**Community Medical Center: PGY 1 residency**

**Policy: Resident Corrective Action & Dismissal**

Purpose:

All pharmacy residents will be treated with fairness and respect. The director of pharmacy (DOP), residency program director (RPD), and preceptors will follow a corrective action process based on counseling and a warning system when a serious deficiency in a resident’s performance is noted. The corrective action process will be used when addressing areas of resident performance and/or behavior requiring improvement or elimination. 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 corrective action process within the specified schedule(s) will result in the resident not receiving a certificate of successful completion of the residency program and may result in involuntary dismissal. Certain behaviors or actions will be considered immediate grounds for dismissal and the corrective action process will not apply.

Procedure:

**Corrective Action Process**

The corrective action process will be utilized if the resident fails to meet his/her obligations and responsibilities outlined in the educational goals & objectives of the residency. This includes but is not limited to satisfactory progress toward attainment of all residency program goals and objectives, and adherence to all health-system, hospital, pharmacy, and residency policies.

I. The RPD, prior to initiating corrective action, will conduct a thorough investigation, including meeting with the individual resident to investigate the concern and offer the resident an opportunity to provide information relevant to the identified problem.

II. Following an investigation, initiated as outlined above, the RPD in association with the DOP separately or in conjunction with an ad-hoc group of 3 preceptors will review the results of the investigation to determine the need to initiate a corrective action process and if so, determine a timeline for the action. The RPD will inform the resident of the results of the review regardless of the final decision. Corrective actions will be agreed upon by a vote.

III. The corrective action process consists of the following:

A. Verbal and written counseling (generated by the RPD) including specific expectations for improved performance or behavior.

B. Notification of a duration of the probationary period associated with the corrective action process.

C. Issuance of a schedule for any additional verbal and written reviews deemed necessary during the probationary period associated with the corrective action process.

D. A verbal and written statement issued by the RPD in consultation with the DOP, ad-hoc committee if used, and affected preceptors at the end of the probationary period associated with the corrective action process stating the final evaluation of the resident’s performance therein. The final evaluation shall fall into one of three categories:

1. Successful improvement and achievement of required program performance and/or professional behavior by the resident.

2. Partial improvement with unsuccessful achievement of the required performance or behavioral expectations. If this applies to an inability of the resident to successfully complete the residency training this will be accompanied by a request for voluntary termination written by the RPD.

3. Continued demonstration of performance or behavior requiring corrective action without improvement. This is to be accompanied by issuance of an involuntary termination letter written by the RPD.

IV. When the RPD and DOP, separately or in conjunction with the ad-hoc committee, determine that corrective action is completed, the RPD will write a letter or memo to the resident. All documents regarding the corrective action process will be kept in the resident’s personnel file and a copy of each document must be given to the resident.

**GROUNDS FOR IMMEDIATE DISMISSAL**

I. Just cause for dismissal includes 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. Specific concerns, behaviors or actions fulfilling these requirements are listed below.

A. The resident fails to obtain pharmacy licensure in the State of Montana by September 15 for residents starting the previous July 1.

* Cases where circumstances prevent licensure by this date will be considered by the RPD, the DOP, and the Residency Advisory Committee (RAC) on a case-by-case basis. In most cases, this will result in a later start of the residency year (e.g. August 1).

B. The resident knowingly or due to negligence of action places a patient, employee or any other person in danger.

C. The resident acts violently or threatens violence toward any other person including aggressive behavior or stalking.

D. The resident is found to be using alcohol, illegal substances or other recreational substances at any time during work and non-work hours with which use of these substances interferes with their ability to perform work duties in a professional, responsible, and safe fashion.

E. The resident is found to carry, possess or use any weapon on UM or CMC property.

F. The resident falsifies information on a document.

G. 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 the RPD, Pharmacy Clinical Manager, and the UM Director of Drug Information Services, and others as deemed appropriate by the RAC.

H. The resident is absent from work more than the days allotted for paid annual leave and is unwilling to make up this time on a voluntary basis without pay.

I. The resident sexually harasses a patient, employee, or any other person while in performance of their duties as a resident.

J. The resident commits an act vandalism or theft on UM or CMC property.

Subsequent to receiving notification of an occurrence from the list above, the RPD and the DOP will conduct a thorough investigation, including meeting with the individual resident to investigate the concern and offer them an opportunity to provide information relevant to the identified problem or occurrence.

II. Following an investigation, the RPD and the DOP, separately or in conjunction with an ad-hoc committee of 3 preceptors, will review the results of the investigation to determine one of the following recommendations by a vote: 1) Need for Immediate Dismissal or 2) Need for Immediate Corrective Action – Involuntary Dismissal May Result. The corrective action process shall meet all of the requirements outlined above. In addition, the RPD will inform such licensing or regulatory bodies as necessary concerning the details of the event(s). The RPD shall inform the resident of the results of the review.

Document developed: July 10, 2015, reviewed January 2017, 2018, 2019, 2020

Author: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Michael P. Rivey, RPD

DOP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kevin Cady