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#### Research Article

# 24-Month pharmacotherapy residency: The what and how behind these programs



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#### ABSTRACT

Purpose: To describe available 24-month pharmacotherapy residency programs.

Methods: Eligible residency programs were identified using the American Society of Health-System Pharmacy (ASHP) and American College of Clinical Pharmacy (ACCP) online directory of postgraduate programs. Initial information was gathered via a program description search on the World Wide Web. Following the initial search, program directors were contacted to verify current information and complete missing data. Descriptive statistics were utilized to report the data.

Results: Thirteen programs were identified and all programs responded. The majority of programs had multiple practice sites  $(n=7;\,54\%)$  and an affiliation with a college or school of pharmacy  $(n=11;\,85\%)$ . Additionally, 62% (n=8) receiving some funding for the residency program through a college or school of pharmacy. Although most programs had a primarily acute care focus, all programs required both acute care and ambulatory care experiences. Overall, 62% (n=8) of programs offered a rotation coupling strategy. All programs required completion of a research project, allowing flexibility for a large two year project as appropriate. Academic experiences were available in all programs; however, experience was more prevalent in programs with academic funding. When combined, programs report the following average residency time allocations: 61% patient care, 15% research, 15% teaching, and 9% leadership/service.

Conclusions: Minimal information is available comparing 24-month pharmacotherapy programs, providing a barrier to interested students, student mentors, and potential residency program directors. While diversity exists between required and elective experiences, all offer a mix of acute and ambulatory care clinical experiences. Graduates are equipped with diverse experiences, allowing versatility in the delivery of patient care. Additionally, residents are often afforded the opportunity to participate in teaching, service, and scholarship. Utilizing knowledge of the characteristics of currently available programs may help future programs structure diverse

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24-month pharmacotherapy residencies and enhance student understanding of what these programs have to offer.

#### Introduction

Multi-year pharmacy residencies are not a new concept; historically they have been at times added on to Pharm.D. degree programs. However, there is no published literature highlighting this training design and there are none that exist as accredited programs today. Pharmacotherapy pharmacy residencies were traditionally available as 12-month postgraduate year two (PGY-2) programs prior to 1996, when the first 24-month pharmacotherapy program was established. Since then, 24-month pharmacotherapy residencies have expanded to include 15 programs—12 American Society of Health-System Pharmacists (ASHP) accredited programs and three unaccredited programs—and now outnumber the five ASHP accredited 12-month pharmacotherapy programs (Table 1). The ASHP/American College of Clinical Pharmacy (ACCP) Standards and Learning Objectives define a 12-month PGY-2 pharmacotherapy program as an organized, directed postgraduate program that centers on developing a mastery of knowledge and an expert level of competency in pharmacotherapy. While 24-month pharmacotherapy residencies may offer several distinct advantages over their 12-month counterparts, there is currently a dearth of information about these programs, as well as no distinct ASHP Standards for 24-month pharmacotherapy programs. These gaps can lead to uncertainty for interested students, confusion for mentoring faculty and preceptors, and mis-direction for future program directors.

A clear need exists for PGY-2 trained pharmacy specialists and educators in our current healthcare system to fill a diverse group of positions that cannot be met without specialized training.<sup>3</sup> With the pharmacotherapy specialty the practitioner may not have a distinct area of expertise, but rather has an ample depth and large breadth of patient populations and practice areas in which they are proficient. Pharmacotherapy programs often have multiple opportunities to build specialized skills, knowledge, and functions that enhance the ability to move from one specialty to another and create significant flexibility in the workforce. Twenty-four-month pharmacotherapy residencies are designed to prepare graduates to enter clinical practice in various acute or ambulatory care settings, and in some instances, academia.

With the vast increase in pharmacy students pursuing residency training, 24-month pharmacotherapy programs are ideal to achieve the primary factor identified by pharmacy students as a reason for pursuing a residency, to gain knowledge and experience. This is especially true for those students who enjoy caring for patients with a wide variety of disease states. The transition to a 24-month span for the pharmacotherapy programs is perfectly suited to promote mastery in a multitude of pharmacotherapy specialties, while allowing elective experience flexibility for the resident's individual interest area. This format also offers an advantage over separate postgraduate year one (PGY-1) and PGY-2 pharmacy residencies in the ability to incorporate longitudinal experiences throughout the first and second year, thus allowing for potential sequencing of experiences over the residency.

The ASHP/ACCP Standards and Learning Objectives recommend experiences in all practice settings (acute care, ambulatory care, sub-acute care, home health care, and nursing home care) for 12-month pharmacotherapy residencies.<sup>2</sup> This recommendation allows for the most versatile pharmaceutical care experiences of any PGY-2 residency. Due to differences in institutions, programs may not be able to offer experiences in all areas of practice; therefore, each program may offer unique learning environments and areas of emphasis, while achieving the overall goal of developing pharmacotherapy expertise. Twenty-four month pharmacotherapy residency programs may offer many benefits, although they are still relatively few in number and much remains unknown about program characteristics and requirements.<sup>5</sup>

A collation of data within currently available programs may lead to an increased understanding and interest in this important area of residency training. This study was conducted to describe similarities and differences in the currently available 24-month pharmacotherapy residency programs, providing a framework for the development of unique standards and clearer global expectations for prospective residents, student mentors or future program directors.

#### Methods

A prospective survey analysis characterizing 24-month pharmacotherapy residency programs was completed in 2014. Twenty-four-month pharmacotherapy residency programs were first identified using the ASHP Online Residency Directory. The directory enables viewers to filter residency programs by specialty, including combined PGY-1 and PGY-2 pharmacotherapy programs. The ASHP Online Residency Directory identified 12 ASHP accredited pharmacotherapy residency programs. The list of programs was compared against the ACCP Online Directory of Residencies, Fellowships, and Graduate Programs. The ACCP Directory displayed thirteen 24-month pharmacotherapy programs, the twelve ASHP accredited programs as mentioned above and one additional non-ASHP accredited residency program. No additional programs were found using a generic online search engine. Thirteen 24-month pharmacotherapy residency programs were contacted for inclusion within the study.

A free-response questionnaire was created utilizing Microsoft Word\* (Version: 2010) to compile information about each pharmacotherapy residency program. The first section focused on institution specific information, including similarities and differences to other available pharmacy residency programs at that institution. Additional questions concentrated on the residency program, including year of establishment, affiliations with colleges of pharmacy, and applicants per year. The final inquiries were directed toward clinical responsibilities along with specific academic experiences in the classroom and experiential setting. The

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