

POSTGRADUATE YEAR 1

Community Pharmacy Residency Programs

An education and training program offered by leading schools/colleges of pharmacy to advance the profession and create community pharmacy practice leaders.



What Is a PGY1 Community Pharmacy Residency Program?

- Postgraduate Year 1 (PGY1) community pharmacy residency programs are accredited by the American Society of Health-System Pharmacists in partnership with the American Pharmacists Association (APhA).
- Programs offer educational opportunities for pharmacists seeking advanced training to provide a range of patient care services such as medication therapy management (MTM) and disease state management, and to participate in collaborative and integrative care models.
- Residents develop the skills needed to begin successful careers in innovative community practice settings and receive training to become leaders for the profession.
- PGY1 community pharmacy residency programs are designed to foster innovative ideas that can be put into clinical practice.
- Many residents go on to serve as faculty members, mentor student pharmacists as experiential preceptors, and establish advanced community practice sites.
- Various models are used for the operation of PGY1 community pharmacy residency programs, including:
 - Partnerships between schools/colleges and community pharmacy practice sites.
 - Independent programs run by community pharmacies, chain corporations, or health systems.
 - Independent programs run by schools/colleges with their own pharmacies.

“I believe that increasing the number of these [PGY1 community pharmacy residency programs] and making them the norm would greatly move pharmacy practice forward and increase patient awareness of the value of pharmacists.”¹

A Community Pharmacy Residency–Trained Pharmacist Excelling in Independent Community Pharmacy



Justin Wilson, PharmD

Co-Owner, Bestyet Pharmacy,
Harrah, Oklahoma
Manager, Valu-Med Pharmacy,
Midwest City, Oklahoma
Assistant Clinical Professor,
University of Oklahoma
College of Pharmacy



Justin Wilson is a man on a mission

to bring clinical pharmacy services to community pharmacies in Oklahoma. Like many innovative community pharmacists, he was initially unaware of the opportunities presented by such a career path. As a student at the University of Oklahoma College of Pharmacy, he knew that he did not want to be a traditional dispensing pharmacist and planned to pursue a clinical practice in an ambulatory care setting. However, while attending national pharmacy meetings, he learned about opportunities to provide patient care in community pharmacy. Wilson met Matthew Osterhaus, RPh, FASCP, at a student retreat and was intrigued. Wilson recalls, "He was doing exactly what I thought pharmacists should do with their education. A light bulb went off," and Wilson decided he wanted to be involved in community pharmacy.

After earning his doctor of pharmacy degree, Wilson sought a residency in Iowa—an area of the country where innovative community pharmacy services were more widespread. In 2002, he began his community pharmacy residency training through the University of Iowa's program at Osterhaus Pharmacy. Wilson credits the team of pharmacists at Osterhaus Pharmacy for stoking his passion for community pharmacy. "It was inspiring to be around a group of pharmacists who were incredibly dedicated to patient care and supportive of my efforts," he explains.

During his residency training, Wilson was involved in several clinical areas of community pharmacy, including diabetes management, smoking cessation, healthy lifestyle coaching, lipid management, osteoporosis screening, and a cardiovascular wellness program, called Heart Smart, for a self-insured employer.

In addition to cultivating his clinical skills, Wilson was immersed in learning how to develop viable business plans for community pharmacy services. His residency project focused on performing a financial analysis of the Heart Smart program, which demonstrated that providing the service to a self-insured company was profitable for the pharmacy. The results of this analysis were published in the September/October 2005 issue of the *Journal of the American Pharmacists Association*.

After completing his residency in 2003, Wilson returned to Oklahoma inspired and prepared to revamp the pharmacy that had been in his family for over 20 years. It didn't take long—he started seeing patients within 6 months. Wilson has worked closely with other pharmacists at the pharmacy to mentor

them and give them opportunities to use their skills. Patient care services offered by the pharmacy include MTM, diabetes management and education, immunizations, and a travel health service. These services have been financially viable, and Wilson recently purchased his third pharmacy.

Wilson views the changes in pharmacy practice as beneficial for the entire health care system. "Pharmacy is in a prime position to support patients with chronic conditions and provide preventive health care," he remarks. The transformation has not only benefited the patients but has also improved the job satisfaction for the pharmacists. "Every day we come to work excited about our jobs because we are able to impact the care of our patients," reflects Wilson.



In addition to training other pharmacists at his practice sites, Wilson is investing time in the next generation of pharmacists. He precepts an advanced pharmacy practice experience (APPE) for fourth-year student pharmacists, delivers lectures, and is a pharmacy practice lab instructor for the University of Oklahoma College of Pharmacy. Additionally, the University of Oklahoma initiated its own community pharmacy residency program in 2009, and residents spend elective time on site with Wilson.

Wilson has been very active with pharmacy associations ever since he was a student pharmacist. He has held several positions in state and national pharmacy associations and was vice president of the Oklahoma Pharmacists Association in 2009. The value of his contributions has been recognized by many local, state, and national pharmacy organizations. Wilson has received awards from the National Community Pharmacists Association, the American Association of Colleges of Pharmacy, and, in 2008, the Distinguished Young Pharmacist Award from Pharmacists Mutual.

"Participating in the residency was the best decision I could have made as a pharmacist," remarks Wilson. "It truly shaped the way I view community pharmacy practice and inspired me to take an active role in patient care. It also taught me how to overcome roadblocks to implementing a service and making it profitable." Wilson strongly recommends that others explore opportunities to participate in community pharmacy residency programs. "I can't stress enough how valuable it was to the way I practice today. If someone wants to make a difference in patients' lives and enjoy it every day, it is the best thing to do."

A Community Pharmacy Residency–Trained Pharmacist, Excelling in Pharmacy Education by Training and Developing Future Practitioners



**Cherokee Layson-Wolf,
PharmD, CGP**

Assistant Professor,
Department of Pharmacy
Practice and Science,
University of Maryland School
of Pharmacy
Patient Care Program
Coordinator, NeighborCare
Professional Pharmacies,
Baltimore, Maryland



UNIVERSITY OF MARYLAND
SCHOOL OF PHARMACY

“I had a deep interest in community practice as a student at the University of Maryland,” remarks Cherokee Layson-Wolf. “As I explored options for advanced practice programs, I was very impressed by the types of nondispensing activities pharmacists were engaged in and the excellent care that was provided to patients.” Layson-Wolf made the decision to pursue a residency and in 2001, she completed a community pharmacy practice residency at Ukrop’s Pharmacy, with Kelly Goode, PharmD, from the Virginia Commonwealth University School of Pharmacy at the Medical College of Virginia as her preceptor.

As a resident, Layson-Wolf was trained in several advanced practice activities, including point-of-care testing, diabetes education, smoking cessation programs, health screenings, immunizations, and a travel health program. In addition, she participated in employer group education and outreach, and the APhA Foundation’s Project ImPACT: Osteoporosis. She also had the opportunity to hone her teaching skills by delivering didactic lectures to student pharmacists.

Overall, Layson-Wolf considers being immersed in advanced practice experiences, rather than any one specific activity, as the greatest benefit of the residency. “Working with community pharmacists providing clinical services—and seeing that they were excited and motivated—was truly inspiring,” she reflects.

At the completion of her residency, Layson-Wolf sought a career in academia to allow her to foster new community pharmacy practice opportunities. She returned to the University of Maryland, which already had a community pharmacy residency program, to share her experiences with other faculty and student pharmacists. Layson-Wolf threw herself into supporting and further developing this program and became the residency director in 2006.

As a graduate of a residency program, Layson-Wolf brings a positive perspective about the future of community pharmacy practice to her students. “I tell my students about what I was able to accomplish as a resident and increase their awareness of their career options,” she explains. “I am able to share my experiences to foster interest in community pharmacy as a viable setting for advanced practice.”

Layson-Wolf recognizes the need for more advanced community pharmacy practitioners and supportive faculty members. Increasing numbers of successful practice sites that embrace new community pharmacy models can expose student pharmacists to opportunities that may inspire them to enter into advanced community practice. She notes, “We also need more community pharmacy residency-trained colleagues to bring that perspective to the faculty.”

Layson-Wolf also credits her experiences as a resident with having a strong influence on her involvement in state and national pharmacy associations. “Before my residency, I did not realize how important the pharmacy associations are to the profession. Gaining exposure to association work during my residency gave me a great perspective of the benefit of state associations—a lot of people take that for granted. Now I recognize both the importance of association work and the importance of advocacy on the state level,” she explains.

Since returning to Maryland, Layson-Wolf has been very involved with association work. She was Speaker of the House for the Maryland Pharmacists Association (MPhA) for 1 year and has spoken regularly at their annual meetings. She has

been the recipient of several prestigious awards, including the MPhA’s Distinguished Young Pharmacist Award in 2005. She also has received two awards from the international professional pharmacy fraternity Lambda Kappa Sigma—the Distinguished Young Pharmacist Award in 2007, and the Faculty Advisor Award.

Efforts to advance legislation allowing pharmacists to immunize in Maryland and working with the state board of pharmacy to implement and expand immunization activities have been an integral part of Layson-Wolf’s work. Her advocacy activities have included educating state legislators and testifying in support of immunization legislation.

Layson-Wolf regards her residency experience as the catalyst for creating the opportunities that she has had. “Looking back, if I had entered practice immediately after graduating rather than participating in the residency, I would never have had the experiences or opportunities in my career that I have today,” she reflects. “The residency gave me the skills, knowledge, and motivation I needed to initiate and develop programs to keep the profession moving forward.”



Why Establish a PGY1 Community Pharmacy Residency Program?

PGY1 community pharmacy residency programs provide value for schools/colleges of pharmacy by:

- Demonstrating a school's/college's leadership in achieving its educational mission and supporting the advancement of pharmacy as a patient care-centered profession to realize the Joint Commission of Pharmacy Practitioners (JCPP) Future Vision of Pharmacy Practice.¹
- Highlighting the value that a school/college places on developing community practitioners who advance community pharmacy practice.
- Reinforcing the school's/college's prestige, thereby attracting prospective student pharmacists.
- Exposing greater numbers of patients to the clinical expertise of pharmacists by elevating the level of patient care provided and increasing outreach and engagement with the community.
- Changing the public's perception of pharmacists and ultimately resulting in greater demand for patient care services aligned with the profession's vision of pharmacists as advanced patient care providers through the patient care services delivered by the resident in conjunction with other pharmacists at the practice.¹
- Supporting the development of high-quality introductory pharmacy practice experiences (IPPE) and advanced pharmacy practice experiences (APPE) in community pharmacy for student pharmacists.
 - PGY1 community pharmacy residency programs may increase a practice site's capacity for IPPE and APPE students, and increase the number of well-trained pharmacists who are prepared to serve as preceptors.
- Establishing venues for residents to provide lectures, lead clinical skills sessions and pharmaceutical care labs, and assist with other teaching responsibilities to support faculty.
- Allowing residents to develop skills that will help prepare them to pursue careers in academia.
- Creating opportunities for faculty who are interested in developing practice-based research networks to study community pharmacy settings.

A West Coast University with a Long Commitment to Community Pharmacy Residency Training, Working within the University and in the Community

UNIVERSITY OF SOUTHERN CALIFORNIA SCHOOL OF PHARMACY



Jeffery A. Goad, PharmD, MPH, FCPA, FCSHP

Associate Professor of Clinical Pharmacy, Titus Family Department of Clinical Pharmacy and Pharmaceutical Economics & Policy



Jeff Goad is the director of the multisite community pharmacy residency program at the University of Southern California (USC) School of Pharmacy. The program, which was the first of its kind in California, was initiated in 1999 with Ralphs Pharmacy, a division of The Kroger Company, and expanded to include USC's campus pharmacies in 2000.

"USC aims to be progressive and act as a showcase for innovative programs," explains Goad. The school's history includes starting the first doctor of pharmacy degree program, and being the first school/college of pharmacy to require an APPE in community pharmacy. "Developing a community pharmacy residency was a great fit for this image, and helped us move our practices to the next level," Goad notes.

In developing the program, Goad initially relied heavily on USC's existing ambulatory care residency, which used an integrated and collaborative practice model throughout practice settings. "The ambulatory program utilizes and integrates an array of resources to create a very strong program," remarks Goad. He received considerable support and assistance from the ambulatory program administrators to create the community pharmacy residency program.

Today, community pharmacy residents participate in providing direct patient care activities including preventive care, such as screenings and immunizations, MTM, and collaborative practice (e.g., travel medicine, diabetes management, anticoagulation services). Additionally, residents tend to be self-motivated individuals with a vision for the future, and apply this passion to create new programs or modify existing programs. Residency projects are an asset for other faculty members as well. "Scholarly activity is a fundamental requirement for faculty members. Collaborating with residents on projects extends the faculty's ability to conduct and complete research," observes Goad.

In addition to training residents and providing excellent patient care, financial viability is a primary goal for the patient care services. Ensuring that services are compensated helps support their continued existence and is important to the longevity of the residency, as well as efforts to expand it. Goad explains, "Ultimately our long-term vision is to continue expanding the program. Ralphs is an amazing partner because they are constantly seeking new opportunities for programs, education, and research." As a critical mass of residency-trained pharmacists in practice is created, Goad hopes to expand the residency program throughout the Los Angeles area.

Residents' teaching responsibilities include precepting APPE students, leading pharmacotherapeutic group discussions, facilitating a self-care course, giving classroom lectures, and



overseeing pharmacy practice labs. "The culture of teaching the next generation is ingrained from the first year of pharmacy school, and the residency fits with that culture," explains Goad. "Having the residency is a great asset for our institution and helps to reinforce the university's mission," he notes.

Additionally, the interactions help students learn about community pharmacy career options. The program aims to provide the residents with a high level of visibility among the student pharmacists, both to enhance the residents' experience and to increase students' awareness of the residency option. Goad views this program structure as vital for the students and the residents. "These interactions make students realize that they can blaze a trail and have an exciting career in community pharmacy."

The community pharmacy residency program creates the change agents of the future to move both the residents' own careers and the profession forward. The contributions made by residents are not lost on program administrators. According to Kathleen A. Johnson, PharmD, MPH, PhD, chair of the Department of Clinical Pharmacy at USC, "Many of them are now faculty at other schools of pharmacy leading the training of future practitioners in the community or working in ambulatory care practices in physician practices, HMOs, or other clinic settings in addition to owning their own pharmacies or working for chains to increase clinical programs at sites."

Past residents gravitate toward positions of leadership where they become advertisements for community pharmacy practice and residency programs, both because of their accomplishments and their vision for practice. "Anywhere they go, they carry the message of moving community pharmacy forward," observes Goad.

Goad describes the influence that residencies can have on pharmacists' careers. "It is incredible to see how a residency accelerates their path. The residency develops thought leaders and innovative practitioners who become valuable assets wherever they go."

A Prominent East Coast University with a Decade of Experience in Community Pharmacy Residency Training and a Cadre of Diverse Community Pharmacy Practice Sites

VIRGINIA COMMONWEALTH UNIVERSITY SCHOOL OF PHARMACY



Jean-Venable "Kelly" R. Goode, PharmD, BCPS, FAPhA, FCCP

Professor and Director,
Community Pharmacy Practice
and Residency Program

VCU

When Kelly Goode came to Virginia Commonwealth University (VCU) School of Pharmacy in 1996, the school's dean, Victor Yanchick, PhD, had already envisioned a role for pharmacists in community practice to elevate the level of care. He had determined that faculty involvement would be essential for moving the profession toward this vision, creating the catalyst for Goode's position delivering patient care services in pharmacy practice.

As a faculty member, and originally funded through a post-graduate research and training program, Goode began working to implement patient care services and design a community pharmacy practice residency at a local pharmacy. "The situation was a win-win for the school and the pharmacy because we were helping to develop the practice site while working toward our academic mission," remarks Goode.

Because she was developing one of the first residency programs in the country, no standards had been developed yet. This situation provided Goode, along with a team of VCU community practice faculty who were involved with program development, with flexibility to shape the program, while maintaining goals of scholarship, service, and learning.

The VCU community pharmacy residency program began in 1997 with two practice sites. Today, the program has expanded to include five practice sites—two supermarket chain pharmacies, a mass merchandiser pharmacy, and two independent pharmacies. Residents' activities have evolved from developing and implementing patient care services to training other residents and students to deliver established services, and are aligned with current national accreditation standards. Existing patient care activities include immunizations, screening programs, disease management services, diabetes education, and MTM. The pharmacy generally receives compensation for the provision of these services. Various aspects of these services are enhanced or assessed by projects that residents complete.

"Having the community pharmacy residency exemplifies the value of innovation in practice," remarks Goode. "We have been able to allow the program to evolve to meet the changing environment while remaining committed to our academic and practice goals." Goode notes that residents' projects also provide fertile ground for faculty who are interested in conducting practice-based research, contributing additional opportunities to document the impact of services provided at the community pharmacy level.



Teaching activities are also central to the residency experience. Residents participate in a practitioner-teacher certificate program designed with the VCU Center for Teaching Excellence. "Not all residents are going to be academicians, but they will teach patients and other health care providers and need to learn concepts of teaching," explains Goode. Other teaching activities for residents include precepting student pharmacists on experiential rotations, delivering lectures, facilitating small classes, delivering an educational presentation to physicians, and teaching a patient group class. In addition to the training the residents receive, these activities have the benefit of exposing student pharmacists to the experiences of residents and increasing awareness of opportunities in community pharmacy practice.

The residency program has several remarkable aspects. For example, it is one of only a handful of residencies throughout the country that has multiple residents practicing in the same city. "In addition to the social aspects and camaraderie associated with this arrangement, this approach provides residents with very strong professional networks when they graduate," notes Goode. Another feature is the requirement to perform community service. The volunteer requirement is not limited to health care settings. "To be a good community pharmacist, you have to understand the benefit of being engaged in the community," explains Goode. Thus, the service opportunities are valuable experiences for both the residents and the community, and help present the school in a positive light. Finally, the residency provides elective opportunities at a variety of locations including national associations, industry, and other practice sites. "Placing enthusiastic and highly trained residents in elective sites reflects very positively on the school, and helps to build new relationships and opportunities for collaboration," observes Goode.

Goode notes that the residency program is instrumental for advancing the vision of pharmacy practice. "Residents are the



cream of the crop; they are entrepreneurs and change agents who go on to do great things," remarks Goode. Graduates of the program have become officers of the APhA Academy of Pharmacy Practice and Management—positions that can be instrumental in shaping the future of the profession. Others have become faculty members at VCU and other universities, continue to work in direct patient care, and serve as residency program directors or preceptors. "Almost all graduates of the program are involved in some sort of leadership role," notes Goode.

Graduates who enter direct patient care have developed new community pharmacy practice residencies. "One of the most important things you can do to continue the movement of pharmacy toward a patient-centered profession is to become involved in community practice," emphasizes Goode. "Additionally, it is essential to have faculty who are interested in community pharmacy to oversee the residency; having residency graduates enter faculty positions helps to set the program development cycle in motion."

Goode's long-term vision for the residency is one of growth and continued enhancement. "Questions we face today include how to best expand the program while retaining our commitment to excellence," she notes. Goode is exploring opportunities to develop a second-year residency program, an academic residency, or a research-oriented fellowship program to expand practice-based research in community pharmacy for analysis of patient outcomes and publication of results.

Regardless of the future direction of the program, "Being a residency director has been one of the best opportunities that I have been involved with as faculty," concludes Goode. "Mentoring future leaders and practitioners is one of the most rewarding things that I have ever done."



Considerations for Establishing a PGY1 Community Pharmacy Residency Program

While PGY1 community pharmacy residency programs provide numerous benefits, there are several factors to consider when developing a program. These include:

- Strategies for partnering with a practice site: Entering into an agreement with a practice site is an important step and should be preceded by thorough evaluation of expectations for the residency program, financial arrangements, geographic proximity, and logistics, so each partner makes an informed decision.
- Preparation required to undergo accreditation: This comprehensive process with specific standards should be examined and used as a guide when developing a PGY1 community pharmacy residency program.
 - Schools/colleges and any residency partners must commit adequate resources to develop the program and comply with accreditation requirements.
 - This comprehensive process includes an accreditation site visit with peer review.
- Creation of a business model: A clear understanding of the value provided by the PGY1 community pharmacy residency program and how that value aligns with the school's/college's mission is essential for a successful program.
 - The business model and financial plan should account for various aspects of the program—including costs for salary and benefits for preceptors and residents and fees for accreditation—and weigh these against the concrete and intangible benefits.

“It is a vital responsibility to the profession to be involved in leadership at the community pharmacy level of care, as it is where most patients/customers interact with a pharmacist.”¹

A Community Pharmacy Residency–Trained Pharmacist Excelling in a Chain Community Pharmacy and Redefining the Clinical Role of the Pharmacist



Lori C. Brown, PharmD

Director of Clinical Programs,
Kerr Health, Asheville,
North Carolina



Before attending pharmacy school

at the University of North Carolina at Chapel Hill (UNC), Lori Brown had worked as a pharmacy technician in a community pharmacy and intended to pursue a dispensing position upon graduation. "I have always enjoyed math and sciences and their application in the prescription-filling process," she explains.

However, during her training, she was encouraged by her preceptors to gain additional practice skills through a residency. "I wasn't very familiar with community pharmacy residencies, but I was interested in the idea and understood the benefits of developing relationships with patients." Brown was particularly impressed by her neurotrauma ICU preceptor and the contributions that she made to patient care. "I trusted her guidance when she recommended residency training for me, and I reasoned that what I learned in a community residency could ultimately be applied to any setting," remarks Brown.

Brown soon discovered a community pharmacy residency program that interested her right at UNC. The residency was a collaborative effort between UNC and Kerr Drug, a regional chain pharmacy, under the leadership of Rebecca Chater, RPh, MPH, FAPhA, as the site coordinator. The Kerr Drug Enhanced Pharmaceutical Care Center had been established as an innovative practice site and learning lab.

In 2001, Brown graduated from UNC's first community pharmacy residency program and her practice site was at Kerr Drug. Although the program was in its infancy, the mix of practice activities was very advanced for the time, and included point-of-care testing, collaborating with physicians to optimize drug therapy, and working with patients to empower them to become involved in their own care.

"Not only did I have the chance to help develop innovative programs, I also learned about the business side of services," remarks Brown. Because community pharmacy practice requires a unique blend of clinical skills, practice management skills, organization, and business knowledge, a residency program is the perfect catalyst for transforming new graduates into change agents. "The residency experience was vital for me to understand what is required to have a successful service in the real world and prepared me to actually implement new services in the community," reports Brown.

Following the community pharmacy residency program, Brown undertook several positions in North Carolina with Kerr Drug,

first as a clinical coordinator in Greensboro and later in Raleigh to start developing clinical services in a new market. After 5 years in Raleigh, Brown moved to Asheville and continues her career with Kerr Drug's clinical division, KDI Health Solutions, where she is the director of clinical programs. Her current responsibilities include managing program logistics for Kerr Drug's MTM programs, delivering a variety of MTM services to her patients, and serving as a care manager in the nationally acclaimed Asheville Project, as well as robust involvement in the delivery of immunization programs. Brown credits the individuals involved in Kerr's residency program with much of the success of Kerr's clinical services. She says, "They are the ones who have built the program into what it is today."



KDI's achievements are numerous, and include receiving the APhA Foundation's Pinnacle Award for Demonstrating Quality in the Medication Use Process in 2006, Outcomes Pharmaceutical Health Care's MTM Provider of the Year award in 2007 and 2008, the North Carolina Alliance for Healthy Communities' Eagle Award, and the American Diabetes Association's North Carolina Provider of the Year award, both in 2009. However, Brown is not one to rest on her laurels.

"We strive to keep our team motivated by how important the work we are doing is to the big picture," she reports.

Brown sees the residency program as a critical stepping stone for her career path, and regards residencies in general as essential for the transformation of pharmacy. "I would not be where I am today or have had the same opportunities if I hadn't participated in the residency," she reflects. "I would probably be a dispensing pharmacist looking for ways to make my practice more clinical."

Brown recommends community pharmacy residency programs to current student pharmacists. "Many students are unaware of such opportunities, but once they learn about the program, they become excited about pursuing it." She reports seeing residency programs change expectations of pharmacists, patients, and other stakeholders. "Residencies give you knowledge and skills that you may not be able to acquire any other way, and prepare you for leadership roles." Brown acknowledges that a residency can be a challenging experience but notes that because pharmacists make a difference in their patients' lives, the experience is worthwhile. "I can't imagine having any higher level of job satisfaction," she reports.

A “Newer” Pharmacy School Beginning the Journey in PGY1 Community Pharmacy Residency Training by Developing Two Different Models of Programs

WILKES UNIVERSITY NESBITT COLLEGE OF PHARMACY AND NURSING



Julie L. Olenak, PharmD
Assistant Professor, Department of Pharmacy Practice
Clinical Pharmacist and Residency Director, Medicine Shoppe Pharmacy, Dallas, Pennsylvania



The School of Pharmacy at Wilkes University, located in a small community in northeastern Pennsylvania, offers two community pharmacy residency programs. By coincidence, both programs began in July 2009, but they are managed under different models.

Julie Olenak is the residency director for the university-sponsored community pharmacy residency program at the Medicine Shoppe Pharmacy in Dallas, Pennsylvania. Additionally, as a pharmacy school faculty member, Olenak provides patient care services at the pharmacy.

The second residency program is run as a partnership with Hartzell’s Pharmacy in Catasauqua, Pennsylvania. Wilkes alumni Vincent Hartzell, PharmD, and Kristen Hartzell, PharmD, approached the School of Pharmacy about partnering in the venture. As opposed to the Medicine Shoppe, in which a full-time faculty member (Olenak) is the residency program director, in this model a full-time clinical pharmacist (Kristen Hartzell) on staff at the pharmacy serves as the residency program director.

“These variations in program design demonstrate that a community pharmacy residency is flexible enough that you can make it viable using various different models,” remarks Olenak.

Olenak trained as a community pharmacy resident at Duquesne University in Pittsburgh, Pennsylvania. “I’ve always been very passionate about patient education and care, and training pharmacists for more advanced activities,” she remarks. Olenak wanted to share her passion with other student pharmacists. One of her primary goals as a new faculty member at Wilkes was to establish a community pharmacy residency. “I made it clear that it was one of my career goals when I came to Wilkes,” explains Olenak. She also chose Wilkes because of its location. “I wanted to be somewhere that did not have much advanced patient care taking place so that I would have the opportunity to bring these services to a new area.”



Olenak's desire to bring a residency to Wilkes was a good fit for the university. The School of Pharmacy was relatively new itself, having started its first class of students in 1996. The university had already established a hospital residency and a second-year residency in ambulatory care. Having a community pharmacy residency program supports the university's image as a small institution that is able to offer more personalized education. "Mentoring is our brand both at the university and school of pharmacy level," explains Olenak. The program is consistent with the mission of the Department of Pharmacy Practice to create meaningful learning experiences, improve patient care, and promote professional scholarship. She notes, "Receiving support from the school has been important for my development as a faculty member and for my satisfaction."



In addition to supporting the university's image, the residency also increases the number of available experiential training opportunities in the community setting in which high-level patient care is practiced. Both residency sites provide IPPE and APPE rotations and are among the most popular community rotations available.

Having community residents involved in activities with student pharmacists provides the students with role models. The number of student pharmacists interested in pursuing residencies has increased since the program was implemented. The residents and community pharmacy faculty alike have increased interest in advancing community pharmacy practice and have been essential in redesigning the way students are trained for the future.

Residents are involved in multiple patient care services at the pharmacies and have the opportunity to either develop a new service or enhance a current service. The Medicine Shoppe resident has focused on a residency project assessing pharmacy student perceptions of their ability to provide advanced patient care in the community setting, while the Hartzell's Pharmacy resident is working to survey patient attitudes toward implementing a new patient care program. Both residents participate in a teaching certificate program, which includes facilitating pharmacy practice labs, delivering a pharmacotherapeutics lecture, and having responsibility for a section of a service learning course. Because of Olenak's full-time position at Wilkes, there are additional teaching opportunities if the resident is interested in academia.

Upon completion of the program, residents are well prepared to become either advanced practice pharmacists in a community setting or pharmacy faculty members. "Having more faculty trained in this area is essential because currently there are not enough residency-trained individuals to staff community faculty positions," points out Olenak. As pharmacy moves toward the JCPP Future Vision of Pharmacy Practice, it will be essential to have enough training programs to prepare graduating pharmacists. "It is very rewarding to be training the future leaders of the profession," she remarks.

In addition to providing faculty development and scholarship, the residencies provide an opportunity for the practice sites to expand their patient care offerings. "We are seeing an increasing demand for services and it is very rewarding to help train and prepare

future leaders of community care," notes Olenak. Looking forward, Wilkes continues to seek opportunities to expand residency programs and is working toward establishing a third community pharmacy residency at another local pharmacy.

"As we prepare for the future of community pharmacy practice, it is essential to increase the number of advanced training opportunities so that there are enough practitioners who are prepared to deliver emerging patient care services." Olenak notes that identifying funding sources for developing residency programs can be an issue, but it is possible to develop viable business plans that meet a variety of school and practice site needs. "Developing a residency does require an investment, but it is incredibly rewarding," Olenak concludes.



APhA and Our Partner Organizations Are Here to Help You Get Started!

The value provided by PGY1 community pharmacy residency programs to schools/colleges of pharmacy is clear. If you are ready to take the first step, numerous resources are available from APhA and other collaborating pharmacy organizations to support you and guide you through the process. These resources include:



American Pharmacists Association®

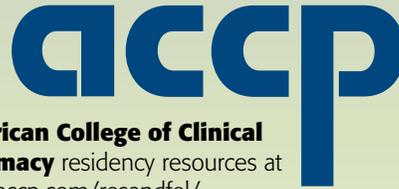
Improving medication use. Advancing patient care.

APhA

American Pharmacists Association website at www.pharmacist.com

Click on the Pharmacy Practice heading, and then on Residencies/Advanced Training on the left-side menu to access these tools:

- An overview of the accreditation process.
- Support services for sites and directors, current residents, and students seeking a residency, including an online national directory of current residencies and a detailed interactive locator.
- Program promotion and marketing resources.
- List serves and e-communities to share knowledge, ideas, and information.



American College of Clinical Pharmacy residency resources at www.accp.com/resandfel/



American Society of Health-System Pharmacists®

American Society of Health-System Pharmacists accreditation page at www.ashp.org/accreditation

American Association of Colleges of Pharmacy **AACP**
Discover • Learn • Care • Improve Health

American Association of Colleges of Pharmacy residency resource pages at www.aacp.org/resources/education/Pages/SuccessfulPracticesinPharmaceuticalEducation.aspx

NCPA®
NATIONAL COMMUNITY
PHARMACISTS ASSOCIATION

National Community Pharmacists Association residency resources at www.ncpanet.org/ownership/cprguidelines.php

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- The researchers who conducted the surveys used to guide the development of this brochure: Jon Schommer, PhD, at the University of Minnesota; Joseph Bonnarens, PhD, at Pacific University; Lawrence Brown, PharmD, PhD, at the University of Tennessee; and Jean-Venable Goode, PharmD, at Virginia Commonwealth University.

References

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