I. The Residency Program Director may place a resident on probation or dismiss a resident for inappropriate behavior(s) as defined herein.

II. Definitions

A. Probation: The Residency Program Director suspends or limits the continuation of the residency program via probation. Probationary status indicates that completion of the residency training program is in jeopardy. Probation is a specified and defined period of time not less than 1 month but no more than three months. Probation may include the restriction of assigned work, loss of elective time or both.

B. Dismissal: The Residency Program Director ends the resident’s training at Yale New Haven Health via dismissal.

C. Withdrawal: The resident initiates termination of his/her residency training program at Yale New Haven Health.

B. Placing A Resident On Probation

A resident may be placed on or removed from probation by a decision of the Residency Program Director in consultation with the program preceptors. The Residency Program Director will inform the resident of the probation status, duration and limitations in person and in writing. Probation or dismissal may occur as the result of any of the following:

1. Failure to complete a required rotation or set of objectives
2. Failure to adequately participate in the educational program as defined by:
   a. Failure to establish individualized rotation goals/objectives with the preceptor
   b. Failure to be present at the established/scheduled times
   c. Failure to complete assignments according to established deadlines
3. Failure to adhere to the professional conduct and dress code policy as outlined in the following documents: Conduct and Corrective Action, Dress Code Policy, Standards of Professional Appearance.
4. Failure to act responsibly and ethically in the provision of pharmaceutical care
   a. Failure to practice in accordance with state and federal drug laws
   b. Failure to practice in accordance with the Policies and Procedures of the Department of Pharmacy Services and Yale New Haven Health
   c. Failure to communicate or collaborate with colleagues and/or preceptors when such is required for optimal patient care
   d. Inappropriate or excessive absence from the hospital as defined in the YNHHS time and attendance policy
   e. Failure to respond to pages, verbal or written requests for drug information or other pharmacy services
5. Failure to obtain pharmacist licensure in the state of Connecticut
a. PGY1 pharmacy residents
   (i) Resident may commence residency prior to receiving a pharmacist license, however they will not practice pharmacy until they have an active pharmacist license in the state of Connecticut pursuant to Sec. 20-593, Chapter 400j of the Connecticut Comprehensive Drug Laws.
   (ii) If pharmacist licensure is not obtained prior to the start of residency, the resident must have a valid pharmacy intern license from the state of Connecticut for the duration of time in which they are not licensed as a pharmacist.
   (iii) A CT Pharmacist license must be obtained within 90 calendar days of the start of residency. Failure to obtain a license within calendar 90 days will result in immediate dismissal from the program barring any extenuating circumstances outside of the resident’s control as determined by the RPD in consultation with Human Resources. In the event of extenuating circumstances, a 30-day extension may be approved by the director of pharmacy in consultation with Human Resources so that the resident is licensed for a minimum of 8 months during the residency program.
   (iv) PGY1 residents who possess an active pharmacist license in another state may follow the licensure guidance outlined below for PGY2 residents.

b. PGY2 pharmacy residents
   (i) Resident must obtain a temporary CT pharmacist license prior to the start of residency.
   (ii) Permanent CT pharmacist licensure should be obtained within calendar 90 days from the residency start date.
   (iii) PGY2 residents unable to obtain permanent licensure within calendar 90 days may be provided an opportunity for a 30-day extension in consultation with their Residency Program Director and Director of Pharmacy, but their temporary license must remain active for this entire period.
   (iv) Failure to obtain permanent licensure within 120 days will result in immediate dismissal from the program. PGY2 Residents must be licensed for a minimum of 8 months during the residency program.

6. An extended leave of absence beyond 60 days (see resident leave of absence policy in residency manual)
7. Accidental or intentional plagiarism (copied text and/or ideas without proper citation)
8. PGY2 residents who fail to provide proof of completion from their PGY1 program prior to or on day 1 from their PGY2 program start date may be placed on a probation until proof is provided, including a certificate of completion, communication with PGY1 RPD, or PharmAcademic PGY1 documentation.

C. Dismissal from the Residency Program
   A resident may be dismissed from the program for one or more of the above listed reasons without first being placed on probation. The decision to dismiss a resident is made by the Residency Program Director (RPD) in consultation with the program preceptors, Human Resources and the Director of Pharmacy.
   1. The resident will be informed of dismissal in person and in writing.
   2. The resident shall be restricted from work immediately upon notification of dismissal.
   3. The Residency Program Director reserves the right to dismiss any resident whose program achievements, clinical performance, or conduct as a professional makes continuation in the program inadvisable.
   4. Residents who are dismissed shall not receive a certificate of completion.

D. Resident Withdrawal
   A resident may voluntarily withdraw from the residency program.
1. The resident will inform the Residency Program Director of the intent to withdraw in writing.
2. The resident should provide at least four weeks working notice to the Residency Program Director prior to withdrawal to ensure continuity in the provision of pharmaceutical care.
3. Residents who withdraw will not receive a certificate of completion.

E. Grievance
A resident may file a grievance in regards to a decision leading to dismissal following the Dispute Resolution Policy. A third party, the Chief Pharmacy Officer or his/her designee, will arbitrate the grievance and come to a final decision in collaboration with Human Resources.

Resident Name: 

Resident Signature: 

Date: 