

TITLE Licensure, Corrective Action, Failure to Achieve			IDENTIFICATION NUMBER PH09.03.085
ORGANIZATION(S) University of Kentucky / UK HealthCare	SITES AFFECTED <input type="checkbox"/> Enterprise <input checked="" type="checkbox"/> Chandler <input checked="" type="checkbox"/> Good Samaritan <input checked="" type="checkbox"/> KCH <input checked="" type="checkbox"/> Ambulatory	CATEGORY <input type="checkbox"/> Enterprise <input type="checkbox"/> Nursing <input checked="" type="checkbox"/> Department Pharmacy Services <input type="checkbox"/> Guideline <input type="checkbox"/> Protocol	REPLACES:
REVIEW CYCLE <input type="checkbox"/> 1 year <input checked="" type="checkbox"/> 3 years REVIEW DATES: 9/2012; 4/2015; 4/30/2015; 11/26/2018; 6/20/2019; 3/2/2023; 11/9/2023; 4/15/2025			EFFECTIVE DATE: 6/15/2025

POLICY STATEMENT

All pharmacy residents and fellows training in programs offered by UK HealthCare will be treated with fairness and respect. The director of pharmacy services, program directors, preceptors and chief pharmacy resident will follow a corrective action process based on counseling and a warning system when a serious deficiency in a resident/fellow's performance is noted. The corrective action process will be used when addressing areas of resident/fellow performance and/or behavior requiring improvement or elimination. It is intended to initiate action that will assist the resident/fellow 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/fellow not receiving a certificate of successful completion of the training program and may result in involuntary dismissal. However, certain behaviors or actions will be considered immediate grounds for dismissal and the corrective action process will not apply. Corrective action process procedures and grounds for dismissal are outlined below.

PURPOSE

To define the procedure for corrective action of pharmacy residents and fellows.

SCOPE

This policy applies to all residents and fellows of the UKHC Pharmacy Residency programs.

PROCEDURES

Corrective Action Process

Appropriate corrective action will be taken if a resident fails to meet any of the following:

1. Obtain intern registration by 10 days prior to the program start date if Kentucky pharmacist licensure is not expected to be completed by this date.
2. Obtain licensure to practice pharmacy in the state of Kentucky on or before 60 days from the start of the residency year (see section V)
3. Present him/herself in a professional manner at all times.
4. Present ethical behavior and conduct at all times.
5. Follow all guidelines, policies and procedures of UK Healthcare and the department of pharmacy at UK Healthcare and entities associated with the residency program.
6. Make acceptable progress on any and all residency objectives & requirements as determined by the resident's RPD, the resident's preceptors. To be evaluated at the end of each learning experience or at any time concerns arise. Resident receives or is anticipated to receive "needs

improvement” on 75% or more of the learning objectives for any given learning experience.

7. Resident meets deadlines for longitudinal projects.
8. Make up time absent from the program beyond the allotted vacation/sick/leave days.

Procedures

UKHC pharmacy residency programs adhere to the Graduate Medical Education (GME) Remediation and Discipline Policy.

Failure To Obtain Pharmacy Licensure

If a resident has not secured their Kentucky pharmacist licensure or intern registration by 10 days prior to their program start date, they will be rendered ineligible to begin their program and subject to corrective action.

If a resident fails to obtain licensure to practice pharmacy in the state of Kentucky by July 31st, appropriate remediation plan will be developed.

1. The resident’s RPD will evaluate the circumstances of the resident’s failure to obtain licensure.
2. The remediation plan determined by the RPD may include, but is not limited to:
 - a. Adjustment to the resident’s staffing schedule.
 - b. Adjustment to the resident’s rotation schedule.
 - c. Adjustment to the end date of the residency program if the failure to obtain pharmacy licensure impedes the resident’s ability to make satisfactory progress toward residency goals and objectives as defined by the specific residency program. Extension will be unpaid without benefits and will be equivalent in competencies and time missed per determination by the ROC and RPD.
3. In all cases, the resident must be licensed to practice pharmacy by September 30th. Failure to obtain licensure by this deadline will result in termination of the residency.

Grounds For Immediate Dismissal

Just cause for dismissal includes failure to perform the normal and customary duties of a pharmacy resident/fellow, substantial or repetitive conduct considered professionally or ethically unacceptable or which is disruptive of the normal and orderly functioning the of the hospital. Specific concerns, behaviors or actions fulfilling these requirements are listed below.

1. The resident fails to maintain valid licensure as a pharmacist in the Commonwealth of Kentucky throughout their program and all requirements of such licensure (continuing education, moral character, legal status, etc.)
2. The resident/fellow knowingly or due to negligence of action places a patient, employee or any other person in danger.
3. The resident/fellow displays acts or threats of violence toward any other person including aggressive behavior or stalking.
4. The resident/fellow 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.
5. The resident/fellow is found to carry, possess or use any weapon on Medical Center property.
6. The resident/fellow falsifies information on a document.
7. The resident/fellow 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 director of pharmacy services, the resident/fellow’s program director, and a clinical specialist in the appropriate area of practice and others designated by REC.
8. The resident/fellow is absent from work beyond allotted personal time off and is unwilling to

make up this time.

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

10. The resident/fellow commits an act vandalism or theft of Medical Center property.

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

Following an investigation, the director of pharmacy services, alone or in conjunction with an ad-hoc committee, will review the results of the investigation to determine one of the following recommendations: 1) Need for Immediate Dismissal or 2) Need Immediate Corrective Action – Involuntary Dismissal May Result. The corrective action process shall meet all of the requirements for such a process listed above in III A-D and IV. In addition, the director of pharmacy services will inform such licensing or regulatory bodies, as is pertinent to the resident/fellow involved, in detail of the event/s.

The director of pharmacy services shall inform the resident of the results of the review.

REFERENCES

[GME Remediation and Discipline Policy](#)

APPROVAL

NAME AND CREDENTIALS: Ryan Naseman, PharmD, MS, BCPS, BCSCP	NAME AND CREDENTIALS: Philip J. Almeter, PharmD, MBA
TITLE: Senior Director, Acute Care Pharmacy Services	TITLE: Enterprise Pharmacy Director
NAME AND CREDENTIALS: Devlin S. McGrath, PharmD	NAME AND CREDENTIALS: Kimberley Hite, MS, PharmD
TITLE: Sr. Director, Acute Care Pharmacy Services	TITLE: Sr. Director, Pharmacy Shared Services