# **Houston Methodist Department of Pharmacy**

## **Promotional Path Evaluation Rubric**

Promotional Level Sought by Applicant: Clinical Specialist Leader (CSL)

Employee Na	me:					
Current Positi	ion: _Sr. Cli	inical Specialist_				
Primary Area	of Practice	or Specialty:		<del></del>		
Tenure with H	<del>I</del> М:					
Tenure in cur	rent role: _	_				
Last 3 Perforr	mance Eval	luation Ratings ir	Current Role:			
	(2020)		(2021)		(2022)	
General Qua	lifications	for Promotion:				
1. Tenure in o	current role	qualifies for pron	notion Yes / No /	request exemp	tion	
2. License an	d Certificati	ion Requirement	s:			
Pharr	macist Lice	nse				
Texas	s State Boa	rd of Pharmacy	Preceptor Licens	e		
Basic	: Life Suppo	ort (BLS)				
Adult	Cardiac Lif	e Support (ACLS	S)			
Pedia	atric Cardia	c Life Support (P	ALS) (if required)	)		
Hous	ton Method	ist Research Ins	titute (HMRI) Cer	tification		
Board	d of Pharma	acy Specialists (E	3PS) Certification	:		
[	BCPS	BCOP	ВСРР	BCNSP	ВСССР	BCACP
	ВССР	BCPPS	BCTXP	BCSCP	BCIDP	 BCEMP

### Evaluation Rubric Domain 1 - Pharmacotherapy Management (Weight - 50%)

<u>Threshold:</u> A successful CSL applicant will have demonstrated <u>exceptional proficiency</u> in pharmacotherapy management. This will include, but is not limited to, the highest level of knowledge within one's area of practice demonstrated by the complexity of intervention documentation, feedback from peers (internal and external), medical and nursing staff members, nursing leaders, and/or patients' recognition. The CSL applicant will have a demonstrated, consistent record for accurate, timely and thoughtful application of pharmacy-based protocols and formulary policy. The applicant demonstrates strongly developed critical thinking skills as related to clinical pharmacotherapy management.

Assessment Standards: Clinician shows ADVANCED pharmacotherapy	Unable to	Absent or Novice	Emerging	Developed	Strongly Developed
management evidence by:		0	1	2	3
Pharmacotherapy Knowledgebase (Knows)		Requires assistance or makes errors in practice decision making	Demonstrates basic skills to meet needs in current role	Advances personal practice independently. Has board certification	+ is a resource for others. Offers advanced knowledge
Ability to Act (Does)		Requires regular assistance for making pharmacotherapy care changes	RARELY Requires assistance for making pharmacotherapy care changes	Can be of assistance or resource to others to complete work	REGULAR assistance or resource to others and regularly goes above and beyond assigned work
Effectiveness in practice (Ability to achieve advanced pharmacotherapy changes)		Involvement in patient care changes at a basic level	Involvement in patient care changes at an advanced practitioner level in limited scope	Involvement in patient care changes at an advanced level across several practice domains	Involvement in patient care changes reflect the highest level of practice (near autonomy) while building capacity for autonomy of peers
Consistency of practice (Reliability)		Regular errors, unreliable, inconsistent at times	Infrequent errors; however, inconsistent at times	Very rare errors, very reliable and consistent	Develops tools or shares skills with others to increase reliability / consistency in others
Accuracy of pharmacy protocol application		Infrequent errors	Very rare errors and follows rules	Only very rare errors and demonstrates critical thinking skills	Highly developed attention to detail, and critical thinking, Develops tools or shares skills with others
<u>Documentation</u> (TAPs entries, notes & interventions. Consider both Quantity and Quality)		Infrequent, incomplete	Infrequent / complete or frequent / incomplete	Complete and consistent	Leader among peers in current role
Formulary Management Experience and Support		Regular, questionable non-formulary requests. Concern for ability to "influence" practice	Few questionable non-formulary requests. Demonstrates ability to "influence" prescribing practice	Regular conversion of non-formulary to formulary agents	+ support of committee reviews (monograph development and follow-through)
Other related evidence(s) offered by candidate that support or limit promotion request in this domain.					

## **Evaluation Rubric Domain 2 – Teaching (Weight - 20%)**

<u>Teaching:</u> A successful CSL applicant will have demonstrated proficiency in institutional (and/or clinical) doctor of pharmacy student instruction and pharmacy resident instruction. A record of formalized pharmacist instruction through pharmacist and nursing staff in-services and training are required. As it relates to clinical teaching, the applicant demonstrates strongly developed critical thinking skills and maturity to address learner needs.

Volume of student and resident instruction in the last two years are sufficient for evaluation of standards		Yes (2 or more PGY1 Residents) No (1 or fewer PGY1 Residents)			
Assessment Standards:	Unable to	Absent or Novice	Emerging	Developed	Strongly Developed
Evidence of quality <u>PLANNING</u> for rotational activities	Assess	0 No plans provided. No preparation obvious	1 Planning initiated	Well established plans	3 Well established planning and follow- through
Evidence of quality learner INSTRUCTION and MODELING (teaching)		Limits learner to observation. A, "Just look over my shoulder and learn" approach	Limited formal modeling, but effective teaching	Incorporates modeling as well as didactic instruction. Engages the learner in tasks.	+ Adaptive to different learning styles and needs
Evidence of quality learner <u>FEEDBACK</u>		Limited and incomplete	Feedback provided but superficial	Frequent, insightful and useful feedback	+ Displays maturity in difficult situations
Evidence of quality learner <u>EVALUATIONS</u>		Incomplete	Complete but superficial	Evaluations are informative and instructive.	+ Evaluations are consistent with feedback
Evidence of interest in improving one's clinical instruction skills		Minimum standards has active preceptor license	Seeks to apply HM teaching standards	Self-driven to increase clinical teaching acumen	+ Recognition by internal learners and external entities
Past performance and letter of intent indicate a willingness and ability to assume more involved and more frequent roles in clinical teaching while maintaining current clinical responsibilities.		Unclear interest	Stated interest	Stated interest and beginning of a track-record	Stated interest, Strong track-record to date
Other related evidence(s) offered by candidate that support or limit promotion request in this domain					

### Evaluation Rubric Domain 3 - Continuous Quality Improvement - Research (Weight - 15%)

<u>CQI and Research:</u> A successful CSL applicant will have demonstrated a track record of performing and leading internal CQI evaluations and basic research within one's stated primary field of pharmacy practice through active participation and developing leadership in existing CQI programs. The CSL candidate should be credentialed with the HMRI prior to application. As it relates to CQI and research activities, the applicant demonstrates developed critical thinking and fundamental data analytical skills.

For scoring this domain, consider applicant's experience (frequency AND participating role) in current or planned Continuous Quality Improvement programs AND research endeavors.

Trait	Novice	Emerging	Developed	Strongly Developed	Rating
ITAIL	1	2	3	4	
Innovative Thinking	Simply reformulates collections of available ideas (no new concepts offered) Research acumen limited. Limited to Junior co- investigator (not innovator)	Experiments with creating novel or unique ideas, question, or service	Implements and measures a novel or unique idea or question for CQI	Implements several ideas and/or creates new knowledge or services Innovator of HM research as PI beyond residency work	
Connecting, Synthesizing Transformational Aptitude	Recognizes existing connections among ideas or solutions	Connects ideas or solutions in novel ways	Synthesizes ideas or solutions into coherent ideas	Transforms ideas or solutions into entirely new pharmacy/hospital programs or services	

#### **Evaluation Rubric Domain 4 – Overall Assessment (Weight - 15%)**

The overall assessment addresses the strength of the candidate's historical performance in his/her current role while considering potential for success in the requested promotional role. The overall assessment incorporates the demonstration of ICARE values, service pride characteristics and overall professionalism.

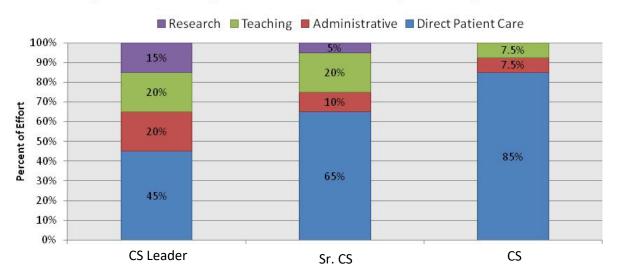
Trait	Unsatisfactory (1)	Satisfactory (2)	Very Good (3)	Outstanding (4)	Rating
Verbal Communication	Difficult to communicate with	Adequate for tasks. Always appropriate	Demonstrates above average capability	Fluent, fluid style, demonstrates confidence	
Non-verbal Physical Communication	Distracting or often inappropriate behaviors	Lacks distracting or inappropriate behaviors	Open and receptive in conversation	Creates environment for professional exchange at all times	
Written Communication	Often has errors in spelling, grammar	No errors. Mostly appropriate	Always appropriate for audience. Often efficient	Always appropriate, efficient, effective, and concise	
Demonstrated motivation to Succeed	Lacks Motivation - Underperforms or merely meets expectations in current role.  Limited self-reflection to drive improved performance or hinders growth.	Motivated - Outperforms in current role	Highly Motivated - Outperforms in current role and expands role for self currently.	Extremely motivated - Outperforms in current role and expands role for self and others currently.  Committed to self- reflection and development	
Poise	Rattled under pressure - Difficult time performing to standards	Rattled under pressure - Adequately performs to standards	Calm under pressure	Not only poised and calm, but thrives in pressure situations	
Time Management	Occasionally leaves tasks un-done or incomplete for others to complete	Never leaves a task un-done	Consistently over- delivers on timelines	volunteers and takes on more responsibility while maintaining quality of work with other tasks	
Transcends role related to ALL Dept. of Pharm work (Admin, ops, clin, IDS, etc)	Remains in primary role expecting peers, superiors to resolve problems and issues	Active reporter role. Provides clear situational details	Takes initiative to resolve issues and work with other areas	+ takes a clear leadership role in following through changes toward completion	

Areas or skills this employee should focus on over the next $1-3$ years as he / she advances into the new role OR re-applies for promotion into the desired role in future cycles:
1
2
3

### **References:**

Figure 1 below reflects the relative time allotted in a given day for the contribution to pharmacy work in the various domains of Direct patient care, Administration and Teaching and research. Successful candidates for promotion should demonstrate a track record of performing in activities of the next promotional level albeit not to the extent of the position as the normal work hours in the current role may not facilitate such regular contributions in the respective domain.

# **Expected Pharmacy Work Domain % Effort by Pharmacy Position**



Domain 1 score: _[_	points earned /	points available]	x 0.50 (weight of doma	ain) =
Domain 2 Score: _[_	points earned /	points available]	x 0.20 (weight of dom	ain) =
Domain 3 Score: _[_	points earned /	points available]	x 0.15 (weight of dom	ain) =
Domain 4 Score: _[_	points earned /	points available]	x 0.15 (weight of dom	ain) =
		-		·
			Overall Sc	ore:
Range of Score	0 to 0.85	0.85 to 0.9	0.9 to 0.95	0.95 to 1
Promotion Guide	Do Not Promote Provide guidance / support to improve areas of weakness for next submission	Consider Promotion	Promotion is Recommended	Promotion is Strongly Recommend
Reviewer's Promotion	n Recommendation:	Do Not Promote	Promote	
Comments:				