

## **FAMILY HEALTH TEAM (FHT) CLINICAL ROTATION ROTATION DESCRIPTION**

### **SITE:**

Toronto Western Family Health Team

### **PRECEPTORS:**

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### **DURATION:**

20 weeks distributed over 3 blocks:

- Block 1 – Facilitated practice
- Block 2 – Transition to independent practice
- Block 3 – Independent practice

### **OUTCOMES:**

The FHT Clinical Rotation (Blocks 1,2,3) are designed to foster the development of the knowledge, skills and professional values to<sup>1</sup>:

1. Provide efficient, evidence-based, patient-centred care for acute, sub-acute, and / or chronic illnesses in all degrees of complexity in a primary care environment (CSHP Std 3.1, 3.2, 3.4, 3.5)
2. Demonstrate appropriate knowledge, skills and attitudes to practice collaboratively in an interprofessional environment. (CSHP Std 3.1, 3.2, 3.3, 3.4, 3.5)
3. Demonstrate leadership and practice management skills. (CSHP Std 3.2, 3.3,3.4)
4. Promote health improvement, wellness and disease prevention. (CSHP Std 3.1, 3.3, 3.5)
5. Demonstrate competence in the provision of training or educational activities for interprofessional team members, peers, health care professionals in training and patients/caregivers. (CSHP Std 3.3, 3.5)

### **GOALS and OBJECTIVES:**

Please refer to the *Primary Care Pharmacy Residency Program Goals and Objectives document* for the core goals and objectives of this rotation.

### **DESCRIPTION:**

- This 20 week rotation is divided into 3 blocks distributed longitudinally over the residency year.
- Teaching will be provided by a variety of methods including self-directed learning, observation and of clinician/patient interactions, inter-professional patient care rounds, family medicine department grand rounds, attendance at medical resident teaching sessions, resident-preceptor therapeutic discussions, ethical case based discussions, formal INR training program, and pharmacy department rounds (clinical sharing sessions, clinical foundations, PRICE sessions etc).

### **RESIDENT RESPONSIBILITIES:**

- Provide previous rotation assessment, longitudinal knowledge tracking, and rotation specific objectives to preceptor at start of rotation
- Work with an inter-professional team to provide pharmaceutical care to patients in the TW- Family Health Team.

- Interact professionally with the interprofessional team, administrative and support staff, and other learners.
- Actively participate in care reviews, ethical case discussions, and grand rounds discussions. If applicable, the resident will contribute to the discussion at these sessions (Eg. Therapeutic tips, discussion of therapeutic controversies, if applicable – actual / potential drug therapy problems for an individual patient case, recommendations (with justification) to resolve these problems)
- Document all pharmacy interventions/activities on the patient’s medical record with the preceptor’s co-signature (per UHN Pharmacy Department documentation guidelines)
- Meet regularly with preceptor to review and discuss issues. Specific meetings can include:
  - discussions on pharmaceutical care patient work-ups
  - pre-selected therapeutic discussion
  - project meetings
  - resident progress/challenges
- Complete the following assessments:
  - written midpoint self-assessment (forward to preceptor prior to meeting to discuss)
  - verbal and written self-assessment after each presentation
  - written assessment of the rotation and preceptor at the end of the rotation
  - longitudinal knowledge tracking
- Participate in peer to peer teaching and learning as appropriate opportunities arise

***It is expected that the resident will, at minimum, be accountable for and be able to perform the following TW-FHT-specific tasks and responsibilities consistently by the end of each block:***

<b>Block 1 (Facilitated Practice)</b>	<b>Block 2 (Transition to Independent Practice)</b>	<b>Block 3 (Independent Practice)</b>
Obtain BPMH certification Conduct accurate BPMH and Med Rec	Conduct accurate BPMH and Med Rec with improving efficiency	Conduct accurate BPMH and Med Rec with efficiency (i.e generally completed in allotted appointment time)
Triage and/or prioritize tasks with preceptor	Triage and prioritize tasks independently then verify with preceptor	Triage and prioritize tasks independently; regular check-ins with preceptor (but may go ahead and complete tasks without first checking with preceptor)
Resident maintains patient log	Resident maintains patient log	Resident maintains patient log
Resident maintains list of disease states / therapeutic topics that have been reviewed	Resident maintains list of disease states / therapeutic topics that have been reviewed	Resident maintains list of disease states / therapeutic topics that have been reviewed
Preceptor assigns tasks and patient cases	Resident demonstrates initiative for taking on new tasks and patient cases	Takes responsibility for being “the Pod pharmacist” (i.e. first point of contact for team)
Lead patient encounters with preceptor assistance	Lead patient encounters with preceptor observing	Independently schedule and lead patient encounters ; preceptor may not observe every encounter
Perform medication reviews, with preceptor assistance, focusing on patients with common acute and chronic conditions encountered in primary care (E.G. DM, HTN,	Perform medication reviews focusing on patients with common acute and chronic conditions encountered in primary care; Preceptor assistance may be	Perform medication reviews <b>with efficiency</b> , focusing on patients with common acute and chronic conditions encountered in primary care. Preceptor assistance may

CVD, chronic pain)	required for complex patients and/or clinical issues (e.g. HIV, polypharmacy)	be required for complex patients and/or clinical issues
Develop pharmacy care plans and make therapeutic recommendations for patients with disease areas commonly seen in primary care (approx. 2-4 <u>new</u> patients per week)	Develop pharmacy care plans and make therapeutic recommendations for patients with less common or more complex disease states (e.g. HIV, transplant) (approx. 2-4 <u>new</u> patients per week)	Develop pharmacy care plans and make therapeutic recommendations for patients with less common or more complex disease states with <b>improving efficiency</b> (approx. 4-6 <u>new</u> patients per week – depending on bookings)
Regular attendance at care review and ethical case discussions; with preceptor guidance, bring to the attention of other health care professionals the actual or potential drug therapy problems, and discuss recommendations for the prevention and resolution of these problems.	Actively participate in care reviews and ethical case discussions If applicable, the resident will bring to the attention of other health care professionals the actual or potential drug therapy problems, and discuss recommendations for the prevention and resolution of these problems.	Actively participate in care reviews and ethical case discussions e If applicable, the resident will bring to the attention of other health care professionals the actual or potential drug therapy problems, and discuss recommendations for the prevention and resolution of these problems.
Learn about other team members roles through observation (shadowing), discussion of care plans with preceptor (who, how to refer), and attendance at care review.  Collaborate with other health care providers within and outside the family health team (with preceptor guidance)  Start to participate in shared care visits with preceptor	Initiate appropriate referrals to other team members (e.g. SW, PT, etc)  Collaborate with other health care providers within and outside the family health team  Participate in shared care visits with preceptor and/or other FHT staff	Initiate appropriate referrals to other team members (e.g. SW, PT, etc) Participate in shared care visits with other FHT staff  Collaborate with other health care providers within and outside the family health team.  Take a leadership role in care coordination for complex cases
Provide a teaching session for medical residents (or another health care profession); may require preceptor guidance during preparation	Provide a teaching session for medical residents (or another health care profession);  Session is tailored and appropriate for the intended audience	Actively seek opportunities to teach other health care providers  Present project at Grand Rounds
Obtain anticoagulation certification.  Work with preceptor to manage anticoagulation therapy in FHT	Manage anticoagulation therapy in FHT; review decisions with preceptor as needed	Manage anticoagulation therapy independently in FHT  Provide anticoagulation training for family medicine residents and other trainees as assigned (e.g. other pharmacy residents or students)
--	Take undergraduate pharmacy students for various teaching experiences (e.g. EPE, case study seminar) as opportunities arise	Take undergraduate pharmacy students for various shadowing experiences (e.g. EPE, case study seminar) as opportunities arise

--	--	Complete clinical initiative
--	--	Provide FHT orientation to new pharmacy trainees (e.g. general residents) as opportunities arise

**RESIDENT ASSESSMENT:**

Residents will be assessed in the following manner:

- verbal formative feedback provided on a regular basis.
- mid-point meeting and review of resident self-assessment (Clinical Rotation Assessment form)
- written final rotation assessment completed by preceptor (Clinical Rotation Assessment form).

Assessments will be based on patient care work-ups, therapeutic interventions, participation in inter-professional rounds, resident-preceptor therapeutic discussions, drug information responses, case presentations, teaching activities, input from patients or care givers, input from team members, and professional conduct.

**Reference:**

1. ASHP Educational Outcomes, Goals and Objectives for Postgraduate Year Two ([PGY2](http://www.ashp.org/DocLibrary/Accreditation/Regulations-Standards/RTP-PGY2-AmbCareProgram.pdf))  
[Ambulatory Care Pharmacy Residency Programs](http://www.ashp.org/DocLibrary/Accreditation/Regulations-Standards/RTP-PGY2-AmbCareProgram.pdf)  
<http://www.ashp.org/DocLibrary/Accreditation/Regulations-Standards/RTP-PGY2-AmbCareProgram.pdf>