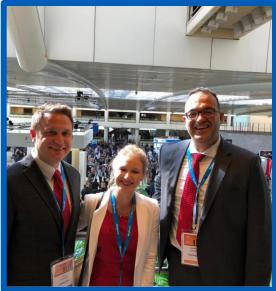
# **Longitudinal Rotations**

- Pharmacy Research
- Pharmacy Staffing
- •Grand Rounds
- Ambulatory Care Clinic
- Teaching Certificate

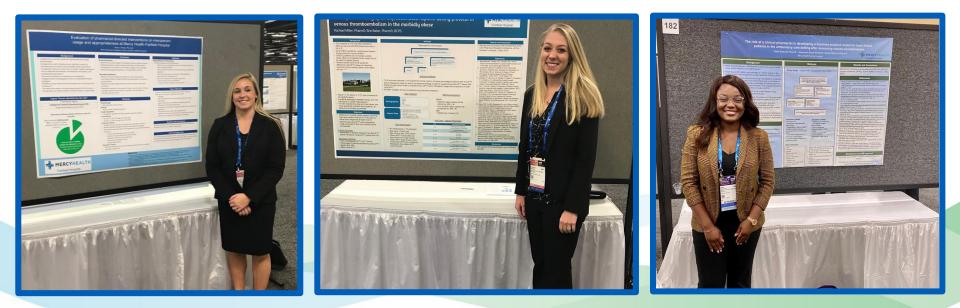


- Pharmacy and Therapeutics Committee
- Patient Safety Committee

### Research



<text><text><text><text><text>



# **Pharmacy Staffing**

•Every other weekend, 2/3 Clinical Services, 1/3 Central Staffing

•Must receive authorization from the RPD before being permitted to staff independently

- Central Pharmacy
- Clinical
- Ambulatory Care Clinic





### **Grand Rounds**

### Four Presentations

- 1 = Research Project Background/Overview
- •2 = Resident Choice
- 3 = Regional Residency Conference Presentation
- •4 = Resident Choice



# **Elective Rotations**

- Ambulatory Care
- Cardiology
- Infectious Disease
- Population Health
- Oncology



- Bone Marrow Transplant at The Jewish Hospital
- •Advanced ICU, ER, or Internal Medicine

### **Evaluations**



### **Formative Feedback**

•Preceptors give ongoing verbal feedback to the resident

- Frequent
- Immediate
- Specific
- Constructive
- •"Stop, Start, Continue" Method once per rotation
  - Via Feedback Tab in PharmAcademic

•Document feedback in the Preceptor Communication Folder on the share drive

# **Midpoint Evaluation**

•A formal opportunity for the preceptor and resident to come together to discuss the current progression of the rotation

•Any barriers to the rotation? Any issues that need to be addressed?

### **Summative Evaluation**

Conclusion of each learning experience

•Residents must receive and discuss with preceptors, verbal and written assessment in reference to competency areas, goals and objectives in the rotation description

- Verbal should be completed last day of rotation
- Written documented in PharmAcademic within 7 days

### **Resident Self-Assessment**

•On-going self-evaluation and personal performance improvement throughout the residency year

### Comparison of Summative Evaluations

- Internal Medicine
- Grand Rounds
- Pharmacy Staffing
- Am Care



#### Failure of a Rotation

•Preceptor evaluates the resident on all required competency areas, goals and objectives

•A conference will be set up with the resident, the preceptor, the RPD, and site director of pharmacy if:

- A resident receives greater than or equal to **two** "Needs Improvement" for Patient Care objectives
- A resident receives greater than or equal to three "Needs Improvement" for any combination of 1) Patient Care, 2) Advancing Practice and Improving Patient Care, 3) Leadership and Management, 4) Teaching, Education, and Dissemination of Knowledge objectives

#### Failure of a Rotation

•After the conference, the preceptor, the RPD, and site director of pharmacy will decide if the resident fails the rotation.

- If the resident fails, the site director will document a Level I Counseling for the resident's file.
- An action plan for improvement will be included in the counseling and a copy given to the resident.
- The rotation will be repeated either in the following month, or as soon as it can be scheduled.
- If the resident fails the remediation of that rotation or a second rotation, the resident will NOT receive their residency certificate and will be dismissed from the residency.

•The resident has the opportunity to appeal the process in writing and provide his/her point of view to the Residency Advisory Committee. The RAC will vote on the matter once the resident has had the opportunity to present their case. The decision of this committee is final.

#### **Other Activities**



## **Teaching & Education**

•Opportunity to develop presentation and instructional skills through various education and training programs in the Department of Pharmacy and also Pharmacy Residency Networks

•Participation in these programs occurs within individual rotations and through additional activities

- Attendance of Greater Cincinnati Society of Health-System Pharmacists (GCSHP) events
- Providing educational programs to multidisciplinary staff during rotations
- Presenting research at the ASHP Midyear Clinical Meeting and a regional pharmacy conference
- Grand Rounds
- Precepting IPPE and APPE students

## **Teaching Certificate**

#### Optional

•Affiliated with the James L. Winkle College of Pharmacy (University of Cincinnati)

- Formal seminars on precepting philosophy
- Skills Labs, Formal Lecture, Breakout Sessions
- Development of teaching portfolio

•All former residents have completed certificate

## **Hospital Committee**

•Residents are required to serve longitudinally on the:

- Pharmacy & Therapeutics Committee
- Patient Safety Committee

•Gain experience in the decision making process encountered with committee work as well as multi-disciplinary interactions in a setting outside of clinical practice



#### **Pharmacy Fun**









#### **Pharmacy Fun**







#### **Professional Development**

•Membership and participation in professional organizations is highly encouraged

- Should be an active member of the ASHP
- Encouraged to be in OSHP, OPA, ACCP

•Utilize opportunities for publication of unique case reports and drug information questions

•Spend informal time with various members of the staff at social occasions as well as professional meetings

#### **Successful Completion**















#### **Successful Completion**

•With the completion of all established program requirements, the resident is awarded a graduation certificate. These requirements include:

- 93% achieved for residency of required rotation competency areas, goals and objectives as documented by completed and appropriately signed evaluations in PharmAcademic
- Up to date resident folder on the Pharmacy Share Drive including:
  - Final research project manuscript
  - Rotation pertinent assignments, projects, and presentations
  - Completion of MHF PGY1 Residency Program Report Checklist
- Attendance of ASHP Mid-year Clinical Meeting
- Attendance of a regional pharmacy conference and presentation of final research project results

•Voted on by the Residency Advisory Committee in the final month of the residency year

#### **Residency Banquet**

•Celebrate accomplishments and graduation of current residents





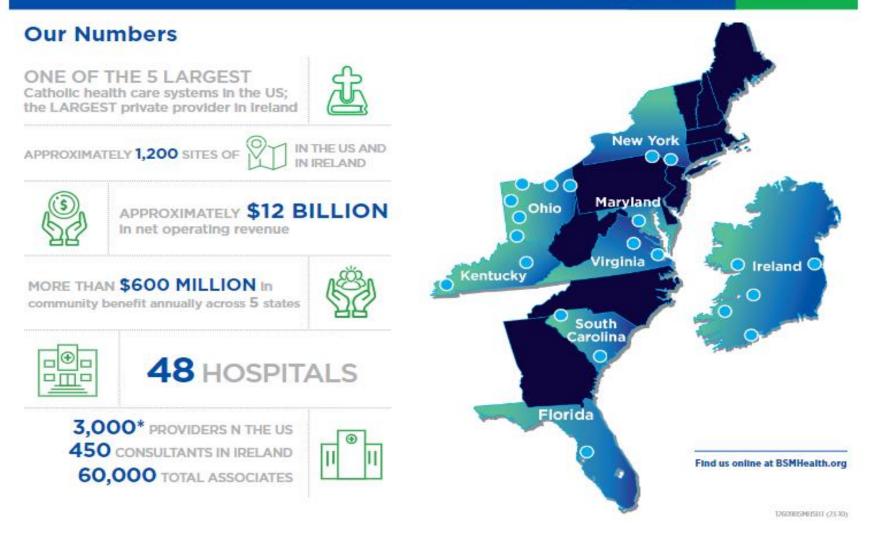
#### Dismissal

•Residents can be dismissed from the residency for the following reasons:

- Failure to obtain Ohio license within 90 days
- Failure of two rotations
- Substance abuse in or outside of the institution
- Endangering patient welfare
- Unprofessional/unethical behavior, including modifying preceptor's evaluations of the resident's performance
- Unprofessional/unethical conduct in settings outside the institution

•The resident will also adhere to the values and expectations and will be subject to the disciplinary guideline and process of Mercy Health – Fairfield Hospital.

#### BON SECOURS MERCY HEALTH



# **Questions?**

