

**Henry Ford Macomb Hospital  
Department of Pharmacy Services  
PGY1 Pharmacy Residency Program**

**Disciplinary Action Process and Grounds for Dismissal**

Residents training in the Henry Ford Macomb Hospital PGY1 Pharmacy Residency Program will be treated fairly and respectfully. The Residency Advisory Committee (RAC) will utilize the disciplinary action processes that incorporate counseling and warnings to correct the problem(s) and improve the resident's action(s). Failure to comply with the processes may prevent the resident from obtaining a residency certificate and/or involuntary dismissal from the program. However, certain behaviors and/or actions will result in immediate dismissal and the disciplinary action processes will not apply. Outlined below are the informal and formal processes of disciplinary action, and the grounds for dismissal.

**Informal Disciplinary Action Process**

At any time, the preceptor may speak directly with the resident regarding identified issues/problems. However, if the preceptor feels that formal disciplinary action is warranted, he/she will follow the description below.

**Formal Disciplinary Action Process**

The formal disciplinary action process will be utilized if a resident inadequately performs his/her obligations and/or responsibilities necessary to successfully complete the program. This includes, but is not limited to, inadequate progress of completing the residency's goals as well as failure to adhere to any policies (hospital, pharmacy, and residency).

**Procedures**

- I. The RAC will conduct a thorough investigation of the problem. The resident will also be questioned to obtain as much information as possible.
- II. After completion of the investigation, the RAC will discuss the findings to determine if disciplinary action will be implemented. The resident will be notified of the RAC's decision.
- III. If the RAC decides the resident needs disciplinary action, the process is outlined below.
  - a. Verbal counseling with resident by the Residency Program Director (RPD)/designee.
  - b. Verbal and written counseling with resident. Expectations and goals will be discussed and reviewed, in addition to the timeline of disciplinary action.
    - The resident is responsible for maintaining a copy of all written counseling in his/her binder.
    - The RPD/designee will maintain a copy of all written counseling in an easily retrievable format.
  - c. Evaluation
    - At the end of the predetermined timeframe, the resident will be evaluated by the RAC as outlined below.
      - Successful: resident exemplified improvement and achievement of behavior.

- Unsuccessful: failure to improve the offending behavior. If this action will prevent the resident from successfully completing any requirement of the residency, he/she may be asked to voluntarily resign. The RAC will determine what measures must be taken to achieve a “successful” score.

### **Grounds for Immediate Dismissal**

A resident may be immediately dismissed from the program by performing any of the actions below. The RAC will discuss the situation and utilize the criteria below to determine a resident’s dismissal status.

- I. Failure to obtain licensure in the state of Michigan by September 1<sup>st</sup>.
  - a. Residents must be licensed in the state of Michigan by September 1<sup>st</sup>. If an event occurs that prevents the resident from achieving licensure by September 1<sup>st</sup> (e.g. sickness, death in the family, etc.), licensure status must be discussed with the RPD/designee. The RPD/designee will assess the resident’s situation and may permit the resident to be licensed at a later date; however, it may not exceed 90 days from the start of the residency. If a resident fails to comply with the specifics of his/her situation, he/she will be dismissed.
- II. Resident places a patient, employee, or any other individual in danger either knowingly or by negligence.
- III. Resident receives 2 consecutive “Unsuccessful” evaluations as described in the formal disciplinary action process.
- IV. Resident utilizes threats or violence against any individual in the hospital.
- V. Resident sexually harasses any individual.
- VI. Plagiarism.
- VII. Unexcused absences beyond the allotted days off.
- VIII. Excessive tardiness without prior permission.
- IX. Falsification of documents.
- X. Utilization of alcohol and/or illegal/recreational substances that interferes with his/her responsibilities and obligation to perform professional, responsible, and safe work.
- XI. Failure to comply with any element of the Henry Ford Health System Code of Conduct.