

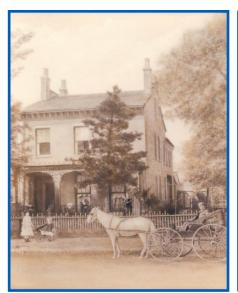


Mercy Health – Fairfield Hospital PGY1 Pharmacy Residency Overview

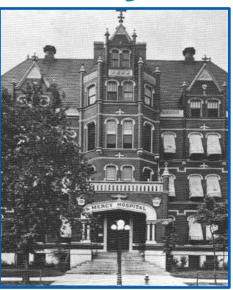
Craig Ratermann, PharmD, BCPS
Residency Program Director, Clinical Coordinator



Mercy Beginnings



Hurm House, 1892 The first Mercy (Cincinnati) hospital



Mercy Hospital, 1903



Operating Room, 1908



Nursery, 1925



Mercy Hospital 1961







Present Day

Hospital Overview

- •230 bed community hospital
 - Average daily census 200
 - 300+ major cardiovascular procedures annually (CABG, AVR, TAVR)
 - 28 OR/Procedure Rooms including Endoscopy, General and Cardiothoracic Surgery and Interventional Radiology
 - 2 ICUs, 18 beds each including Cardiovascular, Med-Surg, and Pulmonary.
 - 50,000 annual ER visits

Recognized Nationally

- Get With The Guidelines Stroke Gold Plus
- Joint Commission Advanced Certification for PSC
- Healthgrades America's 50 Best Hospitals 2023
- Beckers "Great Hospitals in America" for 2023 (July)
- Magnet Designation for Nursing Excellence (3rd Designation 2023)
- Joint Commission Gold Seal Approval for Heart Failure Certification
- AHA Get With The Guidelines Gold Heart Failure
- Nationally Accredited Breast Imaging Center of Excellence
- The Joint Commission Certificate of Distinction, Joint Replacement
- Bariatric Surgery Accreditation through Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- Lung Cancer Screening Center of Excellence

Mercy Health – Fairfield Hospital



Mercy Health - Fairfield Hospital





Commission

CERTIFICATION

Advanced Heart Failure







- America's 100 Best Cardiac Care™ (2024)
- America's 100 Best Critical Care™ (2024, 2023, 2022)
- America's 100 Best Gastrointestinal Care™ (2024, 2023, 2022)
- America's 100 Best Gastrointestinal Surgery™ (2024, 2023, 2022)
- America's 100 Best Pulmonary Care™ (2024, 2023, 2022)
- America's 100 Best Stroke Care™ (2024, 2023, 2022)
- Surgical Care Excellence Award™ (2024)









PGY1 Residency Purpose

- Build upon Doctor of Pharmacy (PharmD) education and outcomes
- Contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions
- •Eligible for board certification and postgraduate year two (PGY2) pharmacy residency training

Mercy Health- Fairfield Hospital

- •Why do a residency at Fairfield?
 - Full 8-year accreditation upon 1st survey.
 - Family culture
 - Desire for growth
 - Trusted part of our team
 - Professional relationship building

Past 5 years Achievements:

- Upgraded IV room facilities/Brand New Pharmacy
- •Five specialized pharmacists: Surgery, ER, Cardiology, ICU, Internal Medicine
- Eight BCPS certified pharmacists
- •Increased APPE student acceptance (Findlay, UC, ONU, Butler, MUSC, Lipscomb, Creighton)
- Poster presentations with our interns, residents, pharmacists.
- •Attendance at ASHP midyear, NPPC, OSHP, ACCP, HOPA
- •Publications in international journals, including Surgical Endoscopy, Innovations in Medicine
- Presented at International Bariatric Surgery Conference in Madrid,
 Spain

Long Term Goals: 5 years

- Residency program development
 - New rotations
- Preceptor/Staff development
 - Specialized board certifications (BCACP, BCOP, BCCCP)
 - Research and presentations
 - Published studies/research
 - Poster presentations
- •Full rounding services w/ inpatient medical residency
- •Increased code coverage i.e. 2nd shift

Diverse Opportunities

Fairfield Rotations

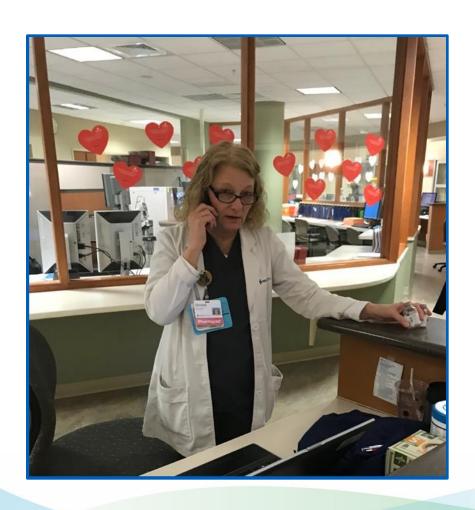
- Required
 - Orientation
 - Internal Medicine
 - Cardiology
 - Surgery
 - Critical Care
 - Emergency Medicine
 - Administration
- Longitudinal
 - Staffing
 - Research
 - Ambulatory Care
 - Drug Policy and Development
 - Patient Safety
- Elective
 - Infectious Disease
 - Oncology
 - Advanced Internal Medicine, ICU, ER

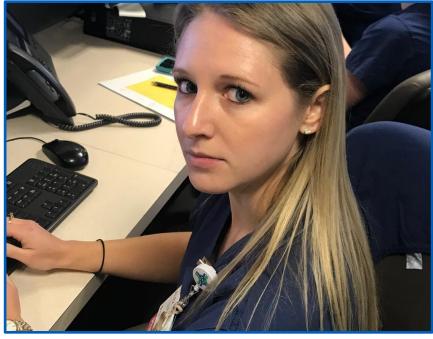
Elective Outside Rotations

- Population Health
- Bone Marrow Transplant



Rules & Regulations



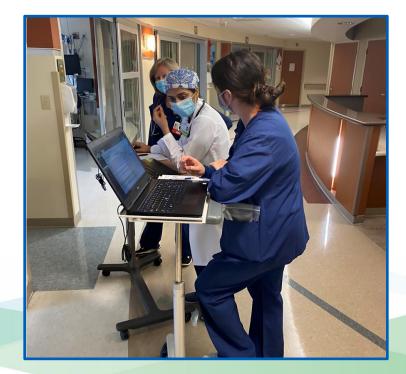


Resident Licensure

•It is expected that the resident will obtain Ohio licensure within 30 days of their official start date

 Failure to obtain Ohio licensure within 90 days from their official start date will result in dismissal from

the residency program



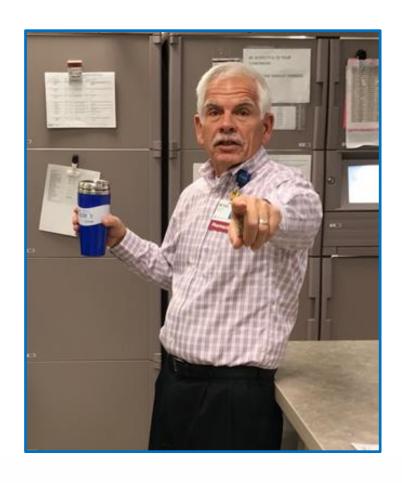
Duty Hours & Moonlighting

- •Duty hours must be limited to 80 hours per week, inclusive of in house activities and moonlighting
- Minimum of one day in seven days free of duty
 - Residents are off duty every other weekend
- Should have 10 hours free of duty between scheduled duty, must have a minimum 8 hours
- Max of 32 hours of moonlighting per month
 - As long as the resident does not exceed the 80-hour limit

Duty Hours & Moonlighting

- •If resident elects to moonlight:
 - Notify the RPD of the type and number of moonlighting hours by submitting a *Moonlighting Request Form* at least one week in advance.
 - Notify current rotation preceptor of the type and number of moonlighting hours
- •Moonlighting must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program
- •If preceptor(s) feels the resident's overall performance is adversely affected, the RPD will be notified and a meeting will be set up
 - The resident will no longer be allowed to moonlight during that rotation
 - This decision can be re-evaluated later in the year

Applications & Interviews



"We want you!"

Recruitment

- Listing on ASHP Residency Directory
- Website
- Attendance of Residency Showcases
 - University of Findlay
 - Ohio Northern University
 - University of Cincinnati
 - ASHP Midyear
 - OSHP



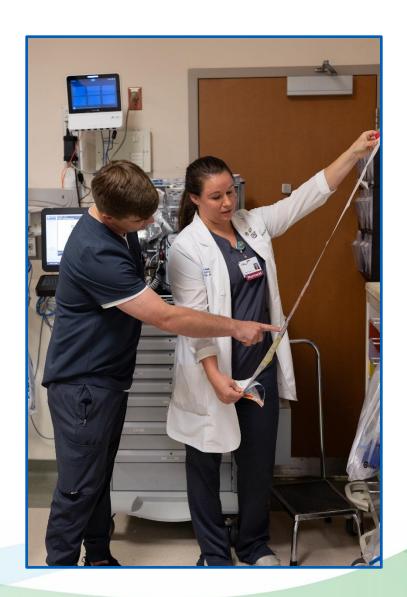
Residency Candidate Screening Evaluation Form

- Leadership
- Work Experience
- Clinical Experience
- Written Communication Skills
- References
- Correspondence
- Interest



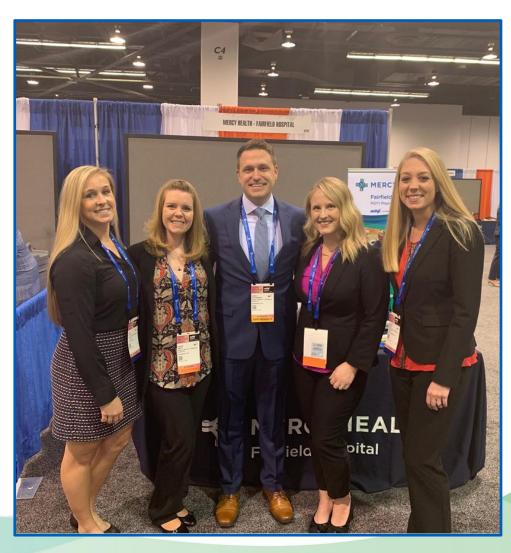
Interviews

- •4 Interview Days in February
 - Program overview
 - Tour of the facility
 - Rotating Interview with Preceptors
 - Q&A with current residents
 - Catered Lunch



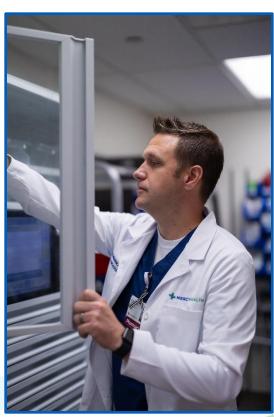
Leadership Roles





Residency Advisory Committee (RAC)

- •Residency Advisory Committee Members for 2025-2026 include:
 - Residency Program Director
 - Craig Ratermann, PharmD, BCPS
 - Director of Pharmacy Services
 - Jeremy Wolfe, PharmD
 - Preceptors/Liaisons
 - Sarah Smith, PharmD, BCPS
 - Kelly Schaub, PharmD, BCCCP
 - Ellie Gillespie, PharmD, BCPS
 - Brockman Sanders, PharmD, BCPS
 - Lein Ghuniem, PharmD



Preceptors

•Members of the clinical and/or administrative staff who serve as preceptors for the various required, longitudinal, and elective rotations

•Preceptors provide:

- Assistance and guidance for achieving competency areas, goals and objectives
- Evaluate the resident's progress during rotations
- Serve as role models

Preceptors

- APPE precepting: University of Findlay, Ohio Northern University, University of Cincinnati and Butler University
- 2015 & 2019 UF APPE Preceptor of the Year
- 2022 UC APPE Preceptor of the Year
- 12 Sunshine Awards
- 7 Partners in Nursing Awards
- 2025 Mercy Health Foundation President's Award



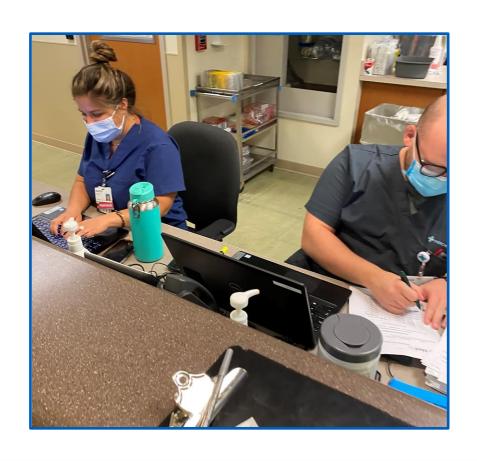




Liaison

- •Each resident assigned a liaison by the RPD at the beginning of the year
- •Monitor the resident's progress throughout the residency year including:
 - MHF PGY1 Residency Program Orientation Checklist
 - Customized development plan updated quarterly
 - Coordinate research project and deadlines

Learning Experiences





Required Rotations

- Orientation
- Internal Medicine
- Pharmacy Administration
- Emergency Medicine
- Surgery
- Critical Care
- Cardiology
- Research Month

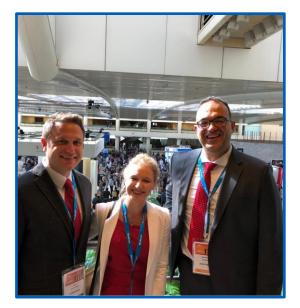


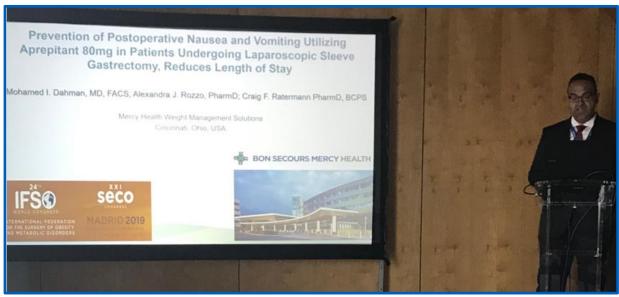
Longitudinal Rotations

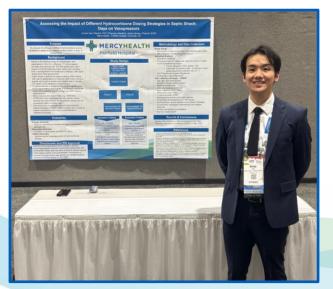
- Pharmacy Research
- Pharmacy Staffing
- Grand Rounds
- Ambulatory Care Clinic
- Teaching Certificate
- Drug Policy and Development
- Medication Safety Committee

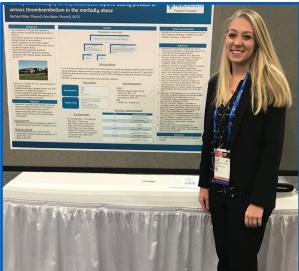


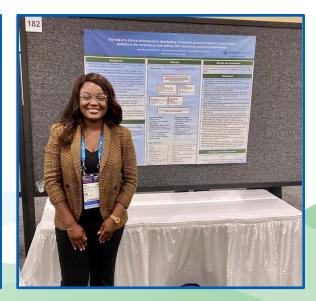
Research











Pharmacy Staffing

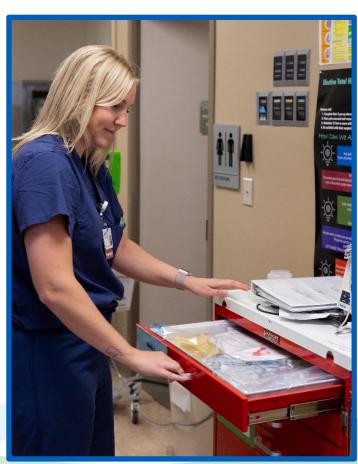
Every other weekend, 2/3 Clinical Services, 1/3 Central Staffing

•Must receive authorization from the RPD before being permitted to

staff independently

- Central Pharmacy
- Clinical
- Ambulatory Care Clinic





Grand Rounds

- Three Presentations
 - 1 = Research Project Background/Overview
 - •2 = Resident Choice
 - •3 = Regional Residency Conference Presentation







Elective Rotations

- Ambulatory Care
- Infectious Disease
- Population Health
- Oncology
- Bone Marrow Transplant at The Jewish Hospital
- Advanced ICU, ER, or Internal Medicine



Evaluations



Formative Feedback

- Preceptors give ongoing verbal feedback to the resident
 - Frequent
 - Immediate
 - Specific
 - Constructive
- "Stop, Start, Continue" Method once per rotation
 - Via Feedback Tab in PharmAcademic
- Document feedback in the Preceptor Communication
 Folder on the share drive

Midpoint Evaluation

- •A formal opportunity for the preceptor and resident to come together to discuss the current progression of the rotation
- •Any barriers to the rotation? Any issues that need to be addressed?

Summative Evaluation

- Conclusion of each learning experience
- •Residents must receive and discuss with preceptors, verbal and written assessment in reference to competency areas, goals and objectives in the rotation description
 - Verbal should be completed last day of rotation
 - Written documented in PharmAcademic within 7 days

Resident Self-Assessment

- •On-going self-evaluation and personal performance improvement throughout the residency year
- Comparison of Summative Evaluations
 - Internal Medicine
 - Grand Rounds
 - Pharmacy Staffing
 - Amb Care



Failure of a Rotation

- Preceptor evaluates the resident on all required competency areas, goals and objectives
- •A conference will be set up with the resident, the preceptor, the RPD, and site director of pharmacy if:
 - A resident receives greater than or equal to **two** "Needs Improvement" for Patient Care objectives
 - A resident receives greater than or equal to three
 "Needs Improvement" for any combination of 1) Patient
 Care, 2) Advancing Practice and Improving Patient Care,
 3) Leadership and Management, 4) Teaching, Education,
 and Dissemination of Knowledge objectives

Failure of a Rotation

- •After the conference, the preceptor, the RPD, and site director of pharmacy will decide if the resident fails the rotation.
 - If the resident fails, the site director will document a Level I Counseling for the resident's file.
 - An action plan for improvement will be included in the counseling and a copy given to the resident.
 - The rotation will be repeated either in the following month, or as soon as it can be scheduled.
 - If the resident fails the remediation of that rotation or a second rotation, the resident will NOT receive their residency certificate and will be dismissed from the residency.
- •The resident has the opportunity to appeal the process in writing and provide his/her point of view to the Residency Advisory Committee. The RAC will vote on the matter once the resident has had the opportunity to present their case. The decision of this committee is final.

Other Activities











Teaching & Education

- •Opportunity to develop presentation and instructional skills through various education and training programs in the Department of Pharmacy and also Pharmacy Residency Networks
- •Participation in these programs occurs within individual rotations and through additional activities
 - Attendance of Greater Cincinnati Society of Health-System Pharmacists (GCSHP) events
 - Providing educational programs to multidisciplinary staff during rotations
 - Presenting research at the ASHP Midyear Clinical Meeting and a regional pharmacy conference
 - Grand Rounds
 - Precepting IPPE and APPE students

Teaching Certificate

- Optional
- •Affiliated with the James L. Winkle College of Pharmacy (University of Cincinnati)
 - Formal seminars on precepting philosophy
 - Skills Labs, Formal Lecture, Breakout Sessions
 - Development of teaching portfolio
- •All former residents have completed certificate

Hospital Committees

- •Residents are required to serve longitudinally on the:
 - Pharmacy & Therapeutics Committee
 - Medication Safety Committee
- •Gain experience in the decision-making process encountered with committee work as well as multi-disciplinary interactions in a setting outside of clinical practice







Pharmacy Fun





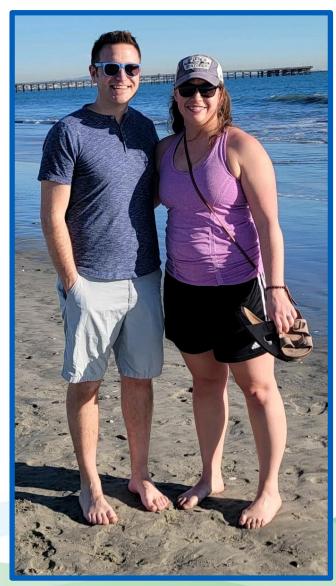




Pharmacy Fun







Professional Development

- •Membership and participation in professional organizations is highly encouraged
 - Should be an active member of the ASHP
 - Encouraged to be in OSHP, OPA, ACCP
- Utilize opportunities for publication of unique case reports and drug information questions
- •4 Published Papers in Surgical Endoscopy, Innovations in Surgery and Medicine and more
- •1 Published Case Report in the New England Journal of Medicine
- •Spend informal time with various members of the staff at social occasions as well as professional meetings

Successful Completion

















Successful Completion

- •With the completion of all established program requirements, the resident is awarded a graduation certificate. These requirements include:
- •94% (29/31) achieved for residency of required rotation competency areas, goals and objectives as documented by completed and appropriately signed evaluations in PharmAcademic
- •Up to date resident folder on the Pharmacy Share Drive/TEAMS including:
 - Final research project manuscript
 - Rotation pertinent assignments, projects, and presentations
 - Completion of MHF PGY1 Resident Development Plan- and all items on the checklist built within the plan for that specific resident.
- •Attendance of the American Society of Health-System Pharmacists (ASHP) Midyear Clinical Meeting (MYCM) and participation in the Residency Research Poster Session
- •Attendance of a regional pharmacy conference and presentation of final research project results. (Ex. Great Lakes Pharmacy Residency Conference (GLPRC) or Ohio Pharmacy Resident Conference (ORPC)
- •Voted on by the Residency Advisory Committee in the final month of the residency year

Residency Banquet

 Celebrate accomplishments and graduation of current residents







Dismissal

- •Residents can be dismissed from the residency for the following reasons:
 - Failure to obtain Ohio license within 90 days
 - Failure of two rotations
 - Substance abuse in or outside of the institution.
 - Endangering patient welfare
 - Unprofessional/unethical behavior, including modifying preceptor's evaluations of the resident's performance
 - Unprofessional/unethical conduct in settings outside the institution
- •The resident will also adhere to the values and expectations and will be subject to the disciplinary guideline and process of Mercy Health Fairfield Hospital.

BON SECOURS MERCY HEALTH

Our Numbers

ONE OF THE 5 LARGEST Catholic health care systems in the US; the LARGEST private provider in Ireland



APPROXIMATELY 1,200 SITES OF



IN THE US AND IN IRELAND



APPROXIMATELY \$12 BILLION
In net operating revenue

MORE THAN \$600 MILLION In community benefit annually across 5 states

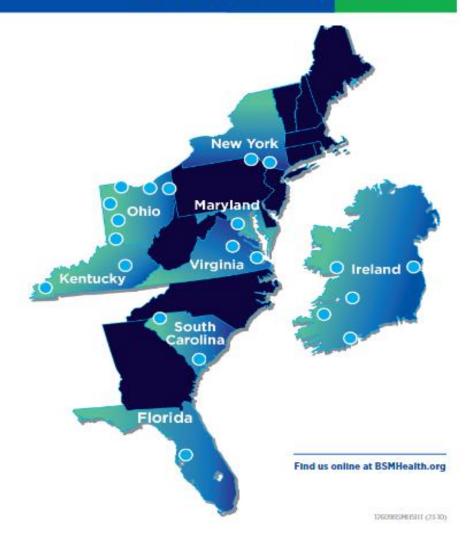




48 HOSPITALS

3,000* PROVIDERS N THE US 450 CONSULTANTS IN IRELAND 60,000 TOTAL ASSOCIATES





Questions?

