

Cambridge Health Alliance Title: Pharmacy Resident Dismissal	Policy Number: D-PHA-0049 Policy Type: Departmental Effective Date: 05/01/18
Replaces (supersedes): Titles: N/A	Policy Chronicle: Date Original Version of Policy was Effective: 07/17 Most Recent Review: 05/1/18 Reviewer Signatures: Gail M. Sanchez, PGY1 Residency Program Director & Senior Clinical Pharmacist Specialist – Internal Medicine Mary E. Regan, Director, Clinical and Academic Pharmacy Services Previous review: July 2017
Area of Operation: PGY1 Pharmacy Residency Program	
Regulatory Agency / Accreditation Standards: ASHP Accreditation Standard for PGY1 Pharmacy Residency Programs (2016)	This Policy has been Reviewed and Approved Electronically: Steven Cano, Chief Pharmacy Officer
Keyword:	Dismissal, Pharmacy, Residency

I. Purpose

To articulate the criteria for dismissal of a resident from the PGY1 Pharmacy Residency Program at the Cambridge Health Alliance (CHA).

II. Personnel

CHA PGY1 Pharmacy Residents.

III. Policy

The Pharmacy Enterprise has the right to dismiss a resident from the residency program if he/she:

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- A. Violates the hospital's code of conduct. Refer to the administrative policy entitled Code of Conduct/Disruptive and Inappropriate Behaviors (A-EXE-0017).
- B. Fails to meet the objectives of the residency program. Failure is defined as:
 1. The inability to meet the objectives of any learning experience after two attempts (as described below); or,
 2. The inability to meet the objectives of another learning experience on first attempt, subsequent to the successful completion of an initially failed learning experience.
- C. Fails to obtain appropriate licensure either prior to or within 90 days of the start date of the residency program.

IV. Definitions

Rating Scale: The PGY1 Residency Program will utilize the American Society of Health-System Pharmacists (ASHP) approved rating scale for summative evaluations as follows:

- NI = needs improvement
- SP = satisfactory progress
- ACH = achieved
- ACHR = achieved for residency
- N/A = not applicable

Remediation: The initial step in improving performance. It is intended to list specific areas in need of improvement and provide a plan for improvement.

V. Procedures

A remedial plan will be used when addressing areas of resident performance and/or behavior requiring improvement. It is intended to initiate action that will assist the resident in correcting problems and improving performance and behavior. Failure to improve performance as addressed by the remedial plan within the specified time frame may result in the Residency Program Director (RPD) lengthening training beyond the 12 month training period, and/or the resident not receiving a certificate of successful completion of the residency program, and/or resident dismissal.

A resident is evaluated for dismissal in the following manner:

- A. At 90 days into the residency training program, the RPD verifies pharmacist licensure with the Commonwealth of Massachusetts. Failure to obtain pharmacist licensure in the Commonwealth of Massachusetts within 90 days of starting the program may result in dismissal from the residency program.

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1. The RPD will evaluate extenuating circumstances on a case-by-case basis to determine if an extension to the above deadline will be granted.
- B. Each quarter of the residency training program, a summative evaluation will be conducted of the resident by the RPD.
 2. Appropriate level of competence is defined as a ranking of “achieved” or “achieved for residency” on the quarterly summative evaluations at the following points in time:
 - a. At least 25% of the time on the quarter 1 summative evaluation
 - b. At least 50% of the time on the quarter 2 summative evaluation
 - c. At least 65% of the time on the quarter 3 summative evaluation
 3. If a resident fails to meet the required competence as outlined in V.B.2., the RPD in conjunction with the preceptor(s) and resident, will develop a remedial plan, which will include a reasonable time frame, to allow the resident to meet the objectives of the learning experience.
 4. Once the remedial plan is accomplished, the resident will proceed to the next rotation.
 - a. After successful completion of the remedial plan, if the resident fails to accomplish the objectives in the subsequent rotation, he/she will be referred to the RPD for dismissal.
 5. If the resident fails to complete the remedial plan he/she will be referred to the RPD for dismissal.
- C. Any violation of the hospital code of conduct policy will result in disciplinary actions up to and including termination. Refer to the Code of Conduct/Disruptive and Inappropriate Behaviors policy (A-EXE-0017).
- D. In addition to the above, any termination will follow the Conclusion of Employment policy (A-HRS-0005).

Approver	Approved [initials]	Not Approved [initials]
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