

POSTGRADUATE YEAR 1

# Community Pharmacy Residency Programs

An education and training program offered by progressive pharmacies to advance the profession and create community pharmacy practice leaders.



# What Is a 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 provide educational opportunities for pharmacists seeking advanced training to contribute 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.
  - Residents are expected to develop or enhance patient care services under the guidance of an experienced preceptor.
  - Many residents go on to establish advanced 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.”<sup>1</sup>

## 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 APPE for fourth-year student pharmacists,

delivers lectures, and is a pharmacy practice lab instructor for the University of Oklahoma College of Pharmacy. Additionally, 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, he received 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

**“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 practice sites by:

- Demonstrating a practice site's commitment to providing outstanding patient care in a progressive environment that includes a range of patient care services.
- Increasing the number of well-trained pharmacists prepared to work in expanding patient care roles and providing additional opportunities to recruit pharmacists.
- Supporting the professional development and job satisfaction of staff pharmacists serving as preceptors, enhancing retention.
- Keeping the practice site progressive through the introduction of new ideas, unique methods, and novel patient care activities by the resident and preceptor that generate new lines of revenue.
- Creating and/or enhancing advanced patient care services that may attract new patients to the practice site and promote customer loyalty.
- 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 site.
- Creating opportunities to develop relationships with other members of the health care team to expand collaborative care opportunities for the practice site.
- Inspiring the entire pharmacy staff with the resident's enthusiasm and energy, resulting in more effective, efficient, and high-quality care.

## An Innovative Health System–Sponsored Approach to Community Pharmacy Residency Training, Improving Care for Patients and Opening Business Opportunities for the Health System

### STRONG MEMORIAL HOSPITAL OUTPATIENT PHARMACY University of Rochester Medical Center



**Timothy J. Warner,  
RPh, MBA**

Associate Director,  
Ambulatory Pharmacy  
Services Program Director,  
PGY-1 Community  
Pharmacy Practice Program

**As program director** of the University of Rochester Strong Memorial Health System's community pharmacy residency program, Tim Warner manages the residents' activities at a number of diverse practice sites in the Rochester, New York area. Residents rotate through various activities ranging from managing maintenance medications for patients with chronic conditions, to adherence monitoring, HIV treatment monitoring, and addressing the needs of post-transplant patients.

"Our health system is large enough that we are able to provide ample opportunities for residents to develop their skills in various facets of clinical pharmacy and integrated care models to provide both breadth and depth of experience," explains Warner. Each of the different activities in the program is linked to the provision of prescriptions to outpatients, which allows for some overlap with ambulatory care pharmacy.

The University of Rochester Medical Center acts as the sponsoring organization and handles the administration of the residency. The residency program has a partnership with the local school of pharmacy, which supports teaching opportunities and allows for integration with faculty members at some rotation sites.

The residency program, currently in its second year, has established a vision for the future of pharmacy practice. Warner remarks that the institution has documented a clear and measurable value of pharmacists' clinical services for inpatient care, which has led to widespread integration of such services throughout the health system setting.

However, there have been fewer opportunities for pharmacists to receive compensation in ambulatory care and community pharmacy. "Our vision is that there will be growth in payment outside dispensing, based on the true value of what pharmacists can do in outpatient care," remarks Warner. "The residency aligns with our vision by training pharmacists to establish services for the future." He notes that self-insured systems that pay the true costs of care themselves have expressed the greatest interest in such services.

Warner explains that the value associated with the outpatient pharmacy services is widespread. It includes decreased hospital readmissions and improved clinical outcomes, both from the services the pharmacists provide and from increased integration with those of other members of the health care team. The program's residents are currently involved in a research project to compare patient outcomes of those receiving outpatient services with other patients to provide real-life data to support community pharmacy services. Additionally, Warner notes that outpatient services have increased both the volume



of prescriptions dispensed as a result of improved adherence and the number of patients transferring other prescriptions to the pharmacy in response to the high level of care provided. This increase in prescriptions helps to offset some of the costs of the residency.

In addition to receiving the training they need to provide outpatient services in the future, the residents are currently acting as pharmacist extenders to allow existing health system pharmacists to provide more services to more patients. Residents also increase the capacity for precepting IPPE and APPE students. "If an institution is looking to expand its pharmacy services, developing a residency is a great way to do it," remarks Warner. "This exposure also helps reinforce the image of pharmacists as direct patient care providers in more patients' minds."

Furthermore, residents often seek career paths within the organizations where they received their residency training, which provides the institution with a highly trained individual upon graduation. "Having a residency is viewed very favorably for anyone who is seeking a position as a clinical specialist," notes Warner. The residents develop the skills that will allow them to be valuable health care providers who are able to assist patients, other health care professionals, and the community.

"Although it can be challenging to justify outpatient clinical services without direct reimbursement, using a resident to establish programs now and generate outcomes data is expected to encourage future reimbursement," explains Warner. "Implementing the programs now, and including the cost of the residency in the start-up costs for the program, will establish outpatient pharmacy as a positive clinical force in the community."

## A National Grocery Chain Pharmacy, Sponsoring Its Own Community Residency Programs and Reaping the Rewards

### SUPERVALU, INC.



**Anthony Provenzano, PharmD**  
Director, Clinical Service



**Jaime Montuoro, PharmD**  
Manager, Clinical Specialist Services  
Director, Jewel-Osco Community Pharmacy Residency Program



**“Our whole infrastructure is based** around the future of clinical pharmacy, and having a community pharmacy residency program is an integral part of that strategy,” reveals Anthony Provenzano, director of clinical services for SUPERVALU, Inc. SUPERVALU pharmacies offers three community pharmacy residency programs, in partnership with four colleges of pharmacy. The program, which began in 2002 with one practice site, has grown over time and graduated 24 residents from practice sites in Minnesota, the Chicago area, and the Philadelphia region.

“For 14 years, SUPERVALU has been developing and implementing clinical services in our pharmacies, and utilizing highly trained pharmacists to provide these services. This experience helped to provide the resources that we needed to develop the residency,” explains Provenzano.

Provenzano notes that although it is a challenge to accomplish all of the goals and objectives of the residency within 1 year, developing a formalized curriculum—one that structures all the activities around learning experiences so they are all targeted to program goals—makes it feasible.

Jaime Montuoro, the manager of clinical specialist services, notes that residents’ primary experiences are in direct patient care, but they also are exposed to other aspects of pharmacy. They are trained to provide comprehensive patient care services in appointment-based settings. In addition to making patient visits, residents address business and implementation strategies associated with patient care services, such as integrating clinical activities into the pharmacy workflow. Residents also have the opportunity to participate in ambulatory care clinics to complement their activities at the pharmacy and are involved with community outreach programs.

Each resident develops a business plan to either implement and evaluate a new patient care service for the company or enhance a program that previously existed. Residents have developed several programs including MTM service enhancements (e.g., pain management as a targeted MTM follow-up program), smoking cessation, hypertension management, anticoagulation, and travel health services. Formal research projects also are conducted to investigate a practice-based issue, sometimes on the same subject as the resident’s business plan.

In addition to learning more about clinical issues, SUPERVALU residents are exposed to a corporate leadership experience—a behind-the-scenes view of how a pharmacy is run on a corporate level. Residents meet with individuals ranging from the president to store-level managers and spend time

learning their career paths, business philosophies, and job responsibilities. Some specific activities at the corporate level include participating in performance appraisals and recruiting efforts, and gaining an understating of information technology issues such as reporting and databases.

University partners have been important for complementing the services and experiences provided by the company and the practice sites. SUPERVALU's university partners provide expertise in certain areas, including research, teaching, and ambulatory care opportunities, and a teaching certificate program. Residents have the opportunity to lecture at university partners and facilitate small group workshops. Residents gain additional teaching experience by offering in-services for physicians, medical office staff, and pharmacy staff at their practice sites.

Patients are the ultimate beneficiaries of the excellent training that residents receive. Provenzano explains that wherever clinical services are offered, patients start to see the pharmacists differently and look to them as a source of health care rather than merely health products. "The epitome of that phenomenon occurs at the residency sites, because the resident's presence amplifies the patient care experience and leads to excellent relationships with patients," he notes. Furthermore, when other pharmacists see residents actively involved with patient care, it invigorates them and reinforces positive attitudes.

Almost every service provided by residents is compensated, either by third-party payers, such as Medicare, Medicaid, and self-insured employers, or by patients who pay out of pocket for services. However, Provenzano notes that the company values the residency program mostly as an investment in the future. "Some revenue is generated but the real ROI is what the residents give back to the company in terms of innovation and leadership," explains Provenzano.



The company aims to retain its residents upon graduation—the overwhelming majority have stayed and many have become company leaders. For example, Montuoro, a former resident, oversees the delivery of SUPERVALU's clinical services on a national level and she is the director for one of the residency programs. Another pharmacist who showed special interest in information technology issues during the residency program was recently promoted and is now SUPERVALU's director of health care systems. Others have gone on to have local leadership roles and act as preceptors at practice sites for both residents and student pharmacists.

"Having the residency program has provided enormous value to our company," explains Provenzano. "Residents receive the training and development that they need to become both outstanding clinical pharmacists and change agents for the future. Everything the residents learn helps them develop and further our patient care mission."

Residents benefit not only the company but the pharmacy community as a whole. Program graduates have become change agents—they are actively involved with state and national pharmacy associations and are working to advance the profession of pharmacy.

"Lots of pharmacists have good clinical and leadership skills. However, what makes our residents different is that they graduate from our program with the determination that they can shape the future of pharmacy, and they have the knowledge and skills to do it," remarks Provenzano.



# 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 school/college of pharmacy: Entering into an agreement with a school/college of pharmacy is an important step and should be preceded by thorough evaluation of expectations for the residency program, responsibilities, financial arrangements, geographic proximity, and logistics, so each partner makes an informed decision.
- Preparation required to undergo accreditation: This comprehensive process includes an accreditation site visit with peer review.
- Commitment of adequate resources: Practice sites and any residency partners must commit to develop the program and comply with specific standards.
- 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 practice site's overall goals is essential for a successful program.
- A thorough business model and financial plan—these 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.

“Community residency programs energize the practice site by bringing in new ideas and innovations. They help keep the pharmacists and staff current and improve the number and type of patient care services the pharmacy is able to offer.”<sup>1</sup>

## A Community Pharmacy Residency–Trained Pharmacist Excelling in 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, 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.

## An Independent Pharmacy in Rural Iowa, Taking Advantage of New Opportunities to Care for Patients Through Affiliation with a Large University-Sponsored Community Pharmacy Residency Program



### OSTERHAUS PHARMACY

**Matthew C. Osterhaus,**  
**BS Pharm, FASCP**  
President  
Residency Program Director



**Osterhaus Pharmacy, in Maquoketa, Iowa,** has been a leader in pharmacy practice innovation since the early 1990s. The pharmacy's mission is "doing what is right" for the patient, notes Matthew Osterhaus, president of the pharmacy. This mission drives his focus on providing individualized patient care services. The pharmacy recently renovated its space to include five semiprivate and private rooms for delivering patient care services. These services are currently provided to approximately 4,500 patients. In addition, the pharmacy dispenses from 200 to 400 prescriptions a day.

Osterhaus Pharmacy has been a pioneer in patient care services, building the foundation to become the patient care powerhouse that it is today. In 1991, the pharmacy began participating in "pharmaceutical care" pilot projects such as Project ImPACT: Hyperlipidemia, and had converted the practice to a patient care-based model by the mid-1990s. These early experiences with patient care services helped to shape Osterhaus' vision for the future of pharmacy. "We saw how the services could improve the lives of our patients and provide a return that was beneficial for us as a practice site and for payers," remarks Osterhaus.

The community pharmacy residency program, offered in conjunction with Ruegnitz Pharmacy and the University of Iowa, became the first of its kind in the state of Iowa in 1997. Osterhaus, an alumnus of the University of Iowa College of Pharmacy and an adjunct faculty member, has served as the primary preceptor for the residency at Osterhaus Pharmacy for 13 years.

The residents are immersed in the provision of patient care services, including MTM, for patients with various medical conditions. Residents also are integral to programs for assist-





ing patients with smoking cessation and healthy weight loss, as well as the provision of drug information, durable medical equipment, and home medical-respiratory services.

Residents are trained to understand the business aspects of providing patient care services so they are prepared to implement services in new locations after graduating from the program. Research into the return-on-investment (ROI) for a service is a common residency project. The data generated by such residency projects help to document the value of the services for the pharmacy, and can be used when marketing the services to other potential payers. "While our mission is to serve our patients, we have to ensure that we are doing so within a realistic business model; you cannot provide patient care services if you cannot keep the lights on," remarks Osterhaus.

Marketing the services to a variety of audiences, including patients, physicians, and potential payers, is another important focus. "Residents need to know not only how to provide a service, or how to run the service, but how to educate others about the value of the service," explains Osterhaus. Current payers for patient care services at the pharmacy include the Iowa state Medicaid program, Medicare Part D, employer groups, and individuals who pay out of pocket.

The residents are an exceptional asset for Osterhaus Pharmacy. Their energy and enthusiasm act synergistically with that of the other staff members to create a positive and committed working environment. The residents also expand the amount of direct patient care the pharmacy provides. In turn, this elevates the positive impression of the pharmacy in the community.

The importance of giving back, and working to ensure a viable future for community pharmacy, are underscored during the residency. In addition to involvement with teaching courses at the University of Iowa, residents have direct responsibilities overseeing student pharmacists during IPPE and APPE rota-

tions. Furthermore, "We emphasize to the residents that it is crucial to be active politically, to connect with your state legislators, and to work with them to ensure that pharmacy services are being supported on a health policy level," notes Osterhaus. He and his staff are actively involved in leadership positions with state and national pharmacy associations as well as with political and regulatory bodies that affect pharmacy.

The team at Osterhaus Pharmacy has trained and inspired many residents who graduate from the program and pursue patient care practices, faculty positions, and leadership roles in the profession. "It is amazing, and incredibly rewarding, to watch residents launch accelerated careers out of the program," observes Osterhaus. Justin Wilson (see profile on page 2) is just one example of the many pharmacists who have completed the residency and advanced to a successful career in community pharmacy, one that now includes precepting other residents.

Osterhaus sees expansion of community pharmacy residency programs as important for the future of the pharmacy profession. He explains, "As more pharmacists complete such a program, the impact of their efforts on transforming the practice of community pharmacy will be exponential." Osterhaus reports that the far-reaching effects of the residency make the investment of time and energy to train the residents a positive experience. "Having a resident does require a commitment of time and resources to ensure that you provide a meaningful experience. However, the value they provide to the pharmacy and to the future of the profession is immense," he concludes.



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

The value provided by PGY1 community pharmacy residency programs to practice sites 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](http://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.

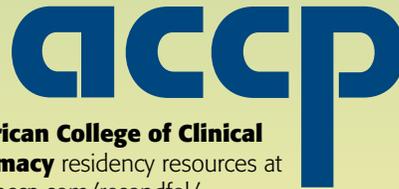
American Association of  
**Colleges of Pharmacy** **AACP**

*Discover • Learn • Care • Improve Health*

**American Association of Colleges of Pharmacy**

residency resource pages at

<http://www.aacp.org/resources/education/Pages/SuccessfulPracticesinPharmaceuticalEducation.aspx>



**American College of Clinical Pharmacy** residency resources at [www.accp.com/resandfel/](http://www.accp.com/resandfel/)



**American Society of Health-System Pharmacists®**

**American Society of Health-System Pharmacists** accreditation page at [www.ashp.org/accreditation](http://www.ashp.org/accreditation)

**NCPA®**  
NATIONAL COMMUNITY  
PHARMACISTS ASSOCIATION

**National Community Pharmacists Association** residency resources at [www.ncpanet.org/ownership/cpprguidelines.php](http://www.ncpanet.org/ownership/cpprguidelines.php)

## Acknowledgments

Several organizations and individuals deserve thanks for their contributions to this initiative:

- The Community Pharmacy Foundation for their support of this project. [www.communitypharmacyfoundation.org](http://www.communitypharmacyfoundation.org)
- The 2009 APhA Community Pharmacy Residency Advisory Panel for their assistance in the development of this brochure.
- The American Association of Colleges of Pharmacy, American Society of Health-System Pharmacists, and National Community Pharmacists Association for contributions in the development of this brochure.
- 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.

## Reference

1. Schommer J, Bonnarens J, Brown L, Goode J-V. The value of community pharmacy residency programs: college of pharmacy and practice site perspectives. *J Am Pharm Assoc*. In press.



**American Pharmacists Association**  
Improving medication use. Advancing patient care.

**APHA** 2215 Constitution Avenue, NW • Washington, DC 20037-2985