Disclosure

In accordance with the ACPE's and ACCME’s Standards for Commercial Support, anyone is a position to control the content of an educational activity is required to disclose their relevant financial relationships. In accordance with these Standards, ASHP is required to resolve potential conflicts of interest and disclose relevant financial relationships of presenters.

- In this session: All planners, presenters, reviewers, and ASHP staff report no financial relationships relevant to this activity.
Learning Objective
Discuss techniques to build critical thinking skills in a non-academic environment.

Building An Academic Environment
- Comprehensive Medication Reviews
- Question Basic Assumptions
- Trainer Self-Reflection

Building Critical Thinking Skills
- Change Patient Characteristics
- “Think It Out”
- Anticipate
- Change Perspective
Critical Thinking Outside of Clinical Skills

Let The Learner:

- Prioritize their day
- Manage own in-basket
- Facilitate meetings
- Develop answers to inappropriate requests

Anytime, Anywhere: Critical Thinking Skills for the Real World

Pull Up a Chair: Giving Residents a Seat at the Committee Leadership Table

Molly (Mason) Howell, Pharm.D., BCPS, BCCCP
Learning Objective
Describe conflict resolution strategies for residents to use when working in multidisciplinary groups.

ASHP Requirements
- Goal R2.1 Manage formulary and medication-use processes
- Goal R2.2 Quality improvement or research project
- Goal R3.1 Demonstrate leadership skills
- Goal R3.2 Demonstrate management skills

Multidisciplinary Committees
- Collaboration
- Communication
- Leadership
- Mediation
- Negotiation
- Time
- Management
Examples of Resident Co-Led Committees

| PGY1          | • Medication Safety
|              | • Oncology/Pharmacy
|              | • OR/Pharmacy
| PGY2 Critical Care (CC) | • CC Multidisciplinary Quality Assurance
|              | • Emergency Department/Pharmacy
| PGY2 Internal Medicine (IM) | • Infectious Diseases Subcommittee
|              | • Therapeutic Drug Monitoring

Tips for Success

✓ Review committee charter
✓ Set clear expectations
✓ Implement concrete goals and milestones
✓ Introduce resident to committee members and their roles
✓ Foster relationships between resident and committee members
✓ Provide constructive and timely feedback
✓ Debrief after meeting and answer any questions

Breaking Out of Traditional Interview Activities

Maria Whitmore, Pharm.D., BCPPS
Pediatric Critical Care/Emergency Department Clinical Pharmacist
Pediatric (PGY-2) Pharmacy Residency Director
Ascension Indiana – St. Vincent Indianapolis
Learning Objective

Describe how a breakout room-style small group activity can be used to assess important characteristics of a residency candidate.

How many have had a resident who is 2 months into their residency and realize the resident struggles with a challenge and also is not a team player?

Qualities of an Ideal Resident

Critical Thinker
- Inquisitive
- Alert to opportunities
- Open minded
- Flexible
- Honest
- Slow to judge

Team Player
- Active listener
- Collaborative
- Good negotiator
- Communicates constructively
- Enthusiastic and supportive
- Receptive to feedback

Breakout Room-Style Activity

- Interview materials
  - Residency handbook
  - Preceptor and past resident trivia
  - Local culture and city activities

1. The number of residents in the past 5 years from an island college. ___
2. This resident did a PGY1 and PGY2 Critical Care at St Vincent and finished the PGY2 in ___ ___ ___ but was not chief resident.
3. This internal medicine pharmacist and Manchester Faculty finished his PGY1 in ___ ___ ___.
4. The current Ambulatory Care PGY2 director started as the Pharmacy Practice PGY1 director in ___ ___ ___.
Lessons Gained

Residents
- Heightened awareness of residency information
  - Program
  - Preceptors
  - City
- Provided opportunity for greater understanding of residency program
- Less stressful, fun activity

Preceptors
- Assessment of important qualities
- Removed interview mask

Comments from Post Interview Survey

I really enjoyed the group activity and the feedback received from it. It is definitely an area that is different from most interviews I attended and I think it says a lot about the program.

Group activity was new and unique - I enjoyed it very much.

The group activity was a fun process at seeing if the candidates are a good fit as co-residents. Please continue this activity!

I also really enjoyed the presentation and group activity portion of the interview. It felt as if more aspects of my personality and passion were being evaluated rather than just clinical experience alone.

Summary
- Interactive techniques
- Able to evaluate difficult criteria
Posting Professionally: Leveraging Social Media Responsibly

Angela Nace, Pharm.D.
Filed Coordinator, Experiential Education
Jefferson College of Pharmacy
Philadelphia, PA

Learning Objective
Describe practical examples for guiding students and residents in conducting themselves professionally in the social media arena.

Social Media 101

- Public
- Private
- Professional
Social Media in Pharmacy Education

- Helps students to connect their tech savviness to learning
- Allows students to experience a new approach to learning
- Enhances patient care
  - Facilitate online groups with similar diseases
  - Develop short videos for patients
  - Promote health awareness
  - Encourage patient engagement

The Values and Risks of Social Media

**Values**
- Ideal method to share knowledge today
- Used to quickly communicate ideas to a large audience
- Important tool to incorporate into the learning process at any practice site

**Risks**
- Could potentially danger privacy, safety, and professional standing
- Requires personal responsibility for all online communications

Top 10 Social Media Etiquette Tips

10. Select the most appropriate platform.
9. Share factual knowledge and useful information.
8. Regularly monitor privacy settings.
Top 10 Social Media Etiquette Tips

7. Avoid posting information you would not discuss in a job interview.

6. Avoid internet impersonators.

5. Remember that social media is not immune to HIPAA.

Top 10 Social Media Etiquette Tips

4. Be aware of who will potentially view the post and how it may be interpreted.

3. Remember that anything posted on the web is permanent.

2. Research your online image.

# 1 Social Media Etiquette Tip....

Be a social media role model!
Take Home Messages

- Don’t overlook the fact that social media is just that…..social.
- When in doubt…..leave it out!

Questions & Answers

Self-Assessment Question

- What are potential ways to build critical thinking skills in a learner?
  A. Question Basic Assumptions
  B. Change Patient Characteristics
  C. Give Supervised Autonomy
  D. All of the above
Self-Assessment Answer

What are potential ways to build critical thinking skills in a learner?
A. Question Basic Assumptions
B. Change Patient Characteristics
C. Give Supervised Autonomy
D. All of the above

Self-Assessment Question

Which of the following is a valuable skill that pharmacy residents can employ through a resident co-chair experience?
A. Negotiation
B. Mediation
C. Collaboration
D. All of the above

Self-Assessment Answer

Which of the following is a valuable skill that pharmacy residents can employ through a resident co-chair experience?
A. Negotiation
B. Mediation
C. Collaboration
D. All of the above
### Self-Assessment Question

All of the following residency candidate abilities could be assessed using a "breakout room-style activity except:

a. Treating other team members with respect  
b. Demonstrating small group leadership  
c. Being a valuable and contributing group member  
d. Advanced clinical decision making

### Self-Assessment Answer

All of the following residency candidate abilities could be assessed using a "breakout room-style activity except:

a. Treating other team members with respect  
b. Demonstrating small group leadership  
c. Being a valuable and contributing group member  
d. Advanced clinical decision making

### Self-Assessment Question

True or False?  
Examples of appropriate social media use in a pharmacy practice setting include posting nondescript information about patients and co-workers.
Self-Assessment Answer

Answer:
False – It is not appropriate to post any information (descript or nondescript) about patients or co-workers.

Mentoring Resident Preceptors to Provide Timely and Accurate Feedback to Address Unprofessional Student Behavior

Lukas Everly, Pharm.D., BCPS
Residency Program Director, PGY-2 Internal Medicine
University Hospitals Geauga Medical Center

Learning Objective

Explain how residents can deliver timely and accurate feedback to preceptors and students when students exhibit unprofessional behavior.
Scenario

- “JB” a current P4 APPE student is midway through her Acute Care rotation.
- Co-precepted by a PGY-1 resident
- Has been meeting expectations so far...

Letting the Resident “Vent”

- Underdeveloped self-awareness
- Limited understanding of role/responsibilities of nursing staff
- Blunted empathy

What feedback did the student receive?

- Limited
- Overly broad
- Lack of personalization
Going Forward

- Resident and student met first thing the next day
- The timing element cannot be recaptured
- Resident gained insight/practice in digesting a teachable moment to ensure feedback is timely

Using Old for a Better New:
Turning Old Rotation Activities Into Valuable Advocacy Actions

Mindy Burnworth, Pharm.D., FASHP, FAzPA, BCPS
Professor of Pharmacy Practice
Midwestern University, Glendale, AZ

Learning Objective

Explain a learning experience that layers in the teaching of advocacy and political involvement.
What?

advocacy

Definition of ADVOCACY: the act or process of supporting a cause or proposal

Why?


Who?

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How?

① ②

③ ④

2018 National Pharmacy Preceptors Conference
Pharmacy Precepting Pearls 2018
① Pick a “Seasoned” Activity

- Patient discharge counseling
- Immunization administration
- Pharmacy to dose IV vancomycin
- Renal dosing
- Research project

② Upcycle the Activity

- Patient discharge counseling
- Immunization administration
- Pharmacy to dose IV vancomycin
- Renal dosing
- Research project

③ Advocacy in Action

- Advocacy in Action

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Added Wow Factor

1. Using Old for a Better New
2. Turning Old Rotation Activities into Valuable Advocacy Actions
3. Evaluating Self-Assessment and Evaluating Evaluation of Self-Assessment (What?!)
Learning Objective
Identify common areas where residents struggle with self-assessment.

Assumptions...
1. Self-assessment is important
2. Self-assessment is NOT easy for everyone
3. Self-assessment should be practiced and evaluated regularly

Experience at Henry Ford Hospital
- Connected process to longitudinal learning experiences:
  - Pharmacy Resident On Call program (PROC)
  - Professional Presentation Development (PPD)
- PharmAcademic evaluations scheduled at specific time points using custom evaluation template
  - Objective R3.1.2 (Apply a process of on-going self-evaluation and personal performance improvement).
Pharmacy Resident on Call

- Resident assesses clinical decision making skills from on call shift
- Preceptor evaluates resident’s self-assessment
- Formative feedback: Monthly during 1st and 2nd quarter
  - On-demand snapshot completed by designated PROC preceptor
- Summative feedback: Quarterly during 1st and 2nd quarter
  - Scheduled evaluation completed by PROC coordinator
- Process is continued into 3rd and 4th quarter only if needed based on resident performance.

Professional Presentation Development

- Resident assesses presentation skills after each presentation
- Preceptor evaluates resident’s self-assessment
- Formative feedback: After each presentation
  - On-demand snapshot completed by presentation preceptor
- Summative feedback: Quarterly
  - Scheduled evaluation completed by longitudinal PPD preceptor

PharmAcademic Custom Evaluations

Residents are evaluated on ability to:

- Assess their skills
  - “Completely accurate”
  - “Somewhat accurate”
  - “Completely inaccurate”
- Develop a roadmap for improvement
  - “Appropriate roadmap created”
  - “Inadequate roadmap created”
  - “Unable to create roadmap”
Evaluating Evaluations: PharmAcademic Police

- Timeliness and quality of feedback given to residents
- All evaluations should be completed < 7 days from end of rotation
- Quality descriptions:
  - “Strong narrative with road map”
  - “Some narrative +/- road map”
  - “Minimal to no narrative +/- road map”
- Inadequate evaluations are sent back to preceptor or resident to strengthen

It’s in the Mail: Tips for Efficiently Writing Meaningful Letters of Recommendation

David M. Peterson, Pharm.D.
University of Utah Health
Learning Objective
Describe five tips that will help the preceptor efficiently write a meaningful letter of recommendation (LoR) for a former learner.

1. Learner Evaluations
   - Most important tool
   - Submit honest and complete evaluations
   - Include examples that are specific and objective
   - Save your evaluations

2. Keep a File
   - Learner evaluations
   - Prior letters of recommendation
   - Sample letters from colleagues or mentors
   - Tip sheets and review articles
3. Expectations of Applicants

- Time: 2 weeks minimum (I prefer ≥ 4 weeks)
- Submissions: CV, Letter of Intent, other application materials
- List of programs/employers
  - Contact/delivery instructions (e.g., PhORCAS)
  - Position description(s)
  - Site-specific instructions or requests
- Face-to-face meeting
- Follow-up

4. Just Say “NO”

- Lack of time (too busy or applicant requested too late)
- Don’t know the applicant well enough
- Can’t speak to the attributes that are most important to the desired position
- Can’t honestly provide a favorable recommendation (i.e., “Highly Recommend” or “Recommend”)

4.1. Don’t Sabotage (i.e., no drive by)

- Do not use an LoR as a way to exact revenge!
- This will reflect poorly on the writer and the applicant.
- Don’t share anything that would be surprising to the candidate if they were asked in an interview
5. Working in PhORCAS (Pharmacy Online Residency Centralized Application Service)

- No actual “letter” of recommendation
- Create evaluation in your favorite word processing software

Questions & Answers

Self-Assessment Question
True or False?
Resident preceptors should NOT be the source of feedback addressing unprofessional student behavior.
Self-Assessment Question

True or False?
As defined by Merriam-Webster’s Dictionary, advocacy is the act or process of supporting a cause or proposal.

Self-Assessment Answer

Answer: True
Advocacy Super Hero supports all pharmacy related causes!
Self-Assessment Question
Which of the following is/are an area(s) where pharmacy residents commonly struggle with self-assessment?

a. Resident is overly critical of their performance
b. Resident struggles with creating appropriate self-improvement plan (road map)
c. Resident does not understand the value of strengthening self-assessment skills
d. All of the above

Self-Assessment Answer
Which of the following is/are an area(s) where pharmacy residents commonly struggle with self-assessment?

a. Resident is overly critical of their performance
b. Resident struggles with creating appropriate self-improvement plan (road map)
c. Resident does not understand the value of strengthening self-assessment skills
d. All of the above

Self-Assessment Question
Which of the following is NOT true about writing an LoR?

A. Summative learning evaluations are a good source for content.
B. A preceptor should always agree to write an LoR.
C. PhORCAS does not require an actual formatted letter to be submitted.
D. It is important to proactively confirm deadlines and expectations.
Self-Assessment Answer
Question: Which of the following is NOT true about writing an LoR?
A. Summative learning evaluations are a good source for content.
B. A preceptor should always agree to write a LoR.
C. PHORCAS does not require an actual formatted letter to be submitted.
D. It is important to proactively confirm deadlines and expectations.

Maximize Your Residency Project:
Strategies for Engaging Pharmacy Informatics Resources
Quan Hoang, Pharm.D.
Manager, Pharmacy Automation

Learning Objective
Define best practices on the engagement of Pharmacy Informatics staff during the initial stages of project.
Why Involve Pharmacy Informatics?

- The medication use process is increasingly integrated with technology
- Pharmacy Informaticists are the experts on data
  - Source of data
  - Timeframe of data
  - Sample size of data
  - Part of workflow
- Access to data to which end users do not have access
  - Mitigates need for manual chart review

Where Does Pharmacy Informatics Provide Value?

- Pharmacy informatics can foresee feasibility, limitations, challenges, and risks with a given project
- Assist with finding baseline values, as well as determine measures of success that can be pulled in from technology
- More familiar with certain workflows and provide perspective on workflows at other sites
- Excel tips and tricks

Best Practices for Involvement of your Pharmacy Informatics Staff for Projects

- Meet with informatics early in project development
  - Pharmacy Informatics will help to determine feasibility
- Ensure project does not compete with or limit resources with informatics based on IT schedule for the year
**Best Practices for Involvement of your Pharmacy Informatics Staff for Projects**

- Design project scope, and have outcomes and inclusion/exclusion criteria developed when meeting with informatics
- Reporting considerations in regards to data points
- Test project before implementation

**Example: Report Request**

1. Resident develops research question/primary outcomes/secondary outcomes
2. Meet with informatics team as early in the process as possible to determine feasibility
3. Develop inclusion/exclusion criteria and outcomes

**Pitfalls to Avoid when Engaging Pharmacy Informatics**

- If site has multiple informaticists, identify preceptor that is subject matter expert in that piece of technology
- Be mindful of competing priorities that informatics may be supporting currently or in the future
- Discuss timeline with informaticist for build, testing, etc
Thank You

- ASHP Section of Informatics and Technology
  - Section Advisory Group on Professional Development Workgroup:
    - Tony Dao
    - Brian Fung
    - Quan Hoang
    - Brandon Ordway
    - Margaret Schmidt
    - Jenny Szarkowski
    - Marc Willner

Patient Role Playing: A Valuable Tool for Students to Experience Empathy in Patient Care

Christina E. DeRemer, Pharm.D., BCPS, FASHP, BCACP
Clinical Associate Professor
University of Florida | College of Pharmacy

Learning Objective

Describe scenarios that are designed to enhance students' empathy.
Empathy

- Ability to understand and share the feelings of another
- “But I don’t have that medical condition. How can I relate?”
- How can you teach, “to how to share feelings?”

Simulations for empathy

Active-learning diabetes simulation in an APPE to develop patient empathy

- Duration: 7 days
- Diet: count carbohydrates
- Monitoring: 4 x daily, twice
- Medication: administer insulin
- Document: record diet and glucose
- 94.9% difficulty in regimen adherence
- 94.9% developed empathy
- 69.2% committed to lifestyle change
Simulations for empathy
Using a Polypharmacy Simulation Exercise to Increase Empathy in Pharmacy Students (n=146)

- Jellybean Polypharmacy Simulation Exercise (JPSE)
  - 8 prescriptions
  - Multi-drug / multi-dose
  - Duration: 7 days

  Kiersma-Chen Empathy Scale (KCES)
  - 98% did not adhere
  - 49% intention (taste/timing)
  - 20% unintentional
  - Statistical difference for underestimating difficulty and increase in empathy

Ambulatory Elective Simulation

6AM 9PM

Hypoglycemia

Medication ran out

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Results for 5 day simulation

- 43/43 students were reported non-adherence
  - Medications
    - Oral > insulin
  - Glucose checks
    - Embarrassed to complete in public
  - Diet
  - Documentation
    - Lacked carrying log book

Reflections of empathy

- “I never understood why people would say they missed their weekend doses, its just another day!”
  - Empathy growth: life patterns change on weekends, I forgot not only to take a dose, I forgot everything, testing, food diary – complete eye opener!

Conclusion

- Students are an amazing, teachable group and simulations have been proven in the literature and our class experience as an affective means of allow students to relate to their patients and share feelings

Thank you to Ambulatory Elective Team:
- Katie Vogel Anderson, PharmD, BCACP
- Eric Dietrich, PharmD, BCPS, CPC-A, BCACP
- Erin St. Onge, PharmD
- James Taylor, PharmD, CDE, BCACP
- Shannon Miller, PharmD, BCACP
Learning Objective
Identify possible advantages to creating resident leadership positions.
Orlando Health Pharmacy Residency Program

- Nine residents
  - 4 PGY-1 Pharmacy Practice Residents
  - 2 PGY-2 Critical Care Residents
  - 1 PGY-2 Emergency Medicine Resident
  - 1 PGY-2 Pediatric Resident
  - 1 PGY-2 Oncology Resident
- Four primary practice sites
  - Over 1,000 beds
  - Community teaching hospitals with > 250 medical residents and fellows

Leadership Position History

- How do we take specific steps to prepare our residents to be practice leaders upon graduation?
- Residency leadership positions implemented for every resident in 2014
- Leadership positions with specific duties which require residents to share ownership of the program and enhance their learning
  - Leadership
  - Time management
  - Organization
  - Communication
  - Delegation

Implementation

- Leadership positions discussed with residents during orientation, with residents selecting desired positions
- Certain positions limited to PGY-2 residents based on previous leadership experiences
- Expectations and activities set for each position in a guidance document
- Residents expected to take ownership and report on activities monthly during residency program meeting
- Annual revisions made to individual positions
Chief resident (PGY-2 only)

- Liaison between residents and program directors
- Ensures all residents are performing their leadership duties
- Runs monthly residency program meetings

Process improvement coordinator (PGY-2 only)

- Leads pharmacy department practice council to identify and address operational concerns
- Assists in development of abstracts for organization Quality Retreat
- Documents and distributes all project deadlines to residents

Editor-in-chief

- Creates content and organizes biannual residency alumni newsletter
- Delegates authorship duties
- Communicates with alumni to include notable achievements

Community outreach/Networking chair

- Assists with planning and organization of residency events
- Maintains residency program website and social media
- Organizes networking events and volunteering service opportunities

Professional development coordinator

- Actively participates in preceptor development subcommittee
- Leads/delegates professional development pearl at residency steering committee
- Encourages participation in local, state, and national organizations

Student coordinator

- Coordinates resident interactive teaching experiences
- Informs preceptors at all sites of educational opportunities for APPE students
- Involves APPE students in departmental and residency projects
### Resident recruitment coordinator
- Arranges details for ASHP midyear recruitment activities
- Attends local recruitment opportunities
- Coordination of PGY-1 and PGY-2 interview process
- Assists in screening of candidates

### Resident-driven pharmacy services coordinator
- Maintains warfarin discharge education services
- Trains and oversees student involvement in warfarin counseling
- Creates and maintains coverage calendar for cardiac arrest response

### Education coordinator
- Liaison between residency program and pharmacy educator
- Facilitate biweekly Pharmacy Grand Rounds series
- Organizes resident journal clubs

### Leadership Position Benefits

- Specific leadership opportunities for each resident
- Resident-driven process improvements within pharmacy department
- Development/expansion of new, pharmacy-driven initiatives in hospital

### Questions & Answers
Self-Assessment Question

Which of the following statements is true regarding project reporting request?
- a. Resident should meet with reporting team once project's primary and secondary endpoints are finalized.
- b. Resident should develop a reporting request which includes only data points pertinent to outcomes.
- c. Resident should meet with reporting team to determine that all data points are able to be extracted.
- d. Resident should submit reporting request after Midyear Clinical Meeting.

Self-Assessment Answer

Answer: C
Resident should meet with reporting team to determine that all data points are able to be extracted.

Self-Assessment Question

Mock student role play will elicit student empathy for prescribed complex medication schedules.

True OR False
Self-Assessment Answer
Question: Medication simulations are an affective means to teach empathy.

True OR False

Self-Assessment Question
Which of the following can be benefits of establishing resident leadership positions?
A. Increased learning of leadership skills
B. Expanded pharmacy services to the health system
C. Larger role of residency within the pharmacy department
D. All of the above

Self-Assessment Answer
Answer: D, all of the above
THANK YOU FOR A GREAT SESSION!