

VA Palo Alto Health Care System

Postgraduate Year Two (PGY2)

Health System Pharmacy Administration Residency

SETTING

The VA Palo Alto Health Care System (VAPAHCS) is a 900 bed hospital and satellite outpatient clinic complex located in the greater San Francisco Bay Area of California. This major tertiary referral center consists of three medical center divisions and seven satellite outpatient clinics. The Palo Alto Division, located in the foothills of the Coast Range Mountains, is comprised of ambulatory care clinics, as well as medicine, surgery, acute psychiatry, spinal cord injury/polytrauma, geriatric care, hospice, and blind rehabilitation inpatient beds. The Menlo Park Division, located seven miles away from Palo Alto, serves primarily chronic psychiatric, nursing home, respite, and domiciliary inpatients and mental health ambulatory care clinics. The Livermore Division, located 40 miles east of Palo Alto, serves nursing home patients and ambulatory care clinics. Satellite clinics are located in San Jose, Monterey, Fremont, Stockton, Modesto, Sonoma, and Capitola. These clinics provide primary and selected specialty care. The Health Care System is affiliated with Stanford University School of Medicine, and the Pharmacy Service has affiliation agreements with the University of the Pacific (UOP), University of Southern California (USC), and Touro University Schools of Pharmacy.

PHARMACY SERVICES

The Pharmacy Service provides 24-hour coverage seven days a week. Patient care is provided by a staff of more than 170 pharmacists and technicians.

Inpatient Service: Our decentralized inpatient pharmacy staff provides pharmaceutical care to veterans ensuring patients are educated and drug therapy is optimized. Care plans are developed based on individual patient needs and monitored for drug indication, appropriateness, and achievement of therapeutic outcomes. New orders are evaluated and verified in the context of this information with attention to drug dosing, drug interactions, adverse effects and drug allergies. Pharmacists' recommendations are communicated on patient care rounds or directly to the medical, surgical, psychiatric, or extended care teams, and documented in electronic progress notes. Pharmacists actively participate on code teams and utilize scopes of practice to independently manage all inpatient anticoagulation and aminoglycoside/vancomycin therapy. Drug distribution is centralized and accomplished through state of the art unit-dose

automation and USP 797 compliant IV admixture services. By utilizing automation and the technician support staff efficiently in the dispensing functions of the pharmacy, the system supports pharmacists in the provision of exceptional pharmaceutical care to their patients.

Ambulatory Care: The Outpatient Pharmacy operations provide distributive and clinical pharmaceutical services for veterans seen in the outpatient clinics and Emergency Department. Ambulatory Care Clinical Pharmacy Specialists provide comprehensive clinical pharmaceutical care services utilizing scopes of practice with full prescriptive authority in the following clinics: General Medicine (PACT: Patient Aligned Care Teams), Anticoagulation, Home Based Primary Care (HBPC), Women's Health, Pain Management, Renal, Psychiatry, Hepatitis C, and HIV Clinics.

Education and Training: Upwards of 30 pharmacy students and residents receive training each year from our experienced pharmacy preceptors as part of our VALOR program, APPE clerkships with affiliated colleges of pharmacy, and PGY1 and PGY2 residency programs. Educational opportunities include: resident inservices, Journal Club, Grand Rounds, clerkship student therapeutics and case conferences.

Pharmacy Administration: The supervisory structure includes the Chief of Pharmacy, Associate Chiefs of Inpatient, Outpatient, and Clinical Operations, and front line managers. These managers are supported by program managers in the areas of Pharmacy Benefits Management (PBM), Medication Safety, Pharmacy Informatics and Automation, Investigational Studies, and Pharmacoeconomics, providing ample opportunity for leadership experience in personnel management, operations, clinical services, and program management.



Mission Statement

Upon completion of this residency, the pharmacist will be prepared for a clinical or operational management/supervisory role in a variety of work settings. The pharmacist will be an effective, integral team member as well as efficient at independently solving problems. She/he will develop and demonstrate excellence in the following core competencies: communication, critical thinking, interpersonal effectiveness, organizational stewardship, personal mastery, business acumen, global perspective, leading change, partnering, and data driven outcomes. Leadership skills will be developed through the management of projects and working with administrators of the Pharmacy Service. Essential research skills will be developed and applied to pharmacy practices. Through all of these activities, the pharmacist will effectively utilize a variety of information and automation technologies.

RESIDENCY ACTIVITIES

The residency is a twelve month postgraduate year two program that provides training and experience in Health System Pharmacy Administration. The program provides a basic foundation in all aspects of pharmacy administration. The program is flexible and can be tailored to the individual resident, accounting for baseline skill set and desired goals and outcomes. It provides exposure to national, regional, and local activities that support safe and effective evidence based medication use, performance improvement, strategic planning, regulatory compliance, human resource management, fiscal management, and effective use of automation/technology. A research project is required and a focus on economics, outcomes analysis, or health-care policy is suggested, but not mandatory.

Required Rotations:

Pharmacy Leadership (longitudinal): The resident will learn core concepts and principles of effective leadership and management in a health care system setting and utilize them in practice. The resident will gain exposure to human resource management including: recruitment, hiring, staff development, performance evaluation, progressive discipline, labor-partnership relations, employee satisfaction and retention. The resident will cultivate professional skills and qualities necessary to develop into an effective and confident pharmacy leader, including; critical decision making, negotiation, delegation, change management, strategic planning, time management and project management skills. Residents also explore the pharmacist's role in the development of health care policy by serving as an active member of local and VISN health care committee throughout the year. Committees include: Local P&T Committee, Local Medication Safety SubCommittee, VISN Clinical Pharmacy Practice Council, VISN Outpatient Pharmacy Supervisors, VISN Inpatient Pharmacy Supervisors, VISN Pharmacy Leadership Board, National Clinical Pharmacy Practice Council, and National Pharmacy Chiefs Meeting.

Pharmacy Benefits Management (PBM) I (6 weeks): The resident will gain experience in several financial management activities in a health care setting. Formulary management activities will include developing formulary guidance documents such as drug use criteria and treatment algorithms; creating formulary implementation tools such as consult forms, order sets, and ward stock requests; developing medication use policy; and participating in various local and regional meetings. Pharmacoeconomic activities will include developing, implementing, and evaluating outcomes of cost savings initiatives; attending didactics in pharmacoeconomics, outcomes research, provider profiling, and academic detailing; preparing monthly budget updates; and conducting quarterly drug class growth trend analyses. The resident will also participate in medication use monitoring activities and pharmacovigilance, including developing and implementing regional performance measures, and conducting medication use evaluations. Additional activities include exposure to local procurement policies and procedures, purchase report reconciliation, daily drug accountability reports, and third party reimbursement.

Pharmacy Benefits Management (PBM) II (longitudinal): The resident will be responsible for various ongoing learning experiences, including: serving as editor of a monthly pharmacy newsletter for circulation to providers and pharmacists; adjudicating non-formulary requests; ensuring compliance with regional PBM medication safety performance measures; preparing a weekly drug shortage bulletin for circulation

to all staff; coordinating the annual wall-to-wall inventory; and preparing the annual pharmacy budget for submission to Chief Financial Officer and Chief of Staff.

Medication Safety/Compliance (6 weeks with longitudinal activities): The resident will collaborate with departmental and interdisciplinary teams to improve the medication-use process. Activities include developing and implementing quality improvement plans using performance improvement methodologies and managing the adverse drug reaction (ADR) and patient event reporting programs. The resident will participate in Root Cause Analyses, Aggregate Reviews, LEAN projects (Value Stream Analysis, 5S, Rapid Process Improvement Workshops), and accreditation preparedness and compliance with external quality standards (The Joint Commission, Office of Inspector General, Environmental Protection Agency, etc.).

Information Technology/Automation (4 weeks): The resident will gain unique exposure to Pharmacy informatics and automation technology in an integrated healthcare system. The resident will gain experience in software and automation for every aspect of the medication use process, including: Computerized Patient Record System (CPRS), Computerized Prescriber Order Entry (CPOE), VISTA Pharmacy packages, Barcoded Medication Administration (BCMA), and inpatient and outpatient pharmacy automation. Our pharmacy is highly automated, utilizing dispensing robots (Robot-Rx®, Parata Max®, Pharmacy 2000®), point of care machines (AcuDose®, Omnicell®), packaging machines (PACMED®) and other automation (MedCarousel®). The resident will gain exposure to implementation and maintenance of software and automation and learn to gather and analyze workload and operations data using Microsoft SQL and ProClarity.

Inpatient Clinical Management (4 weeks) and Ambulatory Care Clinical Management (4 weeks): The resident will get hands-on experience in the management, evaluation and development of clinical and educational services within the Pharmacy Service. The resident will gain experience through project assignment in the following areas: clinical service productivity and outcomes measurement; clinical pharmacist development and appraisal; evaluation and implementation of clinical services. The resident will participate in and lead various meetings, including service-level, health care system and regional meetings.

Inpatient Pharmacy Management (8 weeks): The resident will develop advanced skills in inpatient medication distribution management including: planning, directing and coordinating comprehensive inpatient operations; incorporating inpatient performance improvement activities; resolving inpatient pharmacy related customer concerns; managing and ensuring optimal and timely customer service. The resident will spend four weeks immersed in the inpatient pharmacy operation and another four weeks as the Acting Inpatient Pharmacy Manager.

Outpatient Pharmacy Management (8 weeks): The resident will develop advanced skills in outpatient medication distribution management including: planning, directing and coordinating comprehensive outpatient operations; incorporating outpatient performance improvement activities; resolving outpatient pharmacy related patient concerns; managing and ensuring optimal and timely customer service in the pharmacy telephone care program. The resident will spend four weeks immersed in the outpatient pharmacy operation and another four weeks as the Acting Outpatient Pharmacy Manager.

Elective Rotations (8 weeks): The resident will have eight weeks of elective rotation time that can be scheduled as two separate four week rotations or one eight week rotation based on resident interest and preceptor availability. Given the strong clinical services provided by Pharmacy Service preceptors, a PGY2 resident may choose to further develop their clinical skills in a specific area of interest. If the resident is interested in Pharmacoeconomics and population management, a VISN Pharmacy Benefit Management elective is available. If the resident is interested in supervision, a rotation with the National Pharmacy Recruitment and Retention Office is also available.

2016 – 2017 RESIDENCY CLASS

Jackie Ho, Pharm.D, MPH, BCPS
Touro University California, College of Pharmacy
PGY1 at Kern Medical Center, Bakersfield, CA
Jackie.Ho@va.gov

PROGRAM DESCRIPTION

Residency Type: PGY-2
Duration: 12 months
Number of Positions: 1
Application Deadline: January 1, 2017
Starting Date: July 10, 2017
Stipend: \$52,709
Interview Required: On site
NMS #713863

ELIGIBILITY REQUIREMENTS:

Prior to match:

1. Applicants must be a US Citizen, or should be eligible for citizenship prior to March 1, of the year the residency is scheduled to start.
2. Doctor of Pharmacy Degree
3. Pharmacy licensure in any state of the USA
4. Completion of PGY-1 Pharmacy Residency

After match:

1. Return signed Resident Appointment Letter by the stated deadline.
2. Successfully pass a pre-employment physical exam, including negative drug test.
3. Must meet all requirements for federal employment.

HOW TO APPLY

Our program participates in the ASHP PhORCAS system and National Matching Service (**NMS #713863**) and follows the rules associated with those processes. This residency site agrees that no person at this site will solicit, accept, or use any ranking-related information directly from any residency applicant.

Candidates wishing to apply to our program are required to submit the following **via PhORCAS**:

1. "Letter of intent" stating why you are pursuing a residency position in our program
2. Current curriculum vitae
3. VA Form 10-2850D "Application for Health Professions Trainees" (available at: <http://www.va.gov/oa/app-forms.asp>)
4. US Government form OF-306 "Declaration for Federal Employment" (available at: <http://www.va.gov/oa/app-forms.asp>)
5. Official School of Pharmacy transcript
6. Three letters of recommendation. These should be from individuals capable of commenting on your professional capabilities, including: academic ability, communication skills, behavioral attributes (leadership, initiative, dependability, ability to handle multiple tasks, etc.), clinical problem solving skills, an assessment of potential capability to perform research, and any other attributes which will assist us in assessing your ability to flourish and succeed in our program. All comments and information will be held in strictest confidence.

Applications must be completed in PhORCAS no later than January 1, 2017. Applications completed after January 1, 2017 will not be reviewed. Incomplete applications are not reviewed. The program will advise applicants with completed applications of their interview status (e.g., invite for interview or no interview) by February 20.

For more information and application materials please contact:

Kelly Robertson, Pharm.D.

Chief, Pharmacy Service, PGY2 Health System Pharmacy Administration Residency Program Director
VA Palo Alto Health Care System, Pharmacy Service (119), 3801 Miranda Avenue, Palo Alto, CA 94304

Kelly.Robertson@va.gov

(650) 858-3913

RESIDENCY PRECEPTORS

Pharmacy Management Staff serve as preceptors in their areas of expertise. The following are our current faculty.

Pharmacy Leadership

Kelly Robertson, Pharm.D., Chief, Pharmacy Service: Dr. Robertson received her Pharmacy degree from the University of Pacific in 1992 and completed the VA Palo Alto Pharmacy Residency in 1993. She worked as a Clinical Pharmacy Specialist at VA Palo Alto in Inpatient and Ambulatory Care positions from 1993-1995 and then held various pharmacy management positions of increasing responsibility (Outpatient Pharmacy Supervisor, Palo Alto Division Manager, Associate Chief of Pharmacy) until becoming the Chief of Pharmacy in 2004.

Pharmacy Benefits Management

Noelle Hasson, Pharm.D., Pharmacy Benefits Manager: Dr. Hasson received her Pharmacy degree from UC San Francisco in 1994 and completed the VA Palo Alto Pharmacy Residency in 1995. She has worked as a Clinical Pharmacy Specialist at VA Palo Alto in various positions (Inpatient Medicine, Drug Information, Clinical Coordinator and Pharmacy Benefits Manager) since 1995.

Medication Safety/Compliance

Carolyn Wrzesniewski, Pharm.D., BCACP, Medication Safety Officer: Dr. Wrzesniewski received her Pharmacy degree from the University of Florida College of Pharmacy in 2010 and completed a Healthcare Quality and Medication Safety Fellowship at the University of Florida in 2012. She joined VAPAHCS in 2012.

Information Technology Management/Automation

Douglas Klahold, Pharm.D., Information Technology/Automation Pharmacist: Dr. Klahold received his Pharmacy degree from University of the Pacific in 1995 and completed a Clinical Pharmacy Residency at Hamot Medical Center, Erie, Pennsylvania, in 1996. He has practiced in a number of pharmacy settings including inpatient, outpatient, and long term care, and has held multiple pharmacy management positions (Sav-On, VA Palo Alto Outpatient Pharmacy, and Kaiser Permanente) prior to becoming the IT/Automation Pharmacist at VA Palo Alto in 2008.

Esther Song, Pharm.D., BCPS, FASCP, Pharmacy Information Manager: Dr. Song received her BS Pharmacy from University of Wyoming in 1986 and Pharm. D. from Rio Grande College of Pharmacy in 2000. She started as a Clinical Pharmacy Specialist in Geriatrics at VAPAHCS, Menlo Park Division in 1990 until becoming the Pharmacy Information Manager in 2000.

Inpatient Clinical Pharmacy Management

Rachel Ranz, Pharm.D., BCPS, Inpatient Clinical Manager: Dr. Ranz received her Pharmacy degree from Butler University in 2008 and completed a PGY1 Pharmacy Residency at NorthShore University Health System in Illinois in 2009. She completed a PGY-2 Health System Pharmacy Administration Residency at the Indianapolis VA in 2010 and worked as a Surgical Clinical Pharmacy Specialists for five years at the same VA. She joined VAPAHCS in 2015 as Inpatient Clinical Pharmacy Manager.

Ambulatory Care Clinical Pharmacy Management

Randell K. Miyahara, Pharm.D., Ambulatory Care Manager: Dr. Miyahara received his Pharmacy degree from UC San Francisco in 1985 and completed a Clinical Pharmacy Residency at the University of Southern California in 1986. He joined VAPAHCS in 2005 as an Ambulatory Care Clinical Pharmacy Specialist, and became the Ambulatory Care Clinical Manager in 2006.

Inpatient Pharmacy Management

Ceaminia Yuen-Sinn, Pharm.D., Associate Chief of Inpatient Pharmacy Operations: Dr. Yuen-Sinn received her Pharmacy degree from the University of Minnesota in 1996. Following graduation, she completed a PGY1 Pharmacy Practice Residency at Hennepin County Medical Center in Minneapolis, Minnesota and a PGY2 in Critical Care/Nutrition Support at the University of Tennessee, Memphis, Tennessee. She worked for 6 years as a Clinical Coordinator and Clinical Pharmacist, and then as the Assistant Director/Clinical Coordinator at Seton Medical Center for 12 years. She joined VA Palo Alto Health Care System as an Associate Chief of Inpatient Pharmacy Operations in 2015.

Outpatient Pharmacy Management

Helen K. Park, Pharm.D., BCPS, Associate Chief of Outpatient Pharmacy Operations: Dr. Park received her Pharmacy degree from the University of the Pacific in 1999. Following graduation, she specialized in compounding pharmacy where she established pharmacy clinics for diabetes, hypertension, asthma and immunization. She worked as a pharmacy manager for a retail pharmacy before joining the VA San Diego Healthcare System as a clinical pharmacy specialist in spinal cord injury. She was the Director of Inpatient Pharmacy from 2005-2013 before joining VAPAHCS as the Associate Chief of Outpatient Pharmacy Operations in 2013.