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**BILL GATTON**  
**COLLEGE *of* PHARMACY**

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**EAST TENNESSEE STATE UNIVERSITY**

**PGY1 Community-based Residency Program**  
**Pharmacy Residency Manual**

Bill Gatton College of Pharmacy  
East Tennessee State University

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## Dean's Welcome

On behalf of the faculty, staff and students at the Bill Gatton College of Pharmacy, I would like to welcome you to the "Gatton Family". I'm confident that it shouldn't take long for you to recognize that the culture of our College is one of the most important elements of our success. The simple fact that you were chosen by the faculty from a large number of applicants speaks volumes about you and your professional success to date.

I look forward to seeing you grow and progress throughout the coming year. You will have an opportunity to make a difference in the health and well-being of the patients we serve. In addition, I hope that you will help make the residency program better for those who follow you in the years to come.

Please know that I am available to assist you in any way during your time at ETSU. I am excited that you have chosen the Gatton College of Pharmacy in your endeavor to further your professional education.



Debbie C. Byrd, PharmD, MBA, BCPS  
Dean and Professor  
Bill Gatton College of Pharmacy  
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## Residency Program Leadership

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Residency Program Director

**Julie Scott, PharmD, BCPS**  
Site Coordinator – Boone Drug

Approved by PGLT:

6/20/19

Original 7/2/18; updated: 6/20/19, 11/11/19

# Residency Program Overview

## Residency Program Purpose

PGY1 community-based pharmacy residency programs build on the Doctor of Pharmacy (PharmD) education and outcomes to develop community-based pharmacist practitioners with diverse patient care, leadership, and educational skills who are eligible to pursue advanced training opportunities including postgraduate year two (PGY2) residencies and professional certifications.

The PGY1 Community-based Pharmacy Residency Program at East Tennessee University Gatton College of Pharmacy prepares graduates to be leaders and innovators in community practice, with the goal of elevating pharmacy practice and improving patient health outcomes both in our region and nationally. Pharmacists will develop the skills and confidence to implement, evaluate, and sustain patient care services. Upon completion of our program, residents are qualified to practice independently and have the capability to adapt to future changes in healthcare.

## Program Outcome

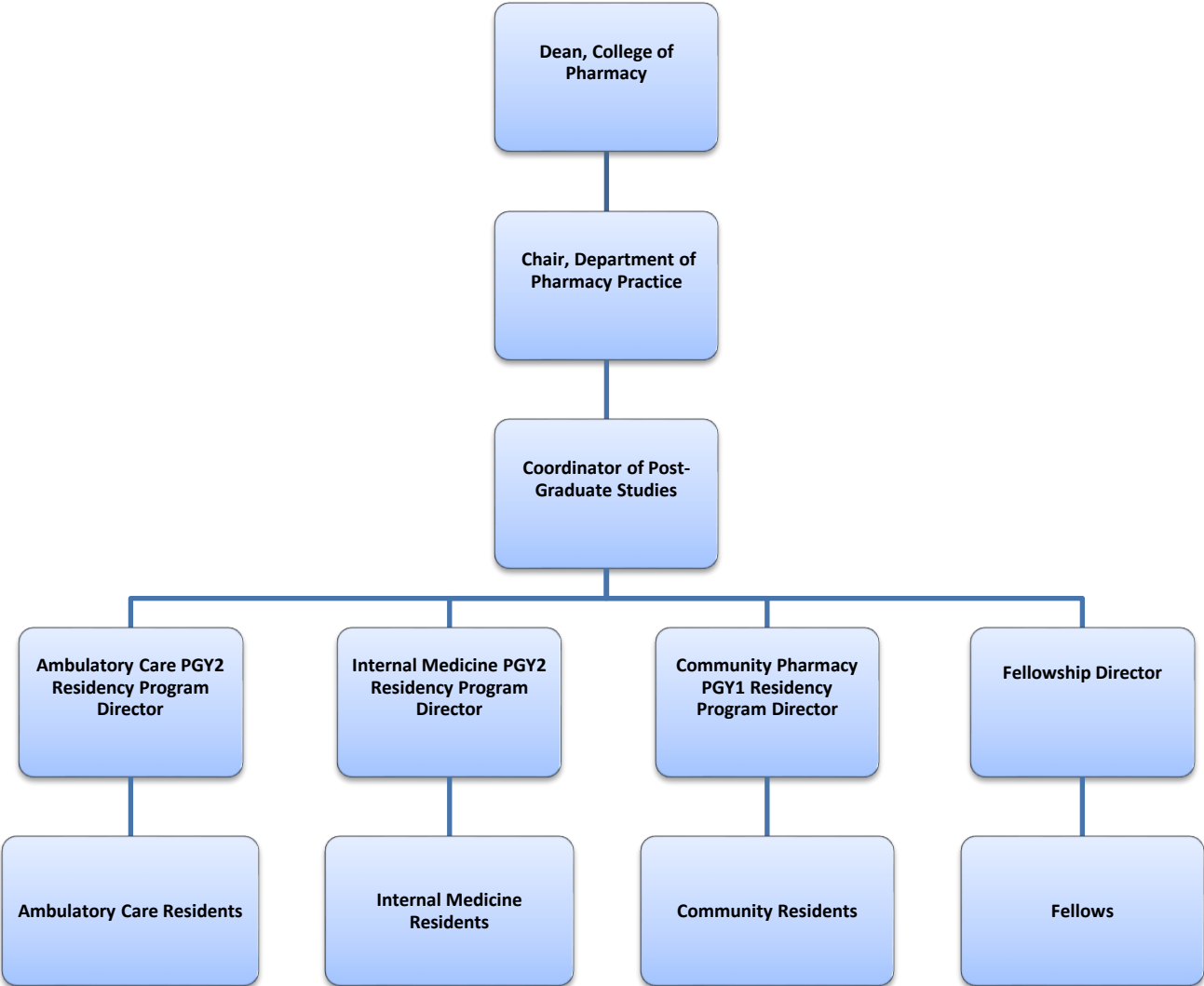
The PGY1 Community-based Pharmacy Residency Program at East Tennessee State University Gatton College of Pharmacy is intended to be a broad-based learning and practice experience. Through a combination of practice locations,

The community-based pharmacy residency program focuses on generalist patient care and development of advanced patient care services implemented in community pharmacy settings.

## ASHP Competency Areas, Goals, and Objectives

Available here: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/pgy1-ashp-apha-newly-approved-community-based-pharmacy-residencies-2016>

**Residency Program Organizational Chart**



### **Qualifications of the Residency Program Director**

The Residency Program Director (RPD) is appointed by the Chair of the Department of Pharmacy Practice to oversee the residency program; however, the Department Chair has ultimate responsibility for the program. The RPD serves as a role model in pharmacy practice and has demonstrated leadership within the organization through documented improvements in and contributions to pharmacy practice, maintains high professional ideals, and contributes to the profession. Moreover, the RPD has a desire and aptitude to teach. The RPD has earned an advanced pharmacy degree and completed an ASHP-accredited residency and/or equivalent experience.

### **Qualifications of the Site Coordinator**

The Site Coordinator is appointed by the Residency Program Director, in cooperation with the practice location and the partnering organization. The Site Coordinator must be a licensed pharmacist who meets the minimum requirements to serve as a preceptor, must practice at the site at least the hours per week, must have the ability to effectively teach in a clinical practice environment, and must have the ability to direct and monitor the resident's and preceptors' activities at the site (with the RPD's direction and oversight).

### **Qualifications of the Preceptors**

Each rotation is assigned a qualified pharmacist preceptor. Preceptors are selected based on their demonstrated competence in their respective area of practice, professional education and experience, and desire and aptitude for teaching. Some preceptors have completed residency training or have obtained equivalent qualifications and experience.

### **Residency Team Member Functions and Responsibilities**

#### ***Chair of the Department of Pharmacy Practice***

The Department Chair identifies the Coordinator of Post-graduate Studies and Program Directors. Ultimately all residents report to this individual. The Department Chair provides contracts to residents after release of the residency match results and, if necessary, dismisses the resident. The chair also:

- Promulgates policies, procedures, and guidelines regarding the residency programs
- Ensures financial viability of post-graduate training programs
- Provides adequate resources for training and development of residents and preceptors
- Facilitates recruitment efforts, including coordination of the ASHP Midyear Clinical Meeting (e.g., Residency Showcase and Personnel Placement Service)
- Certifies that all residents meet graduation requirements, along with the Dean, upon recommendation of the individual program director(s)

### ***Coordinator of Post-Graduate Studies***

This individual coordinates activities for all post-graduate training programs and reports directly to the Chair of Pharmacy Practice, including recruitment efforts. This individual also assists with accreditation for all programs and coordinates activities of the Tri-Cities Residency Consortium (TCRC). The Post-Graduate Leadership Team (PGLT) is also organized, coordinated, and led by this individual.

### ***Teaching and Learning Certificate Program Coordinator***

This individual maintains the Teaching and Learning Certificate (TLC) Program and works directly with member institutions of the TCRC to include interested residents within the region. This individual reports directly to the Chair of Pharmacy Practice. The Coordinator of Post-Graduate Studies will also work closely with this individual.

### ***Residency Program Directors***

The Residency Program Director (RPD) is appointed by the Department Chair to direct, coordinate, and oversee of their individual residency program, in close association with the Department Chair and Coordinator of Post-graduate Studies. The RPD serves as Chair of the Residency Advisory Committee (RAC) for their program and may serve as a preceptor within the program. The RPD is accountable to the Department Chair and is responsible for the following:

- Assume primary responsibility for recruitment and promotion of the program
- Coordinate potential resident applications, interviews, ranking, and hiring of the resident
- Evaluate the qualifications of applicants to the pharmacy residency program through a documented, formal procedure based on predetermined criteria
- Ensure residents are adequately oriented to the residency
- Develop individualized plans for each resident during orientation
- Plan residency activities and schedules
- Confirm overall program goals and specific learning experiences are met
- Monitor that resident evaluations based on pre-established learning objectives are routinely conducted
- Perform quarterly evaluations and adjust the residents' individualized plans
- Oversee progression of residents within the program and documentation of completed requirements prior to recommendation for certification
- Ensure that appropriate preceptorship for each rotation is provided
- Maintain communication with residents throughout the program to ensure an optimal experience and to resolved and problems or difficulties
- Ensure program offerings meet ASHP accreditation requirements and coordinate the ASHP/APhA Community Pharmacy Residency accreditation application, site visits, and attainment of Candidate Status/Full Accreditation



- Evaluate Residency Program Design and Conduct at least annually through on-going continuous quality improvement measures and/or annual program review with the residency advisory committee
- Conduct exit surveys with the resident(s) for feedback on program design and conduct
- Appoint qualified preceptors, orient new preceptors to the program, and oversee preceptor development
- Attend all major residency activities
- Represent residents on the Post-graduate Leadership Team
- Process residents' leave requests and monitor resident duty hours
- Assist in the update/revision of the pharmacy residency manual
- Track residency graduates as they leave the program

### ***Site Coordinator***

The Site Coordinator is appointed by the Residency Program Director, in cooperation with the practice location and the partnering organization. The Site Coordinator serves as extension of the RPD to manage and oversee the day-to-day operations of the residency program and to coordinate implementation at an individual practice site of the residency program. The Site Coordinator also serves as a preceptor in the program. The Site Coordinator is accountable to the Residency Program Director and is responsible for the following (in addition to preceptor responsibilities to follow):

- Ensure resident is adequately oriented at the practice site
- Plan orientation schedules for resident
- Contribute to program recruitment efforts, in conjunction with the RPD
- Monitor progression of the resident within the program
- Maintain communication with the resident throughout the program to ensure an optimal experience and to resolved and problems or difficulties
- Serve as a member of the Residency Advisory Committee (RAC)
- Participate in continuous quality improvement measures and/or annual program review with the RAC
- Work with the RPD to identify preceptors for the residency program and contribute to development of staff to become preceptors for the program

### ***Preceptors***

Each rotational experience is directed by a pharmacy preceptor who is responsible for:

- Develop and maintain learning experience descriptions for rotations when serving as primary preceptor, including identifying activities that will facilitate the achievement of rotational goals and specific learning objectives, in conjunction with the Residency Program Director

- Review the rotational goals, specific learning objectives, expectations, and progression timeline with the resident at the beginning of the rotation (learning experience orientation)
- Introduce the resident to the general work area and people with whom he/she will be working and describe the daily activities and work flow patterns involved in the rotation, including useful information such as frequently used phone numbers and where to find forms
- Meet with the resident on a regularly scheduled basis
- Utilize the four preceptor roles (i.e., instructing, modeling, coaching, facilitating) to enhance resident learning as appropriate throughout the residency year
- Help the resident achieve the rotation objectives by providing direction to the appropriate resources
- Provide ongoing, frequent, immediate, specific, and constructive formative feedback to residents about they are progressing and how they can improve, as well as to make appropriate adjustments to learning opportunities in response to observations and interactions
- Document formal, specific, actionable, criteria-based summative evaluation of the resident's progress toward achievement of educational goals and objectives for the learning experience; must to be written and documented within PharmAcademic within 7 days of the due date
- Contribute to the recruitment and review of applicants to the residency program
- Participate in the continuous quality improvement process for the residency program
- Participate in preceptor development opportunities

### ***Residency Program Support Staff***

All support staff members assigned to the Department of Pharmacy Practice work directly with the Department Chair, Coordinator of Post-graduate Studies, and RPDs to provide support for the program, including:

- Complete necessary documents for employment (e.g., signed contracts, original transcripts, residency completion certificates, background checks, immunizations)
- Ensure all required paperwork is completed and sent to human resources/payroll
- Archive human resource folders
- Submit annual residency program payment to ASHP (January)
- Support recruitment efforts (e.g., ASHP Midyear Clinical Meeting)
- Schedule interviews
- Prepare office space for residents (e.g., supplies, keys)
- Distribute materials before the residency (e.g., residency manual, related documents)
- Organize orientation (e.g., schedule, agenda, orientation books)
- Coordinate and support TCRC events

- Provide general support of residents (posters, lab coats, forms, etc.)
- Complete travel support documentation
- Support Post-Graduate Leadership Team meetings (schedule, agendas, minutes)
- Prepare program documents for accreditation by the American Society of Health-System Pharmacists

Office of Graduate Medical Education, College of Medicine

- Completes Banner documentation
- Orients residents to program benefits

## **Criteria for Appointing and Reappointing Preceptors**

Preceptors are appointed by the Residency Program Director, in cooperation with the site coordinator and partnering organization, after being qualified consistent with the criteria outlined in the Standards. Preceptors are reviewed biannually and discussed as part of the program's quality improvement process and any recommended changes are proposed by the RPD for approval by the Residency Advisory Committee (RAC). Evaluation of preceptor performance includes review of the submitted ASHP academic and professional record, review of resident evaluations, compliance with documented functions and responsibilities, and adherence to preceptor development plan.

Preceptors who cannot maintain required expectations or fail to meet quality standards may be identified for development. The RPD will design an individualized preceptor development plan that the preceptor will be required to adhere to and show appropriate improvement within a set timeframe. Additionally, placement of residents with this preceptor may be postponed. Preceptors who are not compliant or who continue to fail to meet quality standards will be removed from the roster. Following approval by the RAC, the RPD will notify the preceptor's supervisor of the change in preceptor status.

## **Preceptor Development Program**

All preceptors must agree to complete professional development activities. Preceptors are encouraged to complete their development by attending sessions at local, regional, or national meetings and other programming relevant to their practice areas of expertise.

### *Preceptor Orientation*

All new preceptors will participate in an orientation session with the Program Director or designee to provide an overview of the design and conduct of the residency program and requirements of preceptors involved in the program prior to any instruction of the resident.

### *Initial Assessment*

All preceptors must complete the ASHP academic and professional record form or fill out the necessary informational fields in PharmAcademic. Academic and professional records must be reviewed by the Program Director or designee. Preceptors agree to participate in residency program preceptor development requirements. Preceptors who do not meet the requirements as outlined in Standards 4.3 and 4.4 of the *ASHP Accreditation Standard for Postgraduate Year One (PGY1) Community-based Pharmacy Residency Programs* will be designated as preceptors-in-training and will be assigned a mentor and complete a targeted preceptor development plan to achieve qualifications within two years (next section).

### *Bi-Annual Live Event*

The college should sponsor a preceptor development session bi-annually. This will incorporate clinical topics along with programming specific to preceptor development at the level of student pharmacists. Preceptor development at the level of residents may also be additionally provided. Event planning shall be coordinated by the Office of Experiential Education. Guidance and oversight of content should be provided by the Experiential Education Committee and Experiential Education Advisory Board.

### *Online Development*

The college partners with the Collaborative Education Institute (CEI) and Pharmacists' Letter to offer preceptor development activities. These activities will be provided to our preceptors, including student and resident preceptors, at no charge and offer an online alternative to live programming. Development activities offered via CEI are monitored by Office of Experiential Education staff and logged in the online program management system (E\*Value). It is the responsibility of the preceptor to notify the RPD of completion of residency specific modules by documenting in the annual preceptor development report.

### *Preceptor Feedback of Instruction*

Preceptors shall be provided feedback via resident assessment per the assessment plan as outlined in the residency manual and individual learning experience descriptions. Preceptors may access their evaluations at any time in PharmAcademic. Any concerning evaluations of preceptors completed by the resident will be brought to the attention of the RAC.

### *Documentation and Assessment of Preceptor Development Needs*

Preceptors will document completed development hours and activities in a biannual preceptor self-assessment and development report, submitted to the RPD for review in the spring. The RPD will review the residents' evaluations of preceptors and learning experiences to identify potential preceptor development needs, as well as to solicit verbal feedback from the resident annually prior to completion of the program. The RPD will review the ASHP residency accreditation site visit recommendations, if applicable, to identify any recommendations or areas of partial compliance pertaining to precepting skills.

### *Review of Effectiveness of Preceptor Development Plan*

The RPD and Residency Advisory Committee will identify preceptor development needs and will review the effectiveness of the current preceptor development offerings during the program's annual continuous quality improvement process. Recommendations will be shared with PGLT.

## Preceptor-in-Training Development Plan

Preceptors who do not fully meet the eligibility, qualifications, or responsibility requirements for preceptors as outlined in the *ASHP Accreditation Standard for Postgraduate Year One (PGY1) Community-based Pharmacy Residency Programs* are designated as preceptors-in-training. The subsequent plan will guide the development of these preceptors to achieve full qualifications within two years. The plan is targeted towards any preceptor who is new to precepting residents or lacks preceptor training experience.

### *Development Plan*

1. Read and discuss “Guidance Document for the ASHP Accreditation Standard for Post-Graduate Year One (PGY1) Community-based Pharmacy Residency Programs” with RPD
2. Read East Tennessee State University Gatton College of Pharmacy Residency Manual and review components with RPD or designee
3. Complete preceptor orientation
4. Appoint an advisor to mentor the preceptor-in-training (the advisor will also be required to co-sign any summative evaluations completed by the preceptor-in-training)
  - Advisor should assist with experience set-up, idea expansion, feedback/evaluation process, and serve as support when questions arise
5. Sign-up as a preceptor for ETSU Gatton College of Pharmacy Office of Experiential Education
  - Receive access to *Pharmacists’ Letter*, Collaborative Education Institute (CEI), and college-sponsored preceptor development sessions
6. Fill out ASHP Academic and Professional Record and Preceptor Self-Assessment and Development Report
7. Initiate precepting of IPPE or APPE students
  - May benefit from starting with IPPE students and transitioning to APPE students, depending on scheduling and availability
8. Initiate precepting of resident
9. Active participation in preceptor development activities (including offerings through professional organizations)

### *Potential Topics for Developing a Preceptor-in-Training*

Effective, criteria-based feedback	How to write letters of recommendation	What to include in rotation orientation	Managing layered learners
Structuring rotations	Crucial conversations	Motivating learners	Precepting challenges
Conflict resolution	Career counseling	PharmAcademic tutorial	Problem-based learning
4 preceptor roles and when to use them	From Phillips H et al. <i>Assessment of current practices for developing “preceptors in training.” Am J Health-Syst Pharm. 2017; 74: 669-71.</i>		

## Residency Advisory Committee (RAC)

The Residency Advisory Committee (RAC) is established in accordance with the American Society of Health-Systems Pharmacists (ASHP) Accreditation Standards for Residency Programs.

- A. Purpose: The purpose of the RAC is to guide the overall residency program with respect to the ASHP Accreditation Standards and to ensure that program leadership and preceptors are engaged in the design and oversight of the program.
- B. Responsibilities and Functions:
- Reviews, maintains, and assures that the residency program is in compliance with current ASHP accreditation standards
  - Contributes to the design of the core residency curriculum by reviewing, maintaining, and updating the educational and experiential learning experiences of the residency program, which will also be consistent with the current ASHP guidelines and Residency Learning Model
  - Annually reviews recommendations from the RPD regarding qualifications and appointment of preceptors and establishes their functions and responsibilities
  - Assures that overall residency program goals and specific learning objectives are met, training schedules are maintained, appropriate preceptorship for each rotation is provided, and resident evaluations are conducted
  - Establishes residency applicants' requirements, applicant procedures, and formal review process for evaluation and selection of the resident
  - Approves recruitment and marketing plan for residency program
  - Annually reviews the incoming resident's individualized plan for residency, training schedule, and learning objectives and quarterly reviews the resident's progress in the residency and updated development plan
  - In conjunction with other identified experts in research, reviews potential residency research proposals for feasibility, research design, practice implications, and unique contribution to the literature
  - Conducts corrective actions and dismissals as necessary, under the advisement of the Residency Program Director
  - Oversees the program's continuous quality improvement process and conduct an annual review of the program's design
- C. Membership: The RAC is comprised of the RPD, the Site Coordinator(s), and 1-2 primary preceptors per site that are involved in core learning experiences that occupy the majority of the resident's time per week (20-40% or greater). Other preceptors affiliated with the program may be invited to RAC meetings as needed and engaged in RAC activities; residents may also be asked to participate, when appropriate.
- D. Meetings and Minutes: The RAC will meet approximately every quarter (or more frequently as needed) and will maintain a permanent record of its proceedings and actions. The RPD will create the agenda. Minutes of each meeting will be prepared by a designated member and will be maintained by the RPD.

## Post-Graduate Leadership Team (PGLT)

The Post-Graduate Leadership Team (PGLT) is established based upon the needs and request of the Chair of the Department of Pharmacy Practice.

- A. Purpose: The purpose of the PGLT is to coordinate the post-graduate activities within the ETSU Gatton College of Pharmacy. This committee differs from the RAC in that it provides a much broader oversight of post-graduate related issues, above and beyond what is needed at the individual program level.
- B. Responsibilities and Functions:
- Coordinate the activities of the college of pharmacy related to post-graduate training including all accredited and unaccredited residency and fellowship programs
  - Support program directors in providing professional and preceptor development activities
  - Plan and execute recruitment activities for post-graduate training activities
  - Oversee policies and procedures relative to post-graduate training to ensure as much standardization as possible
  - Review research efforts of post-graduate trainees to ensure quality and logistical feasibility as it relates to the respective programs
  - Provide oversight of the Teaching and Learning Certificate Program
  - Oversees the programs' continuous quality improvement process and ensures programs conduct ongoing quality improvement as necessary
- C. Membership: The Post-Graduate Leadership Team (PGLT) is comprised of the Chair of the Department of Pharmacy Practice, the Coordinator of Post-Graduate Studies, the directors of all post-graduate training programs within the College, and staff responsible for supporting the residency and fellowship programs. The Coordinator of Post-Graduate Studies serves as Chair and provides leadership and oversight.
- D. Meetings and Minutes: The PGLT will meet approximately every month and will maintain a permanent record of its proceedings and actions. Minutes of each meeting will be prepared by a designated staff member and will be maintained by the Coordinator of Post-Graduate Studies.



## Tri-Cities Residency Consortium

The Tri-Cities Residency Consortium (TCRC) consists of pharmacy residency programs in the Tri-Cities area of Northeast Tennessee. The Gatton College of Pharmacy (GCOP) is a member of the TCRC and organizes and hosts the group.

- A. Purpose: The purpose of the consortium is to promote postgraduate pharmacy education; specific goals include to facilitate shared residency activities, help individual programs grow and develop together, and collectively elevate pharmacy residency training in the Tri-Cities area. GCOP residents benefit from the consortium by meeting other residents and preceptors in the area and receiving broader feedback related to residency activities (e.g., presentations).
- B. Responsibilities and Functions:
- Collectively elevate pharmacy residency training in the Tri-Cities/Northeast Tennessee
  - Assist sites and residents in conducting research activities by hosting forums for residents to present research ideas and results
  - Coordinate collaborative preceptor development opportunities
  - Enhance resident networking opportunities throughout the residency year
- C. Membership: Any pharmacy post-graduate training program in the Tri-Cities region (Northeast TN) may participate in this consortium.
- D. Meetings: The TCRC meets in July at the resident picnic, in the fall during research presentations, and in the spring during the SERC practice presentations. Additionally, the TCRC should have a meeting once per semester including all program directors (fall and spring) to either discuss current issues relative to residency training and/or preceptor development activities. The post-graduate training coordinator for the Bill Gatton College of pharmacy will serve as the chair of the consortium.

## Selection and Qualification of Residents

### Qualifications of Resident Applicants

Applicants must have a Doctor of Pharmacy degree from an ACPE-accredited college or school of pharmacy and be eligible for licensure in the state of the assigned practice site. Residents must adhere to the rules of the resident matching program (RMP) and be a highly motivated pharmacist who desires advanced education and training leading to an enhanced level of professional pharmacy practice.

### Application Information

To apply for the residency program, applicants submit an application to PhORCAS (<https://phorcas.webadmit.org>). Application components include an official transcript from the college or school of pharmacy, three letters of recommendation, letter of intent, curriculum vitae (CV), and information specifically requested in the PhORCAS application. The deadline to apply is January 5th.

### Recruitment and Selection of Residents

Recruitment of residents for the pharmacy residency program begins at the local state level (Tennessee and North Carolina showcases) and continues at the ASHP Midyear Clinical Meeting at the Residency Showcase. Assessment of applicants begins at these meetings and continues throughout December based on further interactions with applicants.

After receipt of formal applications through PhORCAS, members of the RAC review and rank applicants using a standardized rubric, based on information provided in the application and personal interactions. After applications have been ranked, individuals will be selected for on-site interviews, at the applicant's own expense. Interviews occur during late January, February and early March, and these interviews entail a half day with a presentation of approximately 30 minutes on a clinical topic of the residents' choice. The program uses standardized forms to evaluate applicants during the on-site interview, including an evaluation form for individual preceptor interviews and a form for the presentation.

After interviews are completed, the RAC will reconvene to review interviewees. The RPD compiles evaluation score data and feedback for all applicants from each preceptor and provides aggregated data to the RAC for discussion and consideration in identifying acceptable candidates. Each member of the RAC then creates their own personal rank order list of candidates, and those individual rankings are then shared out amongst the group for discussion and confirmation of any consensus. Ultimately, preference for the overall rank is given to the practice site in any instances of disagreement. This is consistent with the representative nature of the RAC, which is more heavily weighted in membership towards the practice site versus the sponsoring organization. The RPD compiles the final ranking of candidates and submits to the National Matching Service. Once match results are released, the Chair of the Department of Pharmacy Practice extends formal contract offers on behalf of the College.

### Pre-Residency Requirements

Residents will be required to provide certain documents prior to formal employment. Specific requirements will be requested by Department of Pharmacy Practice staff after the matching process has occurred. Documents include items such as federal employment forms, vaccination documentation, and pharmacy license, once earned. Additionally, all residents are required to participate in a pre-employment background check to be arranged and paid for by the College. Incoming residents are expected to have scheduled all of their board exams (and preferably sat for them) prior to the start of residency. Understanding that scheduling can be difficult, accommodations will be made within the first month of the program. Failure to pass required board exams within the first 90 days of the residency will result in individual review by the RPD, development of a remediation plan between the RPD and resident, and/or dismissal from the program. Residents must be licensed pharmacists for at least 2/3 of the residency year, per ASHP Residency Standards.

## Residency Practice Sites

### **Boone Drugs, Inc.; Boone, NC**

#### **Mission**

Boone Drug seeks to honor God by providing for our community the pharmaceutical, medical, nursing, and health needs through personal, caring, and professional service to our patients and their caregivers.

#### **Description**

Boone Drugs, Inc. consists of seventeen independent community pharmacies across North Carolina, South Carolina, and Tennessee and including a specialty pharmacy, two long-term care pharmacies, and multiple collaborative practice sites in the surrounding region. The primary practice site is at Boone Drug & Healthcare at Deerfield, located in Boone across from Watauga Medical Center. Boone Drug participates in the Community Pharmacy Enhanced Services Network (CPESN) to address the needs of patients with complex, chronic conditions. Additional innovative clinical services offered by the site include: clinical medication synchronization, collaborative practice under a Clinical Pharmacist Provider (CPP) embedded in local provider offices, medication therapy management (MTM), immunizations, compounding, point-of-care testing, and other health and wellness services. The resident will broaden their clinical knowledge through active participation in patient care and interactions with experienced preceptors at the site. Additionally, the resident will play a key role in the implementation, expansion, and enhancement of services.

Other resident opportunities include: precepting pharmacy students at the practice site and during outreach events; participating in a Teaching and Learning Certificate program through the College of Pharmacy; teaching in a classroom setting; providing education to patients and professionals; learning key community pharmacy management skills; and planning and completion of a practice-based research project, with the expectation of presenting the results at a national meeting and preparing a manuscript suitable for publication.

## Residency Year Calendar

Residency Year Learning Experience Planning Calendar											
July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
Orientation (1st month only- 45 hrs/wk)											
Patient Centered Dispensing I (0.5 Day Weekly; August - December)						Patient Centered Dispensing II (0.5 Day Weekly; January - June)					
Medication Management Services (2.5-3 Days Weekly; August - June)											
MMS I			MMS II			MMS III			MMS IV		
Collaborative Care (1 Day Weekly (Monday); August - June)											
Project (0.5 Day Weekly; July - June)											
Teaching (Various Dates; August - June)											
Management (2 hours Weekly; Varies)											
Leadership (1-2 hours Weekly; Varies)											

July Orientation	August-September (Q1)	October-December (Q2)	January-March (Q3)	April-June (Q4)
<ul style="list-style-type: none"> <li>✓ College and practice site(s) orientation</li> <li>✓ Residency elective experience selection</li> <li>✓ Specific residency goals and evaluation points established with the RPD</li> <li>✓ Dates and deadlines for major activities finalized</li> <li>✓ Teaching and Learning Certificate Program enrollment</li> </ul>	<ul style="list-style-type: none"> <li>✓ Blocked rotations begin</li> <li>✓ Continuing education program advisor identified</li> <li>✓ Residency project advisor identified</li> <li>✓ Project development and submission for IRB approval, as necessary</li> </ul>	<ul style="list-style-type: none"> <li>✓ Quarterly residency evaluation (revise goals as necessary)</li> <li>✓ IRB approval secured and residency project implemented, including data collection</li> <li>✓ ASHP Midyear Clinical Meeting attendance (December)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Quarterly residency evaluation (revise goals as necessary)</li> <li>✓ Residency project finalized and prepared for presentation</li> <li>✓ Present research poster at APhA Annual Meeting</li> <li>✓ Manuscript preparation</li> <li>✓ Recruitment of the next year's resident(s)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Quarterly residency evaluation (revise goals as necessary)</li> <li>✓ Present residency project at SERC</li> <li>✓ Manuscript finalized</li> <li>✓ Portfolio for Teaching and Learning Certificate Program submitted</li> <li>✓ Final residency evaluation</li> <li>✓ Residency notebook submitted to RPD</li> </ul>
As scheduled throughout the year: <ul style="list-style-type: none"> <li>✓ Longitudinal projects</li> <li>✓ Continuing education program</li> <li>✓ Teaching activities</li> </ul>				

## **Expectations for Professional Practice**

### **Professional Conduct**

The Gatton College of Pharmacy embraces the educational philosophy and values of East Tennessee State University and is committed to the following core values:

#### Academic Excellence

We strive to achieve excellence in teaching, scholarship, and service to the university, local, and professional communities.

#### Professionalism, Integrity, and Character

We aim to create an environment that instills professionalism, integrity, empathy, a high standard of ethical behavior, and the highest professional commitment to the patient, the community, and the employer.

#### A Caring Community

We endeavor to create a caring community characterized by mutual respect, patience, kindness, and generosity, and one that respects, values, and promotes the dignity and diversity of faculty and students.

#### A Culture of Service

We strive to create a culture that values and promotes service to our patients, school, community, and profession.

#### Lifelong Learning

We pursue a passion for lifelong learning and a commitment to personal and professional growth as we serve our patients, community, and profession.

#### Creativity

We hope to create an atmosphere open to new ideas and to foster an environment that provides opportunities for students to explore their individual passions and desires pursuant to the profession of pharmacy.

### **Professional Dress**

The resident will dress professionally in business attire when in contact with patients, other healthcare providers, or students unless otherwise instructed. When the resident represents the College to another healthcare provider or patient, he/she should also wear a long white medical coat with appropriate labeling. Residents must adhere to any additional guidelines in place at each assigned practice site.

**Employee Identification Cards**

The resident must wear his/her name badge when conducting the business of the College or affiliate institution.

**Confidentiality**

The resident will have access to confidential information regarding patients and students. This information must remain confidential and may not be disclosed to any unauthorized individuals in accordance with HIPAA (<http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/>) and FERPA (<http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>), respectively. In addition, confidential information can never be included in emails of any kind. Violation of this confidentiality policy is grounds for dismissal from the program. ETSU requires all personnel with patient care responsibilities to complete the university's online mandatory HIPAA training modules.

**Attendance**

Residents are required to attend all professional functions dictated by the RPD, residency leadership team, and rotation preceptors. Residents are responsible for their assigned duties of the residency program (e.g., rotations, staffing, etc.), and to assure commitments are met in the event of an absence. All leave requests should be submitted in advance to the RPD after discussion with relevant preceptors. An excused absence is defined as leave approved by the RPD.

## General Responsibilities of the Resident

### Employment Eligibility

Residents must meet state and federal guidelines for employment (I9 documentation).

### Pharmacy Licensure

Residents must obtain a license to practice pharmacy in the state of the assigned practice site within the first 90 days of the start date of the residency. The license must remain in good standing with the state's Board of Pharmacy for the entirety of the training period. Failure to obtain or maintain an active license as stated above may result in the resident being dismissed from the residency training program.

### Health Status Documentation Requirement

Residents are required to provide documentation of immunization to measles, mumps, rubella, diphtheria and polio and record of any past immunization against or infection with varicella (chicken pox). Results of a skin test for tuberculosis within the past six months must also be provided. If BCG was administered in the past, please note this. Furthermore, documentation of immunity to Hepatitis B by serologic testing must be provided. If this documentation is lacking, the incoming resident will be required to obtain Hepatitis B vaccination at the time of employment. It is the resident's responsibility to provide the required immunization and tuberculosis skin test data prior to initiating clinical duties. Failure to do so will delay the resident's participation in the program. Compliance with OSHA and CDC safety, bloodborne pathogen and infection control guidelines is also required.

### Pharmacy Malpractice Insurance

Professional liability insurance coverage will be provided by the Tennessee Claims Commission Act (TCA 9-8-301 et seq) for the period of agreement only. Claims made after the termination of training will be covered if based on activities of the educational program and occurred during the agreement period. This coverage does not extend to any practice of pharmacy for activity outside the pharmacy education program of the University. **The resident must obtain supplemental liability insurance at his/her expense.** Each resident is responsible for any liability incurred in the operation of vehicles used in transportation to assigned duties.

### Basic Life Support

Each resident will successfully complete basic life support training or ensure that their certification is up-to-date.

### Professional Memberships

Residents are strongly encouraged to join their state pharmacy association and the American Pharmacists Association.

## General Residency Requirements

Learning Experience Name	Type (Rotational, Longitudinal, Extended, Concentrated)	Duration - Total Number of Weeks (Max 50)	Estimated Time Spent Per Week in Learning Experience (Estimated Hours per week)
<b>Orientation</b>	Rotational	<b>4</b>	<b>40</b>
<b>Patient Centered Dispensing I</b>	Longitudinal	<b>24</b>	<b>5</b>
<b>Patient Centered Dispensing II</b>	Longitudinal	<b>23</b>	<b>5</b>
<b>Medication Management Services I</b>	Extended	<b>8</b>	<b>27</b>
<b>Medication Management Services II</b>	Extended	<b>12</b>	<b>27</b>
<b>Medication Management Services III</b>	Extended	<b>12</b>	<b>27</b>
<b>Medication Management Services IV</b>	Extended	<b>12</b>	<b>27</b>
<b>Collaborative Care</b>	Longitudinal	<b>47</b>	<b>8</b>
<b>Teaching</b>	Longitudinal	<b>40</b>	<b>2</b>
<b>Project</b>	Longitudinal	<b>50</b>	<b>4</b>
<b>Management</b>	Longitudinal	<b>45</b>	<b>2</b>
<b>Leadership</b>	Longitudinal	<b>45</b>	<b>1</b>
<b>Electives (1 per resident)</b>	Rotational	<b>4</b>	<b>30</b>



### **Inclement Weather**

Residents are to follow practice site policy when inclement weather occurs. Under extreme conditions, the University and/or practice site may choose to officially close, delay, or suspend selected activities. An official statement of closing will be posted on the University's web page, broadcast over several area radio and television stations, including the University's radio station, WETS-FM, and distributed via the ETSU GoldAlert Messaging System. (Residents may sign up for GoldAlert by going to <https://www.getrave.com/login/etsu>.) Residents are responsible for monitoring these sources for announcements and contacting the RPD and/or preceptor for further instructions.

### **Duty Hours Policy**

Resident duty hours will reflect and reinforce the resident's obligation for adequate, continuous patient care while at the same time recognizing that prolonged and difficult practice duties detract from this obligation. The residency program adheres to the ASHP policy regarding duty hours.

Duty hours must be limited to 80 hours per week, with 1 day off for every 7 days worked, when averaged over a four-week period, inclusive of all in-house call activities and all moonlighting. Residents should have 10 hours free of duty between scheduled duty, and must have at a minimum 8 hours between scheduled duty periods. The resident creates a monthly calendar outlining their responsibilities and hours, which is then reviewed by the RPD. In addition, the resident is required to complete an evaluation at the end of each month in PharmAcademic where they document duty hours worked that month and any moonlighting hours worked that month. The evaluation is reviewed and cosigned by the RPD and interventions are made as needed. Complete details are available in the [ASHP Duty-hour Requirements for Pharmacy Residencies](#). Residents and preceptors must adhere to these requirements at all times without exception. While it is the prerogative of the resident to decide whether to engage in moonlighting, the resident is required to discuss the potential moonlighting site, work activities, and hours of service at that site with the RPD before committing to any moonlighting activity. The RPD will assist the resident in determining how moonlighting could affect the resident's duty hours and his/her ability to fulfill the goals and objectives of the program.

### Definitions

*Duty Hours*: 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 (not applicable to this residency program); 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 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 RPD or preceptor.

Scheduled Duty Periods: Assigned duties, regardless of setting, that are required to meet the educational goals and objectives of the residency program. These duty periods are usually assigned by the RPD or preceptor and may encompass hours which may be within the normal work day, beyond the normal work day, or a combination of both.

Moonlighting: Voluntary, compensated, pharmacy-related work performed outside the organization (external), or within the organization where the resident is in training (internal), or at any of its related participating sites. These are compensated hours beyond the resident's salary and are not part of scheduled duty periods of the program.

### External Employment Procedure

Employment not related to the resident's training program (moonlighting) is permitted only with approval of the RPD. All hours worked as outside employment fall under the restrictions outlined in duty hours. The University can require the residents to be rested and alert while performing their duties. The RPD is responsible for addressing a resident's fitness for performance of duties. Violation of this policy could result in disciplinary actions up to and including dismissal from the program.

The resident will receive information during the orientation month regarding duty hour requirements. For each of residency quarter, the resident will complete a Request for External Employment (Moonlighting) form (see appendix) and submit it to the RPD or his/her designee. At the beginning of each quarter, the resident must discuss with the RPD and Site Coordinator other responsibilities associated with the residency program (e.g., longitudinal rotation activities) and/or moonlighting obligations that will impact the resident's duty hours.

It is the responsibility of the resident to alert his or her RPD and Site Coordinator if he/she feels inadequately rested to safely participate in patient care on any given work day. Before beginning any moonlighting assignment, the resident will talk with the RPD about the assignment, the duties and work hours of the assignment, and jointly assess how it might impact duty hours or the resident's ability to complete the goals and objectives of the program.

A resident may moonlight for the practice site where they are completing their residency; however, he/she needs to receive prior approval from the RPD and Site Coordinator using the External Employment (Moonlighting) form. If a resident seeks external employment, he or she must give first priority to the practice site at which the residency occurs. If opportunities for external employment are not available at the residency site, the resident has permission to seek other external employment, if desired. Moonlighting hours may not exceed 12 hours per month unless the resident received prior approval from the RPD and Site Coordinator. If moonlighting hours result in the resident violating the program's duty hours policy, and the resident does not respond to a first warning from the RPD about the violation, the resident may be terminated from the residency program upon the second offense that is caused by moonlighting hours. If the RPD or Site Coordinator observe that the external employment is taking precedence over the residency program, the resident may be asked to decrease or

terminate the external employment. Failure to comply may compromise continuation in the program.

## **General Required Activities**

### **Project**

Each resident will complete a research project. Residents will identify a project mentor, submit a project selection form (with approval), adhere to the general timeline below, and submit the project for IRB approval.

July	Meet with RPD and research team to discuss research process and potential research topics; receive IRB protocol training
Mid-July	Select research topic; perform a literature search
Mid-August	Present residency project proposal/specific aims to college faculty and preceptors
September	Draft and submit poster abstract for APhA Annual Meeting; draft and submit an application for an APhA Incentive Grant
October	Submit project to research office and/or IRB
Nov - Dec	Begin data collection once IRB approval achieved
January	Begin research poster development
February	Draft and submit SERC abstract; end data collection and begin data analysis
March	Present research poster at APhA Annual Meeting; prepare for SERC presentation; begin drafting manuscript
Mid-April	Practice SERC presentation (present research project initially to college faculty and preceptors, then Tri-Cities Residency Consortium)
Late-April	Present research project at Southeastern Residency Conference (SERC)
May-June	Finalize manuscript (the project must be submitted to the RPD in a finalized form sufficient for publication)

### **Continuing Educational Presentation (see appendix form)**

Each resident will be required to develop and deliver a one-hour ACPE-accredited presentation to local pharmacists during his/her training year. A mentor should be identified early on in the program for this activity. The topic is ultimately approved by the RPD.

### **Journal Club**

Residents will complete journal clubs as part of individual residency programs. The specific requirements may vary by practice site and preceptor and will be provided by the individual preceptor.

### **Teaching Responsibilities**

Each resident will complete the Teaching and Learning Certificate Program during their year (see separate document providing a description of the Teaching and Learning Certificate Program).

### **Resident Mentors**

Residents will have a preceptor for each learning experience. Selected individuals will also serve as mentors for major activities, including 1) the residency project and 2) continuing education program. During the first two months of the program, the resident must, in conjunction with the RPD, identify one mentor for the residency project and one mentor for the continuing education presentation. The RPD may serve as one or both of these roles, if the resident so chooses.

### **Professional Meeting Attendance**

Each resident is provided financial support for professional development which will be used to support attendance at professional meetings. Travel expenses covered include: mileage to and from meetings, registration fees, airfare, cab fare, and hotel expenses. In order to receive reimbursement, the resident will need to follow the travel policies set by the University. Sharing of hotel rooms with other residents, faculty, or staff may be required, when available, to reduce costs. Exceptions to sharing hotel rooms will be handled on a case-by-case basis with the RPD. Lower cost hotel rooms will be encouraged over higher cost rooms. Residents must begin researching their airfare at least 2 months prior to travel to ensure the best price available. Meeting registrations must be submitted before the early registration expires. The resident will be responsible for keeping all receipts to receive full reimbursement.

All residents will be required to attend the following meetings:

1. ASHP Midyear Clinical Meeting
2. APhA Annual Meeting
3. NCAP Annual Convention and Residency Showcase
4. Southeastern Residency Conference (SERC)

Approval from the RPD must be obtained before residents are allowed to bring spouses, other family members, or friends with them on residency-related travel. If the resident chooses to bring a guest(s), he/she may be responsible for ½ of the cost of the hotel room during the stay.

Guests or spouses are not permitted to stay in shared rooms with other postgraduates without prior approval.

Additional meetings may be required by the site and any travel support would be provided outside of the University. Requests to attend additional meetings must be approved by the RPD and Site Coordinator prior to travel.

### **Participation in Recruitment Efforts**

Each resident will assist with program recruitment efforts. In addition to attendance at the ASHP MCM and state-specific residency showcases, each resident will serve as a source of information and advice for potential candidates. During interviews scheduled in January, February and March, there will be scheduled times for interviewees to interact directly with current residents. Residents will also follow-up with candidates and ensure all questions have been adequately answered.

### **Travel**

#### *Local Travel*

Travel to and from the central residency location and home is not reimbursable, nor is travel between the central residency location and the College. If the resident is required to visit a pharmacy or site >40 miles from the worksite, mileage may be submitted for reimbursement. Residency Program Director must provide preapproval of all local travel requests.

## Residency Portfolio

Each resident will maintain a documentation of activities completed throughout the residency year, either as a hard copy or in a shared electronic folder. The residency notebook is a permanent record and it is the property of the Gatton College of Pharmacy. The resident is encouraged to keep a copy of the notebook. The notebook will include, at a minimum:

- a) Initial customized residency plan with schedule
- b) Learning experience descriptions
- c) Graduation checklist
- d) Resident's quarterly individualized learning plans
- e) Handouts of any in-services provided to nurses, physicians or other healthcare professionals
- f) Handouts from any continuing education programs presented
- g) Patient education materials created
- h) Final documents for projects (i.e. CPA, CQI, business plan, etc.), when applicable
- i) Handout/slides/poster from presentations of research project, as well as any other documentation from research project development (i.e. IRB submission, grant application, etc.)
- j) Manuscripts submitted or prepared for publication
- k) Community service projects
- l) Monthly patient care tracking reports
- m) Teaching and Learning Certificate (TLC) Program Portfolio, including student assessment of resident teaching performance, mentor evaluations, and any teaching materials
- n) Experiential student calendars, activities, and evaluations
- o) Curriculum vitae
- p) Copies of any certifications earned during the residency year
- q) Documentation from any professional conferences or workshops attended
- r) Documentation of any awards or achievements
- s) Personal narratives

Other items will be documented electronically in PharmAcademic for each resident:

- t) Resident's initial customized residency plan and interest survey
- a) Any documented formative evaluations of resident performance
- b) Preceptors' summative evaluations of resident performance
- c) Resident's formative and summative self-evaluations
- d) Resident's evaluations of learning experiences and preceptors
- e) Resident's quarterly individualized plan for 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> quarters with their schedules

### **Completion of Program Requirements**

The ASHP Accreditation Standard for Residency requires a minimum of a 12-month, full-time practice commitment or equivalent for the resident. In the view of this minimum requirement, all residents must participate in the residency for a twelve month period with allowable annual, sick, and authorized leave.

A certificate will be issued on the recommendation of the Dean after completion of satisfactory service. This certificate and any letters of verification will be issued only after the resident has completed all requirements, has settled all financial obligations to the university and affiliated practice sites, and has returned all practice site and university property. Residents who successfully complete the program will have exhibited professional conduct, dress, and appearance (as outlined in manual) throughout and will have adhered to all applicable rules, regulations, policies, and procedures of the resident's assigned training site(s), the College, and all other partnering organizations.

At a minimum, the resident must complete the following to be awarded a certificate of completion:

- All rotations and key rotational requirements/activities must be successfully completed (see grid in resident's development plan)
- All resident self-evaluations must be completed (if not, give plan)
- All resident evaluations of their rotations and preceptors must be completed (if not, give plan)
- Completion of the ETSU Gatton College of Pharmacy Teaching and Learning Certificate Program
- Prepare and deliver at least one continuing education program
- Co-precept a minimum of two (2) students at the practice site, and serve a primary preceptor of record for one (1) APPE student rotation at the practice site
- Prepare and submit a business plan for a new or enhanced service
- Complete a research project, including presentation of results (preferably both a poster and a podium presentation) at agreed upon conference(s) and submission of a complete manuscript suitable for publication
- Submission of a residency portfolio with all required work
- Of the required objectives for the residency program, a minimum of 90% must be graded as Achieved (ACH), with the remaining objectives graded as Satisfactory Progress (SP)

Residents will also be required to complete a check-out checklist during the last month of the residency, which includes items related to evaluations, exit interview, and administrative tasks.

### **Options for Extending the Residency**

If a resident believes he/she is unable to meet 90% of the goals of the residency in one year, he/she should inform the RPD in writing as early as possible. The declaration should include which specific goals will not be met and why. The RPD, with advice from the Residency Advisory

Committee and PGLT, will consider the circumstances and determine whether to grant an extension.

If the RPD believes the resident is unable to meet a sufficient number of the goals of the residency, as outlined below, in one year, the RPD should inform the resident in writing as early as possible. The letter should include which specific goals are not likely to be met. If a resident does not meet the sufficient number of the goals of the residency in one year, the RPD, with advice from the post-graduate leadership team, will consider the circumstances and determine whether to grant additional time. Typically, additional time will only be granted in lieu of extenuating circumstances, such as medical or health related problems, not for suboptimal performance, particularly for significant extensions of time.

### **Resident Disciplinary Action and Dismissal**

The resident may face disciplinary action if he/she violates any policy in this manual or his/her contract, is unprofessional, insubordinate or otherwise inappropriate, or is dangerously incompetent. In addition, residents may be dismissed for failure to demonstrate adequate progress towards the achievement of residency program outcomes, including goals, objectives, and activities, and for failure to perform assigned job duties.

Violations should be reported to the RPD. The RPD, along with the department chair, will discuss the violation(s) with the resident and document the meeting. The discussion and documentation should include a description of the violation, the seriousness of the violation, and a plan of correction.

If the behavior continues and/or is particularly egregious, the resident may be subject to dismissal from the residency program. Such serious violations will be reported to the post-graduate leadership team, which will offer advice to the RPD in regards to appropriate action. If the post-graduate leadership team determines a behavior is grounds for suspension or dismissal, the recommendation will be forwarded to the Chair of the Department of Pharmacy Practice, who has the final decision whether to suspend or terminate a resident's contract.

In the event of dismissal, the resident may appeal the Chair's decision by submitting a written appeal within five business days to the Dean of the College, who will charge the Associate Dean of Academic Affairs or another designee to form an ad hoc committee as outlined below. The committee will hear the appeal and make recommendations to the Dean. The Dean will render a decision within ten business days of the resident's submitted appeal. The decision of the Dean is final.

Extension of timeframe: should event(s) occur that significantly affect the notification timeframe listed above, the resident or administration may be granted an extension by the Dean. Such extension may be prospective or retrospective.



**Due Process**

Any resident who wishes to appeal a suspension or termination from their program may request a hearing before an ad hoc committee as outlined above. This committee shall consist of not less than three faculty members from the college and/or preceptors and one resident from the Tri-Cities Residency Consortium (TCRC), to be appointed by the Dean in collaboration with the Chair of Pharmacy Practice. Committee members may be selected from the PGY1 programs at affiliated hospitals who actively participate in the TCRC.

**Grievance Procedure**

If a resident believes he/she has been treated or evaluated unfairly, he/she may report this to the RPD, or where the RPD is the offender, the Chair of the Department of Pharmacy Practice in writing within five business days of the actual occurrence. The RPD or Chair of the Department of Pharmacy Practice shall develop a plan of action and communicate the plan to the resident, preceptor and/or RPD, and other appropriate individuals within five business days. If the resident is unsatisfied and wishes further recourse regarding the plan or implementation of the plan, the resident may further appeal the Chair's decision within five days to the Dean, who is the final authority on the appeal.

## **Residency Evaluation Procedure**

The residency program utilizes ASHP's Residency Learning System and PharmAcademic.

### **Initial evaluation with the residency program director**

At the beginning of the residency program, residents will complete a self-evaluation that is used to guide the individualized plan. This assessment includes review of strengths and areas for improvement as well as unique goals the resident would like to achieve during the year. The RPD in consultation with the resident will develop the individualized plan, which will be revised and modified as appropriate on a quarterly basis and shared with all preceptors in the program.

### **Preceptor evaluation of learning experiences**

With each learning experience, the preceptor will provide at least quarterly summative evaluations to the resident for longitudinal rotations or otherwise as defined in the learning experience description and consistent with the Standards. The evaluations will be based on the goals and objectives assigned to the learning experience and activities identified to meet those objectives. Preceptors will provide criteria-based feedback and qualitative written comments that are specific and actionable. Evaluations are to be completed by the due date or within 7 days. The RPD will receive a copy of each evaluation to review.

### **Self-evaluations of learning experiences**

At the end of each learning experience and at other invited times, the resident will evaluate his/her own performance based on the goals of the learning experience and make comments. In addition, the resident must evaluate themselves on their progress toward all the goals of the program during each quarterly evaluation.

### **Evaluation of preceptors and rotations**

After each learning experience and at other invited times, the resident will evaluate that learning experience and the preceptor. This includes staffing, longitudinal experiences, and block rotations.

### **Quarterly evaluations with the residency program director**

At each quarterly evaluation, the RPD will read the evaluations from the learning experiences since the last quarterly evaluation, as well as the resident's self-evaluation. He/she should then evaluate the resident on his/her progress toward the goals of the program. Quarterly evaluations are also opportunities to re-evaluate the appropriateness of residents' goals and customized training plan and revise them as necessary. Short-term goals for the next quarter should also be set if necessary. All plans will be documented in PharmAcademic and shared with preceptors.

### **Ongoing programmatic assessment**

The PGLT will discuss each program during routine PGLT meetings. Trainee updates should be provided at each meeting by the respective program director. Additionally, post-graduate

trainees will receive a formal assessment at the end of the training period. This assessment will be evaluated by the program director, the PGLT and college administration.

### Evaluation of preceptors

Preceptors are evaluated on an ongoing basis per the Preceptor Evaluation Plan. Components of the evaluation process include the residents' evaluation of the preceptor for each learning experience. Residents are required to complete a written preceptor evaluation at the conclusion of each experience. Residents should feel free to alert their respective RPD to any specific issues as soon as they arise for particularly concerning or egregious issues.

### Evaluation of learning experiences

Learning experiences (LEs) are evaluated on an ongoing basis. Residents are required to complete a written LE evaluation at the conclusion of each experience. Residents should feel free to alert their respective RPD to any specific issues as soon as they arise for particularly concerning or egregious issues.

### Rating Scale Definitions

The following scale will be used for summative evaluations completed in PharmAcademic:

Rating	Definition
Needs Improvement (NI)	Resident is not performing at an expected level or displays deficiencies in knowledge/skill in this area at the time of evaluation; significant improvement is needed. Resident's progress will not result in achievement of objective. Resident often requires assistance to complete the objective and/or is unable to ask appropriate questions to supplement learning. Resident may display unprofessional behavior or fail to meet set deadlines.
Satisfactory Progress (SP)	Resident is performing and progressing at a level that should eventually lead to mastery of the goal/objective and displays adequate knowledge/skill at the time of evaluation. Requires some assistance, but is able to ask appropriate questions to help build understanding. Progressing as expected; improvement evident.
Achieved (ACH)	Resident can consistently perform associated activities independently for this learning experience and has fully mastered the knowledge/skill evaluated. Rarely requires assistance and minimal supervision is required.
Achieved for Residency (ACHR)*	Resident can consistently perform associated activities independently across the scope of pharmacy practice. Performance is ideal and meets what is expected of a PGY-1 <u>graduate</u> of the residency program over multiple learning experiences with consistency, independence, and professionalism.
Not Applicable (NA)	Not evaluated at the time of evaluation.

*\*only RPD may determine ACHR, following review of preceptor evaluations*

## Residency Benefits

### Stipend

The university, in order to enable the resident to pursue his/her course of training in the program, will provide the resident a per diem stipend of \$43,000 per annum, based on a 365-day year. The stipend is payable in equal monthly installments on the last working day of each month. The university requires direct deposit.

### Leave (see appendix form)

All leave is granted at the discretion of the RPD and must be approved in advance and in writing by the RPD or his/her designee. The resident must contact the RPD via email or by phone in the event of urgent sick leave.

Residents are expected to carry out any duties or assignments as directed by their RPD on Federal or State holidays, unless other arrangements are made by the RPD according to departmental policy. Residents may be required to “make-up” any time missed in accordance with the residency program.

#### Annual Leave (AM)

A total of ten (10) days (75 hours) of paid annual leave is granted during the fiscal year and must be approved by the Residency Program Director. Annual leave is usually considered as a short leave of absence from duty during the usual working week; however, the Program Director reserves the right to include weekends and official holidays if he/she believes it to be appropriate based on the resident’s schedule. Any unused annual leave will be forfeited at the end of the contract year.

#### Administrative Leave (LM)

A total of five (5) days (37.5 hours) of paid administrative leave is granted during the fiscal year and must be approved by the Residency Program Director. Administrative leave may be used by residents to interview for positions or attend professional activities not directly related to the residency program. Residents requiring more than 5 days for interviews may use annual leave with the approval of the RPD. Additional administrative leave may be granted at the discretion of the RPD for the purpose of representing the University at professional meetings and recruiting future residents. Any unused professional leave will be forfeited at the end of the contract year.

#### Holidays/Administrative Closing Days

Residents are granted paid time off for holidays and any administrative closing days as determined by the practice site. Seven paid holidays are included in the residency year:

- New Year’s Day; Memorial Day; Independence Day (July 4<sup>th</sup>); Labor Day; Thanksgiving Day; Day after Thanksgiving; Christmas Day

### Sick Leave (SM)

A total of 5 days (37.5 hours) of paid sick leave per fiscal year is provided. Accumulated sick leave is forfeited if University service is contractually interrupted. Sick leave may be deducted for consecutive days of illness, irrespective of weekends and holidays, depending on assigned duties and schedule. Sick leave can only be used for bonafide illness, which prevents the performance of professional duties and cannot be used for vacation, educational leave, professional leave, or other personal purposes. It is the responsibility of the resident to notify the RPD of illness, which prohibits them attending to assigned duties. The RPD has the right to request verification of any alleged illness. Where an employee must be absent because of illness in the immediate family, sick leave may be granted by the RPD. Parental leave will be treated as any other illness. Any unused sick leave will be forfeited at the end of the contract year.

### Family Leave (KM)

In compliance with the Family Leave Act of 1993, it is the policy of the university to provide eligible male and female residents up to twelve workweeks of leave during a twelve-month period for specified family and medical reasons. The resident must use sick and annual leave prior to leave without pay. The resident and the RPD will establish a makeup schedule in accordance with the resident's education program and departmental policy, which may result in a delayed completion date.

### Leave of Absence

Unpaid leave of absence must be approved by the RPD and Chair of Pharmacy Practice. Should any leave interfere with the ability of the resident to complete the requirements of their program as scheduled, such requirements must be completed after the projected completion date of the Program.

### Military Leave

Residents who are on military leave shall be paid their stipend for a period, or periods, not exceeding 20 working days in any one (1) calendar year, plus such additional days as may result from any call to active State duty pursuant to TCA 58-1-106. Residents must furnish the university certification from competent military authority of the dates active duty was actually performed.

## **Insurance**

### Health

The health insurance carrier for residents and their families is United Healthcare. Single or Family coverage is available for residents and their families. Premiums are shared by the College and the resident. All premiums are payroll deducted.

### Life

Basic life of \$50,000 is available for the resident only; no coverage for dependents.

### Disability

Monthly benefits of \$1,000 after 90 days of disability are provided; no coverage for dependents.

## **Academic Appointment**

Residents will receive an adjunct faculty appointment (Clinical Instructor) in the Department of Pharmacy Practice.

## **Travel Support**

Travel to four (4) required meetings will be supported through the program. Additional travel may be supported, particularly for residents who are representing the College, contingent upon fund availability. See more information under the General Required Activities section.

## **Office Space**

The resident will be supplied with adequate dedicated workspace in a convenient location and necessary office supplies.

## **Computer**

The resident will be provided with a computer and internet access that is adequate to perform his/her duties throughout the year. Additionally, the resident will have access to LexiComp® for use on their own personal mobile device.

## **Long-Distance Phone Calls**

The resident will be issued a long-distance code from the Office of Information Technology for work-related use only. The resident will complete the OIT form and obtain the appropriate signatures.

## **Photocopying**

Photocopying is available to residents. The resident will be issued a department code number in order to use photocopiers when necessary.

**Mail**

The resident will have a mailbox in the College. The post office box number for the Department of Pharmacy Practice is Box 70657.

**Parking**

The resident will be required to purchase an ETSU faculty/staff parking sticker for \$50 per year. This parking sticker will allow parking on the VA Campus and the ETSU Main Campus

**Keys**

Keys will be issued to the resident and these must be returned at the end of the residency.

**White Coat**

The College will provide each resident one long white medical coat with the Gatton College of Pharmacy logo and it will be embroidered with the resident's name. Residents may not wear white coats with any other institutional logos while performing resident duties of the College of Pharmacy or affiliated institutions.

**ETSU Library**

The resident will have full access to the ETSU Medical Library's electronic and physical references. The library website is <http://www.etsu.edu/medlib/>.

**ETSU Campus Recreation**

Residents have access to the Wayne G. Basler Center for Physical Activity (CPA) at no cost. The CPA is a 120,000 square foot facility that was built by and operates on student activity fees and is staffed by ETSU student workers. In addition to an indoor track and exercise equipment, ETSU offers programs in:

- Fitness
- Intramurals
- Non-credit instruction
- Outdoor Adventure
- Sports Clubs

Additional information may be obtained at: <http://www.etsu.edu/students/campusrec/>

## **Appendices and Forms**



## Continuing Education Program Selection Form

Resident name: \_\_\_\_\_

Date: \_\_\_\_\_

Proposed continuing education presentation title

Description of the presentation, including an outline, objectives for the audience members, and an explanation of why it is an important, relevant and timely topic

Comments from the residency leadership team (to be completed by RPD)

\_\_\_\_\_  
Signature, Residency Program Director

\_\_\_\_\_  
Date

**Leave Request Form**

East Tennessee State University  
Gatton College of Pharmacy

**LEAVE REQUEST**

**TO:** \_\_\_\_\_ (Residency Program Director)  
**FROM:** \_\_\_\_\_ (Resident)  
**DATE:** \_\_\_\_\_

**I request to use the following type of leave:**

- Annual Leave
- Administrative Leave
- Sick Leave
- Other:

I have verified this request with my assigned preceptor and obtained their approval prior to submission to the RPD

Date(s)

Total Leave Time (Hours) Requested: \_\_\_\_\_

- Approve
- Disapprove

RPD Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**Request for External Employment (Moonlighting) Form**

To: \_\_\_\_\_ (Residency Program Director)

From: \_\_\_\_\_ (Resident)

Date of Request: \_\_\_\_\_

Work Site Name: \_\_\_\_\_

Work Address: \_\_\_\_\_

\_\_\_\_\_

Intended  
Monthly Hours: \_\_\_\_\_

Comments from residency program director (to be completed by RPD)

Decision of residency program director

Approve

Disapprove

\_\_\_\_\_  
Signature, Residency Program Director

\_\_\_\_\_  
Date