Sentara Martha Jefferson Hospital

PGY1 Pharmacy Residency

Policy Manual

Updated November 2024

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Sentara Martha Jefferson Hospital Pharmacy PGY1 Residency Program Purpose

Purpose: The Sentara Martha Jefferson Hospital PGY1 pharmacy residency program builds on Doctor of Pharmacy (Pharm.D.) education and outcomes to develop pharmacist practitioners with knowledge, skills, and abilities as defined in the educational competency areas, goals, and objectives. Residents who successfully complete PGY1 residency programs will be skilled in diverse patients care, practice management, leadership, and education, and be prepared to provide patient care, seek board certification in pharmacotherapy (i.e., BCPS), and purse advanced education and training opportunities including postgraduate year two (PGY2) residencies.

Overview

The Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency will provide the resident with the skills and knowledge required to become a skilled practitioner. During pharmacy rotations, the resident assumes responsibility for all aspects of patient drug therapy including: conducting patient interviews and patient medication counseling; advising physicians, nurses, and patients on appropriate drug use; attending rounds and conferences; pharmacokinetic consulting; and providing lectures on drug therapy to medical, nursing, and pharmacy staff. Required rotations include orientation (5 weeks), sterile compounding/nutrition (5 weeks), internal medicine (5 weeks), critical care (5 weeks), administration (5 weeks), drug information/medication safety (5 weeks), service component (longitudinal, 11 months), and teaching and learning certificate (longitudinal, 11 months). Elective rotations include emergency medicine (5 weeks), oncology (5 weeks), internal medicine II (5 weeks), critical care II (5 weeks), and transitions of care (5 weeks).

During resident training, valuable experience is obtained in the many integrated aspects of a pharmacy service including quality improvement programs, medication use evaluation programs, and regulatory compliance. These experiences enable the resident to develop the skills needed to communicate effectively; to organize, prioritize, and manage pharmacy services; and to plan for and implement new programs.

Mission Statements

Sentara Mission: We improve health every day. Pharmacy Mission: We improve health every day by helping people make the best use of medications.

Sentara Commitments

- Always keep you safe
- Always treat you with dignity, respect, and compassion
- Always listen and respond to you
- Always keep you informed and involved
- Always work together as a team to provide you with quality healthcare

PGY1 Pharmacy Residency Program at Sentara Martha Jefferson Hospital – 2025-2026 Residency Class

- NMS Match Code: 38800
- Program Start Date: Monday, June 30, 2025
- Term of Appointment: 52 weeks (program concludes on Friday, June 26, 2026)
- **Stipend:** \$50,000 annual salary (residents are paid every other week)
- **Benefit information:** medical/dental insurance, vision care option, life insurance, paid time off (PTO), travel allowance for professional meetings, office space, access to clinical databases
- **Financial support for required professional meeting attendance:** residents will receive financial support to attend the ASHP Midyear Clinical Meeting (including meeting registration, airfare, and hotel accommodations) and the UNC-Research in Education and Practice Symposium (including meeting registration, mileage, and hotel accommodations).

Sentara Martha Jefferson Hospital PGY1 Pharmacy Resident Expectations

The resident is expected to achieve the educational outcomes of the residency program. In order to earn a residency certificate at the end of the residency year from the Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency Program, the resident must complete the following:

- 1. Achieve at least 80 percent of the required residency objectives including all objectives under Required Program Competency Area R1: Patient Care, and have no objectives that need improvement.
- 2. Obtain pharmacist licensure in the Commonwealth of Virginia within 90 days of residency start date.
- 3. Development of personal goals for the residency following an initial evaluation of career interests, prior experience, and areas of strength and weakness.
- 4. Compliance with learning experience expectations
 - a. meeting with the learning experience preceptor(s) to define individual goals and objectives for the rotation
 - b. completing assignments by the assigned deadline
 - c. scheduling routine meetings with learning experience preceptor(s)
 - d. informing residency director of difficulties encountered in meeting goals and objectives or problems with preceptors
 - e. assuming responsibility of the learning experience preceptor in his/her absence
 - f. preparing a written evaluation of each learning experience at its conclusion that includes accomplishment of objectives, experiences gained, and evaluation of the learning experience site and preceptor(s) with recommendations for improvement
- 5. Completion of quarterly self-evaluation reports to be reviewed by the residency director. The purpose of these reports will be to ensure that the established residency goals are being achieved.
- 6. Provision of pharmacy staffing coverage. This will be achieved by working every fourth weekend (10-hour shifts), every other Friday evening for approximately 5 hours starting in January, 4 holidays, and 5 additional 8-hour shifts performing distributive and clinical pharmacist functions.
- 7. Maintenance of active membership in the American Society of Health-System Pharmacists.
- 8. Completion of a major residency project.
- 9. Completion of a medication use evaluation (MUE).
- 10. Completion of a monograph or drug class review.
- 11. Provision of several required presentations throughout the residency year, including journal club presentations, residency conferences, and in-services to physicians, nurses, and pharmacy personnel.
- 12. Attendance at the ASHP Midyear Clinical Meeting and a residency conference in the spring. Attendance at applicable local pharmaceutical education programs is expected. Residents may attend other professional meetings if the staffing schedule permits.

In addition to the resident's responsibilities listed above, it is important to note residency training is a fulltime commitment and therefore moonlighting of any type (pharmacy and non-pharmacy-related) is prohibited. The primary responsibility of the resident is to the residency program at Sentara Martha Jefferson Hospital.

Professional attire is required while at Sentara Martha Jefferson Hospital and residents must follow Sentara's Colleague Professional Appearance Policy.

The resident reports to and is supervised by the learning experience preceptor(s) and the residency program director.

Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency Program Residency Completion Requirements

Below are the requirements for the successful completion of the PGY1 residency program at Sentara Martha Jefferson Hospital.

- 1. Residents shall be licensed as a pharmacist in the commonwealth of Virginia as described in the residency manual
- 2. Residents shall successfully complete their residency project. Successful completion will be defined as:
 - a. Submission to and approval by the IRB
 - b. Presentation at Research in Education and Practice Symposium (REPS) or equivalent conference
 - c. Written manuscript submitted to the project preceptors and residency director. The quality of the manuscript should be as if submitting to a professional journal.
 - d. Closure of the IRB application when the project is completed
- 3. Regarding the ASHP PGY1 Education Objectives, the residents must achieve the following
 - a. 80% achieve for all objectives in Required Program Competency Areas (R1-R4)
 - b. 100% achieve for all objectives under Required Program Competency Area R1: Patient Care
 - c. No "needs improvement" in any of the ASHP PGY1 objectives
- 4. Residents shall complete all PharmAcademic evaluations
- 5. Residents shall complete the Teaching and Learning Certificate requirements
- 6. Residents shall have completed service component requirements as outlined in the residency manual
- 7. Residents shall complete a medication use evaluation (MUE), present it as a poster at a conference, and submit a final MUE manuscript as outlined in the residency manual

Policy:	Pharmacy Residency – Days Away from Residency				
Manual:	Click here to enter Manual.		Original Date:	3/1/2023	
Section:	Click here to enter Sec	ction.	Revision Date:	7/1/2024	
Location(s):	SMJH, SNGH, SRMH, SMG, IT		Approved By:	SCREAM	
			Process Owner:	Residency Program Directors	
Revision Descripti	on (Most Recent):	per the updated ASHP a residency from 25 days t days/professional days). personal days, religious	accreditation standards. F to 20 days (due to remov . Clarified PAL to include days. Clarified that 20 d	ve as days away from residency Reduced days away from ving conference e interviews, holidays, float hol, lay maximum includes jury duty, leaves of absence in addition to	

Policy Statement:

Because of the limited time period for completion of a PGY-1 and PGY-2 pharmacy residency program, residents will not be allowed to use all accrued paid time off during the residency year.

DAYS AWAY FROM RESIDENCY

- Residents may not exceed 20 days away from the residency program (assigned shifts/working days). This includes PAL (interviews, holidays, personal days, religious time),jury duty, military leave, sick, parental leave, medical leave, leaves of absence, and bereavement.
- It is up to the program how excess days away from the residency may be made up, if at all during the program or an extension at the end of the residency year.
- Residents must have a minimum of one day in seven days free of duty (when averaged over four weeks).

CONFERENCE ATTENDANCE

- ASHP Midyear and a regional residency conference attendance (considered professional leave) is required for the pharmacy residency programs. PAL will not be taken for attendance at these conferences and the resident will be paid at the regular daily rate.
- Attendance at other professional conferences not required by the individual program will require use of PAL, unless otherwise approved by the RPD.
- A maximum of 10 paid days is allowed for conference attendance.
- Required, internal pharmacy conferences are considered rotation days and do not count towards the maximum conference attendance days.

PAL

- Residents will accrue Paid Annual Leave (PAL) per Sentara policy.
- PAL must be approved by RPD at least 2 weeks prior. PAL during scheduled staffing must be requested prior to the department scheduling deadlines.
- Weekend requirements are set by the individual program (see residency manual for details). Weekend switches are allowed, but must be approved by the RPD.
- Each program outlines specific PAL restrictions that are contained within their residency program's manual.
- Residents will use HOLPAL per Sentara policy if not working on observed holidays. HOLPAL and floating HOLPAL does count towards the away from residency.
- It is the resident's responsibility to communicate with all parties as required per their program.
- PAL requests must follow department standards.
- Days required for licensure exams and interviews will require use of PAL.
- Community service days required by the program will not require PAL.

Page 1 of 2

ATTENTION: FOR REFERENCE USE ONLY WHEN PRINTED;

PLEASE REFER TO ELECTRONIC DOCUMENT FOR MOST CURRENT VERSION



SICK

- Residents may take sick time according to Sentara policy.
- All sick time must be communicated with the RPD according to department standards.
- Residents must follow system Attendance Policy 304.

PROGRAM EXTENSION

The ASHP PGY1 standards require 52 weeks for completion of the residency and certification of the resident. Based on this requirement, an equivalent time to the duration of the leave will be added to the end of the residency for a period not to exceed 5 weeks. The RPD will evaluate each situation on an individual basis.

- Residents who require more than maximum 20 days away from the residency program, or cannot meet residency program requirements for worked days must make up the additional leave if the program is able to accommodate.
- Determination if an extension can be offered will be dependent on the cause of the excess leave and how much time must be made up. Final decision is made by the RPD.
- The program extension time will be unpaid.
- If the resident is unable to make up the excess leave or an extension cannot be offered, the resident will not receive a certificate of completion.

Related Documents:

Policy	202 Paid Annual Leave (PAL) Policy
	202a Scheduling of Paid Annual leave PAL
	202b Paid Annual Leave PAL accrual
	203 Employee Sick Leave
	208a Leave of Absence non FMLA leave
	208 Leave of Absence/FMLA
	210 Employee Bereavement Leave
Procedure	List Procedures.
Job Aids	List Related Job Aids.
Regulatory References	ASHP Accreditation Standard for Postgraduate Pharmacy Residency Programs

Policy:	Pharmacy Residency – Disciplinary Action and Dismissal			
Manual:	Click here to enter Ma	inual.	Original Date:	3/1/2023
Section:	Click here to enter Se	ction.	Revision Date:	Click here to enter a date.
Location(s):	SMJH, SNGH, SRMH, SMG, IT		Approved By:	
			Process Owner:	Residency Program Directors
Revision Descript	ion (Most Recent):	Click here to enter Mos	t Recent Revision.	

Policy Statement:

DISCIPLINARY ACTION

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Residents are expected to conduct themselves in a professional manner at all times and to follow all relevant departmental and hospital policies and procedures.

Disciplinary action will be initiated if a resident:

- Does not follow policies and procedures of Sentara Healthcare
- Does not present him/herself in a professional manner
- Does not make satisfactory progress on any of the residency goals or objectives as documented in PharmAcademic
- Does not make adequate progress towards the completion of residency requirements as documented in PharmAcademic (e.g. residency project, rotation requirements, etc.)
- Does not attend and participate in educational sessions during paid conferences
- Does not attend and support the residency recruitment at ASHP Midyear meeting or other assigned conferences
- Does not adhere to set deadlines for assignments

DISMISSAL AFTER DISCIPLINARY ACTION

• Failure to meet standards or make satisfactory progress after disciplinary action or remediation can result in dismissal from the program

IMMEDIATE DISMISSAL

Refer to the Sentara Code of Conduct policy and procedure (301 and 301a) for additional details

- Failure to perform the normal and customary duties of a pharmacy resident, substantial or repetitive conduct considered professionally or ethically unacceptable or which is disruptive of the normal and orderly functioning of the hospital
- If licensure within the state of Virginia is not obtained within 90 days of the start date
- The resident knowingly or due to negligence of action places a patient, employee or any other person in danger
- The resident commits a major offense as outlined in Human Resources Policy 301a, Employee Conduct Procedure
- The resident commits plagiarism determined by a majority decision of an ad-hoc committee called to
 review the materials suspected of plagiarism. This committee must consist of at least the director of
 pharmacy services, the resident's program director, and a clinical specialist in the appropriate area of
 practice.

Related Documents:

n ~	1:
PO	m

301a Employee Conduct



Procedure	301 Employee Conduct
Job Aids	List Related Job Aids.
Regulatory References	List Regulatory References.

Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency Program Resident Evaluation Procedures

All evaluations will be completed using PharmAcademic.

Residents' Self-Evaluation of Their Attainment of Goals and Objectives

- 1. Residents will complete the same summative evaluation instruments at the midpoint of specified learning experiences and at the end of each rotational learning experience or at quarterly intervals for longitudinal learning experiences.
- 2. Residents will check the appropriate rating to indicate progress during the learning experience and should provide narrative comments for any goal for which progress is "Needs Improvement" or "Achieved".
- 3. Residents must have evaluation instruments completed to be used in evaluation session with preceptor(s). They will be reviewed and discussed with preceptors. Evaluations will be electronically signed and dated by the resident and preceptor(s) via PharmAcademic. The evaluation will be sent electronically to the RPD via PharmAcademic.
- 4. Residents are responsible for maintaining their residency notebook with all written documentation/feedback provided by preceptors.

Residents' Evaluation of the Preceptor and Learning Experience

- 1. Residents will complete the program's evaluation form no later than the last day of each rotational learning experience or quarterly for longitudinal learning experiences.
- 2. Completed evaluations will be discussed with preceptors, signed and dated both electronically via PharmAcademic.
- 3. PharmAcademic will electronically send completed, signed evaluations to the RPD for review on the day of completion.

Evaluation Definitions:

The rating of a resident's performance is based upon the following definitions, the assigned learning activities, the level of Bloom's taxonomy associated with the objective, and the criteria associated with each objective as designated by ASHP.

- **Needs Improvement (NI):** the resident is not practicing at the expected level at this point in the residency and specific practice modifications are needed. Comments must be written to give the resident specific behaviors/activities that must be improved.
- Satisfactory Progress (SP): the resident is practicing in a manner consistent with their level of experience, improvement was noted during the rotation, but the individual has not yet mastered this goal or is unable to function as an independent practitioner.
- Achieved (ACH): the resident practices independently and has mastered the skill set. No further instruction or evaluation is required. Comments must be written describing resident specific behaviors and examples of skill mastery.
- Achieved for residency (ACHR): this rating is designated only by the program director and after a resident has been rated as achieved in at least one summative evaluation and consistently performs objective at Achieved level, as defined above.

SENTARA MARTHA JEFFERSON HOSPITAL POLICY AND PROCEDURE

PGY1 Residency

Department: Pharmacy	Title: Residency Duty	Title: Residency Duty Hours & Moonlighting		
Initiating Authority:	Approving Authority:	Effective Date:		
Department of Pharmacy Services	Pharmacy Department	September 11, 2014		
Date of Revision/Review:	Page: 1	Category/Policy		
June 2018, May 2022, March 2023,		Number:		
October 2024				

Purpose: To define duty hours for pharmacy residents to ensure they are fit to provide services that promote patient safety.

Policy:

- 1. The Sentara Martha Jefferson PGY1 Pharmacy Residency will follow and comply with the current ASHP duty hour requirements located at <u>Duty-Hour Policy</u>
- 2. PGY1 pharmacy residents will utilize the functionality in PharmAcademic to track duty hours.
 - a. On the last day of each month, residents will receive an email notification and a task on their PharmAcademic home page to complete an ASHP standard Duty Hours form. The form contains three sections:
 - i. Required attestation statement
 - ii. Optional moonlighting questions
 - iii. Optional on-call questions
 - b. If a resident reports a violation, the form will be routed to the RPD for review/cosign to assist programs identify issues. If needed the RRD can send back the form to the resident to revise and resubmit. If no violations are reported, the form will not be sent to the RPD, but can be viewed in several places in PharmAcademic
- 3. Moonlighting (internal and external) is not permitted during the course of the residency program
- 4. The residency program at Sentara Martha Jefferson Hospital does not have an on-call program

Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency

Dates	R1	R2
7/1-8/2	Orientation	Orientation
8/5-9/6	Sterile	Internal Medicine
	Compounding/Nutrition	
9/9-10/11*	Internal Medicine	Critical Care
10/14-11/15	Oncology	Sterile
		Compounding/Nutrition
11/18-12/20	Drug Information/Med	Oncology
	Safety	
12/7-12/12	ASHP Midyear Clinical	ASHP Midyear Clinical
	Meeting	Meeting
12/23-1/3	Project Days	Project Days
1/6-2/7	Critical Care	Drug Information/Med
		Safety
2/10-3/14*	Internal Medicine II	Emergency Medicine
3/17-4/18	TOC	Critical Care II
4/21-5/23	Emergency Medicine	Administration
May 2024	UNC REPS	UNC REPS
5/27-6/27	Administration	TOC

Longitudinal learning experiences will begin the week of August 5 and continue throughout the remainder of the residency year.

(*) APPE Student on rotation to help meet Teaching and Learning Certificate requirements

Sentara Martha Jefferson Hospital PGY1 Pharmacy Residency

Criteria for Residency Preceptor of the Year Award Selection

Purpose: To establish criteria for pharmacy practice residents to select a residency preceptor of the year.

The residency preceptor of the year shall meet the following:

1. Be an active preceptor in the SMJH PGY1 Pharmacy Residency Program

2. Be an employee of SMJH (UVa and other "off site" preceptors are not eligible)

3. Have precepted 67% of the residents in the class. The precepting can be a combination of rotations, projects, seminars, etc.

4. Made a meaningful impact on the residents. This impact can be clinically, professionally, or even socially.

Residents will select a preceptor of the year and notify the residency program director of their selection no later than May 31st.

The residency preceptor of the year award will be presented by the current residents to the preceptor at the residency graduation ceremony.



Overview

Overview

Inactive	No
Effective Date	03/20/2023
Date of Last Change	03/13/2023 12:57:03.646 PM
Job Profile Name	Resident-Pharmacist
Job Code	102450
Include Job Code in Name	No
Job Profile Summary	The pharmacy residency is a 12-month experience designed to expand upon academic experiences in an integrated health care facility and to provide further opportunity for knowledge base development and expertise in the provision of pharmaceutical care by completing rotations through a variety of clinical areas. The resident will gain an understanding of the pharmacoeconomics applications necessary for successful managed care in a mixed academic/community setting with extensive exposure to several different facets of health care. Residents will also play an integral role in the implementation of inpatient and outpatient protocol development, formulary management, system wide program implementation, impact of market forces on health care, and the impact of managed care on the well-being of the community.
	BLS required within six months of hire. Will consider new graduated pharmacists and pharmacists not licensed in Virginia due to relocation. Must have Virginia license within 90 days of hire.
Job Description	
Additional Job Description	
Job Title Default	Resident-Pharmacist
Restrict to Country	
Management Level	Individual Contributor
Job Level	Band 1 Staff
Job Family	Pharmacy
Job Category	Business Professional
Job Classifications	2 - Professionals (EEO-1 Job Categories-United States of America) BND1PL - Sentara Job Level 1 with PAL (PAL Group-United States of America)
Work Shift Required	Yes
Public Job	Yes
Referral Payment Plan	Employee Referral
Characteristics	
Difficulty to Fill	
Critical Job	No
Compensation	
Compensation Grade	Clinical Support
Compensation Grade Profile	
Impacted Eligibility Rules	CER_OCC_Call Pay at 1.50



CER - CGP Resident-Pharmacist

Additional Data

View As Of 03/20/2023

Active Frequency

Lift/Carry	Bending	Climbing	Driving	Walking	Standing	Sitting	Reaching/Handling	Kneeling/Crouching/Crawling	Push/Pull	Peak/Force
1-5 lbs	Seldom (0-6% of time)			Seldom (0-6% of time)	Seldom (0- 6% of time)	Constantly (67-100% of time)	Seldom (0-6% of time)		1-5 lbs	1-5 lbs

Additional Information

Stroke Patients-Incumbents are required to be knowledgeable of the standards of care for stroke patients and meet the annual educational requirements for the Primary Stroke Center, where applicable.	Yes
Clinical Setting-Demonstrates the minimum knowledge, skills and abilities to care for the individualized needs of the patient to include physical, psychological, socio-cultural, spiritual and cognitive needs as well as functional abilities including the need for diversified use of such practices.	Yes
Aptitudes	
Mental abilities-The ability to learn and understand instructions and underlying principles. This would include the ability reason and make judgments, understand and follow oral and written instruction, to guide others and give instructions, and to make decisions in accordance with established policies and procedures.	Yes
Communication-The ability to understand the meaning of words, sentences, and paragraphs, as well as, ideas associated with them and to use them effectively. The ability to comprehend language, and to understand and present information and ideas clearly.	Yes
Environmental Exposure	

Environmental Exposure

Confined Space (Limited Entrance/Exit) Cytoxic Agents (Chemotherapy Drugs)



	Lung Irritants/Dust/Vapors Repetitive Motion Skin Irritants Toxic Chemicals Vibration
Physical Demand Strength	
Strength Demand	Sedentary
Risk Assessment	
COVID-19	COVID-19 Very High/High-Workplace communicable disease risk is managed through correct use of vaccination programs, and personal protective equipment and workplace and engineering controls. For those who are Teleworking (i.e. not physically interacting with coworkers, residents, patients or members), whether temporarily or permanently, the employee is designated as lower risk while they are Teleworking.
Airborne Risk	Involved in procedures such as sputum induction, administration of aerosolized pentamidine, bronchoscopy, caring for post bronchoscopy patients, endotracheal intubation or suctioning, autopsies, and care of patients known or suspected of having tuberculosis. Employees with occasional patient contact or who perform diagnostic/therapeutic procedures on patients who are in Airborne Precautions isolation.
Bloodborne Risk	
Sensory	
Sensory	Color Discrimination-ability to match & detect differences between colors & brightness Far Vision-ability to see details at a distance Hearing-ability to detect or tell the diff between sounds that vary in pitch & loudness Near Vision-ability to see details at close range (within a few feet of the observer) Peripheral Vision-ability to see objcts/movemnt of objcts to one's side as eyes look ahead Speech-ability to speak clearly so others can understand you

Qualifications

Certifications

Certification

Required	Country	Certification (Predefined)	Certification (Not Predefined)	Issuer (Not Predefined)	Specialty	Subspecialty
Yes		Basic Life Support (BLS) - Other/National				
Yes		Pharmacist License (PharmD) - Other/National				
		Pharmacist License (PharmD) - North Carolina				
		Pharmacist License (PharmD) - Virginia				

Competencies



Competencies

Required	Competency	Target Rating
	Always keep you informed and involved	
	Always Keep you Safe	
	Always listen and respond to you	
	Always treat you with dignity, respect, and compassion	
	Always work together as a team to provide quality healthcare	
	CMP03051 - Responsible for medication distribution.	
	CMP03052 - Provides effective individualized care to patients.	
	CMP03053 - Responsible for Safety/Quality Improvement.	

Competencies from Other Sources

Required Competency Target Rating Source Source Type
--

Education

Education

Required	Degree	Field of Study
Yes	BLD - Bachelor's Level Degree	Pharmacy

Languages

Languages

|--|

Responsibilities

Responsibilities

Required	Responsibility

Training

Training

Required	Training	Training Type	Description

Work Experience

Work Experience

Required	Work Experience	Experience Level
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Equivalence Rule

Equivalence Rule

Equivalence Rule			Derived Logic
Pay			
Pay Rate Type Pay Rate Types			
Country		Pay R	ate Type
United States of America	Sala	ried	
Job Exempt Job Exempt			
Country / Country Region		Job	Exempt
United States of America	Yes		
Workers' Compensation Code Worker's Compensation Codes			
Workers' Compensation Code	Country	Country Region	Location

Workers' Compensation Code	Country	Country Region	Location