



## Creating an Effective Resident Development Plan

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- In this session:

All planners, presenters, reviewers, and ASHP staff report no financial relationships relevant to this activity.

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## Learning Objectives

- Define the purpose of a resident development plan (RDP) and how it differs from a quarterly summary of resident progress.
- Demonstrate the major components of an ideal RDP, including three processes for RDP development, communication and use.
- Given a case scenario, develop and discuss a RDP based on a case scenario.



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### Session Outline

- Key Principles and Components of an Ideal Residency Development Plan
  - Darryl Rich
- Creating and Using Residency Development Plans
  - Julie Dagam
- Group Practice Exercise



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### Key Principles and Components of an Ideal Resident Development Plan

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### The Issue

- Frequent findings of partial compliance on ASHP Residency Accreditation Surveys.
  - 3.4d(2) On a quarterly basis, the RPD or designee must assess residents' progress and determine if the development plan needs to be adjusted
  - 71% of surveys scored PC (#3 standard cited)



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### A Story with an Analogy

- Patient Care Plans vs. Resident Development Plans (RDPs)
  - Home infusion vs. Hospitals



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### Standards

- 3.4.a. Initial assessment
  - 3.4.a.(1) At the beginning of the residency, the RPD in conjunction with preceptors, must assess each resident's entering knowledge and skills related to the educational goals and objectives.
  - 3.4.a.(2) The results of residents' initial assessments must be documented by the program director or designee in each resident's development plan by the end of the orientation period and taken into consideration when determining residents' learning experiences, learning activities, evaluations, and other changes to the program's overall plan.



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### Standards

- 3.4d Resident Development Plans
  - 3.4d(1) Each resident must have a resident development plan documented by the RPD or designee.
  - 3.4d(2) On a quarterly basis, the RPD or designee must assess residents' progress and determine if the development plan needs to be adjusted.
  - 3.4.d.(3) The development plan and any adjustments must be documented and shared with all preceptors.

See Guidance Document for 3.4d(1)



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### Purpose of RDPs

- Operative word is **PLAN** – it is a forward-looking document
- Primary purpose is to modify the design and conduct of the program on an ongoing basis to address each resident's unique learning needs & interests.
- Discusses changes in focus & structure of the program for that resident
- Communication tool for upcoming preceptors to tailor their rotation
- A tracking and monitoring tool about the resident's progress over the course of the residency



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### Key Features of RDPs

- Dynamic, based on changing assessment of the resident
  - Lists actions/activities to maximize identified strengths and to improve identified weaknesses
    - Professional knowledge, skills, and abilities related to the educational goals and objectives
    - Personal strengths/issues related to being a professional
  - Tailors the training schedule to the short- and long-term career goals, and learning interests of the resident (*optional*).



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### Key Features of RDPs

Documents all of the following:

- Modifications of residents' schedules (including electives selected)
- Goals and objectives to be emphasized in required and elective learning experiences
- Addition of goals and objectives to required or elective learning experiences
- Modify preceptors' use of modeling, coaching, and facilitation
- Changing and/or increasing number of summative self-evaluations, formative self-evaluations, and preceptors' feedback related to areas for improvement



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### So what if...

- Problem Child vs. Superstar
  - Tailoring to the resident's learning interests/career goals
  - Modifications to the schedule
  - Goals and objectives to be emphasized
  - Additional goals and objectives required
  - Modify preceptors use of the modeling, coaching and facilitation.
  - Changing/increasing evaluations



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### Typical Outline of RDPs

- Identified Strengths
- Identified Weaknesses
- Career Goals
- Learning Desires
- Residency Completion Requirements
  
- A word about format: Multicolumn vs. Transcript



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### Sources of Information

- Summative Evaluations and Feedback– preceptor, non-preceptors, and resident
- Feedback from day-to-day observations, interactions and assessments, including other healthcare practitioners (e.g., MD, RN)
- RPD discussion with the resident and preceptors



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### Common Pitfalls

- Retrospective summarization of resident past activities
- Focus on changes in strengths/weaknesses/needs rather than actions to be taken in response to them
- Stating how unchanged structure (already scheduled rotations) will meet resident needs
- Focus on overall improvements to the program rather than the specific resident's training



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### Common Pitfalls

- No discussion of:
  - schedule changes
  - goals and objectives to focus in upcoming rotations
  - additional evaluations needed
  - stretch goals for superstars



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### Other Common Pitfalls

- Thinking like it is an overall summative evaluation and not a forward-thinking **PLAN**
- Not involving all preceptors in development of the plan
- Plan is developed but preceptors and RPD are not using it to customize the residency training



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## Let's Look at Some Examples

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## From ASHP Website

RESIDENT DEVELOPMENT PLAN EXAMPLE  
SANDY RESIDENT, PHARM.D.

Entering Characteristics	Initial Plan: Changes to Program	1 <sup>st</sup> Quarter Update/ Effectiveness of Changes	2 <sup>nd</sup> Quarter Update
<b>Strengths</b> <ul style="list-style-type: none"> <li>Has a lot of drug distribution experience as a tech lead at this hospital – very competent in this area</li> <li>Gets along well with others</li> <li>Drug distribution</li> <li>Writing skills</li> </ul>	<ul style="list-style-type: none"> <li>Shorten orientation to drug distribution from 4 weeks to 3 weeks with a focus on the pharmacist's role</li> <li>Monitor resident strengths and determine if additional modifications are needed during 1<sup>st</sup> quarter update.</li> </ul>	<ul style="list-style-type: none"> <li>3 week orientation period/drug distribution successful</li> <li>Concur that getting along well with others is a strength</li> <li>Writing skills – concur that this is a strength</li> </ul>	




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<b>Areas for Improvement</b> <ul style="list-style-type: none"> <li>Broaden data base and improve patient monitoring</li> <li>Oncology noted as weakness in patient care skills.</li> </ul>	<ul style="list-style-type: none"> <li>The program provides ample opportunity to improve data base and patient monitoring skills. The desire to work on these will be conveyed to preceptors. Ask preceptor to give additional feedback on patient care skills.</li> <li>Since oncology is an elective area, will not schedule anything to address oncology at this time. She will have some exposure to cancer patients in her required rotations.</li> <li>Review performance related to data base collection and monitoring of patients and determine if any modifications are needed during 1<sup>st</sup> quarter update.</li> </ul>	<ul style="list-style-type: none"> <li>Schedule additional time in Family Medicine to help resident achieve patient care objectives (R1.1.2 &amp; R1.1.4 rated NI during Family Medicine rotation).</li> <li>Continue to request preceptors provide more feedback on R1.1.2 and R1.1.4</li> <li>No change in other areas.</li> </ul>	<b>10/31 Update:</b> To address nervousness impacting presentations and other communications: <ul style="list-style-type: none"> <li>Add Objective E6.2.3: <i>Deliver a practice-based educational activity, including didactic or experiential teaching, or facilitation.</i></li> <li>Add Objective E8.1.1: <i>Design and deliver program for health care consumers that center on disease prevention and wellness promotion.</i></li> <li>Additional objectives added to current rotations and evaluations.</li> <li>Monitor with</li> </ul>	evaluations preceptor and resident feedback. Will update the plan again at the end of this quarter or sooner if need. <ul style="list-style-type: none"> <li>Discussed with Residency Advisory Committee and all of Sandy's preceptors so they can assist with monitoring progress of her continued development.</li> <li>Will meet with preceptors and resident at the end of November to be sure progress is occurring.</li> </ul>
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# 2018 National Pharmacy Preceptors Conference Creating an Effective Resident Development Plan

Resident Progress	Most goals and objectives marked SP. R1.1.2 and R1.1.4 rated NI for patient care skills. Preceptors plan to give additional coaching and feedback in these areas.	<ul style="list-style-type: none"> <li>10/31 Update: Resident has improved on R1.1.2 and R1.1.4. However, she is having difficulty giving presentations and communicating needed information to the health care team due to nervousness. Therefore, Objective E6.2.3 and E8.1.1 have been added to give her more experience and build her confidence.</li> </ul>
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**What's Missing?**



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## Real Example-PGY2

<b>BACKGROUND INFORMATION:</b> <b>Interests:</b> <ul style="list-style-type: none"> <li>Emergency medicine, critical care, ambulatory care, medication safety, administration</li> </ul> <b>Career Goals:</b> <ul style="list-style-type: none"> <li><b>Short term:</b> ED pharmacist, critical care/ambulatory care <ul style="list-style-type: none"> <li>Build a strong clinical knowledge base/foundation and hands on understanding of hospital pharmacy workflow prior to serving in pharmacy administration in order to accurately represent pharmacy and make relevant decisions</li> </ul> </li> <li><b>Long term:</b> Medication Safety, Administration, improving the healthcare system on a large scale</li> </ul>
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<b>Updated Interests (Q2):</b> <ul style="list-style-type: none"> <li>Public health/education/awareness, patient education in general (ex. via career, collaboration, and other means/social media)</li> </ul> <b>Updated Career Goals (Q2):</b> <ul style="list-style-type: none"> <li>Long term goal of improving patient knowledge of healthcare and medications</li> </ul>
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<b>Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Gain exposure to medication safety and administration for a future long term career in medication safety and administration</li> <li>Observe the pharmacy structure, relationships, functioning from a medication safety/administrative perspective</li> <li>Increase experience in emergency medicine</li> <li>Refine skillset and proficiency in emergency medicine and critical care</li> <li>Serve as a knowledgeable and independent emergency department pharmacist</li> </ul>	<b>Changes to Program Based on Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Due to her overlapping interests in medication safety and emergency medicine, assign her Medication Safety projects specifically related to emergency medicine/critical care to create a bridge between medication safety and emergency medicine and to allow her to observe the overall picture of the pharmacy department working in conjunction</li> <li>Based on her residency goal of gaining experience in emergency medicine and serving as an independent ED provider, assign her to the ED night shift practice to allow her to gain independence and confidence as the primary drug information resource</li> </ul> <b>RLS Goals for Q1: (planned)</b> <ul style="list-style-type: none"> <li>R8.3.1</li> </ul>	<b>Effectiveness of Changes to Program Based on Personal Residency Goals:</b> <b>RLS Goals Achieved End Q1:</b> <ul style="list-style-type: none"> <li>Because of her prior knowledge of and experience with the our system and RPD, she was able to quickly orient herself to multiple longitudinal medication safety projects including gain management and her longitudinal research project regarding best practice alerts for medications in older adults and fulfill R6.1.1, 6.2.2, 6.1.3, 6.2.1, 6.2.2, 8.1.1, 8.1.2, and 8.1.3</li> <li>Based on the needs of the medical center and pharmacy department, she fulfilled R7.1.1, 7.1.2, 7.1.3, 7.1.4</li> </ul> <b>RLS Goals for Q2: (planned)</b> <ul style="list-style-type: none"> <li>R8.1.5</li> </ul>	<b>Effectiveness of Changes to Program Based on Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Her short term career goals include gaining experience and working and developing as an emergency department pharmacist. In order to fulfill these short term goals, she completed her elective learning experience in the ED as an independent pharmacist during the night shift which gave her ample opportunity to grow as an independent ED pharmacist who also had her ED preceptors to refer to when in need of guidance</li> <li>Fulfilled goal R8.1.3 by creating and presenting a management case study at a national meeting</li> </ul> <b>RLS Goals for Q3: (planned)</b> <ul style="list-style-type: none"> <li>To incorporate applying medication safety and clinical knowledge abilities, complete R7.2.2 and 7.2.3 and improve patient safety in the emergency department (and elsewhere if applicable on a larger scale)</li> <li>She will be able to fulfill goal R8.1.4 when her house wide research project goes live into the Epic DRB system</li> <li>Based on her realized interest of increasing people's knowledge and awareness of healthcare and safety, having her focus on fulfilling goals R2.4.1, 2.4.2, 2.4.3, 2.4.4, 4.1.1, 4.4.3, 4.5.1, and 2.1.1</li> </ul>
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# 2018 National Pharmacy Preceptors Conference Creating an Effective Resident Development Plan

<b>Strengths:</b> <ul style="list-style-type: none"> <li>Interest and passion for medication and patient safety, dedication to patient safety</li> <li>Detail-oriented</li> <li>Involvement with professional organizations, student pharmacy organizations</li> <li>Gets along well with others</li> </ul>	<b>Initial Plan and Changes to Program Based on Resident's Initial Strengths:</b> <ul style="list-style-type: none"> <li>Initial plan: due to her passion for patient safety and detail-oriented nature, assign her hands-on real world assignments that can directly improve patient safety including creating medication policies and guidelines to improve the current medication process</li> <li>Based on her prior experience with student organizations (APhA-ASP president, APhA-ASP Faculty Advisor), give her more opportunities to work in conjunction with and precept students</li> </ul>	<b>Effectiveness of Initial Plan and Changes to Program Based on Resident's Initial Strengths:</b> <p>Resident Progress:</p> <ul style="list-style-type: none"> <li>RLS Goals Achieved End Q3:</li> <li>As a result of modifying her schedule to incorporate more time in the emergency department, she was able to fulfill goal R4.3.1</li> </ul> <p>Updated Strengths:</p> <ul style="list-style-type: none"> <li>Thorough and comprehensive review of literature, including primary literature, relating to medication safety guidelines</li> </ul>	<b>Effectiveness of Plan and Changes to Program Based on Resident's Strengths:</b> <p>Resident Progress:</p> <ul style="list-style-type: none"> <li>As noted on Dr. Sam's evaluation, with her additional time spent as an independent pharmacist in the ED, she has further developed and improved as a clinical pharmacist in the emergency department</li> </ul> <p>Updated Strengths:</p> <ul style="list-style-type: none"> <li>Improvement in clinical database, prioritization/management of tasks via hands on experience during clinical elective learning experiences</li> </ul>
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<b>Areas for Growth/Improvements:</b> <ul style="list-style-type: none"> <li>Clinical database, expand</li> <li>Prioritization/management of tasks</li> </ul>	<b>Initial Plan and Changes to Program To Incorporate Resident's Initial Areas for Improvement:</b> <ul style="list-style-type: none"> <li>Focus on goal R4.3.1 during the ED Day learning experience to maximize the efficiency of completing a task in a patient-care area that incorporates time sensitive tasks</li> </ul>	<b>Effectiveness of Initial Plan and Changes to Program To Incorporate Resident's Initial Areas for Improvement:</b> <p>Resident Progress:</p> <ul style="list-style-type: none"> <li>RLS Goals Achieved End Q3:</li> <li>By maximizing her exposure to emergency medicine by first following the emergency department pharmacist during the day shift, she was able to refine her knowledge of relevant critical care clinical pearls and receive feedback in real time and fulfill goal R4.3.1</li> </ul> <p><b>Updated Plan To Incorporate Resident's Areas for Improvement:</b></p> <ul style="list-style-type: none"> <li>In order to improve her knowledge base, since the MRCU is a time-consuming learning experience, allow her to focus on her MRCU learning experience by not assigning her any new additional medication safety projects to start during this rotation</li> <li>Due to her involvement in both the medication safety and the clinical fields of pharmacy, create a feasible timeline for the resident allowing enough time for multiple projects to be completed in addition to longitudinal and teaching responsibilities</li> </ul>	<b>Effectiveness of Plan and Changes to Program To Incorporate Resident's Areas for Improvement:</b> <p>Resident Progress:</p> <ul style="list-style-type: none"> <li>The timeline created to manage multiple projects at the same time facilitated Participating in 3 medication safety related research projects with plans to present two of them at national meetings, mentoring a student organization and serving as the primary supervisor and contact for multiple events and competitions including a presentation for the MRCU, creating order set requests in requested format to be implemented by informatics based on house-wide guidelines, being involved with compiling the background information and appropriate personnel resources for multiple service requests to improve the electronic health record system at XXXMAC to optimize medication safety based on reported medication errors, presenting medication safety projects and events at Medication Safety, MERIP, and P&amp;T meetings, researching potential processes and solutions for various medication safety related projects at XXXMAC, serving as a student mentor for the local ASP chapter (SPH), and composing and editing an interdisciplinary quarterly newsletter for the medical center</li> </ul> <p><b>Updated Areas for Growth:</b></p> <ul style="list-style-type: none"> <li>Ability to be concise</li> </ul> <p><b>Updated Plan Based on Updated Areas for Growth:</b></p> <ul style="list-style-type: none"> <li>Challenge her with the task of including only the most pertinent information in her platform presentation of one of her research projects at the Epic RGM national conference</li> <li>In order to practice her ability to prioritize tasks from an administrative/medication safety perspective, one of the goals for the upcoming quarter is for her to single-handedly run a MERIP Core meeting in place of the SPD</li> </ul>
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Not So Good Example		
Entering Characteristics	Initial Plan:	2nd Quarter Update/ Plan
<b>Strengths:</b> <ul style="list-style-type: none"> <li>Charming and Enthusiastic personality</li> <li>Adventurousome spirit as evidenced by moving from across the country for PGY1 residency</li> <li>Prepared (as evidenced by already being licensed in our state at start of residency!)</li> </ul>	<ul style="list-style-type: none"> <li>Staffing/dispensing/IV Room operations</li> <li>Drug knowledge – kinetics, parenteral nutrition, warfarin dosing</li> <li>Disease knowledge</li> <li>Process Improvement/Research methodology</li> <li>Continue developing skills in teaching students (co-precepted an APPE student previously)</li> </ul>	<ul style="list-style-type: none"> <li>Much more comfortable with departmental policies/procedures/protocols</li> <li>Continuing to build rapport with pharmacy, medical, and nursing staffs</li> <li>Much more comfortable talking with patients (via Coumadin clinic patients)</li> <li>Continue to work independently as a practitioner</li> <li>Continue to work on improving time management skills particularly for research projects</li> <li>Continue to work on improving striking the right balance with making recommendations to prescriber when using electronic messaging</li> </ul>

<b>Career Goals</b>	<ul style="list-style-type: none"> <li>Considering PGY2 residency</li> <li>Wants to earn BCPS</li> </ul>	<ul style="list-style-type: none"> <li>Unchanged</li> </ul>
<b>Interests</b>	<ul style="list-style-type: none"> <li>Internal Medicine</li> <li>Infectious Diseases</li> <li>Cardiology</li> </ul>	<ul style="list-style-type: none"> <li>Infectious Diseases and Internal Medicine remain primary interests</li> <li>Gained insights into statistical methods from having completed Drug Info rotation</li> <li>Has become better skilled at knowing best resources for specific types of information (from Drug Info rotation)</li> </ul>
<b>Changes to Program</b>	<ul style="list-style-type: none"> <li>Would like to have designated office space for residents</li> <li>Need a way to directly contact residents (i.e. assigned cellphones) rather than going through paging operator</li> </ul>	<ul style="list-style-type: none"> <li>Recommend continuing offering drug information rotation. Sequence the Drug Info rotation prior to MCM and prior to start of project data collection fits well with timing for skill development. Drug Info also further develops writing skills.</li> </ul>




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### Key Takeaways

- It is a **PLAN** on how the residency will be customized to meet the changing goals/needs/strengths and weakness of the resident
- Comments should be action-focused




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### Creating and Using Resident Development Plans

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PGY1 Pharmacy Residency Director, Aurora Health Care, Milwaukee WI

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### Creating and Using Development Plans

- Describe approaches that can be used to develop, communicate, and use development plans
- Discuss strategies that can be incorporated into the RDP process



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### Presentation and Speaker Expectations

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| <ul style="list-style-type: none"><li>▪ Can do:<ul style="list-style-type: none"><li>▪ Share perspective</li><li>▪ Generate ideas</li><li>▪ “Pro-tips” from personal experience<ul style="list-style-type: none"><li>▪ RPD of 18 residents (35 total)</li></ul></li><li>▪ serving as a guest surveyor</li></ul></li></ul> | <ul style="list-style-type: none"><li>▪ Can’t do:<ul style="list-style-type: none"><li>▪ Guarantee full compliance on these elements of the standard!</li><li>▪ ☺</li></ul></li></ul> |
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### Audience Response Question

Which role best describes you?

- Residency Program Director (RPD)
- Program Coordinator
- Preceptor (not RPD or coordinator)
- Preceptor-in-training
- Student or Resident



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### Audience Response Question

How many residents are in your program?

- 1 resident
- 2-5 residents
- 5-10 residents
- More than 10 residents



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### Does Size Matter?

- Smaller programs may be challenged by not as much “expertise” from other residents
- Larger programs may be challenged by applying the RDP process to multiple residents in a customized manner
- Programs of all sizes can share similar challenges!



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### Setting the Stage

- Set expectations early (orientation)
- Define difference between RDP and summative evaluations



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### Summative Evaluations vs RDP

- Evaluations
  - Skills shown during a learning experience (LE)
  - Components of the RDP
- RDP: Big Picture
  - Skills shown as a practitioner
  - Ties together several LE + strategic checkpoints



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### Setting the Stage: Pro-Tip

- Involve PGY2 residents (or recent residency graduates)
- Discuss how their RDP helped them
  - Develop as a professional
  - Realize their progress quarterly
  - Reflect on their progress
  - Change/adjust focus
  - Celebrate how far they came by the end of their residency vs. at the start
  - Carry those skills into post-residency



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### Developing the Initial Plan

- Use the entering interests and self-assessments
  - Pre-built in PharmAcademic™
  - Collect custom elements (e.g. learning style assessment, experience in certain areas) if relevant to your program's design
- Collect observations from preceptors to verify resident-reported strengths/areas for improvement
- Customize RDP to correspond with SWIG (strengths, weaknesses, interests, goals)



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### Developing the Initial Plan: Pro-Tip

- When customizing each resident's RDP, consider:
  - Learning experience choices/sequencing/repetition
  - Projects
  - Staffing areas
- Consider including activities that help with department needs/program execution
  - Example: education/inservices, wellness fairs, point person for initiating time studies
  - Align with a particular strength or area for improvement



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### Quarterly Updates: What is your biggest challenge?

- ☐ A Finding the time!
- ☐ B It's hard to write an action plan instead of a summary of activities!
- ☐ C The resident already gets great feedback on each LE!
- ☐ D All of the above ☺



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### Quarterly Updates: Finding the time

- Pro-tip: Pair the resident with a "preceptor mentor"
  - Preceptor who knows the resident beyond a single LE
  - Additional perspective
  - Opportunity for mentor relationship
- May be particularly useful in large programs



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### Quarterly Updates: Meaningful Action Plans

- Pro-tip: Pool information from multiple sources
  - PharmAcademic™, preceptor meetings, preceptor handoffs
  - Identify patterns over several repetitions/LE's vs. isolated event
- Pro-tip: Discuss with preceptors
  - May see strengths/weaknesses not observed elsewhere
  - Have ideas for what worked/didn't work on a particular LE
  - Generate ideas for strategies
  - Helps newer preceptors (when they encounter similar situation)



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### Quarterly Updates: Pro-Tip

- PharmAcademic™ - Resident's tab



\*Screenshots courtesy of PharmAcademic™, a McCreadie Group Inc. Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential



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### Quarterly Updates: Pro-Tip



\*Screenshots courtesy of PharmAcademic™, a McCreadie Group Inc. Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential



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## Quarterly Updates: Pro-Tip

Competency Area	Goal	Objective	ACHRP	6/2017	9/2017	12/2017	3/2018	6/2018	9/2018	12/2018
PGY1 Pharmacy (2014)	REL	Base Goal	FALSE							2
Evaluation Scale										25
Needs Improvement + 180		REL1	TRUE							3
Satisfactory/Progress + 200		REL2	FALSE							2
Achieved + 200										

\*Screenshots courtesy of PharmAcademic™, a McCreadie Group Inc.  
Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential




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## Quarterly Updates: Pro-Tip

### ■ PharmAcademic™ - Resident's tab

PharmAcademic™  
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PGY1 - Pharmacy (45600)  
Julie Dagam (Julie.Dagam@aurora.org)  
Accreditation Standard: PGY1 - 2014 (ASHP Accredited)  
Goals and Objectives: PGY1 - Pharmacy (2014)

Manage Program

Program Details | Competency Areas | Learning Experiences | Residents | Preceptors and Staff | Reports

Current Residents in this Program

\*Screenshots courtesy of PharmAcademic™, a McCreadie Group Inc.  
Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential




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## Quarterly Updates: Pro-Tip

Program | Schedule | Evaluations | Feedback | Competencies | Development Plans | Reports | Files

Program Information: PGY1 - Pharmacy  
Edit Program Dates

Start Date: 6/26/2017  
End Date: 6/25/2018  
Standard: PGY1 - 2014

Resident Portfolio

Program | Schedule | Evaluations | Feedback | Competencies | Development Plans | Reports | Files

Goal and Objective Summary for Resident

Click on the Description to drill into the goals and objectives for that area

Type	Count	ACHRP
PGY1 Pharmacy (2014)		
Goals	9	6
Objectives	33	25

\*Screenshots courtesy of PharmAcademic™, a McCreadie Group Inc.  
Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential




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### Quarterly Updates: Pro-Tip

Click on the goal to view the goals and associated objectives, including evidence, clinical experiences, activity logs, and feedback mapped to the goal or objectives.


Curricular Set:

**R1 Patient Care**

→ R1.1 In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient care process. ACHR: **No**

Objective	ACHR
R1.1.1 Applying Interact effectively with health care teams to manage patients' medication therapy	Yes
R1.1.2 Applying Interact effectively with patients, family members, and caregivers	No
R1.1.3 Analyzing Collect information on which to base safe and effective medication therapy	Yes
R1.1.4 Analyzing Analyze and assess information on which to base safe and effective medication therapy	No

\*Screenshots courtesy of PharmAcademic™, a McCreddie Group Inc. Software Solution | [mccreadiegroup.com](http://mccreadiegroup.com) | Confidential




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### Quarterly Updates: Already Receive Feedback

- Remember the difference between summative evaluations and RDP
- Pro-tip: Involve the resident
  - May be a future preceptor or RPD!
  - Help the resident develop effective self-reflection skills
    - Prepare them to use self-reflection in post-residency roles (when feedback is not as frequent)
  - Apply concept to Continuing Professional Development (CPD)




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### Continuing Professional Development

“...a self-directed, ongoing, systematic and outcomes-focused approach to lifelong learning that is applied into practice. It involves the process of active participation in formal and informal learning activities that assist individuals in developing and maintaining continuing competence, enhancing their professional practice, and supporting achievement of their career goals.”

Retrieved July 10, 2018 from  
<https://www.acpe-accredit.org/continuing-professional-development/>




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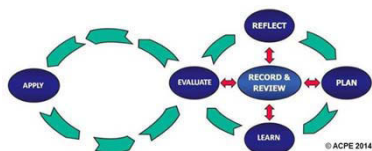
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### The CPD Cycle

- Reflect, Plan, Learn and Apply, Evaluate



Retrieved July 10, 2018 from  
<https://www.ascp-accredit.org/wpcontent/uploads/CPDCycle2014Color.jpg>  
Continuing Professional Development (CPD) Cycle graphic - Copyright © 2005 - 2014 Accreditation Council for Pharmacy Education. Used with permission.




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### RDP and CPD: Pro-tip

- Use RDP as an opportunity to teach the concept of CPD
- Resident involvement in their RDP during their program can help them develop and understand skills needed for CPD
- Characteristics: career plan, dynamic, requires revision, up to the individual to maintain




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### Initial and Quarterly Updates: Other Tips

- Prevent RDP from being just a resident's self-assessment by including preceptor/RPD validation of resident's self-assessment
- Include a short term goal for each quarter
- Reflect on the success (or lack thereof) of the short term goal
  - At the next update
  - Adjust as needed
- Initial plan may take longer, but quarterly updates can become more efficient if well-constructed (build on each of the previous updates)




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### Initial and Quarterly Updates: Other Tips

- Talk about the RDP during preceptor meetings, handoffs
- Preceptors:
  - Use the RDP as a way to customize your LE to the resident
  - Review the RDP along with the LE description at the start of the LE, and refer back to both during the LE
- Use to track skill development and progress toward graduation requirements



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### Key Takeaways

- Introduce the concept of RDP early so residents understand the intent and how it differs from other assessment/feedback methods
- Utilize strategies to make the RDP process more meaningful and efficient, such as including preceptor mentors, using multiple sources to pool information, and involving the resident
- Use the RDP process to teach and develop valuable post-residency skills



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### Scenario for Case Discussion

Break up into groups of 4-6. For 5 minutes, discuss what you would include in the Resident Development Plan for the following resident.

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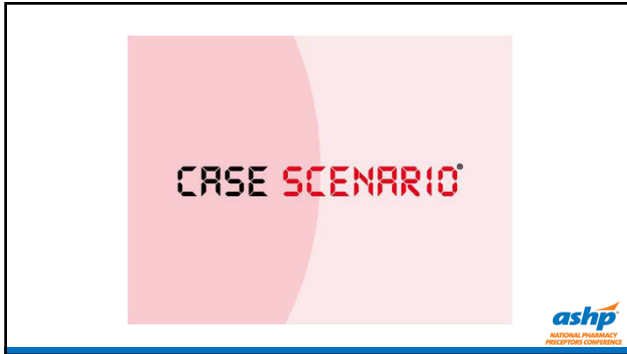
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**Case Scenario**

- One of your residents entered your program with a strong interest in Critical Care and is very motivated to pursue a PGY2 in this area.
- Incoming strengths listed on the initial self-assessment include motivation and effective patient counseling skills.
- She has worked as a pharmacy technician in the retail setting, but her experience in an acute care setting is limited to APPE rotations.
- She says that she gets nervous when presenting in front of a larger audience, but is very comfortable speaking with patients and their families.



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**Case Scenario**

- Thus far in her program, she has demonstrated an above average clinical knowledge base, and is hard-working, personable, and empathetic.
- She makes patient care a priority, and other care team members enjoy interacting with her. However, she lacks confidence when applying her clinical knowledge to individual patients.
- She spends a lot of time working up each patient to make sure she doesn't miss any details, often focusing on details that do not impact the care plan.
- She also relies on her preceptor to validate even very straightforward care plans.



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### Case Scenario

- She is aware she is not as efficient in patient care activities as other residents, but feels she is more detail-oriented than they are.
- From a project standpoint, she knows what she must do, but struggles to meet deadlines, often asking for an additional day or an additional week. She actively seeks out feedback and incorporates it effectively, and her finished work products are of high quality.



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What strengths should be listed in the plan? What areas for improvement?

What actions/changes should be noted in the plan?



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Let's share!  
What did you  
come up with?



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2018 National Pharmacy Preceptors Conference  
**RESIDENT DEVELOPMENT PLAN - XXXMC PGY2 Medication-Safety Pharmacy Residency 2017-2018**  
 Creating an Effective Resident Development Plan

Entering Characteristics	Initial Plan: Changes to Program	1st Quarter Update/Effectiveness of Changes	2nd Quarter Update	3rd Quarter Update
<b>Background Information:</b> <b>Interests:</b> <ul style="list-style-type: none"> <li>Emergency medicine, critical care, ambulatory care, medication safety, administration</li> </ul> <b>Career Goals:</b> Short term: ED pharmacist, critical care/ambulatory care <ul style="list-style-type: none"> <li>Build a strong clinical knowledge base/foundation and hands on understanding of hospital pharmacy workflow prior to serving in pharmacy administration in order to accurately represent pharmacy and make relevant decisions</li> </ul> Long term: Medication Safety, Administration, improving the healthcare system on a large scale			<b>Updated Interests:</b> <ul style="list-style-type: none"> <li>Public health/education/awareness, patient education in general (ex. via career, collaboration, and other means/social media)</li> </ul> <b>Updated Career Goals:</b> <ul style="list-style-type: none"> <li>Long term goal of improving patient knowledge of healthcare and medications</li> </ul>	
<b>Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Gain exposure to medication safety and administration for a future long term career in medication safety and administration</li> <li>Observe the pharmacy structure, relationships, functioning from a medication safety/administrative perspective</li> <li>Increase experience in emergency medicine</li> <li>Refine skillset and proficiency in emergency medicine and critical care</li> <li>Serve as a knowledgeable and independent emergency department pharmacist</li> </ul>	<b>Changes to Program Based on Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Due to her overlapping interests in medication safety and emergency medicine, assign her Medication Safety projects specifically related to emergency medicine/critical care to create a bridge between medication safety and emergency medicine and to allow her to observe the overall picture of the pharmacy department working in conjunction</li> <li>Based on her residency goal of gaining experience in emergency medicine and serving as an independent ED provider, assign her to the ED night shift elective to allow her to gain independence and confidence as the primary drug information resource</li> </ul> <b>RLS Goals for Q1: (planned)</b> <ul style="list-style-type: none"> <li>R4.3.1</li> </ul>	<b>Effectiveness of Changes to Program Based on Personal Residency Goals:</b> <b>RLS Goals Achieved End Q1:</b> <ul style="list-style-type: none"> <li>Because of her prior knowledge of and experience with the our system and RPD, She was able to quickly orient herself to multiple longitudinal medication safety projects including pain management and her longitudinal research project regarding best practice alerts for medications in older adults and fulfill R6.1.1, 6.1.2, 6.1.3, 6.2.1, 6.2.2, 8.1.1, 8.1.2, and 8.1.3</li> <li>Based on the needs of the medical center and pharmacy department, she fulfilled R7.1.1, 7.1.2, 7.1.3, 7.1.4</li> </ul> <b>RLS Goals for Q2: (planned)</b> <ul style="list-style-type: none"> <li>R8.1.5</li> </ul>	<b>Effectiveness of Changes to Program Based on Personal Residency Goals:</b> <ul style="list-style-type: none"> <li>Her short term career goals include gaining experience and working and developing as an emergency department pharmacist. In order to fulfill these short term goals, She completed her elective learning experience in the ED as an independent pharmacist during the night shift which gave her ample opportunities to grow as an independent ED pharmacist who also had her ED preceptors to refer to when in need of guidance</li> </ul> <b>RLS Goals Achieved End Q2:</b> <ul style="list-style-type: none"> <li>Fulfilled goal R8.1.5 by creating and presenting a management case study at a national meeting</li> </ul> <b>RLS Goals for Q3: (planned)</b> <ul style="list-style-type: none"> <li>To incorporate applying medication safety and clinical knowledge abilities, complete R7.2.2 and 7.2.3 and improve patient safety in the emergency department (and elsewhere if applicable on a larger scale)</li> <li>She will be able to fulfill goal R8.1.4 when her house wide research project goes live into the Epic EHR system</li> <li>Based on her realized interest of increasing people's knowledge and awareness of healthcare and safety, having her focus on fulfilling goals R2.4.1, 2.4.2, 2.4.3, 2.4.4, 4.1.1, 4.4.3, 4.5.1, and 2.1.1</li> </ul>	<b>Effectiveness of Changes to Program Based on Personal Residency Goals:</b> <b>RLS Goals Achieved End Q3:</b> <ul style="list-style-type: none"> <li>Completed goals R7.2.2, 7.2.3 by creating an Opioid Conversion to initial PCA guideline per pharmacy for sickle cell disease patients to fulfill the needs of the institution (applicable to acute ED patient population and patients admitted to the floor)</li> <li>Completed planned goal 8.1.4 by implementing a system wide pharmacy protocol for QTc interval and medication monitoring</li> <li>She fulfilled goals R2.4.1, 2.4.2, 2.4.3, 2.4.4, 4.1.1, 4.4.3, 4.5.1, and 2.1.1, 1.1.11, and 2.1.1 by independently running a didactic lecture regarding medication errors for the Medication Safety class at the XXX School of Pharmacy.</li> </ul> <b>RLS Goals for Q4: (planned)</b> This quarter we are going to focus on improving her progress in goals R6.3.1, 7.3.4, and 8.1.7 by creating and scheduling research time for her to focus on multiple research projects, presentations, and data analysis to the point that she can present her data effectively on a poster that concisely displays her research
<b>Strengths:</b> <ul style="list-style-type: none"> <li>Interest and passion for medication and patient safety, dedication to patient safety</li> <li>Detail-oriented</li> <li>Involvement with professional organizations, student pharmacy organizations</li> <li>Gets along well with others</li> </ul>	<b>Initial Plan and Changes to Program Based on Resident's Initial Strengths:</b> <ul style="list-style-type: none"> <li>Initial plan: due to her passion for patient safety and detail-oriented nature, assign her hands-on real world assignments that can directly improve patient safety including creating medication policies and guidelines to improve the current medication process</li> <li>Based on her prior experience with student organizations (APhA-ASP president, APhA-ASP Faculty Advisor), give her more opportunities to work in conjunction with and precept students</li> </ul>	<b>Effectiveness of Initial Plan and Changes to Program Based on Resident's Initial Strengths:</b> <b>Resident Progress:</b> <b>RLS Goals Achieved End Q1:</b> <ul style="list-style-type: none"> <li>As a result of modifying her schedule to incorporate more time in the emergency department, She was able to fulfill goal R4.3.1</li> </ul> <b>Updated Strengths:</b> <ul style="list-style-type: none"> <li>Thorough and comprehensive review of literature, including primary literature, relating to medication safety guidelines</li> </ul>	<b>Effectiveness of Plan and Changes to Program Based on Resident's Strengths:</b> <b>Resident Progress:</b> <ul style="list-style-type: none"> <li>As noted on Dr. Sample's evaluation, with her additional time spent as an independent pharmacist in the ED, she has further developed and improved as a clinical pharmacist in the emergency department</li> </ul> <b>Updated Strengths:</b> <ul style="list-style-type: none"> <li>Improvement in clinical database, prioritization/ management of tasks via hands on experience during clinical elective learning experiences</li> </ul>	<b>Effectiveness of Plan and Changes to Program Based on Resident's Strengths:</b> <b>Updated Strengths:</b> <ul style="list-style-type: none"> <li>Based on her evaluations from her preceptors, one of her strengths is her ability to assess her progress by requesting and welcoming feedback</li> </ul>

<ul style="list-style-type: none"> <li>Knows the LLU system, culture, and EHR from her experience at LLU as a PGY1</li> </ul>	<ul style="list-style-type: none"> <li>Shorten orientation to 1 week due to the fact that she has already participated in the same orientation process as a PGY1.</li> <li>Change schedule to forgo hospital practice due to she completed the requirement as a PGY1 and to give her more time for electives to achieve her goal of gaining exposure, knowledge, and experience in emergency medicine</li> </ul>	<p>2018 National Pharmacy Preceptors Conference</p> <p><b>Updated Plan Based on Updated Strengths:</b></p> <ul style="list-style-type: none"> <li>Creating an Effective Resident Development Plan</li> <li>Because of her ability to independently create evidence based guidelines based on primary literature and prior examples of protocols and guidelines, give Leilani the independence to communicate and work directly with the physicians and pharmacists to update and refine new and existing medication-related policies</li> </ul>	<p><b>Updated Plan Based on Updated Strengths:</b></p> <ul style="list-style-type: none"> <li>As a result of her clinical progress in the emergency department and her interest in expanding her overall clinical database, give Leilani a week to rotate with pharmacists in other fields such as oncology and transplant</li> </ul>	
<p><b><u>Areas for Growth/Improvement:</u></b></p> <ul style="list-style-type: none"> <li>Clinical database, expand</li> <li>Prioritization/manage ment of tasks</li> </ul>	<p><b><u>Initial Plan and Changes to Program To Incorporate Resident's Initial Areas for Improvement:</u></b></p> <ul style="list-style-type: none"> <li>Focus on goal R4.3.1 during the ED Day learning experience to maximize the efficiency of completing a task in a patient-care area that incorporates time sensitive tasks</li> </ul>	<p><b><u>Effectiveness of Initial Plan and Changes to Program To Incorporate Resident's Initial Areas for Improvement:</u></b></p> <p><b>Resident Progress:</b></p> <p><b>RLS Goals Achieved End Q1:</b></p> <ul style="list-style-type: none"> <li>By maximizing her exposure to emergency medicine by first following the emergency department pharmacists during the day shift, she was able to refine her knowledge of relevant critical care clinical pearls and receive feedback in real time and fulfill goal R4.3.1</li> </ul> <p><b><u>Updated Plan To Incorporate Resident's Areas for Improvement:</u></b></p> <ul style="list-style-type: none"> <li>In order to improve her knowledge base, since the MICU is a time-consuming learning experience, allow her to focus on her MICU learning experience by not assigning her any new additional medication safety projects to start during this rotation</li> <li>Due to her involvement in both the medication safety and the clinical fields of pharmacy, create a feasible timeline for the resident allowing enough time for multiple projects to be completed in addition to longitudinal and teaching responsibilities</li> </ul>	<p><b><u>Effectiveness of Plan and Changes to Program To Incorporate Resident's Areas for Improvement:</u></b></p> <p><b>Resident Progress:</b></p> <ul style="list-style-type: none"> <li>The timeline created to manage multiple projects at the same time facilitated: Participating in 3 medication safety related research projects with plans to present two of them at national meetings, mentoring a student organization and serving as the primary supervisor and contact for multiple events and competitions including a presentation for the NPCC, creating order set requests in requested format to be implemented by informatics based on house-wide guidelines, being involved with compiling the background information and appropriate personnel resources for multiple service requests to improve the electronic health record system at XXXMC to optimize medication safety based on reported medication errors, presenting medication safety projects and events at Medication Safety, MERP, and P&amp;T meetings, researching potential processes and solutions for various medication safety related projects at XXXMC, serving as a student-mentor for the local ASHP chapter (ISHP), and composing and editing an interdisciplinary quarterly newsletter for the medical center</li> </ul> <p><b>Updated Areas for Growth:</b></p> <ul style="list-style-type: none"> <li>Ability to be concise</li> </ul> <p><b><u>Updated Plan Based on Updated Areas for Growth:</u></b></p> <ul style="list-style-type: none"> <li>Challenge her with the task of including only the most pertinent information in her platform presentation of one of her research projects at the Epic XGM national conference</li> <li>In order to practice her ability to prioritize tasks from an administrative/medication safety perspective, one of the goals for the upcoming quarter is for her to single-handedly run a MERP Core meeting in place of the RPD</li> </ul>	<p><b><u>Effectiveness of Plan and Changes to Program To Incorporate Resident's Areas for Improvement:</u></b></p> <p><b>Resident Progress:</b></p> <p><b>RLS Goals Achieved End Q1:</b></p> <ul style="list-style-type: none"> <li>By independently running the MERP Core meeting, she fulfilled goals R1.1.4, 1.1.6, 1.1.8, 2.1.1, 2.1.2, 2.2.1, 2.2.2, 2.3.4, 2.3.5, 3.1.1, 3.1.2 and more. For example, she presented current flaws in the medication use system to the committee and proposed changes to improve the system such as reducing the default duration of ordered opioids and PCAs in the EHR. She also prioritized her goals to improve the system by placing greater importance on her presentation of the most pertinent proposals</li> </ul>

**RESIDENT DEVELOPMENT PLAN EXAMPLE**  
**SANDY RESIDENT, PHARM.D.**

Entering Characteristics	Initial Plan: Changes to Program	1 <sup>st</sup> Quarter Update/ Effectiveness of Changes	2 <sup>nd</sup> Quarter Update	3 <sup>rd</sup> Quarter Update
<b>Strengths</b> <ul style="list-style-type: none"> <li>Has a lot of drug distribution experience as a tech/lead tech at this hospital – very competent in this area</li> <li>Gets along well with others</li> <li>Drug distribution</li> <li>Writing skills</li> </ul>	<ul style="list-style-type: none"> <li>Shorten orientation to drug distribution from 4 weeks to 3 weeks with a focus on the pharmacist's role.</li> <li>Monitor resident strengths and determine if additional modifications are needed during 1<sup>st</sup> quarter update.</li> </ul>	<ul style="list-style-type: none"> <li>3 week orientation period/drug distribution successful</li> <li>Concur that getting along well with others is a strength</li> <li>Writing skills – concur that this is a strength</li> </ul>		
<b>Areas for Improvement</b> <ul style="list-style-type: none"> <li>Broaden data base and improve patient monitoring</li> <li>Oncology noted as weakness in patient care skills.</li> </ul>	<ul style="list-style-type: none"> <li>The program provides ample opportunity to improve data base and patient monitoring skills. The desire to work on these will be conveyed to preceptors. Ask preceptor to give additional feedback on patient care skills.</li> <li>Since oncology is an elective area, will not schedule anything to address oncology at this time. She will have some exposure to cancer patients in her required rotations.</li> <li>Review performance related to data base collection and monitoring of patients and determine if any modifications are needed during 1<sup>st</sup> quarter update.</li> </ul>	<ul style="list-style-type: none"> <li>Schedule additional time in Family Medicine to help resident achieve patient care objectives (R1.1.2 &amp; R1.1.4 rated NI during Family Medicine rotation).</li> <li>Continue to request preceptors provide more feedback on R1.1.2 and R1.1.4.</li> <li>No change in other areas.</li> </ul>	<b>10/31 Update:</b> To address nervousness impacting presentations and other communications: <ul style="list-style-type: none"> <li>Add Objective E6.2.3: <i>Deliver a practice-based educational activity, including didactic or experiential teaching, or facilitation.</i></li> <li>Add Objective E8.1.1: <i>Design and deliver programs for health care consumers that center on disease prevention and wellness promotion.</i></li> <li>Additional objectives added to current rotations and evaluations.</li> <li>Monitor with</li> </ul>	



			<p>evaluations/preceptor and resident feedback. Will update the plan again at the end of this quarter or sooner if need.</p> <ul style="list-style-type: none"> <li>• Discussed with Residency Advisory Committee and all of Sandy's preceptors so they can assist with monitoring progress of her continued development.</li> <li>• Will meet with preceptors and resident at the end of November to be sure progress is occurring.</li> </ul>	
<b>Resident Progress</b>		<p>Most goals and objectives marked SP. R1.1.2 and R1.1.4 rated NI for patient care skills. Preceptors plan to give additional coaching and feedback in these areas.</p>	<ul style="list-style-type: none"> <li>• <b>10/31 Update:</b> Resident has improved on R1.1.2 and R1.1.4. However, she is having difficulty giving presentations and communicating needed information to the health care team due to nervousness. Therefore, Objective E6.2.3 and E8.1.1 have been added to give her more experience and build her confidence.</li> </ul>	