

The Lobbyist

District of Columbia College of Clinical Pharmacy



Greetings! I hope everyone is enjoying the cooler weather as much as possible in these unusual times. To say this pandemic has impacted not only our everyday routines but re-shaped the landscape of healthcare as we know it, is an understatement. We must remember it is often the challenging situations that will lead to new and exciting opportunities if we patiently work through them.

I would like to extend a big CONGRATULATIONS to the students, residents, and fellows of DC-CCP who graduated this past year! Good luck on next steps in your clinical pharmacy careers. Welcome new students, residents, and fellows! We wish you all the best throughout this coming year and hope to connect with you.

Due to the unforeseen circumstance with the COVID-19 Pandemic we did not hold any events this Spring or Summer. As we move into Fall our committee members have been working diligently to develop several excellent virtual opportunities for networking and education, as well residency preparation opportunities for our students. The annual Fall CE program, which provides access to high-quality clinically focused free CE programming for our members, will be held in November in conjunction with two new events: a Residency Roundtable and CV review for students.

As healthcare providers we are dedicated to improving the health of our patients and the general population. Our Philanthropy committee is working on an excellent opportunity for our members to give back through volunteering at the Capital Area Food Bank. Please keep an eye out for communication on these events.

Our goal at DC-CCP is to provide educational and networking experiences that help our members advance in their pharmacy careers. We are always interested in hearing new voices through CE presentations and newsletter articles. Also please let us know what additional programming and opportunities would have been helpful so we can develop for future trainees.

Finally, if you are interested in serving in a leadership role within DC-CCP, please contact myself or one of our committee chairs.

Erin VanMeter, Pharm.D, BCACP
Ambulatory Care Pharmacy Specialist
DC-CCP President 2020 - 2021

“Nothing in life is to be feared; it is only to be understood. Now is the time to understand more, so that we may fear less” — **Marie Curie**

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DC-CCP Executive Board & Committees

Executive Board

President: Erin VanMeter, PharmD, BCACP

Treasurer: Lisa Chen, PharmD

Committees

Networking and Education

Resident Chair: Nancy Tang, PharmD

Student Co-Chairs: May Nicholson, Carissa Campbell, Maryam Alli

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Pharmacist Chair: Jessica Phytilla, PharmD, BCPS, BGCP

Student Co-Chairs: Willis Marsh, Raddison Floresca

Advocacy

Pharmacist Chair: Lisa Peters, PharmD, BCPS

Student Chair: Ladan Karin-Nejad

Membership

Pharmacist Chair: Chelsea McSwain, PharmD, BCPS, BCCCP

Student Chair: Katie Jones

Philanthropy

Student Chair: Amy Chan

Upcoming DC-CCP Events

Capital Area Food Bank - November 7th, 2020

- This will be held in Washington DC, and will be from 1:00PM-4:00PM
- Members will be volunteering to help the DC community fight against hunger
- Networking opportunity with other fellow members around the area, whether that be with fellow pharmacy students or even practicing pharmacists
- Sign-up link [here](#)
- If you have any questions, contact Amy Chan at chanar@vcu.edu

2020 Fall CE Forum - November 21st, 2020

- DC-CCP's yearly Fall Continuing Education Forum is approaching!
- Participants will be given the opportunity to earn CE credits
- This will be held virtually through WebEx and will be from ~8:45AM-2:00PM
- In addition there will be a residency roundtable, where students will have the opportunity to network with residents and fellow pharmacy students from the region
- For more information on this and registering, click [here](#)
- If you have any questions, contact Nancy Tang at nancy.m.tang@medstar.net

CV Reviews (Ongoing)

- Fellow pharmacists in DC-CCP have volunteered their time and insight to review students' CVs
- CV reviews will be conducted through Zoom OR by having comments attached to the CV
- This is open to all students, but student members will have priority
- Emails will be sent to schools for sign-ups soon. Stay tuned for this

Mock Interviews (Virtual)

- This will be tailored to those interviewing for residency or another another job utilizing a virtual platform
- The goal is for students to become more familiar with virtual interviews
- Zoom will be utilized, specific to students' account links OR the interviewer's if the student does not have a Zoom account
- Sign-ups will be sent to each school around late October, and the deadline to sign up will be on December 18th, 2020

ACCP Student Chapter Reports

Howard University College of Pharmacy

The Howard University student chapter of ACCP is dedicated to serving the students of Howard University through networking opportunities and professional development. An example of the chapter's influence on the student body is Residency Week. This February, it consisted of four events that were organized by the student chapter of ACCP and the Howard University chapter of the American Society of Health Systems Pharmacists. The first event was a midyear recap where 4th year students shared helpful tips on how to be successful and be appropriate during the annual event. This included who to room with while at ASHP's midyear, how to not ruin your chances with potential employers, and what programs generally are looking for in their next residents, fellows, or employees. The next event was titled "Fireside Chat with Residency Programs." In this event, current residents explained the day-to-day operations of resident pharmacists and how to secure a prestigious residency. This informal event was helpful because students had the opportunity to ask questions to former students about challenging and exciting activities residents do in each of their hospitals. The third event was a cover letter review workshop. Two professors at the school, Dr. Malaika Turner and Dr. Divita Singh, explained the importance of having excellent cover letters and having professors check them and curriculum vitae before submission. The last event was a happy hour where students, residents, and clinical pharmacists fellowshiped and networked. Students in the first through fourth years attended these events and it helped to provide clarity on the necessities of being a stand out residency candidate and excelling while being a resident.

Willis Marsh, PharmD Candidate, Class of 2021

University of Maryland School of Pharmacy

On February 29th, 2020, our local chapter gathered to volunteer at the local Baltimore City Ronald McDonald House Charity (RMHC) to prepare brunch for the residents and their families. RMHC provides a “home-away-from-home” for seriously ill children and their families. They provide care and hospitality via donations and work from volunteers. Volunteers can make meals and lead activities for the children. Our student chapter worked together in the RMHC kitchen to make breakfast brunch burritos and blueberry muffins for the residents and staff. We individually wrapped and packaged them with instructions for them to be reheated at their convenience. As future clinical pharmacists it is important to know that the care of patients does not end with their medications. We must provide holistic care and our support patients wherever needed. The work done at RMHC is incredible and it is an honor to work with them. Due to the COVID-19 pandemic, RMHC is not taking volunteers but we hope our chapter can return again soon.

Lauren Proctor, UMSOP Class of 2022



Student Chapter Spotlight: Virginia Commonwealth University School of Pharmacy

This year VCU School of Pharmacy's student chapter of ACCP won ACCP's Outstanding Student Chapter of the Year award! The award recognizes an ACCP student chapter that exemplifies strength in leadership, dedication to patient care, and a passion for professional development through its activities and membership. VCU's chapter has focused on addressing ACCP's core values of extending the frontiers of clinical pharmacy and promoting dedication to excellence in patient care, research, and education. By promoting community service at local health clinics and fairs, bringing in clinical pharmacists and researchers to speak at their meetings, and organizing journal clubs and topic discussions around VCU, student members were able to grow themselves professionally and prepare themselves for future careers in clinical pharmacy! VCU's student chapter will receive a 2020 Outstanding Chapter plaque and a \$1000 award presented at the Annual Meeting during their awards ceremony.

Amy Chan, PharmD Candidate, Class of 2022



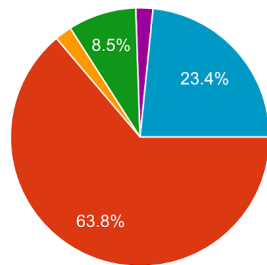
COVID-19 Impact

Hello fellow and prospective DC-CCP members! With the recent pandemic affecting all of us throughout the world, DC-CCP wanted to hear your thoughts on how the pandemic has impacted the experiential learning experience! Here in the next few pages, you will see the questions we asked students, preceptors, and their responses! The survey was open from early August to late September. The arrangement will start with the consensus of each group, followed by the questions and responses. First will be the students, followed by the preceptors.

Students

Which school are you from?

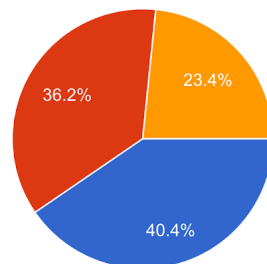
47 responses



- University of Maryland Eastern Shore
- Notre Dame of Maryland University
- Howard University
- University of Maryland - Baltimore
- Virginia Commonwealth University
- Shenandoah University

What year are you?

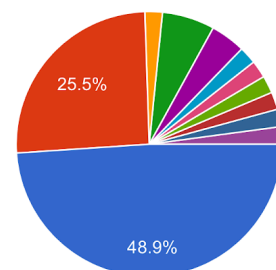
47 responses



- 2nd year
- 3rd year
- 4th year

Which rotation are you on? (Could also answer for a past rotation too)

47 responses

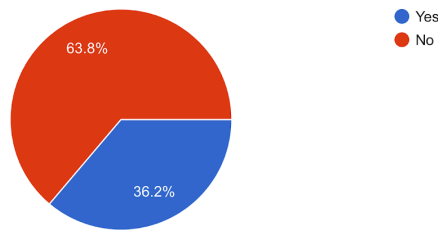


- Community
- Health-System
- Managed Care
- Ambulatory
- Acute Care
- Academia
- Direct Patient Care
- Internal Medicine

▲ 1/2 ▼

Was your rotation(s) during March through May transition from on-site/in-person to virtual (Did your rotation switch to virtual during these months)?

47 responses



Majority of our student responses came from Notre Dame of Maryland University, followed by Shenandoah University! For the years that answered, 19 were in their 2nd year, 17 in their 3rd year, and 11 in their 4th year. Majority of students were on a community rotation, followed by health-systems. A few students were on either an IDS, Longitudinal Care, or Public Health rotation. The majority of students did not have their rotations switch to virtual. Thirty-six percent of the students on rotation did switch to virtual.

If your rotation(s) transitioned to virtual, how has this affected your learning experience?

- "It was easy, but I felt like I could learn more if I was on site with my preceptor"
 - 2nd year, Notre Dame of Maryland University, Health-Systems
- "Shortened my learning experience. Our IPPE Health System Intro went from 3 weeks to 2 weeks +1 week online modules"
 - 3rd year, Virginia Commonwealth University, Health-Systems
- "I missed out on a lot of hands on experiences, such as compounding, and making pharmacy binders. From home there was only so much I could do"
 - 4th year, Shenandoah University, Investigational Drug Services
- "Diminished networking opportunities, hands-off work and being physically distant made it harder to learn and material was not fully translated"
 - 4th year, Shenandoah University, Public Health
- "It worked out for the best I think. My original rotation was in the surgical ICU (not ideal place to be during COVID), and I was switched to a virtual rotation with NCDOA (oncology association management). I loved every part of my rotation"
 - 4th year, Shenandoah University, Ambulatory
- "My rotation was virtual, but it was in July. I think it was still a wonderful learning experience, but I feel I did not experience the rotation at the fullest since everything was online or over the phone. For instance, the clinic offers diabetic foot exams, but we did not have the opportunity to conduct one. However, I did get to speak with patients directly over the phone about medications, care plans, etc"
 - 3rd year, Shenandoah University, Direct Patient Care

- “Personally, I feel that some of the advantages of the virtual rotation is that I was able to look up necessary information to facilitate my learning more quickly. Something that was a little more limited when compared to an on-site rotation is the drug database access through a personal computer. One thing that was a disadvantage is that not being on-site rotation did take away the physical interaction with a patient. As a soon-to-be healthcare providers, I believe that the ability to effectively communicate health-related topic can make a difference in quality of care”
 - 4th year, University of Maryland - Baltimore, Ambulatory

- “It was more project based than working up patients. We did not have remote access, so the patient cases were not actual patients. However, I had more free time in the morning”
 - 4th year, Howard University, Internal Medicine

If your rotation remained on-site/in-person, what requirements or procedures changed at your site and how did this affect your learning experience?

- “I did not stay in the pharmacy more than three days a week and my preceptor would assign hours of homework and projects to complete the 140 hour requirement”
 - 2nd year, Notre Dame of Maryland University, Community

- “I finished up my hours by going for less days but more hours on those days. I liked that I was there for a few more hours and could learn more with my preceptor, especially since all my coursework was done”
 - 3rd year, Notre Dame of Maryland University, Health-System

- “We have to wear a mask at all times, remain six feet apart or as far apart as possible, keeping our instruments to ourselves and clean periodically”
 - 2nd year, Notre Dame of Maryland University, Community

- “My remaining rotations at UVA have been on-site. In the first rotation, I was in a cubicle in an office, so I didn't feel much impact of social distancing except that meetings were all through Webex/Zoom. I'm not a fan of virtual meetings, but it is what it is. In my rotation now in Ambulatory Care, I work some days off-site to accommodate the space. When I see patients, I have to wear a surgical mask and goggles. I'm still learning a lot regardless of the situation, though I don't get to meet as many people face to face”
 - 4th year, Shenandoah University, Ambulatory

What are differences that you have noticed for rotation experiences pre-COVID-19 and post-COVID-19?

- “Face-to-face services has been cut back to the minimum so certain services such as for a medication review, the patient's storage of medications cannot be observed”
 - 3rd year, University of Maryland - Baltimore, Health-System

- “Pre-COVID, the schedule was more flexible for when the students' were able to come in to do their own hours depending on where their site was. Post-COVID, all hours were to be done before school starts back again”
 - 3rd year, Notre Dame of Maryland University, Health-System

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- “There was no commute to rotation which I found attractive. Post COVID, I felt like I was doing more research and utilizing my time more efficiently and effectively. I also learned more about the management of patients with COVID”
 - 3rd year, Shenandoah University, Acute Care
 - I have more time to focus on my personal well-being. It is harder to gauge my preceptors' reactions and/or body language when talking to me or giving me my evaluations”
 - 4th year, Shenandoah University, Public Health
 - “Social distancing changes interactions between people. I notice how people keep a distance and it makes me feel like I'm the one who is infected, so it is strange. I can't shake hands with people either, and I have to wear a mask at all times, so people cannot see when I'm smiling at them (I try to smile anyway and exaggerate by squinting my eyes to try to show that I'm smiling)”
 - 4th year, Shenandoah University, Ambulatory
 - “The virtual aspect was very different than from what I am used to. I feel much more comfortable working directly with preceptors and patients, but I am grateful for this experience to better prepare me for more virtual roles, if the need arises”
 - 3rd year, Shenandoah University, Direct Patient Care

What recommendations do you have for other students to be successful in virtual rotations?

- “Stay on top of all projects and have easy access to meeting call-in information. Be proactive in looking for people to talk to and try to utilize as many resources as if you were actually on site”
 - 4th year, Shenandoah University, Public Health
- “I will recommend to be open minded and flexible. Do not procrastinate. Do some research before the rotation starts and be proactive. Ask questions. Don't be shy”
 - 3rd year, Shenandoah University, Acute Care
- “Go into the rotation knowing that things are going to be complicated and you MUST be flexible, it will not only make your life easier but it will also take a huge weight off your preceptors shoulders”
 - 4th year, Shenandoah University, Acute Care
- “To successfully adapt to the virtual rotation, my biggest suggestion is to maintain your utmost professionalism as if you are working onsite. It helped me to stay motivated and contribute during my rotation. Although working at your comfort at home might mask the fact that you are still working with professional pharmacists during your rotation, they can still be your future employers and it would look more advisable if you are being professional while being on call. Some of the advice to stay professional is to be on time for your meetings, make sure that you communicate effectively on your emails (avoid using slang, unfinished sentences, casualties when emailing your preceptors), dress presentable during your video calls”
 - 4th year, University of Maryland - Baltimore, Ambulatory
- “To be on track, attend all meetings and try to get the most out of it”
 - 2nd year, University of Maryland - Baltimore, Community

- “Make sure to take breaks from the computer screen because looking at a screen all day can make you tired. Also, do not forget to check for messages/emails that preceptors send throughout the day”
 - 4th year, Howard University, Internal Medicine
- “I would say to ask and try to get remote access to the system at which a site may use. It makes it more conducive and you learn more when you’re able to use the system versus just being shown through videoconference and explanations”
 - 4th year, University of Maryland - Baltimore, Managed Care

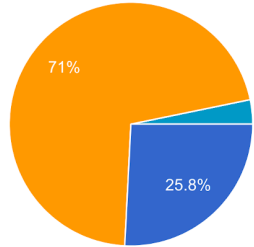
What new things have you noticed pharmacists doing to help and/or expand their roles during these times?

- “I have more so noticed a decrease in pharmacy services provided. Pharmacists are however gathering information where possible on treatment success and failure of medications to treat COVID-19 such as Remdesivir”
 - 3rd year, University of Maryland - Baltimore, Health-System
- “They have prioritized efficient communication channels, as well as workflow procedures”
 - 3rd year, Notre Dame of Maryland University, Community
- “The pharmacists are utilizing zoom communication to help students in rotation”
 - 2nd year, Notre Dame of Maryland University, Health-System
- “Forming committees to be a “command center” for updates and implementing efficient changes to stay safe to continue to provide patient care”
 - 3rd year, Notre Dame of Maryland University, Health-System
- “My pharmacist assists with a COVID-19 testing site and is hands-on with taking samples from patients and with delivering their results”
 - 2nd year, Notre Dame of Maryland University, Community
- “Round in COVID units, experimental drug dosing and monitoring”
 - 4th year, Shenandoah University, Health-System
- “Making the transition to offering care via phone or video call has been great. Pharmacists at my work site were key in helping get Remdesivir order sets in place to treat COVID patients”
 - 4th year, Shenandoah University, Ambulatory

Preceptors

Which school are you affiliated with?

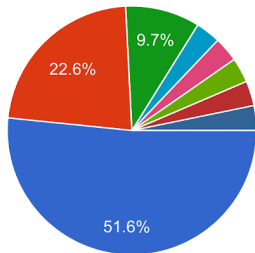
31 responses



- University of Maryland - Baltimore
- University of Maryland Eastern Shores
- Notre Dame University of Maryland
- Howard University
- Virginia Commonwealth University
- Shenandoah University

Which rotation are you precepting?

31 responses

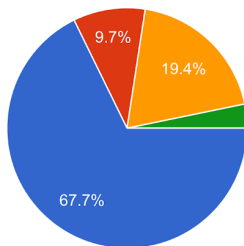


- Community
- Health System
- Managed Care
- Acute Care
- Ambulatory Care
- Elective - Critical Care
- Health System and Acute Care (2 part...)
- Advanced Community Rotation

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Are you onsite, telework, or have a mixture of these everyday?

31 responses



- Onsite
- Telework
- Mixture
- Onsite 4 days, Telework 1 day

As part of the responses, 31 preceptors responded to our survey, the majority from Notre Dame of Maryland University! Most were precepting a community rotation, followed by a health-system rotation. Even with the pandemic, the majority remained on site. Many preceptors believe that telemedicine will continue to expand beyond the pandemic.

If your job was onsite, telework, or a mixture, how has the pandemic impacted these?

- “To reduce the number of staff on site, management came up with a minimum number of staff needed on site, so I work some days at home and some on site”
 - Health-System, Notre Dame of Maryland University, Mixture of onsite and telework

- “Many meetings are now online. However, most of the expectations and core work on site hasn’t changed. Nature of work has changed to some extent”
 - Acute Care, Notre Dame of Maryland University, Onsite
- “Can only have the students on site for some of the work days to prevent overcrowding”
 - Health-System, Notre Dame of Maryland University, Mixture of onsite and telework
- “We strive to follow physical distance parameters and have limited the time students spend on the wards”
 - Health-System, Notre Dame of Maryland University, Onsite
- “It has proven more difficult to get students acclimated”
 - Community, University of Maryland - Baltimore, Telework

What are some of the challenges that your students face when completing a virtual rotation?

- “Most of the projects are within pharmacy. It is nearly impossible to make it virtual. That is why I usually do not give virtual activities as often”
 - Community, Notre of Maryland University, Onsite
- “Difficult to understand hospital operations virtually”
 - Health-System, University of Maryland - Baltimore, Mixture
- “You can’t practice Emergency Medicine virtually; thus, the student misses out on considerable involvement in my practice”
 - Acute Care, Shenandoah University, Onsite 4 days and Telework 1 day
- “Need to come up with a lot more project work to keep them active relative to prior rotations which were more rounding-based”
 - Health-System, Notre Dame of Maryland University, Mixture
- “Scheduling group discussions, getting acclimated to systems/workflow”
 - Community, Notre Dame of Maryland University, Telework

Are there barriers to providing optimal patient care through telemedicine?

- “Yes. Telemedicine works well and sending medications through home delivery work pretty well. But this does not seem to be possible in all situations. It has definitely helped patients who are immunocompromised or high-risk. This way patients can have choices”
 - Community, University of Maryland - Baltimore, Onsite
- “More communication issues (Voicemail, answering machines)”
 - Community, Notre Dame of Maryland University, Onsite
- “Telemedicine is working very well overall - many more positives than challenges. Biggest challenges are equipment and connectivity for older patients and patients with limited incomes/resources”
 - Health-System, Notre Dame of Maryland University, Mixture
- “A lot of patients are unwilling to answer the phone, whether or not they recognize the phone number. It definitely leads to delays in care in scenarios where I could have normally just stopped in and introduced myself during an infusion visit”
 - Health-System, Notre Dame of Maryland University, Mixture

- “Phone issues while rounding, patient not answering phone when providing discharge counseling”
 - Acute Care, Notre Dame of Maryland University, Mixture

What advice would you give to other preceptors about communicating with patients and students using phone calls, video calls, or other media? What is effective or not effective?

- “Effective communication works best when we really listen to a patient’s needs and concerns. We also have to ensure we address all the knowledge gaps they may have about the medications. This will help in keeping your patients adherent. We have to ensure we stress the importance of how taking their chronic medications on time will keep them out of the doctor’s office and hospital during this high-risk pandemic”
 - Community, Notre Dame of Maryland University, Onsite
- “Utilize zoom whenever possible, seeing someone face to face on a video call is more effective than just talking on the phone”
 - Community, Notre Dame of Maryland University, Onsite
- “Zoom meetings are definitely the most effective tool for me. Being able to share screens and communicate in real time makes a big difference”
 - Health-System, Notre Dame of Maryland University, Mixture
- “Email is very effective for project progress, schedule updates, or anything else that is better in writing or that you need a “paper trail” to be able to follow back if need be. Students that I have been with so far are all tech savvy and can easily call in to phone and video conference calls”
 - Health-System, Notre Dame of Maryland University, Onsite
- “Topic discussions and project work are easily done off-site or via video call”
 - Acute Care, Shenandoah University, Onsite 4 days and Telework 1 day

How do you think this pandemic has changed/re-shaped the landscape for telemedicine in the future?

- “Has definitely paved the way for more utilization of telemedicine”
 - Community, University of Maryland - Baltimore, Onsite
- “I think it has forced most medical providers to come up with a telemedicine plan of action. How many of them will continue to use the services after the pandemic remains to be seen but almost all providers now have an understanding of what is involved”
 - Community, University of Maryland - Baltimore, Onsite
- “We ripped the band-aid off quickly and the adoption curve of telemedicine was significantly faster. Pharmacists are getting reimbursed for telemedicine via incident to billing - need to make sure this continues post-pandemic”
 - Health-System, Notre Dame of Maryland University, Onsite
- “Definitely opened up doors to allow more remote visits. Being forced to be physically present is a huge barrier to providing care for patients with mobility and transportation needs. Also, by working from home a few days a week, I have gotten some of my own life back (less

commute time, taking care of errands on lunch, etc). I noticed a reduction in stress and improved work-life balance, which is very important to prevent burnout”

- Health-System, Notre Dame of Maryland University, Mixture
- Telemedicine may help decrease ED visits for non-emergencies”
 - Acute Care, Shenandoah University, Onsite 4 days and 1 Telework day
- “Puts into true perspective what we take for granted everyday. Many people are still afraid to come to a medical facility, and yet many patients are falling away from care as they are limited or unable to participate with telemedicine with age causing limitations through hearing and visual limitations being a deterrent”
 - Community, University of Maryland - Baltimore, Onsite

Thank you peer reviewers, authors, and contributors!

Interested in writing for an upcoming newsletter?
Interested in becoming a peer reviewer?

Contact: rfloresca@umaryland.edu or willis.marsh@bison.howard.edu



For more information about DC-CCP or if you are interested in becoming a member, please visit our website:

<https://dcccw.wildapricot.org/>

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About DC-CCP:

DC-CCP is a non-profit professional association and an independent chapter of the American College of Clinical Pharmacy dedicated to improvements in pharmacotherapy practice, education, and research in the Washington DC Capital Region, including the District of Columbia, State of Maryland, and Commonwealth of Virginia. Membership will be open to any pharmacist, resident, or pharmacy student in the Capital Region. Membership in the American College of Clinical Pharmacy is not required to become a member of our organization. DC-CCP was founded in 2011 by Richard Parrish

Purpose and Goals of DC-CCP:

- (A) To promote the rational use of drugs in society
- (B) To advance the principles and practice of clinical pharmacy
- (C) To promote the full-time, advanced practice of clinical pharmacy
- (D) To provide an advanced level of continuing education programs in the area of clinical pharmacy and objectives of ACCP as outlined in its constitution and bylaws
- (E) To provide a forum for the expression of opinion on pharmacy practice, education, and research from the perspective of clinical pharmacists
- (F) To support, promote, and advance the goals and objectives of ACCP as outlined in its constitution and bylaws
- (G) To provide a local recruiting base for ACCP