## PGY2 Specialty Pharmacy Administration Residency Program Completion of Minimum Program Requirements

- 1. NYS Licensure Per Resident Licensure Policy
- 2. Required goals and objectives
  - a. At minimum, 80% of all objectives must be achieved for the residency per the current ASHP PGY2 Specialty Residency Accreditation Standards.
  - b. The remaining 20% that are not achieved for the residency, must all at the very least, be in satisfactory progress, with no needs improvement.
- 3. Successful completion of all required and scheduled learning experiences
  - a. All assignments and activities of the learning experience as required by the primary preceptor of the rotation must be completed
- 4. Guideline/Topic Discussions
- 5. Plan and Execute Employee Engagement Activities
- 6. Major Project (Quality Improvement or Research Project or Business improvement)
  - Data analysis must be completed and findings presented at professional meeting (ex. UB day, Eastern States or ASHP Summer Meeting)
  - b. A manuscript in a form suitable for publication must be completed prior to the last day of the residency program
  - c. Research follows the flipped model (data collection, analysis, and manuscript at the beginning of the year and new idea, protocol, request for data the 2<sup>nd</sup> half of the year)
- 7. Quality Improvement Project (Morbidity, Mortality, and Improvement Conference or Root Cause Analysis)
- 8. Informatics Evaluation Project
- 9. Develop marketing materials (ex. Social media management, recruitment, patient education)
- 10. Performance evaluation preparation and delivery
- 11. Presentations
  - a. 1 CE accredited presentation
- 12. Medication event reporting/improvement of medication use system
- 13. Pharmacy Intern management
- 14. Committee involvement
  - a. Quality Management Committee: Quarterly Meeting
    - i. Present various survey results:
      - 1. Provider satisfaction annually (administered in July, presented in August)
      - 2. Patient satisfaction annually (Administered in November, presented in February)
      - 3. AHRQ Survey on Patient Safety Culture (SOPS) annually (administered in January, presented in February)
        - a. Subject to change frequency if there is an update to clinical documentation
      - 4. Employee Engagement annually: Stay Survey/Press Ganey (timing varies)
  - b. Clinical Oversight Committee (quarterly)
    - i. Call for agenda items, preparation of agenda and meeting minutes
- 15. Pharmacademic

- a. All assigned evaluations must be completed prior to the last day of residency
- b. Any evaluations requiring resident co-signature must be completed prior to the last day of residency

Requirement progress will be maintained on the resident development plan.

\*\*\*Presentation and/or other requirements may be revised at the discretion of the program director and coordinator during the residency year without prior notice\*\*\*