

What's Changed About the CPRB Survey Process?

Learning Objectives

Upon completion of this webinar you will:

- 1.Understand the changes to the "Request for CPRB Accreditation Survey" document.
- 2.Understand the changes for the documents required to be submitted 30 days pre-survey visit
- 3.Understand the changes to the on-site survey itinerary.
- 4.Understand the changes to the "What to Expect" interview guide.

Background

- Mandate of the Canadian Pharmacy Residency Board (CPRB)
- Accreditation Standards
- Accreditation Process
 - Intent to apply
 - Request for accreditation
 - On site survey visit

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Canadian Pharmacy Residency Board (CPRB) Information

CPRB Strategic Objectives

CPRB Strategic Objectives

Board Members Profiles

- · Colette Raymond (Chair)
- · Moira Wilson (Past-Chair)
- · Curtis Harder (Vice-Chair)
- · Jennifer Bolt (Member)
- Karine Cloutier (Member)
- · Céline Corman (Member)
- Barb Evans (Member)
- · Allan Mills (Member)

CPRB Sub-Groups

The work of CPRB will be assisted by groups made up of CPRB members and non-members. The groups are listed below. They will help decrease the time and work demands on board members by using expertise from across the country. If you are interested in volunteering for one of these groups, please e-mail Gloria Day

Education Group

Standards Group

· Colette Raymond (Chair)

· Allan Mills (Chair)

- 6



http://www.cshp.ca/programs/residencyTraining/CHPRBinfo_e.asp

- Colette Raymond (Chair)
- Barb Evans (Member)
- Tanya Mysak (Member)
- Jennifer Teng (Member)

Surveyors Group

- Moira Wilson (Chair)
- · Céline Corman (Vice-Chair)
- Danette Beechinor (Member)
- Cathy Burger (Member) on maternity leave until February 2016
- Dorothy George (Member)
- Sandy Jansen (Member)
- Lauza Saulnier (Member)
- · Bill Wilson (Member)

Standards Group

- Allan Mills (Chair)
- Peter Loewen (Vice-Chair)
- Curtis Harder (CPRB) Member)
- Sandra Bjelajac Mejia (Member)
- Jennifer Bolt (Member)
- Heather Kertland (Member)
- Debbie Kwan (Member)
- Lalitha Raman-Wilms (Member)
- Nancy Sheehan (Member)
- Donna Woloschuk (Member)
- Samatha Yau (Member)

Residency Board News

Current - Spring 2014

Past

On Site Survey

- 2 day visit
- Surveyor team
- Structured itinerary
- Closing Discussion

Survey CQI

- Post-survey evaluation by site survey participants
- Surveyors comments



Canadian Pharmacy Residency Board Conseil canadien de la résidence en pharmacie

Request for CPRB Accreditation Survey

| □ New Program | | | | | | |
|--|--|---|--|--|--|--|
| Renewal . | | | | | | |
| raining program. Data submitted to a H completing Sections II-V. The Program Surveyors the survey documents in an el | at both the CPRB survey team and the hospit dospital Pharmacy in Canada (Lilly) survey of Residency Director, Coordinator, or Admir dectronic format. The program can either created via courier directly to the surveyors. To the documents. | within the past 3 years may be used when nistrative Assistant to send the CPRB ate and share a drop box <u>directly with the</u> | | | | |
| Name of Health Care Organization: | | | | | | |
| Address: | | | | | | |
| City: | Province: Postal Code | | | | | |
| Phone: | Fax: | | | | | |
| Participant in the Residency Matching Date Request Completed: | | nore than one campus is involved: | | | | |
| Signature, Residency Program Director Name Title Phone Fax Email address | Signature, Residency Program Coordinator Name Title Phone Fax Email address | Signature, Chief Executive Officer OR Senior Administrative Delegate with Accountability for Pharmacy Name Title Phone Fax Email address | | | | |

Request is hereby made for accreditation of our hospital pharmacy residency program. We accept and understand the principles and requirements expressed in the residency accreditation process of the Canadian Pharmacy Residency Board (CPRB).

Note: Sites may either enter the data in the tables below or submit-site-specific data from the Hospital Pharmacy in Canada (Lilly) Survey within the past 3 years III. Pharmacy Human Resources Information for Each Facility/Campus in Which Residency Training Occurs

| Staffing | Facility/Campus | Facility/Campus | Facility/Campus | Facility/Campus | Facility/Campus | Facility/Campus |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| | FTE* | FTE | FTE | FTE | FTE | FTE |
| Pharmacists | | | | | | |
| Management | | | | | | |
| Technicians/Assistants | | | | | | |
| Support Personnel (clerical, porter/aide) | | | | | | |
| Residents | | | | | | |
| Total FTE | | | | | | |
| Paid hours per Acute Patient Day (excluding residents) | | | | | | |

FTE: Full Time Equivalent (i.e., equivalent of a full-time employee)

CPRB PROGRAM SAMPLE ITINERARY & REQUIRED DOCUMENTS

(CPRB ACCREDITATION STANDARDS)

The Program Residency Director, Coordinator, or Administrative Assistant to send the CPRB Surveyors the survey documents in an electronic format. The program can either create and share a drop box <u>directly with the surveyors</u> or populate a USB drive and send via courier <u>directly to the surveyors</u>. Documents should be numbered/labeled exactly as per the list below. The lead surveyor will contact you to confirm your preferred method to provide the documents.

Framework for Program Pre-Survey Documents – 30 Days prior to date of survey

Please create a separate sub-folder for each numeric grouping below (e.g. residency program manual contents located in a sub-folder)

- 1. Contractual agreement with primary partner designated organization (if this is a shared program)
 - 1.1 Reports associated with partner accreditation surveys
 - 1.2 Inspection reports associated with partner accreditation surveys
- 2. Itinerary
- 3. Program Self-Assessment
- 4. Request for accreditation survey and related documents
 - 4.1 Any changes to the organizational structure of the organization, organizational structure of the pharmacy department since the last CPRB accreditation in any format, i.e., ppt or word format
 - 4.2 Mission statement and goals/objectives of the pharmacy department
 - 4.3 Most recent pharmacy services annual report
 - 4.4 Accreditation Canada survey report
 - 4.5 Quality improvement plan and strategic plan for the pharmacy department
 - 4.6 Quality improvement plan and strategic plan for the residency program
 - 4.7 Schedule of residency rotations including preceptors for previous 4 years and current year
- 5. Residency Advisory Committee Terms of Reference and minutes for previous 4 years and current year
- 6. Residency Program Manual and Residency-related policies and procedures
 - 6.1 Expectations of residents and preceptors
 - 6.2 The intended educational outcomes of the program
 - 6.3 Learning goals and objectives for each residency rotation available for each resident(s)
 - 6.4 Evaluation forms
 - 6.5 Criteria for successful completion of the program
 - 6.6 Policies concerning professional, family, and sick leave and the effect such leaves shall have on the resident's ability to complete the program
 - 6.7 Policies governing scheduling of residency experiences, including service shifts
 - 6.8 Procedures for resident(s), preceptor(s), coordinator(s), director, training site (rotation), and program evaluation
 - 6.9 Processes for remedial action if deficiencies in the progress of the resident(s) are noted
 - 6.10 Processes that shall be used to address all discrepancies in assessment
 - 6.11 Preceptor orientation, development, and selection process

| DAY | TIME | TITLE OF MEETING | PARTICIPANTS SHALL INCLUDE |
|-------|-----------|--|---|
| Day 0 | | Review of survey documents at hotel | Surveyors |
| Day 1 | 0800-0815 | Meeting with CEO, Administrative person to whom Pharmacy Director reports | CEO or (Senior Administrative designate), Administrative person to whom Pharmacy reports, Residency Director and Coordinator(s), and Resident(s) |
| | 0815-0845 | Meeting with Pharmacy Administrative Team | Residency Director, Residency Coordinator(s), Resident(s), and Pharmacy Leaders who provide direct support to the Residency Program |
| | | - include a handout, and time for further questions from the surveyors Rather than a formal presentation the administrative team is requested to provide in any format (e.g., word, ppt) the department's strategic plan and any major changes to either the organization or to the pharmacy department since the last survey visit. | CEO or (designate) may attend |
| | 0845-0915 | Meeting with Residency Program Director | Residency Program Director |
| | 0915-1045 | Meeting with the Coordinator(s) Questions from surveyors | |
| | | Sign the institution's confidentiality agreement | Surveyors |
| | 1045-1100 | BREAK | Surveyors |
| | 1100-1200 | Meeting with Residency Preceptor(s) (from all campuses, may set up teleconferencing if needed) | As many Residency Preceptor(s) as possible except the Residency Director, and Coordinator(s) |
| | 1200-1300 | LUNCH | Surveyors |
| | 1300-1445 | Meeting with Resident(s) | Current Resident(s) and from one year previous if available |
| | | Deleted meeting with the healthcare team | |
| | 1445-1515 | Tour of Patient Care Area(s) where the resident is currently working or where a rotation has recently been completed | Pharmacist(s) regularly working in the Patient Care Area(s), Resident(s) |
| | 1515-1600 | Tour of Pharmacy Department | Manager of Operations or (designate), Resident(s) |
| | 1600- | Review of on-site documents Check in with Residency Coordinator(s) (or designate) for arrangements for the | Surveyors |
| | | next day pnarmacie | |

4. Meeting with the Residency Coordinator(s)

The purpose of the meeting is to discuss the following with the surveyors:

The surveyors will select a competency – please be prepared to discuss:

- How you translated the competency into learning objectives (Show us your learning objectives and the competency that is associated with the learning objectives);
- How you set the levels of expected performance (Show us your definition of the expected level of performance. Where is it located? E.g. is it part of the learning goal and objectives, is it a free standing document, or is it a procedure?);
- How you assess and document that the resident has met the expectations (Show us your forms or explain your assessment process and show us any documentation records); and
- How you track completion of requirements over the course of the program (Show us your competency tracking - process/tool).
- How residents' knowledge and skills are developed and evaluated; and
- How coordinators support residents and preceptor training and supervision
- Any particular challenges you are facing?
- Any innovations, opportunities or successes you wish to highlight?

7. Tour of the Patient Care Area(s) Where resident (s) are currently working or have recently completed a rotation

Please ensure the healthcare team is informed to expect questions from surveyors

The purpose of this tour is to familiarize the surveyors with:

- The training environment for the pharmacy residency program;
- The working relationship with the health care team
- The extent to which the healthcare team participate in the training of the resident
- The medication cycle from prescription to drug administration;
- Evidence of safe medication practices including adverse drug event reporting;
- Documentation in the health record by the pharmacists and pharmacy residents; and
- Access to drug information resources.

CPRB Web-site

 Insert hyperlink to CPRB Residency Training Program web-site

http://www.cshp.ca/programs/residencyTraining/index e.asp

Questions

Please contact me if you have any questions!

moira.wilson@horizonnb.ca