

Pharmacy Resident Attendance and Leave	
Department: Pharmacy	Institution Name: Brigham and Women's Faulkner Hospital
Approver: Raul Santiago, PharmD, BCPS, BCIDP PGY1 Pharmacy Residency Program Director	Contact Person: PGY1 Pharmacy Residency Program Director
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Applies to: Pharmacy Residents	
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KEYWORDS

Pharmacy, resident, leave, attendance, earned time, vacation, sick

PURPOSE

To define the leave benefits provided to pharmacy residents and residency-specific restrictions on leave.

POLICY STATEMENT

For residents to receive a certificate of completion for the residency program, they are required to complete a 52-week appointment. Residents receive Earned Time (ET) that can be used for vacation, holiday, sick leave, and interview days. Residents are not generally eligible for extended medical leave via FMLA but may be eligible for Massachusetts PFML in accordance with BWFH policy and state law. Residents are expected to be punctual and physically present on site as specified by the residency program, must ensure they communicate planned or unplanned absences, and must ensure that any leave required does not interfere with the completion of residency requirements.

PROCEDURE

- Coverage of leave during direct patient care learning experiences will be provided by the primary preceptor or other scheduled decentralized pharmacist or otherwise as designated by Pharmacy Administration.
- Residents may not be absent from a learning experience for more than 5 business days. Any exceptions to this rule must be approved by the RPD and preceptor. This may additionally result in a reorganization of the resident's developmental plan.
- Requests for holiday, vacation, or professional leave (e.g., conferences, interviews) should be requested at least 30 days in advance and should be made in consideration of rotation obligations, staffing schedules, and other residency responsibilities.
- Personal appointments should have minimal impact on rotation activities with every best effort made not to schedule these during work hours. Residents should notify the preceptor at least two days prior to the appointment, and ideally, as early as possible if time off is required.
- Residents must submit requests for time off as follows:
 - The resident must request the time off via email to the preceptor of the relevant learning experience.
 - Once the preceptor approves, the request must be forwarded to the Residency Program Director (RPD) for review.

- c. Once the RPD approves, they will notify the resident, the preceptor, and the Assistant Director of Pharmacy Services (or scheduling manager) by email.
 - d. Next, the resident must submit a request in the pharmacy scheduling system for the time off that was approved.
 - e. The Assistant Director of Pharmacy Services (or other scheduling manager) will approve the time in the pharmacy scheduling system so that it appears on the master pharmacist schedule.
6. Weekend Staffing Schedules
- a. The resident weekend staffing schedule is set at the beginning of the year.
 - i. Residents will decide amongst themselves who will staff the first assigned weekend, setting the rotation for the remainder of the year.
 - ii. When choosing this, residents must consider the entire year and come to an agreement. If residents are unable to come to an agreement, the RPD will determine the staffing schedule using a randomization tool.
 - iii. Time off requests for weekend staffing shifts require a swap with another resident. Earned time may not be used in lieu of the staffing requirement.
7. If a resident is sick, they must do the following:
- a. Regular Learning Experience Day
 - i. Contact their learning experience preceptor via phone or text by 7:00 AM.
 - ii. The preceptor will acknowledge this and provide any relevant instructions as required.
 - iii. Preceptors may assign remedial activities as appropriate.
 - iv. The resident must also notify the RPD and Assistant Director of Pharmacy Services via email.
 - b. Pharmacy Service (Staffing) Shifts
 - i. Call the central pharmacy and notify any pharmacist on duty AND the Assistant Director of Pharmacy Services (or scheduling manager) at least two hours prior to scheduled start time.
 - ii. Notify the RPD via email.
 - c. Sick leave requests only apply for the day they are made and must be requested daily if multiple days are needed, unless otherwise dictated by hospital policy.
 - d. Pharmacy staffing shifts must be made up if due to unscheduled absence. Missed weekend staffing shifts due to unscheduled absences must be made up by covering central pharmacy staffing shifts, generally through 4-hour weekday evening shifts. Other shifts may be available for these makeup shifts at the discretion of the RPD and the pharmacy scheduling manager. The resident must work with the RPD and scheduling manager to coordinate make up shifts.
 - e. Vacation time, professional time, and personal time may not be used in lieu of resident staffing expectations.

Resident Earned Time

1. Residents will accrue 4.62 hours per week, equal to approximately 30 days of Earned Time. This is inclusive of holidays that are not worked (6 or 7, depending on start date) and 15 days for vacation, sick leave, or professional time (e.g., interviews, licensing exams).
2. Vacation Days: May not exceed 3 days during an individual block rotation.
3. Holidays: Mass General Brigham recognizes 10 holidays throughout the year. They are Independence Day, Labor Day, Indigenous Peoples' Day, Martin Luther King Day, Presidents' Day, Memorial Day, and Juneteenth (minor holidays), in addition to Thanksgiving Day, Christmas Day, New Year's Day (major holidays).
 - a. ET is used for any hospital-designated holiday that residents are not assigned to work and does not count towards allotted vacation days for the year.

- b. Residents are required to work one major and two minor holidays as part of the service component of the residency program, and these are assigned in accordance with the department's standard process for holiday shift allocation.
4. Sick Leave: Residents will be able to use sick time from their general pool of earned time. Residents must follow sick call procedures delineated in this policy, and the RPD/pharmacy administration may request a physician's note.
5. Any remaining ET will be paid out at the completion of employment at BWFH in accordance with HR policies.

Extended Leave

1. In the event of a serious medical or personal condition requiring extended leave, communication with the RPD and Human Resources should be initiated as soon as possible to ensure that the resident is aware of what actions are available.
2. Residents are not eligible for the Family and Medical Leave Act (FMLA) unless they have been an employee at BWFH for more than 12 months. Residents may be eligible for Massachusetts Paid Family and Medical Leave (PFML) within their first year of employment at BWFH under certain criteria. Refer to the BWFH Leave Policy for additional information and eligibility requirements.
3. Per ASHP, time away from the residency program may not exceed 37 days in the 52-week training period in order to be eligible for a certificate of completion without extending the residency program year. Time away includes vacation time, sick time, holiday time, religious time, interview time, personal time, jury duty time, bereavement leave, military leave, parental leave, leaves of absence, and extended leave.
 - a. 37 days is defined as 37 scheduled training days. The resident service commitment (staffing shifts) is independent of training days. Compensatory days for staffing shifts are a part of the service commitment and are not counted as time away from the program.
 - b. This limitation dictates only the maximum number of days that ASHP allows residents to be away from the program without the need to extend the residency year. BWFH has specific limitations delineated in this policy on time away for pharmacy residents, including vacation time, sick leave, professional leave, and extended leave that take precedent.
4. If there is an event requiring extended leave, the resident is still required to complete the 12-month program in order to receive a certificate of completion. If extended leave is required, the resident may take the 15 allotted vacation and sick days and up to 15 additional days (days exceeding ET accrual are unpaid) and still maintain the ability to complete the residency program on schedule. This takes into account already set aside days for leave, including non-working holidays.
5. If extended leave is required (90 days maximum), the following procedures will occur:
 - a. Extension of the residency program requires approval from the RPD and Director of Pharmacy Services.
 - b. At the discretion of the RPD and Director of Pharmacy Services, the residency program may be extended for up to maximum of 90 days from the yearly end of June residency program end date. Salary and benefits will remain as designated in the initial residency agreement for the duration of the extension.
 - c. Additional extension beyond this allotment will not be permitted.
 - d. Residents who do not fulfill the residency program requirements by the end of the extension period will not be issued a certificate of completion for the residency program and their employment terminated.
 - e. The RPD will develop a proposed plan to assure that requirements for the residency will be successfully met and that all residents are treated fairly.
 - i. This plan will be developed in conjunction with the individual resident, Residency Advisory Committee, and residency coordinator.
 - ii. Extended leave may result in a need for the resident to extend their residency program to meet program requirements.

- iii. If the program is extended, the resident will fulfill their service obligations just as any other resident.
- iv. Extensions of the residency year due to leave cannot accommodate for future employment.

Professional Leave

1. The RPD and Pharmacy Administration will work with residents to coordinate and book travel for conferences (ASHP Midyear, Eastern States Residency Conference)
2. The travel allowance will cover flight, hotel, and transportation with the ultimately acceptable amount determined by the RPD in conjunction with pharmacy administration.
 - a. Only transportation between the airport and hotel and vice versa will be reimbursed. The most reasonable cost-effective transportation method should be used.
 - b. All reimbursement occurs in accordance with Mass General Brigham Policy and Procedures for Employee Business Expenses

Other Leave

1. See BWFH Leave Policy.

REGULATIONS / REFERENCES

American Society of Health System Pharmacists. ASHP Accreditation Standard for Postgraduate Pharmacy Residency Programs. Available at: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/examples/ASHP-Accreditation-Standard-for-Postgraduate-Residency-Programs.pdf>.

Commonwealth of Massachusetts Paid Family and Medical Leave (PFML) Overview and Benefits. Available at: <https://www.mass.gov/info-details/paid-family-and-medical-leave-pfml-overview-and-benefits>.

RELATED POLICIES

BWFH Leave Policy

MGB Policy and Procedures for Employee Business Expenses

DEVELOPMENT & CONSULTATION

Reviewed by:	Review / Revision Approval Date
Pharmacy Residency Advisory Committee	11/2021, 11/2022, 3/2023, 1/2024, 1/3/2025

Pharmacy Resident Duty Hours and Moonlighting	
Department: Pharmacy	Institution Name: Brigham and Women's Faulkner Hospital
Approver: Brenda Hoa, BCPS PGY1 Pharmacy Residency Program Director	Contact Person: PGY1 Pharmacy Residency Program Director
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KEYWORDS

Pharmacy, resident, pharmacist, duty hours, moonlighting

PURPOSE

To set forth duty hour requirements for the pharmacy residency program in accordance with the ASHP Duty Hour Requirements for Pharmacy Residencies. In addition, this is to ensure that the program's educational objectives will not be overshadowed by excessive service obligations or moonlighting, while balancing concerns for patient safety and residents' well-being.

POLICY STATEMENT

Pharmacy administration, the Residency Program Director (RPD), preceptors, and residents all bear responsibility in ensuring compliance with duty hour regulations as defined in the ASHP Duty Hour Requirements for Pharmacy Residencies (see link at end of document). The RPD, in conjunction with Pharmacy administration, are responsible for setting work hours, educating preceptors and residents about duty hour rules and policies, and for ensuring compliance. Residents are responsible for following the established staffing requirements.

DEFINITIONS

Continuous Duty: Assigned duty periods without breaks for strategic napping or resting to reduce fatigue or sleep deprivation

Duty Hours: All hours spent on scheduled clinical and academic activities, regardless of setting, related to the pharmacy residency program that are required to meet the educational goals and objectives of the program.

- Duty hours include inpatient and outpatient patient care (resident providing care within a facility, a patient's home, or from the resident's home when activities are assigned to be completed virtually); staffing/service commitment; in-house call; administrative duties; work from home activities (i.e., taking calls from home and utilizing electronic health record related to at-home call program); and scheduled and assigned activities, such as conferences, committee meetings, classroom time associated with a master's degree for applicable programs or other required teaching activities; and health and wellness events that are required to meet the goals and objectives of the residency program.

- Duty hours exclude reading, studying, and academic preparation time (e.g., presentations, journal clubs, closing knowledge gaps); travel time (e.g., to and from work, conferences); and hours that are not scheduled by the residency program director or a preceptor.

Moonlighting: Any voluntary, compensated work performed outside the organization (external) or within the organization where the resident is in training (internal). These are compensated hours beyond the resident's salary and are not part of the scheduled duty periods of the residency program.

Scheduled Duty Periods: Assigned duties, regardless of setting, that are required to meet the educational goals and objectives of the residency program. These duty periods are usually assigned by the residency program director or preceptor and may encompass hours which may be within the normal workday, beyond the normal workday, or a combination of both.

Strategic Napping: Short sleep periods, taken as a component of fatigue management, which can mitigate the adverse effects of sleep loss.

PROCEDURE

Residents, program directors, and preceptors have the professional responsibility to ensure they are fit to provide services that promote patient safety. The residency program director (RPD) must ensure that there is not excessive reliance on residents to fulfill service obligations that do not contribute to the educational value of the residency program or that may compromise their fitness for duty and endanger patient safety.

Providing residents with a sound training program must be planned, scheduled and balanced with concerns for patients' safety and residents' well-being. Therefore, programs must comply with the following duty-hour requirements:

Maximum Hours of work per Week and Duty-Free Times

- A. Duty hours must be limited to 80 hours per week, averaged over a four-week period. Activities that are included and excluded from the duty hours calculation are defined in the ASHP Duty Hour Requirements for Pharmacy Residencies and above.
- B. Continuous duty periods for residents should not exceed 16 hours in the absence of an In-House Call Program.
- C. Residents should have a minimum of 8 hours between scheduled duty periods.
- D. Residents must have a minimum of one day in seven days free of duty, averaged over a four-week period, and cannot be on at-home call on duty-free days.

Moonlighting

- A. Internal or external moonlighting must not interfere with the ability of the resident to achieve the educational goals and objectives of the residency program, the resident's fitness for work, nor compromise patient safety.
- B. External moonlighting is not permitted. Internal moonlighting may be allowed after licensure and as training and other program responsibilities permit. Residents must receive permission from the RPD prior to beginning any moonlighting activities. If approved, all moonlighting hours must be submitted via email and approved by the RPD.
 - a. If internal moonlighting is approved, the resident will need to apply for a per diem pharmacist position. Once the onboarding process is completed, they will be able to pick up shifts.
- C. Moonlighting hours are included in the 80-hour weekly duty hour limit and must not exceed 16 hours per week.

- D. Permission to moonlight can be rescinded if residents' participation in moonlighting affects their performance during scheduled duty hours. Residents will receive one warning if moonlighting interferes with their performance before permission to moonlight is revoked.

Duty Hours and Moonlighting Tracking

- A. Residents must document their duty hours in PharmAcademic, including any internal moonlighting.
- B. On the last day of each month, residents will be assigned a task to complete an ASHP standard duty hours form.
- C. The duty hours form will be reviewed by the RPD monthly using the Duty Hours Dashboard and attested to in the resident monthly check in form in PharmAcademic. If there are duty hour violations found, the RPD will discuss a plan with the resident to ensure compliance going forward. This plan will be documented with the review of the duty hours evaluation.

REGULATIONS / REFERENCES

American Society of Health-System Pharmacists. Duty Hour Requirements for Pharmacy Residencies. Available at: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.pdf>.

DEVELOPMENT & CONSULTATION

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Pharmacy Resident Failure to Obtain Pharmacist Licensure	
Department: Pharmacy	Institution Name: Brigham and Women's Faulkner Hospital
Approver: Raul Santiago, PharmD, BCPS, BCIDP PGY1 Pharmacy Residency Program Director	Contact Person: PGY1 Pharmacy Residency Program Director
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KEYWORDS

Pharmacy, pharmacist, resident, licensure, license

PURPOSE

To define the deadline by which pharmacy residents must obtain valid pharmacist licensure in the Commonwealth of Massachusetts and the procedures around delays in or failure to obtain licensure.

POLICY STATEMENT

Pharmacy residents are required to have a valid pharmacist license in the Commonwealth of Massachusetts in order to complete the residency program and maintain employment at Brigham and Women's Faulkner Hospital.

PROCEDURE

Incoming residents must actively pursue pharmacist licensure in the Commonwealth of Massachusetts as soon as possible after matching and must notify the Residency Program Director (RPD) of all examination dates. Residents must make all reasonable efforts to complete their first attempts of both required licensing exams (NAPLEX and MPJE) prior to the end of the orientation block (the specific date may vary from year to year but is approximately 6 weeks after the start of the residency year). This includes regular review of exam availability to move test dates forward. If they are unable to do so, they must discuss this as early as possible with the Residency Program Director (RPD) for approval of their delayed exam dates.

If the resident has not obtained Massachusetts pharmacist licensure by the start of the residency year, the resident must obtain a Massachusetts pharmacy intern license in order to begin work. If neither of these are obtained prior to the start of the residency year, it will result in termination of the residency agreement, release of the resident from the residency program, and termination of employment.

If not already licensed as a pharmacist in Massachusetts prior to the start of the residency year, residents are required to obtain pharmacist licensure in the Commonwealth of Massachusetts within 120 days of the first day of the residency program year, to ensure that at least two-thirds of the residency year is completed as a licensed pharmacist.

Failure of the resident to obtain Massachusetts pharmacist licensure within 120 days of the first day of the residency year will result in termination of the residency agreement, release of the resident from the residency program, and termination of employment.

REGULATIONS / REFERENCES

American Society of Health System Pharmacists. ASHP Accreditation Standard for Postgraduate Pharmacy Residency Programs. Available at: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/examples/ASHP-Accreditation-Standard-for-Postgraduate-Residency-Programs.pdf>.

RELATED POLICIES

Pharmacy Resident Disciplinary Action and Dismissal

DEVELOPMENT & CONSULTATION

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Pharmacy Residency Advisory Committee	11/2021, 11/2022, 3/2023, 1/2024, 1/3/2025

Pharmacy Resident Corrective Action and Dismissal	
Department: Pharmacy	Institution Name: Brigham and Women's Faulkner Hospital
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KEYWORDS

Pharmacy, pharmacist, resident, discipline, dismissal, corrective, CAP

PURPOSE

To define procedures for corrective action and dismissal of pharmacy residents and reasons for non-receipt of a residency completion certificate.

POLICY STATEMENT

Pharmacy administration, residency leadership, and residency preceptors will follow a corrective action process when there is a deficiency in resident performance that is noted. This process will be used when addressing any areas of resident performance and/or behavior requiring improvement. The intent of this process is to assist the resident in correcting problems and improving performance and/or behavior. Dismissal without a residency certificate can occur under specific circumstances defined in the procedures below.

PROCEDURE

It is the responsibility of the pharmacy resident to complete all assigned activities to receive a residency certificate. Residents are expected to comply with all policies and procedures of Brigham and Women's Faulkner Hospital, conduct themselves in an ethical and professional manner at any times they are representing BWFH, on or off campus, and obtain licensure as delineated in the Failure to Obtain Licensure policy.

In addition to any pharmacy or residency-specific policies, residents must adhere to standards of conduct set forth by the institution and are subject to disciplinary processes as laid out in the Standards of Conduct and Disciplinary Action policy. Corrective action or dismissal from the program are actions considered when residents do not meet program or rotation expectations and requirements.

Corrective Action Process

If a resident fails to meet their obligations and responsibilities outlined in the educational goals/objectives of the residency, including but not limited to satisfactory progress towards attainment of all residency program goals and adherence to all organizational, departmental, and residency policies, the corrective action process (CAP) may be initiated.



1. Prior to initiating the CAP, the Residency Program Director (RPD) will conduct a thorough investigation, including meeting with the resident to investigate concerns and offer the resident the opportunity to provide information related to the issue at hand.
 - a. If the issue directly involves the RPD, Pharmacy Administration will take the place of the RPD in investigating and gathering information as stated above.
2. Following an investigation, the RPD with the Residency Advisory Committee (RAC), will review the results of the investigation to determine whether initiating a CAP is required, and determine the timeline for this process. The decision to initiate a CAP and the timeline associated with it will be voted upon by the RAC. The RPD will notify the resident of the result of the review.
3. The CAP may be extended once, if insufficient or no improvement is seen in the initial period for the CAP. This will be decided by RAC vote.
4. A CAP consists of:
 - a. Verbal and written counseling including specific expectations for improved performance or behavior
 - b. Notification of the duration of the probationary period associated with the CAP
 - c. Schedule of any additional verbal or written review required during the probationary period associated with the CAP.
 - d. A verbal and written statement issued by the RPD in consultation with the RAC at the end of the probationary period associated with the CAP stating the final evaluation of the resident's performance. This will fall into one of three categories:
 - i. Successful improvement and achievement of required program performance and/or professional behavior by the resident
 - ii. 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.
 - iii. 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.
5. When the RPD and RAC determine that a CAP is completed, the RPD will provide written notification to the resident. All documents related to the CAP will be maintained in the resident's file and provided to the resident.

Dismissal from the Residency Program

Just cause for dismissal from the program includes but is not limited to failure to obtain licensure in accordance with residency policy, perform the normal and customary duties of a pharmacy resident, failure to meet program expectations, substantial or repetitive conduct considered unprofessional or ethically unacceptable, or that is disruptive of the normal and orderly function of the organization. Specific behaviors, concerns, or actions that fall under this definition include, but are not limited to those listed in the BWFH HR policy, Standards of Conduct and Disciplinary Action.

1. Pharmacy residents are required to have Massachusetts licensure either as a pharmacy intern or pharmacist prior to the first day of employment at BWFH. Massachusetts pharmacist licensure must be obtained within 120 days of the start of the residency year. Failure to meet these requirements will result in termination of the residency agreement, release of the resident from the residency program, and termination of employment at BWFH. See the Pharmacy Resident Failure to Obtain Pharmacist Licensure Policy for the full policy and details.
2. Residents can be dismissed in the event of excess time away from the program in accordance with the Pharmacy Resident Attendance and Leave policy.
3. For other scenarios, following an investigation, the RPD in conjunction with the RAC, Pharmacy Administration, and Human Resources will review the results of this investigation to determine one of the following recommendations:

- a. Need for immediate dismissal
 - b. Need for immediate CAP – Involuntary Dismissal May Result. The CAP shall meet the requirements listed above. The RPD will work with the Director of Pharmacy to notify licensing/regulatory bodies as required.
4. The resident will be notified of the result of this investigation.

RELATED POLICIES

Standards of Conduct and Disciplinary Action
Pharmacy Resident Failure to Obtain Pharmacist Licensure
Pharmacy Resident Attendance and Leave

DEVELOPMENT & CONSULTATION

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