



**Pharmacy Services
Residency Advisory Committee
MINUTES**

February 12, 2008
1100 – 1200h

Present: Roxane Carr, Eva Cho, Patricia Gerber, Don Hamilton, John Hope, Sue Rudolph, Jennifer Tam

Regrets: Alison MacDonald, Kathleen Collin, Mary Ensom

1.0 Approval of Minutes

Minutes of October 12, 2007 meeting were approved.

2.0 Current Resident Progress (Jennifer Tam)

2.1 Rotation Update

- Working on dispensary/miscellaneous projects
- Completed Oncology Rotation and learned a lot from Roberta, Keith and Claire
- Current rotation - PICU with Roxane
- Admin week is scheduled next, then WH, Project, DPIC, Dispensary evening shifts, and Burnaby Hospital rotation

2.2 Case presentation to Residents, Coordinators Groups

- Gave case presentation to group coordinators in January

3.0 Project Update

- In process of reviewing charts (reviewed 47/108 to date)
- Difficult to access charts since Health Records was short staffed during project week

4.0 Project evaluation process

- Currently evaluation process as per BC Residency Coordinators Group and CSHP Hospital Pharmacy Residency Award. The following criteria are used - a project "representing a significant innovation, practical application and/or development in an institutional pharmacy practice setting. The two projects with the highest cumulative scores, as assessed by a minimum of two reviewers, will be deemed the winning submissions. Reviewers to assist in judging the manuscripts will use the following criteria as guidelines: project merit (40%), written presentation (30%), and methodology (30%) based on highest marks from an CSHP evaluation process"
- Discussion regarding evaluation process:
 - Roxane: The resident should have an opportunity to get constructive feedback on writing skills, and other aspects of the project throughout residency year. Suggest that preceptor should meet with the resident at the end of every project week and provide feedback. Also at this time, the resident should be asked to evaluate the project/preceptor. Will need to adapt an evaluation form for project.
 - Don: Task falls on Residency Committee. Instead of evaluation form could have a progress record.
 - Eva: Preceptor should assess accuracy of project data

Consensus: Agreed that there is value in an established process to help dialogue. Will formalize processes in place and incorporate into residency program.

5.0 Resident's Learning Portfolio

- Eva and Jennifer T. developed a list of items that should be included in the learning portfolio (eg schedules, rotation objectives, personal goals, evaluations, clinical activities)
- Suggestions:
 - Resident to keep a log and pass on to next preceptor, ie. interesting pharmacokinetic issues, presentations attended, and presentations presented
 - Document learning moments, to minimize repetition during residency year
- Jennifer T. showed the group her e-learning portfolio using the "Keep Toolkit"
 - Keep Toolkit - <http://www.cfkeep.org/static/index.html>
 - Each students e-learning portfolio is URL accessible
 - Concerns about confidentiality were discussed
- Group agreed to ask upcoming resident to use, and Jennifer T. agreed to send her URL to Don

6.0 C&W Residency Program CHPRB Accreditation (October 2007)

6.1 Review of process

- Group reviewed process (see attached letter and recommendations)
- Accreditors will respond with a final report

6.2 Review of preliminary recommendations

Discussed Summary of Recommendations:

2.3.1 b) add at beginning "preferably have been"

Selection criteria – add: "as department deems qualified"

3.1.1 Granting credit – resident can submit letter specifying competency and ask for credit
ie. Resident can work extra time in dispensary and be credited
Roxane questioned if this would reduce residency, but John responded that the assumption is that the resident will learn something else

3.2.1 Required reading – suggested that change to "optional"

2.1.2 Asked for 2 residents in budget

2.2.1 Have a lunch with preceptors / have an annual preceptor forum for sharing teaching techniques, tips
ie. First forum – not residents
Second forum – invite residents
Vancouver Coastal has own Preceptor Workshop, so cuts down on attendees

3.3.1.1 Pharmacy has asked for budget

3.3.2.1 Pharmacy has asked for budget

Group decided to start having a discussion at RAC meeting (last 10 minutes) without resident to discuss competency / progress and to trial at next meeting

7.0 New initiatives introduced in 2007-08 - Review & feedback

7.1 Academic ½ Day (see attached)

- Going smoothly and well received by preceptors and staff
- Patricia mentioned that this is difficult to schedule when no one is available to attend and missing Adult Cardio, but could possibly invite a speaker ie. a Pharm D student?

- Jennifer T. felt that topics were relevant, but she could not always apply learned concepts immediately in practice. Thus, she suggested that more hands on, case-based learning be used for these sessions..

7.2 Weeks of [Dispensary (am) – Miscellaneous (pm)]

(See attached schedule)

- Jennifer T. liked the morning dispensary shift and felt the resident should be an extra for at least one week
- Sue R. agreed that days are better for resident learning, and agreed to look at how to best schedule Vanessa
- Don suggested having 2 x 4 – 8 pm shifts as an extra and then could work in December and March as a scheduled pharmacist

7.3 Oncology rotation x 4 weeks

- Group agreed that Oncology should remain as a 4 week rotation

7.4 Elective rotation

8.0 Resident Selection 2008 -09

8.1 C&W Resident 2008-09

Vanessa Paquette will be starting June 30th

8.2 Schedule planning, elective rotation

See attached schedule

8.3 “Call for projects”

Patricia has put a call for projects out and will follow up.

9.0 CSHP Accreditation Standards 2010 Draft Version 3- Feedback

10.0 Transitioning of Residency Coordinator

11.0 Next meeting

Will try to set up a meeting in June.

Recorded by: Lynne Taylor