

MOUNT SINAI HOSPITAL MEDICAL CENTER PGY2 HEALTH-SYSTEM PHARMACY ADMINISTRATION AND LEADERSHIP





PGY2 Health-System Pharmacy Administration and Leadership Mission Statement

Our mission is to develop future progressive pharmacy leaders through a curriculum full of coordinated practical experiences involving all of our expanding pharmacy services.

Purpose

PGY2 pharmacy residency programs build on Doctor of Pharmacy (Pharm.D.) education and PGY1 pharmacy residency programs to contribute to the development of clinical pharmacists in specialized areas of practice. PGY2 residencies provide residents with opportunities to function independently as practitioners by conceptualizing and integrating accumulated experience and knowledge and incorporating both into the provision of patient care or other advanced practice settings. Residents who successfully complete an accredited PGY2 pharmacy residency are prepared for advanced patient care, academic, or other specialized positions, along with board certification, if available.

The PGY2 residency program provides in-depth professional, managerial and patient directed training and experience at the post-graduate level. The resident will acquire advanced skills in personnel management and development, communication, resource management, fiscal management, regulatory compliance, and program development. The PGY2 offers the resident the opportunity and stimulus to develop, to the highest degree attainable, his/her professional expertise as a clinical practitioner and future health system manager/leader, emphasizing skills required to optimally deliver pharmaceutical care through effective leadership.

Goals

- Develop skills in health-system pharmacy enterprise management
- Develop competence in managerial, financial, and organizational components of health-system pharmacy
- Develop effective organizational, integrative, and evaluation skills that will assist the resident in improving current and developing new pharmacy services
- Develop sufficient knowledge and expertise in pharmacy with legal, regulatory, safety and accreditation requirements
- Demonstrate leadership by developing working relationships with healthcare providers and other professionals on multidisciplinary teams and committees
- Lead others through the use of effective communication, mentorship, action, and transformational leadership





PGY2 HEALTH-SYSTEM PHARMACY ADMINISTRATION AND LEADERSHIP RESIDENCY PROGRAM STRUCTURE

Required Rotations

- 1. Orientation (4 to 6 weeks)
- 2. Pharmacy Administration I (4 weeks)
- 3. Health System Medication Safety (4 weeks)
- 4. Pharmacy Administration II (5 weeks)
- 5. Health System Administration with VP (5 weeks)
- 6. 340B, Specialty Pharmacy, Supply Chain (4 weeks)
- 7. Budget and Finance (5-6 weeks)
- 8. Advanced Pharmacy Operations (12 month longitudinal)
- 9. Staffing (12 month longitudinal)
- 10. Pharmacy Informatics and Technology (4-6 weeks)
- 11. Research project (12 month longitudinal)

Elective Rotations

- 1. Repeat any of the required rotations
- 2. 340B, Specialty Pharmacy, Supply Chain II (4 weeks)
- 3. Pharmacy Administration at Holy Cross Hospital

Additional Core Experiences

- Strategic Planning
- Chief Resident
 - Mentor and direct IPPE, APPE students and PGY1 Residents
 - Primary preceptor of PGY1 residents and students on Hospital Practice Management rotations
- Engage in cross-functional team meetings including Pharmacy & Therapeutics Committee Meetings, Comprehensive Unit Based
 Safety Program & Pharmacy Technician Meetings
- Contribute in development of the layered learning model as we work to best utilize pharmacy technicians, pharmacy students, pharmacy residents and clinical specialists to the fullest of their training
- Lead several pilot programs involving transitioning patients across the continuum of care
- Develop human resource experiences through practical experience in recruiting, employee engagement tools, performance evaluations, developing schedules and other managerial functions
- Lead daily pharmacy staff huddle
- Participation in activities related to health promotion and wellness.
- Work with the Director of Pharmacy and a Health System Administrator (VP of Clinical Operations) to gain a better understanding and play a role in health-system initiatives
- Lean Six Sigma Yellow Belt Training, Learn and incorporate Studer philosophy towards leadership (thank you cards, rounding, setting goals)

Elective Experiences

Roosevelt University Teaching Certificate

Requirements

- 1. Complete a research project and present at Midyear Clinical Meetings and Great Lakes Residency Conference
- 2. Serve as weekend supervisor on-call one weekend every month
- 3. Complete a business proposal for implementation of a new service





- 4. Lead a minimum of 8 leadership topic discussions for PGY1 residents throughout the residency year
- 5. Complete one pharmacy operations enhancement or financial savings related project
- 6. Responsible for presenting Drug Shortages Report at Pharmacy & Therapeutics Committee Meeting every other month P&T (part of Advanced Pharmacy Operations rotation)
- 7. Completion of one drug utilization evaluation to be completed during Medication Safety and/or Pharmacy Administration Rotation
- 8. Development and/or updating of a policy or guideline (part of the Medication Safety rotation), utilizing best practices
- 9. Co-Lead Comprehensive Unit-Based Safety Program and Pharmacy Technician Meeting for pharmacy team
- 10. Act as Chief Resident for PGY1 Residents

General Information

- 1. The Program Director shall serve as program advisor for the resident and will guide the resident in meeting the requirements for successful completion of the residency.
- 2. The resident shall meet with the Program Director at the beginning of the program to evaluate their skills and knowledge and to develop an individualized plan based on the resident's previous preparation and professional practice goals.
 - a. The evaluation and planning process shall be documented in the PharmAcademic Customized Training Plan (CTP) using the Resident Self-Evaluation and Planning Form.
 - b. The resident and Program Director will develop a customized residency program plan for each resident to accomplish the specific program goals taking into account the resident's goals, interests, strengths, weaknesses, and opportunities available within Sinai Health System.
 - c. The Resident Self-Evaluation and Planning Form will be used to develop each resident's schedule of rotations.
 - d. Once residency rotations have been assigned, the resident may request a change in assigned rotations. Requests will be accommodated whenever possible and appropriate for their training plan.
- 3. A copy of the Residency Manual shall be provided electronically to each resident outlining the requirements of the residency program.
 - a. Residents shall make themselves knowledgeable of all program requirements.
 - b. Residents shall make themselves aware of important dates and deadlines set forth and identified in the program manual and appendices.
- 4. Orientation to Mount Sinai Hospital Medical Center and to the Department of Pharmacy Services will take place during the first weeks of the program; however, orientation and skills development will continue on an as-needed basis.





Since 1919, the hospitals, physicians and staff of Sinai Health System have provided medical care and social services to Chicago's west side communities. Today, Sinai Health System provides a full continuum of care, including acute, primary, specialty and rehabilitation services.

Mount Sinai Hospital Medical Center

- 319 bed teaching, research and tertiary-care facility
- Level I trauma Center: Adult & Pediatric
- Emergency visits: > 50,000 per year
- Accreditation: Primary Stroke Center & Chest Pain Center [Joint Commission]
- Tertiary/Specialty care: Cardiovascular services, Cancer Care Center, Stroke Center, Orthopedics, minimally invasive surgery, Diabetes, Geriatrics
- Residency Programs: Pharmacy, Internal Medicine, Family Medicine, Surgery, Pediatrics, OB/GYN, Podiatry

Sinai Children's Hospital

- 74 bed teaching hospital
- Level III NICU & PICU
- Pediatric Specialty services: cardiology, gastroenterology, nephrology, allergy, endocrinology, urology, neurology, physical medicine and rehabilitation

Schwab Rehabilitation Hospital

- 102 bed teaching and research hospital
- One of three free-standing rehabilitation hospitals in Chicagoland area
- The only Joint Commission and CARF Stroke Rehabilitation certified facility in Chicago
- Core Programs: Stroke, Brain Injury, Spinal Cord Injury, Musculoskeletal and neurological rehabilitation, Amputation rehabilitation, Pediatric and Adolescent rehabilitation

Sinai Medical Group

- More than 500 Physicians on staff and 200 specialists in the Medical Group
- Clinics located in the communities Sinai serves and on the Mount Sinai Hospital campus

Holy Cross Hospital

- 274 bed community hospital
- Joined Sinai Health System in 2013

Sinai Community Institute

Programs designed to address the social, economic and environmental factors that impact the health of the community

Sinai Urban Health Institute

• Provides community-based interventions that improve health in some of the most vulnerable neighborhoods in the city









Pharmacy Department Strategic Plan

1. Defining and measuring pharmacy productivity to allow operational adjustments to further impact positive outcomes and increase direct patient care

- a. Identifying patient care priorities at Mount Sinai Hospital and Schwab Rehabilitation Hospital that can be advanced by redeployment of pharmacists
- b. Focusing on data-mining for the purposes of performance improvement and to assist in operational and clinical decision-making
- c. Developing expertise in data analytics to ensure the best use of data to improve individual patient and populationbased care
- d. Creating cascading goals dashboard in alignment with Sinai Health System Key Performance Indicators (KPIs) to assess progress

2. Creating an inpatient medication therapy management program to expand transitions of care program services within Mount Sinai Hospital and Schwab Rehabilitation Hospital

- a. Establishing close alliances with organizational leaders by contributing to initiatives in population health, risk contracting, and strategic partnerships
- b. Engagement of pharmacists as medication therapy experts, clinicians, and physicians to drive practice changes, community-wide antimicrobial & opioid-related stewardship efforts and policy solutions for our community

3. Limiting expected growth of drug expenditures through multiple departmental initiatives

- a. Performing medication utilization evaluations of high cost drugs identified through the 80/20 report along with diligent and often daily support from clinical pharmacists guiding day-to-day medication management through appropriate order sets and guidelines
- b. Optimizing inventory management, reducing waste, and eliminating non-urgent low volume usage products from the drug formulary

4. Maximizing revenue opportunities through our 340B drug pricing program, specialty pharmacy program, and onsite outpatient retail pharmacy

a. Meeting regulatory compliances surrounding the 340B program with appropriate oversight and program compliance responsibilities

5. Continuing to professionally engage our staff

- a. Leveraging and increasing the utility of pharmacists, APPE students and pharmacy technicians to provide more direct patient care through patient education, medication histories and medication reconciliation
- b. Establishing a sound process for identifying the competency requirements of pharmacists and technicians for specific responsibilities and assessing every staff member for compliance with competency requirements
- c. Encouraging continuous professional development of each pharmacist and technician related to competency requirements surrounding increased direct patient care and medication safety initiatives





Faculty and Mentors

Our team is led by a Pharmacy Director who is committed to departmental growth and development. Through our innovative programs, our passionate and energetic preceptors enjoy sharing their knowledge and expertise with others.

PGY2 Pharmacy Administration and Leadership Residency Program Director
Sameer Shah, PharmD, MHA
Director of Pharmacy, Respiratory, Sleep Lab & Neurodiagnostics
Cancer Program Administrator
Graduate of UIC College of Pharmacy, PharmD
UIC School of Public Health, Master of Healthcare Administration

Interests/Focus: Pharmacy Automation/Technology/Innovation, Advancing Pharmacy Practice, Leadership Development, Pharmacy Revenue Cycle Management, Maximizing pharmacy's full clinical and fiscal value to improve patient outcomes and lower the total cost of healthcare



<u>PGY2 Pharmacy Administration and Leadership Residency Coordinator</u> Thomas Yu, PharmD

Outpatient (340B/Specialty/Retail Pharmacy) Manager

Graduate of Ernest Mario School of Pharmacy at Rutgers University, PharmD

PGY1 Residency: Kimball Medical Center

PGY2 Residency: Mount Sinai Hospital Medical Center (Health-System Pharmacy Administration)

Interests/Focus: 340B, Specialty Pharmacy, Population Health, Leadership Development



<u>PGY2 Residency Preceptors</u>
Stanley Chacko, PharmD
Pharmacy Operations Manager – Holy Cross Hospital
Graduate of University of Sciences at Philadelphia, College of Pharmacy, PharmD

Interests/Focus: Development and advancement of Pharmacy Services, Personnel Development/Management, Pharmacoeconomics, Cost-Containment Strategies, Staff development/compliance with USP 797/800, Drug Shortage Management, Optimization of all Pharmacy technologies





Ann Wehmeyer, PharmD, BCPS

Medication Safety Officer: Sinai Health System

Graduate of Ohio Northern University College of Pharmacy, BS

University of Cincinnati College of Pharmacy, PharmD PGY1 Residency: VA Medical Center, Cincinnati, OH AHA/NPSF Patient Safety Leadership Fellowship

Interests/Focus: Patient and Medication Safety, No Harm Initiatives, Electronic Safety Surveillance, Pain management, Anticoagulation, Anesthesia, Process Improvement, Accreditation, Root Cause Analysis



Tejal Patel, PharmD, BCPS
Pharmacy Operations Manager – Mount Sinai Hospital Medical Center
PGY1 Pharmacy Residency Program Coordinator

Graduate of Nova Southeastern University College of Pharmacy, PharmD PGY1 Residency: Mount Sinai Hospital Medical Center, Chicago, IL

Interests/Focus: Development of Pharmacy Services, Pharmacoeconomics, Cost-Containment Strategies, Advancing pharmacy disease management services, Personnel Development/Management, USP797/800, Drug Shortage Management, Pharmacy informatics



Rimple Patel, PharmD

Pharmacy Operations Manager - Mount Sinai Hospital

Graduate of Roosevelt University College of Pharmacy PGY1 Residency: NorthShore University HealthSystem, IL

PGY2 Residency: Mount Sinai Hospital Medical Center (Health-System Pharmacy Administration),

Chicago, IL

Interests/Focus: Administration, Medication Safety, Drug Information, Formulary Management

Donnica Austin-Cathey Vice President of Operations, Acute Care Hospitals

Graduate of University of Illinois at Urbana-Champaign, Bachelor's Degree Graduate Governors State University, Master of Health Administration

Interests/Focus: Compliance, Regulatory, Hospital Operations, Health System Transformations, Strategic Planning





Karen E. Trenkler, PharmD, MS, BCPS
PGY1 Residency Program Director
Clinical Manager: Mount Sinai Hospital Medical Center
Graduate of UIC College of Pharmacy, BS
Midwestern University, Chicago College of Pharmacy, PharmD
DePaul University, Information Systems, MS

Interests/Focus: Infectious Diseases, Informatics, Critical Care, Geriatrics, Clinical Pharmacy Management







Mission

Our mission is to improve the health of the individuals and communities we serve.

Vision

Sinai Health System will become the national model for the delivery of urban health care.

Values

Respect, Integrity, Quality, Teamwork, Safety

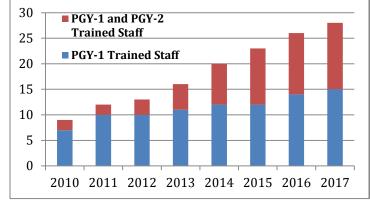
Pharmacy Department

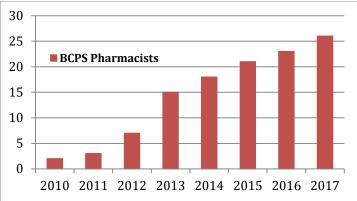
Department of Pharmacy Services Mission Statement

Our mission is to provide evidence-based, cost-effective and safe drug therapy, with the purpose of attaining optimal patient care outcomes. To achieve this, maximization of technology and the emphasis on education, training, and development of pharmacy staff are prioritized.

Mount Sinai Hospital's (MSH) pharmacy department has greatly expanded its level of clinical services and scope of practice over the past 8 years. The previous pharmacy model focused on the distribution of medications and the pharmacists worked mainly within the pharmacy. Today, pharmacists practice and round on patient floors where the focus is on direct patient care and providing evidence-based recommendations to doctors and other healthcare professionals. This change in MSH pharmacy practice was a multi-year process that required a high level of staff engagement and leadership.

The growth of pharmacy clinical services was accomplished through the acquisition of talented and residency-trained pharmacists. Pharmacy residencies require at least one year of intense pharmacy practice training that is considered professionally to be equivalent to 3 years of hospital practice experience. In 2007, the pharmacy department only had one residency-trained pharmacist. Today, there are over 25 residency-trained pharmacists on staff. In addition to residency training, pharmacists can obtain board certification in pharmacotherapy through board certification examination which formally affirms a pharmacist's strong fundamental understanding of drug therapy across dozens of diseases. The pharmacy department grew from having 0 to 26 board certified pharmacists.





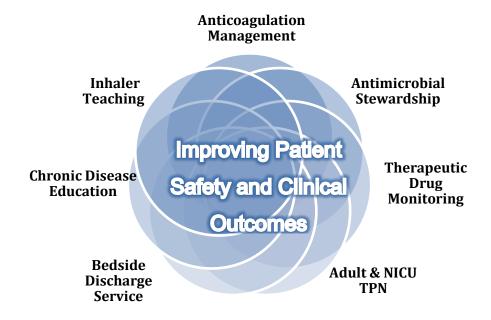
With a talented and engaged pharmacy staff, our clinical staff pharmacists have expanded the level of pharmacy-provided clinical services to improve patient safety and outcomes. The clinical staff pharmacists are located on general medicine floors where they provide in-person pharmacy guidance to doctors, residents, nurses and other healthcare providers. They are also responsible for implementing pharmacy-driven initiatives designed to provide evidence-based medication management strategies to patients. Some





of these roles include anticoagulation management, antimicrobial stewardship, disease state management, bedside discharge counseling, and therapeutic drug monitoring.

The scope of pharmacy practice has grown into high-risk areas where a medication specialist is needed. At MSH, the first clinical pharmacist acquired in 2009 specialized in critical care medicine. Since then, the role of pharmacy specialists has expanded to other high-risk areas such as emergency medicine, surgical intensive care unit, oncology, infectious diseases, and pediatrics. All hired clinical specialists have undergone a second year of residency to become experts in the evidence-based practices of their respective specialty. Clinical specialists are invaluable to the hospital not only for their depth of knowledge but also for their ability to develop hospital-wide guidelines, order sets, and procedures in their specialized areas.



Pharmacy is at the forefront of medication safety. The pharmacy department has acquired new technologies that improve workflow efficiencies and automate processes to prevent errors from reaching the patient. Some recent technology implemented includes two-way wireless smart pumps, MedMined™ clinical surveillance application, DoseEdge™ IV workflow manager, Baxter Exactamix™ TPN compounder, McKesson™ automation, including 30 Omnicell machines, 2 MedCarousels™, 1 PACMed™, 3 Narcotic Towers, KitCheck, Smart Temps wireless thermometers, Simplifi797, and Veriform. Together, these technologies improve the accurate dispensing and safe administration of many medication formulations. Automation has also allowed for pharmacists to focus on expanding clinical services to the patients on the floors.

The development of MSH's PGY1 pharmacy practice residency program (2010) and PGY2 Health-System Pharmacy Administration and Leadership Residency Program (2013) symbolized the growth, success, and stability of the department. A strong residency program requires two key components: reliable operations and a variety of clinical learning experiences. These pieces are needed to create a learning environment where a resident is able to receive a well-rounded experience. Consequently, many of MSH's resident graduates have decided to stay within SHS.

Since the start of the PGY2 residency program in 2013, 3 of the 4 graduates were hired within SHS upon completion of the program. They required minimal training and instantly increased the level of pharmacy clinical and administrative services. The residency program has also been invaluable in developing future department leaders. A few of our current pharmacy managers were past MSH PGY1 and/or PGY2 residents.





Mount Sinai Hospital has fostered the development of a highly-trained pharmacy staff that goes above and beyond the traditional inpatient pharmacy model. Mount Sinai's pharmacy department provides for patients in a wide variety of services that differentiate itself from its peers and bring incredible value to the hospital. The pharmacy department has embraced the vision and mission of Sinai Health System and will continue to bring a high level of service to its patients.

About the Pharmacy Department

The Pharmacy Department consists of a progressive management team which works with a staff of experienced and motivated pharmacists & technicians.

- Pharmacy Staff (32 FTE Pharmacists and 22 FTE Technicians)
 - Clinical Staff Pharmacists (Main Pharmacy)
 - Clinical Pharmacist
 - General Medicine
 - Ambulatory Care Clinics
 - Clinical Specialist
 - MICU
 - SICU
 - Emergency Department
 - Oncology
 - Infectious Diseases (2)
 - Inpatient
 - Outpatient (HIV/HepC/ID)
 - Informatics
 - NICU
 - Transitions of Care Pharmacists (2)
 - Management
 - Director of Pharmacy
 - Operations Manager
 - Clinical Manager
 - Medication Safety Officer
 - Outpatient Pharmacy Manager (340B/Specialty)
 - Pharmacy Coordinator (340B/Specialty)
- Operations / Technology
 - Decentralized Pharmacy Model
 - USP <797> and USP <800> Clean Room and Oncology Satellite
 - ADC, MedCarousel & PACMed Technology → Converted to Omnicell Automation Technology in 2017
 - DoseEdge Pharmacy Workflow Manager
 - Kit Check → OR Trays, Epidural Trays, Anesthesia Boxes, Crash Carts
 - Simplifi797, Veriform, and StaffReady
 - Medication Surveillance Software
 - Computerized Prescriber Order Entry (CPOE)
 - Barcode Medication Administration (BCMA)
 - Electronic Medication Administration Record (eMAR)
 - o Programmable IV pumps two-way wireless

