

**TORONTO GENERAL HOSPITAL/ MCGILL UNIVERSITY HEALTH CENTRE
DEPARTMENT OF PHARMACY SERVICES
HIV SPECIALTY RESIDENCY PROGRAM**

PROGRAM GUIDELINES

A. PURPOSE

The purpose of the Residency is to prepare graduates for successful careers in HIV specialty pharmacy practice. This in essence will accelerate the professional development of the pharmacist by familiarizing her/ him with all elements of HIV pharmacy practice that gained through normal experience.

B. QUALIFICATIONS OF THE APPLICANT

The residency applicant must be a M.Sc. or Pharm.D. graduate of a school of pharmacy whose curriculum meets the approval of the Association of Faculties of Pharmacy of Canada. In addition, the resident must already have completed a one-year CHPRB-accredited or PGY1 pharmacy residency.

C. PROGRAM

1. The Residency *program* lasts for twelve consecutive months.
2. The *program* will include training in all areas of HIV pharmacy practice, research and elective rotations. The time allocated to each rotation is as follows:

Ambulatory Care Rotations	16 weeks
Inpatient Rotation	4 weeks
Outpatient Pharmacy	2 weeks
Drug Information/Marketing	4 weeks
Therapeutic Drug Monitoring	4 weeks
Pediatrics	4 weeks
Elective Rotations (4 weeks each)	8 weeks
Project	8 weeks
Conferences/Interdepartmental Activities	max 5 days (as scheduling permits)
Holidays	2 weeks

The Resident is entitled to 2 weeks of vacation.

3. Interdepartmental orientations at both sites will be arranged for the resident. Computer training at Toronto General Hospital and at McGill University Health Centre will also be arranged. Special orientation visits to other institutions allied to pharmacy and the understanding of the liaison between these different institutions and the profession may also be arranged for the resident.
4. The resident will be required to complete a project in cooperation with a project preceptor and the Program Directors, as outlined in Section F.

D. ROTATION TRAINING OBJECTIVES

1. The resident will be provided with a list of objectives and activities planned for her/ his training in each rotation.
2. The resident will develop personal program goals and objectives. Selected objectives will be discussed with the rotation preceptor to complement the rotation objectives.
3. The activities in each rotation will be planned to make possible the attainment of the objectives.
4. The resident will review the training objectives at the beginning of each rotation.
5. It is the resident's responsibility to inform the rotational preceptor and the Program Coordinators as soon as possible if the objectives are not being covered.
6. The evaluation of the resident after each rotation will be based on the resident's success in meeting the rotation objectives.

E. EVALUATION AND PERFORMANCE

1. In general, the resident will complete evaluations for each rotation as follows:
 - Mid rotation self assessment
 - End of rotation self assessment
 - evaluation of the rotation
 - evaluation of the preceptor
 - self reflection

Refer to the Evaluation Framework for specifics. The resident will have the opportunity to evaluate the Program Directors and the overall Program.

2. The primary rotation preceptor will complete a mid-point and end of rotation assessment of the resident which will be reviewed with the resident. The primary preceptor may obtain input from other preceptors involved in the resident's learning during the rotation. Ongoing feedback throughout the rotation is expected.
3. The resident will maintain a Learning Portfolio, including copies of presentations, manuscripts, drug information questions, and examples of consults which MUST be de-identified.
4. Final rotation assessments of the resident are placed in the resident's Assessment Passport, which will be forwarded to the next clinical rotation preceptor for review at the start of the rotation in order to identify areas of strengths and weaknesses of the resident and identify competencies that should be a focus for the rotation.
5. All completed evaluations and assessments will be returned to the Program Directors who will monitor the resident's overall progress through the year. The resident will have quarterly assessments with the Program Directors to ensure that adequate progression in all fields is occurring.
6. The resident will have two oral, case-based exams, one at the midpoint and one at the end of the program. These exams will be administered by the Program Directors.
7. If the resident's performance is not satisfactory based on the above evaluations, the Program Directors in consultation with the Residency Advisory Committee may terminate the resident.

F. PROJECT

1. The resident will be responsible for preparing a research protocol. The resident shall gain experience in the following areas:
 - a) Background research (i.e., conducting primary literature search, assessing and selecting relevant literature to support project idea and design).
 - b) Study design (i.e., methodology, inclusion & exclusion criteria, sample size calculation, study end-points, budget preparation).
 - c) Ethics submission process (may include hospital, University of Toronto, Canadian HIV Trials Network, etc.).
 - d) Application for funding (incl. Ontario HIV Treatment Network, Ontario Positive Action Fund, CSHP annual research grant competition, private industry, and others as appropriate).
 - e) Data analysis (i.e., using appropriate statistical methods, identifying confounding factors).
 - f) Presentation/publication (abstract preparation, poster presentation, and/or manuscript submission).

The resident may work on either one project to completion, or may contribute to different portions of ongoing projects to gain experience in all of the above areas during the program. This will depend upon the timeline of the primary study protocol, turnaround time for ethics approval, funding, study recruitment, etc.)

2. The resident will avail himself/ herself of the opportunity to talk to the HIV clinic Directors, residency program directors, and other clinic staff regarding projects available. The preparation of the project will be appropriately guided and assisted by the Program Directors and the Project Preceptor. The project report will be concise, of reasonable length and of practical application. The resident will submit a final draft version to the Residency Advisory Committee 1 week prior to the last meeting of the academic year for review. The completed project will be then forwarded to Directors of the program and a copy will be submitted to the Faculty of Pharmacy, University of Toronto within two months of the end of the program. The resident will also prepare the manuscript in a format ready to submit for publication in a peer-reviewed journal.
3. The resident will be accountable to the Program Directors for the allocation of his/her time in the department and will report progress on his/her project along with any proposed changes.

G. REQUIREMENTS TO PASS THE RESIDENCY

1. The resident must satisfactorily complete all of the following components in order to successfully pass the residency program:
 - a) *Rotations:* The resident is expected to pass all rotations in order to successfully complete the program. If the resident fails one rotation, the resident must successfully repeat a similar rotation at his/her own expense at the end of the scheduled rotations, prior to receiving the residency certificate. If two or more rotations are failed, the resident will be terminated by the Program Directors in consultation with the Residency Advisory Committee..
 - b) *Project:* The resident must complete all assigned responsibilities regarding the research project within 2 months of the end of the residency. No additional stipend will be offered during this time.
 - c) *Oral exams:* The resident will be required to pass two oral exams, one at 6 months, one at the end of the residency. Each exam will consist of two complex patient cases. The resident must achieve a minimum score of 75% per case.
2. At the final meeting, the Program Directors will ensure that the resident has met the requirements for the successful completion of the residency program. Once the resident has met all requirements, the university and hospitals will recognize this by awarding him/her a residency certificate.

H. GENERAL INFORMATION

1. The resident has the use of the library facilities and information services used in the hospitals.
 2. The hospital's policy regarding payment of certain medical insurance premiums is also applied to the resident.
- G. If a resident is ill and misses a day of work, a day's pay is not deducted. The time will have to be made up at the discretion of the Program Directors.