



## Pharmacy Residency Programs

### **Policy: Problem Identification, Resolution and Disciplinary Action**

**Purpose:** To establish policy and procedures for identifying problems with / of residents and strategies for resolution.

**Policy:** A pharmacy resident may be subject to disciplinary action based upon identification of problems utilizing an organized process of examination of the identified problems and proposed solutions. Examples of problems which may require disciplinary action are, but are not limited to:

1. Infractions of the Children's Hospital of Philadelphia's Rules of Conduct (Human Resources Policy 5-2)
2. Infractions of the Children's Hospital of Philadelphia Drug Free Workplace Policy (Human Resources Policy 5-10)
3. Academic dishonesty
4. Inadequate performance on an individual learning experience or over time despite development of a corrective action plan

**Resident identified issues or problems:** The program believes that most problems are best resolved through face-to-face interaction between the resident and preceptor (or other party), as part of an on-going working relationship. Residents are encouraged to first discuss any identified problems or concerns with his/her preceptor. In turn, preceptors are expected to be receptive to identified issues or complaints, attempt to develop a reasonable solution with the resident, and seek appropriate consultation or escalate the issue or problem as needed. If face-to-face resident and preceptor discussions do not result in a satisfactory resolution of the identified issue or problem additional steps are available to the resident and/or preceptor.

1. **Informal mediation** – The resident or preceptor may request the Residency Programs Director (RPD) to act as a mediator, or to help in selecting another mediator who is agreeable to both the resident and the preceptor. Such mediation may facilitate a satisfactory resolution through continued discussion. Alternatively, mediation may result in recommended changes to the learning environment, or a recommendation that some other alteration in the resident's learning goals and objectives be made in order to maximize his/her learning experience. Occurrences of and outcomes from mediation should be documented in PharmAcademic as feedback and discussed with the RPD prior to implementation.
2. **Formal grievances** - In the event that informal avenues of resolution are not successful or possible for a specific incident, the resident may submit a formal grievance by sending a written request for action to the RPD within 30 days of the occurrence. A grievance regarding the RPD may be submitted directly to the Clinical Manager of Pharmacy Services for review and resolution.

- a. A written formal grievance shall include the following information for consideration of the RPD:
  - Brief statement of the identified issue or concern
  - List of individuals involved
  - Objective evidence describing the identified issue or concern
  - Corrective action steps attempted, if any
  - Recommendations for resolution
- b. The RPD will notify the Clinical Manager of Pharmacy Services of the grievance, and, if needed, arrange a “review panel” of representatives of the Residency Advisory Committee (RAC), the RPD and Clinical Manager to review the formal complaint. The resident and preceptor in question will be notified of the date of the “review panel” meeting and allowed the opportunity to provide any additional information they deem pertinent regarding the grievance.
- c. Based upon review of the grievance and any other additional relevant information provided or discovered, the “review panel” members will determine the course of action that will best promote or correct the trajectory of the resident's learning experience. This action may include recommended or required changes within the learning experience itself, a change in preceptor assignment, or a change in assigned learning experience.
- d. The resident will be informed in writing of the “review panel's” decision, and asked to indicate whether he/she accepts the decision. If the resident accepts the decision, the recommendations for resolution will be implemented. If the resident disagrees with the decision, the resident may appeal to the Clinical Manager of Pharmacy Services, who has overall responsibility for the conduct and performance of the Pharmacy Residency Programs, and shall be familiar with the facts of the filed grievance. The Clinical Manager of Pharmacy Services will render the appeal decision, which will be communicated to all involved parties.
- e. Should any unethical, inappropriate, or unlawful staff behavior be identified in the course of the review of a formal grievance, this will be immediately escalated to the Clinical Manager of Pharmacy services for appropriate personnel action, following CHOP's progressive disciplinary structure outlined in the Rules of Conduct, HR Policy 5-2.

*Pharmacy Resident Disciplinary Actions:*

1. **CHOP Rules of Conduct Infractions** – Any breaches of the CHOP Rules of Conduct by a resident shall be brought to the immediate attention (no later than 5 days following the incident) of the RPD and Clinical Manager of Pharmacy Services. Any person who observes such behavior has the responsibility to report the incident. Infractions will be assessed and dealt with according to the progressive discipline and corrective actions outlines in CHOP HR Policy 5-2, ranging from general counseling to termination.
2. **Resident Performance Issues** - The CHOP Residency Programs aim to cultivate future leaders in [pediatric] pharmacy practice and develop advanced

professional competence. To wit, a resident lacking the competence for eventual independent practice due to a serious deficiency in skill or knowledge, or due to problematic behaviors that significantly impact his/her professional functioning may require intervention. In such cases, the RPD or RAC will help residents identify these areas and provide remedial experiences, plans, or actions and/or recommend resources for resident self-evaluation and correction in an effort to improve the resident's performance. These recommendations may be informal or formal and documented accordingly as a resident performance improvement plan. Should any problem identified be of significant concern that the resident would not be able to complete the Program unless that problem was remedied, the identified problem must be brought to the attention of the RPD at the earliest opportunity in order to allow the maximum time for remedial efforts. The RPD will inform the resident of the reported concern, and convene the RAC for consultation. The resident and all involved preceptors or staff are encouraged to attend to provide any information relevant to the concern and to help provide corrective actions. As the Program's structure is to require successful completion of all learning experience, the inability to complete a learning experience at the discretion of the preceptor will automatically place the resident on probationary status and require that the learning experience be repeated – the steps outlined below will also be followed. Failure to successfully complete the same learning experience a second time will result in dismissal from the program. Failure to successfully completed two separate learning experiences will also result in dismissal from the program. Additionally, continual or repeated scores of "Needs Improvement" will be considered a potential grounds for not successfully completing a learning experience.

- a. A resident identified as having a deficit or problem serious enough that it could prevent the resident from fulfilling the Program's certificate requirements OR upon failing an individual learning experience shall be placed on probationary status by the RAC.
- b. Probationary status mandated by the RAC may require the resident to participate in particular learning experiences or render guidelines for the type of experiences the resident should undertake in order to remedy the identified deficit.
- c. The RPD, with input from the resident's mentor and recent preceptor(s) or administrators reporting concern(s), will produce an improvement plan specifying the identified needs in knowledge, skills and/or behaviors (objective based) that are necessary for the resident to improve upon in order to correct the identified problem, complete with a timeframe for reassessment. This performance improvement plan will be reviewed with the Department of Pharmacy Clinical Manager and also be uploaded into PharmAcademic. The Program RPD will meet with the resident and their mentor to deliver and discuss the improvement plan.
- d. The resident and their preceptor(s) will report to the RAC on a regular basis, as specified in the improvement plan (but not less than every month) regarding the resident's progress on the performance improvement plan.

- e. The resident may be removed from probationary status by a majority vote of the RAC when the resident's progress in resolving the problem(s) or deficit(s) specified in the performance improvement plan is sufficient. Removal from probationary status indicates that the resident's performance is at the appropriate level to be able to meet the Program's certificate requirements.
- f. If the resident is not making progress according to the performance improvement plan OR if it becomes apparent that it will not be possible for the resident to meet the Program's certificate requirements OR the resident fails a repeat learning experience or a second learning experience the resident will be dismissed from the program.
- g. A resident may appeal the RAC's decision to the Clinical Manager of Pharmacy Services. The Clinical Manager will render the appeal decision, which will be communicated to all involved parties.
- h. The procedures outlines here are not intended to prevent a resident from pursuing an appeal of the RAC decision under any other applicable mechanisms available to CHOP's employees or under the mechanisms of any relevant professional organization, including ASHP.

Any significant infraction, repeated minor infractions, or breach of CHOP Rules of Conduct must be documented in writing and submitted to the RPD, who will notify the resident of the complaint or reported issue. Per the procedures described above, the RPD will consult the Clinical Manager of Pharmacy Services for escalation if a breach in CHOP Rules of Conduct occurred. For infractions outside of the CHOP Rules of Conduct, the RPD will arrange a "review panel" of representatives of the RAC, the RPD and Clinical Manager to review reported infractions. All involved parties will be encouraged to submit any additional relevant information that is objective and pertinent to the issue for consideration at the "review panel" meeting.

Following a careful review of the infraction, the "review panel" may recommend no action, probation or dismissal of the resident from the program. Recommendation of a probationary period or termination shall include the decision and plan (if indicated), hearing and appeal procedures described in the above sections. Ultimately the Director of Pharmacy Services has the ultimate say in any disciplinary action as recommended by the "review panel" with the exception of offenses that require involvement of the law enforcement. A violation of any probationary plans or agreements would necessitate the termination of the resident's employment at Children's Hospital of Philadelphia.