

# **University Health Care Hospitals & Clinics Health-System Pharmacy Administration Residency**

## **Management of Ambulatory Services**

**Rotation Preceptors:** Michael Kelly, RPh, MBA

### **Site Description:**

The University Health Care ambulatory care pharmacy administration provides operational oversight and services to 15 clinic based pharmacies, pharmacy specialty billing, multiple MTM specialty pharmacy clinical services.

The pharmacy administrative offices are located in downtown Salt Lake City in a building dedicated to billing and office support for the University of Utah Hospitals and Clinics. The pharmacy administrative area includes an entire suite of this building with the ambulatory pharmacy service director, pharmacy billing manager and support personnel, Pharmacy IT support personnel and an administrative assistant. This office supports 15 clinic based pharmacies, four that are located approximately 30 miles in each direction from the University of Utah Hospital. The other eleven pharmacies are in various locations within University of Utah Hospital owned medical clinics within the Salt Lake Valley. Currently the Ambulatory Care Pharmacy services consists of approximately 150 employees that includes pharmacists, technicians, cashiers, billing and other support personnel.

### **Rotation Description:**

Typical expectations of this resident rotation include the following: working 5 days a week Monday through Friday eight hours a day. Length of this rotation will be 12 weeks. Much of the resident activity involves participation in management meetings of all types on a scheduled and as needed basis. Responsibilities also include development of reports and project implementation that support business operations and improved patient care and medication safety. Presentations are required at all ambulatory care regional managers meetings. Typically 2 days are spent on the primary project identified for this rotation.

### **RLS Goals**

R1.2 – Manage the medication distribution process in all locations within the health system where drugs reside.

Obj R1.2.1: Based on one's own assessment of the pharmacy's drug control systems, contribute any needed recommendations for improvement.

R1.3 – Manage a pharmacy's direct patient care services.

Obj R1.3.1: Based on one's own assessment of the scope of the pharmacy's current services for its capacity to meet the needs of all patients served by the health system, identify any needed services.

R2.3 – Assure the health system's compliance with medication-related external quality standards.

Obj R2.3.1: Explain the organization's process for reporting external quality data.

Obj R2.3.2: Explain effective strategies for assuring pharmacy's influence on organizational decision-making on quality standards with relevance to the medication-use system.

R2.6 – Apply methods for measuring and improving internal and external customer satisfaction with pharmacy services.

Obj R2.6.1: Contribute to an assessment of customer satisfaction with a specific aspect of pharmacy services.

Obj R2.6.2: Create a proposal for the improvement of a specific area of pharmacy services.

R4.1 – Utilize productivity measurement in operational decision-making.

Obj R4.1.1: When given a productivity report, draw appropriate conclusions.  
 Obj R4.1.2: Effectively utilize an internal and external benchmarking and productivity system to make management decisions.

R4.3 – Justify new services using return on investment (ROI) analyses.  
 Obj R4.3.1: Uses skill in return on investment (ROI) calculations to make an accurate judgment concerning a proposed pharmacy plan.

**Activities Evaluated:**

<b>Rotation Activity</b>	<b>RLS Goal</b>	<b>Teaching Methods (Direct Instruction, Modeling, Coaching, Facilitation)</b>
Contribute any ideas for change based on one's own assessment of the pharmacy's drug control systems.	1.2	Customized based on resident experience – M,C,F
Identify any needed services based on one's own assessment of the scope of the pharmacy's current services for its capacity to meet the needs of all patients served by the health system.	1.3	Customized based on resident experience – M,C,F
Explain the organization's process for reporting external quality data	2.3	I
Create a proposal for the improvement of a specific area of pharmacy services.	2.6	C,F
Recommend or communicate productivity standards for staff	4.1	C,F
Contribute to the development of a business plan for a new or enhanced pharmacy service or program.	4.3	Customized based on resident experience – M,C,F
Explain the pharmacy revenue cycle	4.3	I

Teaching methods : I = Direct Instruction, M= Modeling, C= Coaching, F= Facilitation

**Readings and Preparatory Work:**

Review the site locations of campus and valley pharmacies at the Department of Pharmacy Services webpage: <http://healthcare.utah.edu/pharmacy/>

**Project Description:**

The resident will complete one major project while on rotation with the ambulatory care pharmacy administration rotation. The choice of projects depends on the interest of the resident and needs of the pharmacy department. Examples of projects include:

1. Medication Reconciliation improvements
2. Pharmacy processes related to patient hospital discharge
3. Assistance with current CQI projects
4. Benchmarking of current processes
5. Assistance with development or improvement of collaborative practice agreements and protocols
6. Audit reporting and CQI
7. Patient Surveys as a way of improving processes

**Typical Daily/Weekly/Monthly Activities:**

Participate in all scheduled and as needed management meetings.  
 Present at ambulatory care regional managers meetings.

**Evaluation Process:** The preceptor will conduct a midpoint evaluation. At the end of the rotation, the resident will conduct a self-evaluation. The preceptor will conduct an end of rotation evaluation with the resident. The resident will complete the preceptor and learning experience evaluations.