PGY-2 Specialty Pharmacy Administration  
Sample Learning Experience Description

In recognition of the need to develop future specialty pharmacy practitioners, the ASHP Section of Specialty Pharmacy Practitioners - Section Advisory Group on Workforce Development has developed a sample elective learning experience description compiling suggested activities and experiences for pharmacy residents.

Institution Name

Pharmacy Department  
PGY-2 Health-System Pharmacy Administration and Leadership  
Specialty Pharmacy, Health-System Pharmacy Administration Learning Experience

Primary Preceptor:  
Name  
Title  
Email

Additional Preceptors:  
Name  
Title  
Email

General Description

The Specialty Pharmacy Management learning experience is an elective month long learning experience for PGY-2 Health-System Pharmacy Administration and Leadership residents at institution. The specialty pharmacy name is a closed-door, mail-order pharmacy that dispenses specialty medications. Specialty pharmacy name is located at location, with many decentralized pharmacist and technician locations throughout the entire campus.

Specialty medications are defined as high-cost medications that require clinical monitoring, administration, and/or unique storage parameters. Specialty pharmacy name serves all institution patients and employees. Employees work in coordination and directly with physicians, nurse practitioners, physician assistants, nurses, and social workers in various clinical service lines and ambulatory clinics. Employees assist providers with insurance prior authorizations, financial benefits investigations, and the insurance appeal process. Additionally, staff coordinate with logistics companies, couriers, and delivery-based service companies to ensure product quality and to meet the standards of some of the unique specialty medication storage requirements. Clinics have opted to utilize specialty pharmacy clinical services in the following areas: Hepatitis C, HIV, Dermatology, Gastroenterology, Rheumatology, Oncology, Transplant, Osteoporosis, Fertility, Neurology, and more. Specialty pharmacy name is constantly expanding the number of clinical services provided with the advantages being direct...
access to services for institution providers and patients, direct access to an electronic medical record (EMR), and collaborative agreements with said providers.

Role of the Pharmacist Preceptor: Leadership and administration teams are responsible for coordinating projects and workflow throughout the entire central operations pharmacy as well as decentralized locations. Leadership and administration formulate strategies to help enhance patient care, increase workflow capacity and efficiency, formulate vision for growth and expansion of market share, triage and remedy patient complaint issues, intercept and mediate issues and complaints, attend high level meetings discussing system-wide changes and involvement, and coordinate all other operations and activities of specialty pharmacy name employees and staff on a day-to-day basis.

Residents will be provided opportunities to develop advanced patient-care management skills necessary for complex medication-related disease states, complex medical complications, and related to the managerial aspects of specialty pharmacy services.

Resident responsibilities may include, but are not limited to: formulating and completing process improvement projects/service line expansion projects; analyzing current workflow processes and triaging issues as they arise; intercepting and triaging customer complaint issues; attending and partaking in managerial discussions and meetings; coordinating with pharmacy team leads and operation leads to manage inventory issues, patient issues, and logistic issues; and triaging and rectifying employee complaints and issues as they arise.

The resident may also partake in central operations as part of the specialty pharmacy workflow to give broader insight into leadership and administrative decision making which may include, but is not limited to: prescription processing, addressing drug utilization review, interpreting claim adjudications, completing prior authorizations, assisting in the appeal process, co-payment assistance, pharmaceutical billing processes, dispensing operations, and delivery operations. Residents will develop skills in the following areas while on rotation: time management skills, multi-tasking skills, communication skills, managerial skill sets including clinical and people management, conflict resolution, and clinical knowledge in specialty medications and disease states.

Residents will be required to lead topic discussions in the disease state areas, leadership development, conflict resolution, and other administration areas they are interested in and have agreed upon with their primary preceptor. The resident may choose to engage staff and the leadership team with an educational formal presentation if they so choose.

Certain aspects of the learning experience will be customized to the resident’s interest area, prior experiences, and areas for improvement. Residents are encouraged to express their interest in particular service lines during their initial meeting with their primary preceptor. Residents will be formally evaluated during midpoint and final evaluations with their preceptors via PharmAcademic.

**Hours and Preceptor Interaction**

- **0800-0830**: Meet with preceptor and create schedule/designate tasks for the day
- **0830-1100**: Partake in assigned projects or central/clinical operations for the day
- **0900 (M-W-F)**: Engage in specialty pharmacy staff huddle in central operations
- **1100-1200**: Check-in with preceptor for afternoon discussions/schedule updates, check-in with operations, call center, and script data entry staff for delivery confirmations and issues for patients that resident is coordinating or any other outstanding issues outside of clinical involvement
- 1300-1530: Wrap-up clinical activities for the day (if assigned), and engage in discussions with primary preceptor and afternoon follow-ups and status updates on projects
- 1600: End of day check-in with primary preceptor for outstanding issues and coordinating next-day activities
- 1630: Dismissal from rotation (unless required to attend any meeting/event after 1630)

Any days off, or requests for PTO should be approved by primary preceptor and/or residency coordinator, preferably prior to the beginning of the rotation.

**Tentative schedule above is subject to change at the discretion of preceptors and coordination with resident**

**Potential Disease State and Topics Encountered**

Common topics in which the resident will be expected to gain proficiency through literature review, discussion, administrative and leadership team involvement, and/or direct patient care experience include, but are not limited to:

- **Operations**
  - Insurance Overview
  - Patient Assistance Programs
  - Medication Reconciliation
  - Medication Education
  - Adherence Coaching
  - Storage specifications for specialty medications
  - Logistics and Delivery of medications
  - Script Data Entry
  - DUR Review
- **Scope of Practice**
  - Individual assessment of each clinical service line
  - Assessment of Practice for Ambulatory Care Services
- **Human Resource Management**
  - Conflict resolution
  - Patient incidence/complaint resolution
- **Regulatory Compliance and Standards**
  - Review of contract negotiations
  - Review of current and future policies, procedures, and protocols
  - URAC, ACHC, CPPA, and Pharmacy Network (if applicable) standards
- **Financial Assessments**
  - Cost analysis on current or future projects
  - Return-on-investment investigations
- **Strategic Planning**
  - Develop/formulate strategy moving forward
  - Market share analysis
  - SWOT analysis for project development
## Goals and Objectives Taught and Evaluated

<table>
<thead>
<tr>
<th>Objective</th>
<th>Matched Activity</th>
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<tbody>
<tr>
<td><strong>Goal R1.1: Identify patient care service opportunities.</strong></td>
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| **Objective R1.1.1:** (Evaluating) Based on one’s assessment of the scope of the pharmacy’s current services, identify any service opportunities | - Analyze current services and compare with current market demands  
- Conduct quality improvement analysis with current services  
- Formulate and conduct gap analysis |
| **Goal R1.2: Participate in the development and coordination of medication-use policy improvement initiatives.** | |
| **Objective R1.2.1:** (Understanding) Develop an understanding of the formulary systems. | - Evaluate current process for additions, edits, or deletions to current formulary list  
- Evaluate current processes for inventory management and the need to modify current processes  
- Observe market trends in shortages and inventory-management and implement proactive measures  
- Conduct analysis on current practices for inventory management and implement changes for quality and efficiency improvement |
| **Objective R1.2.2:** (Evaluating) Based on an assessment of the adequacy of the pharmacy’s current system for inventory control, make any needed recommendations for improvement | |
| **Goal R1.3: Participate in assuring pharmacy compliance with internal and external compliance requirements, including legal, regulatory, safety, and accreditation requirements.** | |
| **Objective R1.3.1:** (Applying) Participate in a departmental assessment to assure compliance with applicable legal, regulatory, safety, and accreditation requirements | - Review of current processes, policies, and procedures for compliance  
- Update current processes, polices, and procedures to keep up with recommendations for accreditation |
| **Goal R2.1: Apply methods for measuring and improving internal and external customer satisfaction with pharmacy services.** | |
| **Objective R2.1.1:** (Applying) Participate in an assessment of customer satisfaction with a specific aspect of pharmacy services. | - Conduct gap analysis for current service lines to compare current practices with customer demands  
- Implement processes and improvements in service lines/operations to keep up with current customer demand and improve satisfaction |
| **Objective R2.2.3:** (Creating) Participate in the development or revision of the pharmacy’s quality improvement plan or policy | - Analyze current processes for organization’s strategies and procedures for approaching quality improvement  
- Design and conduct a quality improvement project initiative |
| **Goal R3.2: Monitor and manage operating and capital budgets.** | |
| **Objective R3.2.1:** (Analyzing) Participates in the operating budget process for a selected aspect of the pharmacy’s activities. | - Appropriately analyze current service lines for fiscal stewardship and develop plan for budgetary allocation to each service line  
- Conduct cost-analysis for formulary additions, edits, or deletions  
- Conduct return-on-investment analysis for current and/or future planned projects |
Goal R4.4: Understand how to design and implement plans for maximizing employee engagement and enhancing employee satisfaction and retention.

**Objective R4.4.1:** (Understanding)
Explain supportive evidence and the organization’s strategy regarding employee satisfaction and engagement and effective tactics for recognizing and rewarding employees.

- Formulate strategies and utilize tools to assess current employee engagement
- Coordinate improvement projects in employee engagement
- Formulate strategies for procedural and periodic assessment of employee engagement by leadership team

Goal R5.5: Demonstrate ability to conduct a quality improvement or research project.

**Objective R5.5.2:** (Creating)
Develop a plan or research protocol for a practice quality improvement, healthcare pharmacy administration topics, or related topics for advancing the pharmacy profession.

- Analyze current market that pharmacy is serving and compare with initiatives in advancing pharmacy practice
- Formulate a quality improvement project plan focusing on, but not limited to: operational efficiency, new clinical services, improving patient safety outcomes, enhancing patient care experiences

**Progression of the Resident**

The length of time the preceptor spends in each of the phases of learning will depend on the resident’s progression in the current learning experience and where the learning experience occurs in the overall residency program.

- **Week 1: Rotation Orientation**
  - Preceptor will review pre-rotation self-assessment with resident, set expectations for the rotation, set dates for any required journal club and/or presentations, structure of rotation, approved absences, etc.
  - Preceptor will model pharmacy operations in central operations and clinical operations in clinic, and resident will be expected to observe (modeling)
  - The resident will be oriented to workflow and documentation; with the expectation the resident will be able to perform independently by end of the week.
  - The resident will learn documentation for required service line and/or clinic of choice
  - The resident will attend and partake in administrative and leadership meetings

- **Week 2: Data Analysis and Project Formulation**
  - Conduct gap analysis to identify improvement areas or service expansion needs
  - Determine patient demographics, insurance information, and clinical needs to ascertain appropriateness of utilizing specialty pharmacy services and identify demographics needed for data gathering specific to project

- **Week 3-4: Autonomous Functioning as administrative and leadership team member and project completion**
  - Independently recognize, triage, and rectify patient complaint issues
  - Independently recognize, triage, and rectify staff issues and employee engagement issues
  - Completion and presentation of quality improvement project/service line expansion project to administration and leadership team
  - Completion of all discussions, topic discussions, and educational presentations to staff
Required Readings and Expected Knowledge

- Required readings are located in the: __________
- Preceptors will determine readings based on topic discussions, resident interest areas, and administration situations and clinical situations that may arise while on service.

Evaluation of the Resident

- PharmAcademic will be utilized for maintenance of the learning experience description as well as documentation of formal evaluations.
- The table below represents the expected and required evaluations; however, situations may arise that require more evaluations at the discretion of the preceptor and resident than what is reflected below.

<table>
<thead>
<tr>
<th>Type of Evaluation</th>
<th>Responsible Party</th>
<th>Point of Completion</th>
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<tbody>
<tr>
<td>Verbal Midpoint Evaluation</td>
<td>Resident, Preceptor</td>
<td>Midpoint of learning experience</td>
</tr>
<tr>
<td>Written Summative Evaluation</td>
<td>Resident, Preceptor</td>
<td>End of learning experience</td>
</tr>
<tr>
<td>Written Preceptor Evaluation</td>
<td>Resident</td>
<td>End of the learning experience</td>
</tr>
<tr>
<td>Written Learning Experience Evaluation</td>
<td>Resident</td>
<td>End of the learning experience</td>
</tr>
<tr>
<td>Written Resident Conference</td>
<td>Resident, Preceptor</td>
<td>Following conference presentation</td>
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<tr>
<td>Presentation Evaluation</td>
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