

Integrating Into a New Professional Culture: The Development of a Pharmacy Faculty Role within a Family Medicine Residency Program

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Objectives

- Articulate the development steps for a pharmacy faculty position in a new FM residency program and the ways this collaboration enhanced interprofessional training experiences
- Discuss approaches to understand the perspectives of those involved including; the PD, non-physician faculty and residents when designing a new non-physician faculty role.
- Describe the benefits of creating an interprofessional faculty environment in a FM residency program.

Project Goals

- Develop 0.5 FTE pharmacy faculty position
 - Train medical residents
 - Develop the new FM program
- Work with the UM SOP and CHPBS
 - Create a shared faculty position
 - Enhance IP training experiences for learners in health professions programs

Introduction: The FM Residency of Western Montana

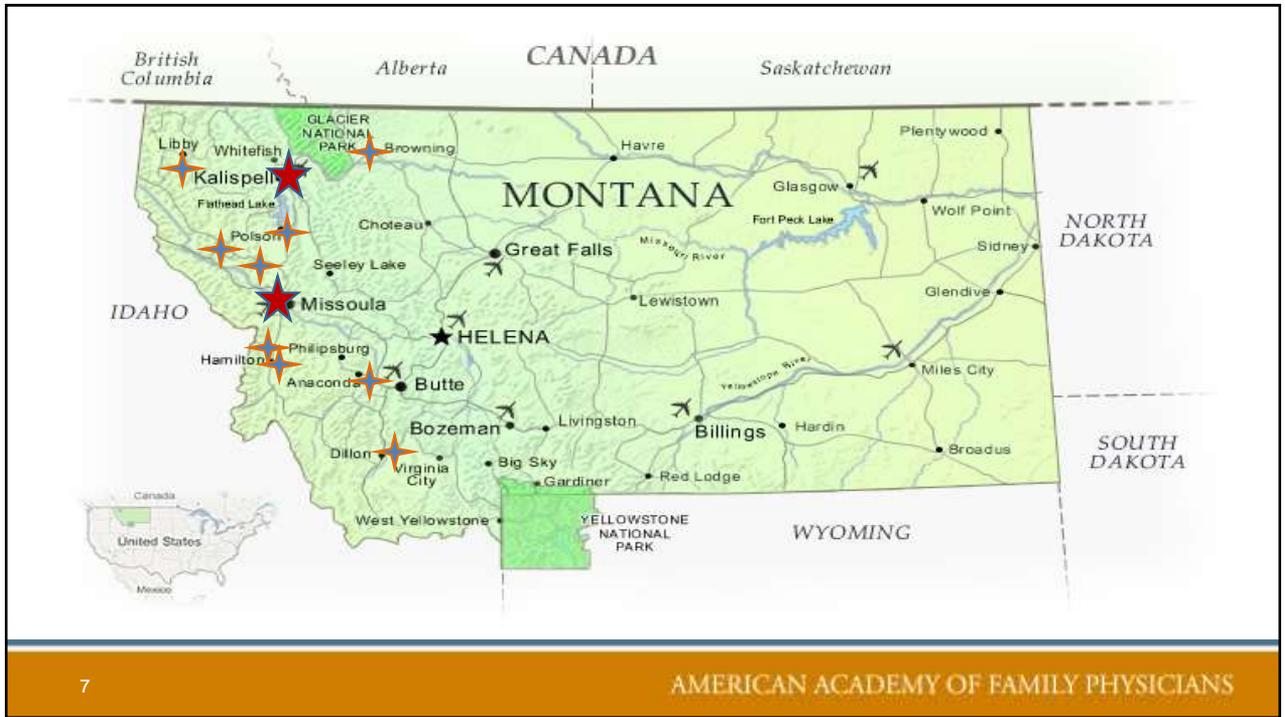
- Created to address Montana's underserved / rural areas
- University of Montana as sponsoring institution
- University of WA FMR Network
- Accredited in 2012
- Matriculated first class in 2013



Introduction: The FM Residency of Western Montana

- 30 residents (10 per class) : 24 in Missoula / 6 in Kalispell
- 12 core faculty
 - 10 physicians
 - 1 behavioralist
 - 1 pharmacist
- Rural focus
 - Core curriculum
 - Required rural rotations
 - 9 rural teaching communities





Introduction: UM College of Health Professions

- College of Health Professions and Biomedical Sciences (CHPBS)
 - Pharmacy, PT, SW, Public Health, FMRWM
- Accreditation standards: need to enhance IPE training



Planning Steps/Process: PD Perspective

- Underlying philosophy: equal footing for physician and non-physician faculty
- UM connection
 - Pharmacy as a key point of contact
 - Interprofessional education as a growing area of importance
- Importance of pharmacy in multiple realms
 - Precepting room
 - Clinic
 - Hospital
 - Didactics

Planning Steps/Process: Pharmacist Perspective

- Researched the potential for role
 - PD, SOP Dean, Dept chair
 - SOP faculty
 - State/regional programs
 - Literature search
 - MD residency faculty and residents

Planning Steps/Process: Pharmacist Perspective

- Assessment
 - Skills/experience
 - Understanding of FM and the scope
 - Needs of residents and program

Assessment: Resident/Faculty Survey

- Study Objectives
 - To determine preferences of Montana interns and core physician faculty for clinical pharmacist role in residency training
 - Understand previous experience with clinical pharmacy services
 - Use data to inform decisions about the role for pharmacy
- University Grant Program
 - Funded May 2013-August 2014
- Questionnaires were developed
- \$10 incentives (gift cards) offered to participants (100% response rate)
- Received exemption from UM IRB

Faculty Survey

- 4 physician core faculty
- Completed structured interviews
 - 15 questions, 30 minutes
- Discussed
 - Previous experiences with clinical pharmacy services
 - Potential for pharmacist role within FMRWM
- Most important roles identified were;
 - Availability during precepting in clinic
 - Assist in providing a team-based training model
 - Assist in developing didactic sessions

Resident Survey

- R1 residents (n=40)
 - 3 MT Programs: Missoula and Billings R1
 - 70% FM, 30% IM
- 10-question paper questionnaire and consent form
- Data collection periods July 2013 and July 2014

Resident Survey Results

- 83% (n = 33/40) Had previous experience working with pharmacists during medical school

Type of interactions with Pharmacists	Number (%) R1
During medical rounds	29 (88%)
Lectures or inservice presentations	24 (73%)
Drug information resource	16 (48%)
Disease state management	16 (48%)
Pharmacokinetics consult	15 (45%)
TPN/ Nutritional support	14 (42%)
Medication regimen review	14 (42%)
Medication reconciliation	13 (39%)
Patient education/medication counseling	13 (39%)
Antibiotic stewardship	21 (36%)

Resident Survey Results (con't)

- 85% (n=34/40)
 - Ranked pharmacy involvement in their residency training as important to very important
- Residents identified the following roles as most important for pharmacists;
 - 75% Pharmacist involvement during hospital/clinic precepting
 - 12.5% Teaching didactics
 - 5% Participation on care teams

Role Integration and Implementation: PD Perspective

- Inclusiveness
- Transparency of communication
- Empowerment to innovate
- Comprehensive roles for non-physicians
 - Faculty meetings / CCC / recruiting
 - Clinical presence
 - Resident access
 - Student engagement
 - Faculty wellness

Role Integration and Implementation: Pharmacist Perspective

- Job description
- Resources
 - Financial
 - Office space, student space, computer etc
 - DI resources
- Integrate as part of the team
 - Educate members about role and gain understanding roles of others
 - Be highly visible/accessible
- Creation of pharmacy list serv in UW network

Current Pharmacy Faculty Position

- 0.5 FTE UM SOP
 - Typical tenure-track responsibilities (teaching, service, scholarship)
- 0.5 FTE FMRWM
 - Assist with precepting residents in clinic (3 – ½ days per week)
 - Pharmacy didactics and curriculum (1 hr monthly lecture session)
 - Wilderness Medicine Curriculum
 - Develop IP experiences in other resident training sites
 - Administrative duties

Benefits of Interdisciplinary Faculty Team: PD Perspective

- Integration into the UM College of Health Professions
 - Interprofessional education development
 - Research
 - Expanded resident education
- Broad perspectives are beneficial
 - Academic structure and function
 - Resident recruiting
 - Resident evaluation
 - Resident remediation

Benefits of Interdisciplinary Faculty Team: Pharmacist Perspective

- Community/state
 - Enhanced the 'teaching' culture in medicine
 - Legislative activities
 - CE programming
- College
 - Enhanced IP training experiences in western Montana
 - Classroom and experiential experiences
- Residency
 - Expanded expertise/skills for residents and precepting
 - Tap into resources in other professions

IPE Sites



IPE Site Data (as of July 2015)

Site	City	Setting	Start Date	Pharmacy Students	Pharmacy Residents	FM Residents
PHC	Missoula	FQHC	Aug 2013	18	3	20
PSPH	Missoula	Hospital	Feb 2014	26	3	20
FCHC	Kalispell	FQHC	Oct 2014	2	NA	3
KRMC	Kalispell	Hospital	July 2015	1	NA	3

Questions



Tip #1

DON'T REINVENT
THE WHEEL



JUST REDESIGN IT



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Tip #2



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Tip #3



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Tip #4



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During the break...

- Discuss / think about how you might implement the information you just heard.
- Fill out a session evaluation.



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