

## **Cleveland Clinic Akron General Pharmacy Residency ASHP – Required Policies 2022-2023**

1. Licensure in Ohio Policy
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## Pharmacy Residency Policy - Licensure in Ohio

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center - Pharmacy		<b>Original Date of Issue:</b>	<b>Version</b> 3
<b>Approved by:</b> AGMC Board Policy Committee	<b>Date Last Approved/Reviewed:</b>	<b>Prepared by:</b> Christopher Ensley (Manager Medication Safety)	<b>Effective Date</b>

**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

### Purpose

In accordance with the [Licensure/Certification/Clinical Competency Policy](#), this document outlines the Ohio Pharmacy Licensure requirements for all pharmacy residents during post-graduate year 1 (PGY1) and post-graduate year 2 (PGY2).

### Policy Statement

All pharmacy residents must successfully be licensed by the Ohio State Board of Pharmacy in a timely manner, including reciprocity.

### Definitions

**Cleveland Clinic Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider-based locations.

**ACPE** - Accreditation Council for Pharmacy Education

**NAPLEX** - North American Pharmacy Licensure Examination

**MPJE** - Multistate Pharmacy Jurisprudence Examination

### Policy Implementation

All pharmacy residents must successfully be licensed by the Ohio State Board of Pharmacy in a timely manner, including reciprocity.

1. All pharmacy residents must have graduated from an Accreditation Council for Pharmacy Education (ACPE) accredited School of Pharmacy, and be licensed in the State of Ohio.

2. Residents should contact the Ohio State Board of Pharmacy as soon as possible after the match to determine licensure requirements. Residents are responsible for determining and completing Ohio intern hour requirements necessary to be eligible to sit for Licensure Examinations.
3. Residents must obtain an Ohio Pharmacy Intern License if currently does not hold a Pharmacist License in Ohio or in another state.
  - a. Residents do not need an Ohio Intern License if they hold a current/active Pharmacist License in another state while waiting for reciprocity to be determined by Ohio State Board of Pharmacy.
    - i. Reciprocity should be done as soon as possible (July of residency year)
4. Residents must maintain an Ohio Pharmacy Intern License until obtaining a Pharmacist License in Ohio.
  - a. Failure to obtain or maintain Ohio Pharmacy Intern License while waiting for Ohio Pharmacist License will result in suspension from work/residency.
5. Until the resident is licensed in Ohio, they must work under the direct supervision of a licensed pharmacist.
6. All pharmacy residents should obtain their Ohio Pharmacy License prior to orientation or as soon as possible after starting orientation.
7. Residents must be licensed within the first 90 days of start date.
  - a. Residents should complete initial licensure examinations by July 15 and shall complete no later than July 31, to allow adequate time for re-testing in the event the resident does not pass the initial examinations.
  - b. For NAPLEX, after a failed attempt, please refer to NAPLEX standards regarding waiting period for next attempt.
  - c. For MPJE, after a failed attempt, there is a 30 day waiting period for next attempt at the MPJE.
  - d. Failure to obtain license by August 1<sup>st</sup> may impact resident's staffing and clinical rotations (e.g., decrease in number of electives, attendance at local, state, and national conferences), and may extend the residency program length to meet requirements as outlined in the [Pharmacy Residency Successful Completion Policy](#).
8. Failure to pass Ohio State Board of Pharmacy Licensure requirements within in first 90 days of start date or two failed attempts of the same examination (i.e., NAPLEX or MPJE) occurring within the first 90 days of start date of the residency will result in termination from the residency program. Exceptions (e.g., medical leave of absence in accordance with [Pharmacy Residency Leave of Absence Procedure](#)) will be considered on an individual basis. If exception approved, the residency will be extended by the amount of time as the extension (e.g., up to 12 weeks based on [Pharmacy Residency Leave of Absence Procedure](#)) to ensure that the resident completes 12 months of training and completes two-thirds of the residency as a licensed pharmacist. Managers or designee are responsible for performing primary source verification of a resident's license within first 90 days of start date.

- a. Manager or designee is responsible for performing primary source verification of renewal no later than the expiration of the credentials.
  - b. Manager or designee will retain a copy of the website screen print, dated no later than the expiration date in the resident's departmental file, and submit to Human Resources.
9. PGY2 pharmacy residents must show proof of certificate of completion for a postgraduate Year 1 (PGY1) residency within the first 30 days of hire. Failure to produce certificate of completion for a post-graduate Year 1 (PGY1) residency will result in dismissal from the residency program.
  - a. PGY2 residents must bring in a copy of the certificate of completion for a postgraduate Year 1 (PGY1) residency (e.g., graduation certificate).
  - b. Pharmacy manager or designee will contact PGY1 residency program to verify the primary source.
10. Residents are responsible to maintain current licensure, certification, and/or clinical competencies as required by their position as outlined in the [Licensure/Certification/Clinical Competency Policy](#). Continued employment is contingent upon maintaining current credentials.

### **Regulatory Requirement/References**

Ohio Licensure as a Pharmacist by Examination. Available from <https://pharmacy.ohio.gov/Licensing/Pharmacist.aspx> (Accessed Jan 09, 2023).

NAPLEX - <https://nabp.pharmacy/programs/naplex/> (Accessed Jan 09, 2023).

[Licensure/Certification/Clinical Competency Policy](#)

### **Oversight and Responsibility**

The Department of Pharmacy is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

## Pharmacy Residency Duty Hours Standard Operating Procedure

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center - Pharmacy		<b>Original Date of Issue:</b>	<b>Version</b> 4
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**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

### Purpose

To outline duty hour requirements for all pharmacy residents during post-graduate year 1 (PGY1) and post-graduate year 2 (PGY2).

### Definitions

**Cleveland Clinic Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider-based locations.

**Duty Hours:** Defined as 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 includes: 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 excludes 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.

**Continuous Duty:** Defined as assigned duty periods without breaks for strategic napping or resting to reduce fatigue or sleep deprivation.

**Moonlighting:** Defined as any voluntary, compensated work performed outside Cleveland Clinic Akron General (CCAG) (external), or within Cleveland Clinic Akron General (internal), or at any of its related participating sites. These are compensated hours beyond the resident's salary and are not part of the scheduled duty periods of the residency program.

## **Instructions**

Pharmacy residents must not violate duty hour requirements approved by the American Society of Health-System Pharmacists (ASHP) Commission on Credentialing.

### *A. Maximum Hours of Work per Week and Duty Free Times*

1. Duty hours must be limited to no more than 80 hours per week, averaged over a four-week period, inclusive of internal and external moonlighting.

### *B. Mandatory Duty-Free Times*

1. Residents must have a minimum of one day in seven days free of duty (when averaged over four weeks).
2. At-home call cannot be assigned on these free days.
3. Residents must have at a minimum of 8 hours between scheduled duty periods .
4. Residents are not permitted to work more than two consecutive weekends in a row (i.e., both Saturday and Sunday).
  - a. Before a resident trades/switches weekend staffing with another resident, it must be approved by the respective Residency Program Directors (RPD). Once the RPD approves the trade/switch, the schedule can then be updated by responsible party.

### *C. Continuous Duty*

1. Continuous duty periods for residents should not exceed 16 hours.

### *D. Tracking of Compliance with Duty Hours*

1. Programs must have a method in place to track compliance with the Duty Hour Requirements for Pharmacy Residencies Policy (See Appendix 1 for how Cleveland Clinic Akron General will track duty hours).
2. Review of tracking method must be completed on a monthly basis.
3. Any instances of non-compliance with this policy identified should be assessed and actions taken, as needed, to avoid future instances of non-compliance.

## **At-Home or In-House Call Activities**

Cleveland Clinic Akron General Medical Center does not have an on-call service that our residents support.

## **Moonlighting**

- A. Moonlighting (internal or external) must not interfere with the ability of the resident to achieve the education goals and objectives of the residency program, and must not interfere with the resident's fitness for work nor compromise patient safety.
1. It is at the discretion of the residency program director (and/or Residency Committee) whether to permit or to withdraw moonlighting privileges.
    - a. The RPD may, at any time and without notice, prohibit the resident from moonlighting if his/her assessment indicates that resident performance is being compromised or the moonlighting arrangement is in violation of this procedure or the Duty Hours standard.
  2. All moonlighting hours must be counted towards the clinical experience and educational work 80-hour maximum weekly hour limit averaged over a four-week period and included in the tracking of hours.
  3. Programs that allow moonlighting must have a documented structured process that includes at a minimum (See Appendix 1 for what Cleveland Clinic Akron General allows for moonlighting):
    - a. The type (internal only, external only, or both) and maximum number of moonlighting hours allowed by the program per week, pay period or month
    - b. Requirement for the resident to receive approval for moonlighting hours and to inform the RPD of their completed moonlighting hours:
      - i. If the resident elects to pursue moonlighting activities, he/she will be required to get approval by RPD prior to accepting the moonlighting activity (i.e., extra internal shifts or external shifts)
      - ii. The RPD will only approve the moonlighting activity if the resident is satisfactorily meeting all residency program goals and objectives, and if the activity is not in violation of the Duty Hours standard
      - iii. For extra internal shifts, the RPD will contact the appropriate Pharmacy Manager/ Director with decision (approval or denial of extra internal shift)

## **Statement on Well-Being and Resilience**

- A. Residents are at an increased risk for burnout and depression due to the nature of the healthcare environment and psychological, emotional, and physical well-being are critical in the development of the competent, caring, and resilient pharmacist.
- B. As part of the development of the resident, it is the responsibility of the pharmacy leaders to ensure residents are educated on wellness and resilience, including education on burnout syndrome, the risks, and mitigation strategies as part of the orientation to the residency.
- C. It is also the responsibility of pharmacy leaders to ensure preceptors are educated on burnout syndrome, including the risks and mitigation strategies, in order to help identify and provide resources for at-risk residents, and to recognize when it may be in the best interest of patients to transition care to another qualified, rested pharmacist.
- D. As part of promoting a culture of wellness, pharmacy leaders 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 residents' fitness for duty and endanger patient safety. However, as members of the healthcare team, residents may be required to participate in departmental coverage in times of unusual circumstances/state of

emergency situations (e.g., mass-casualty, downtime, and natural disasters, pandemic) that go beyond the designated duty hours for a limited timeframe.

**Regulatory Requirement/References**

American Society of Health-System Pharmacists (ASHP)  
*Pharmacy Specific Duty Hours Requirements for the ASHP Accreditation Standards for Pharmacy Residencies.*

Available from: <https://www.ashp.org/-/media/assets/professional-development/residencies/docs/duty-hour-requirements.pdf> Accessed January 09, 2023.

**Oversight and Responsibility**

The Pharmacy Department is responsible to review, revise, update, and operationalize this standard operating procedure to maintain compliance with regulatory or other requirements.

**Appendices**

Cleveland Clinic Akron General Pharmacy Residency Duty Hours

<b>Appendix 1: Moonlighting</b>					
<b>Hospital</b>	<b>Internal Moonlighting (Y/N)?</b>	<b>External Moonlighting (Y/N)?</b>	<b>3rd shift/overnight Moonlighting (Y/N)?</b>	<b>Duty Hour Moonlighting Cap/Week (Hours)</b>	<b>Mechanism for tracking</b>
Akron General	Yes	No	No	16	Duty Hour Attestation in Pharmacademic
Updated June 2022 (for 2022-2023 Residency Year) <i>Note: Per communication from ASHP, military reservist hours are counted toward duty hours.</i>					



## Pharmacy Residency Leave of Absence Procedure

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center - Pharmacy		<b>Original Date of Issue:</b>	<b>Version</b> 4
<b>Approved by:</b> AGMC Board Policy Committee	<b>Date Last Approved/Reviewed:</b>	<b>Prepared by:</b> Christopher Ensley (Manager Medication Safety)	<b>Effective Date</b>

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### Purpose

To support the [Leaves of Absences- Including FMLA, Medical, Worker's Compensation, Personal, Military and Departmental Policy](#), this document outlines the leave of absence procedures for all Cleveland Clinic Akron General Medical Center pharmacy residents during post-graduate year 1 (PGY1) and post-graduate year 2 (PGY2).

Pharmacy residents must follow Human Resources policies and procedures for Leave of Absence requests.

### Definitions

**Cleveland Clinic Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider-based locations.

### Procedure

#### Leave of Absence Requests

1. Per residency year, each resident has 14 “time-off” days.
  - a. “Time-off” days may be used for 1) illness or personal time, 2) licensure requirements [reciprocity hearing or taking the North American Pharmacist Licensure Exam (NAPLEX) and/or jurisprudence exam(s) for licensure in Ohio], or 3) interviewing for PGY2 residencies or jobs.
  
2. Each Resident can take up to 12 weeks for leave of absence.
  - a. All requests for Leave of Absence must be submitted in writing to the respective Residency Program Director (RPD) and Human Resources. The RPD shall notify the appropriate Pharmacy leadership (e.g., Pharmacy Manager, Pharmacy Director, etc.). Please refer to individual Human Resources Policies and Procedures for

- specific processes and documentation requirements based on type of leave.
- b. The resident will need to apply to take unpaid leave up to 12 weeks, unless eligible for Short Term Disability pay, per Human Resources Benefits eligibility guidelines.
  - c. If the Leave of Absence is approved, and the resident has used all “time-off” days, the below will be followed to ensure the residency program is a minimum of 12 months in length (per American Society of Health-System Pharmacy Residency Standards).
    - i. Residents taking leave greater than paid leave allowed (i.e., 14 “time-off” days) cannot be awarded a residency certificate unless additional leave is made up.
    - ii. For example, if a resident needs to take a leave of absence and they have 10 days of “time off” remaining out of the 14 “time-off” days, they use the 10 “time-off” days remaining and then will need to make up the remaining days taken on the leave of absence [i.e., a resident takes 4 weeks leave or 20 work calendar days leave of absence, they will be required to make up 10 work calendar days for the residency at the end of the year and any required staffing shifts missed (e.g., weekends)]

### **Make-up Time for Absences**

1. Leave(s) of absence may extend the training period to reach an acceptable level of performance in order to graduate from the program. The resident must complete 12 months of residency.
2. Leave of absence time must be completed within 6 months of the date the program was scheduled to be completed, or the resident forfeits the privilege of receiving the Certificate of Completion of the program and is dismissed from the residency program. In other words, for a leave of absence, the residency position will be held for 6 months after the end date of the residency in the Acceptance Letter.
3. When returning from a leave of absence, all Successful Completion Requirements must be met in order to obtain a residency graduation certificate. For example, the resident must complete all required rotations as outlined in the Successful Completion Requirements; therefore, any required rotations and deliverables missed during the leave of absence would need to be made up upon the residents return and done within the allowable period of the extension.
4. Upon returning from leave, hours will be paid and must be worked under the guidance of a preceptor, equal to the hours missed, and used to complete the requirements not yet achieved.

### **Regulatory Requirement/References**

Family and Medical Leave Act (FMLA)

Cleveland Clinic Akron General - Human Resources Policies and Procedures:

- [Bereavement Leave Policy](#)

- [Jury Duty Witness Duty Leave Policy](#)
- [Leaves of Absences- Including FMLA, Medical, Worker's Compensation, Personal, Military and Departmental Policy](#)

Cleveland Clinic Akron General has its own Successful Completion Requirements.

### **Oversight and Responsibility**

The Pharmacy Residency Committee is responsible to review, revise, update, and operationalize this procedure to maintain compliance with regulatory or other requirements.

## Pharmacy Residency Dismissal Policy

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center - Pharmacy		<b>Original Date of Issue:</b>	<b>Version</b>  4
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### Purpose

To define the dismissal procedure for all Cleveland Clinic Akron General pharmacy residents during post-graduate year 1 (PGY1) and post-graduate year 2 (PGY2) in the Pharmacy Residency program who fail to meet the required standards for completion set forth by the American Society of Health-System Pharmacists (ASHP).

### Policy Statement

To graduate and receive a pharmacy residency certificate, pharmacy residents must meet all the requirements set forth by the Pharmacy Residency Program. Residents will be evaluated according to the ASHP Standard 1 Requirements and Selection of Residents; specifically 1.6) for the PGY1 Standard, 1.7) for the PGY2 Standard, and Standard 2 Responsibilities of the Program to the Resident; specifically 2.7) for the PGY1 and PGY2 Standards “the Residency Program Director (RPD) will award a certificate of residency only to those who complete the program’s requirements.” Failure to meet the successful completion requirements will result in dismissal from the Pharmacy Residency Program.

### Definitions

**Cleveland Clinic Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider-based locations.

### Policy Implementation

1. PGY2 pharmacy residents must show proof of certificate of completion for a post-graduate Year 1 (PGY1) residency within the first 30 days of hire. Failure to produce certificate of completion for a post-graduate year 1 (PGY1) residency will result in dismissal from the residency program.

2. Performance deficiencies can be identified by personal interactions with the resident, by formative and summative evaluations (located in Pharmacademic), and quarterly development plans (located in Pharmacademic).
3. To address the performance deficiencies, the Residency Program Director (RPD) will conduct a performance management discussion, review the resident's current performance and work with him/her to create a plan to achieve the required standards for completion by ASHP.
4. If the resident continues to not meet the required standards for completion, the RPD will notify the hospital specific Director of Pharmacy, System Director of Residency Programs, and Cleveland Clinic Akron General HR business partner(s) or designee.
5. If it is determined the resident may not be able to meet the requirements to successfully complete the residency (See [Pharmacy Residency Successful Completion Policy](#)), a Resident Improvement Plan will be created by the RPD and Director of Pharmacy or designee and will include input from preceptors.
6. The Resident Improvement Plan will identify; measurable metrics, the current performance, desired performance, methods and timeframe for improvement and the consequences of successful and unsuccessful completion of the plan.
  - a. Examples of metrics include but are not limited to: 1) select objectives from the residency specific ASHP competency areas, goals, and objectives and rating of specific objective (e.g., satisfactory progress or achieved); 2) presentation and/or project milestones and completion; 3) time management of work with specific dates for completion; and 4) professionalism (e.g., arriving and leaving rotation on time, and interaction with other health care professionals and patients).
  - b. The timeframe of the Resident Improvement Plan is typically four (4) weeks.
  - c. The resident and RPD will sign and date the Resident Improvement Plan.
7. If the resident does not successfully meet all the metrics of the Resident Improvement Plan, but demonstrates progress, the Plan may be extended with updated metrics and timeframes.
  - a. The timeframe of a Resident Improvement Plan extension is typically four (4) weeks.
8. During the Resident Improvement Plan period, the resident will meet with the RPD on a regular basis, typically once a week (or more frequently as needed), to review progress of the plan.
9. If the resident is not successful in meeting the requirements outlined in the Resident Improvement Plan, he/she will be terminated from the residency program.
10. Resident will also be dismissed from the residency program if the resident cannot make up time missed from a leave of absence within 6 months of the end date of the residency as outlined in the Acceptance Letter (see [Pharmacy Residency Leave of Absence Procedure](#)).

## **Workplace Conduct and Performance**

Cleveland Clinic Akron General has established standards of behavior and expectations governing performance and conduct as identified in the Cleveland Clinic Akron General Human Resources (HR) [Corrective Action Policy](#), [Professional Conduct Policy](#), and other applicable policies. The purpose of this criteria is to assist with managing employee performance and conduct issues that interfere with safe, orderly, effective and efficient operation of the organization.

Conduct prohibited by these policies is unacceptable in the workplace or in any work-related setting outside the workplace such as during business trips or business meetings. Those individuals who engage in acts prohibited by Cleveland Clinic Akron General policies, regardless of status, position or title, will be subject to appropriate action, including but not limited to corrective action up to and including discharge.

## **Regulatory Requirement/References**

American Society of Health System Pharmacists (ASHP), 2016, ASHP Accreditation Standard for Postgraduate Year One (PGY1) Pharmacy Residency Programs.

<https://www.ashp.org/search?q=PGY1%20Residency%20Accreditation%20Standard%20-%202016>

- Standard 1. [1.6] Requirements for successful completion and expectations of the residency program must be documented and provided to applicants invited to interview, including policies for professional, family, and sick leaves and the consequences of any such leave on residents' ability to complete the residency program and for dismissal from the residency program.
- Standard 2. [2.7] The RPD will award a certificate of residency only to those who complete the program's requirements.

American Society of Health System Pharmacists (ASHP), 2017, ASHP Accreditation Standard for Postgraduate Year Two (PGY2) Pharmacy Residency Programs.

<https://www.ashp.org/search?q=PGY2%20Residency%20Accreditation%20Standard%20-%20June2017>

- Standard 1. [1.7] Requirements for successful completion and expectations of the residency program must be documented and provided to applicants invited to interview, including policies for professional, family, and sick leaves and the consequences of any such leave on residents' ability to complete the residency program and for dismissal from the residency program.
- Standard 2. [2.7] The RPD will award a certificate of residency only to those who complete the program's requirements.

[Corrective Action Policy](#)  
[Professional Conduct Policy](#)

[Pharmacy Residency Successful Completion Policy](#)

## **Oversight and Responsibility**

The Residency Program Director and Pharmacy Residency Committee is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

## Pharmacy Residency Successful Completion Policy

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center - Pharmacy		<b>Original Date of Issue:</b> 10/31/2013	<b>Version</b> 3
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**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

### Purpose

To outline the graduation requirements for all Cleveland Clinic Akron General (CCAG) pharmacy residents.

Standard 2 (Responsibilities of the Program to the Resident), number 2.7 of the American Society of Health-System Pharmacists (ASHP) Pharmacy Residency Standards states, “a Residency Program Director (RPD) awards a certificate of residency only to those who complete the program’s requirements.”

### Policy Statement

A Resident must meet all program requirements in order to receive a residency certificate.

### Definitions

**Cleveland Clinic Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider-based locations.

**Acceptance Letter (ASHP Standard Principle 2.4a):** A letter that is sent to the resident candidate after the National Matching Service results or early commitment that outlines requirements for successful completion of the residency program. The letter is signed and dated by both the resident and the Residency Program Director (RPD). The letter also includes a start date and end date of the residency program. The letter will be postmarked no later than 30 days following receipt of the Match results or acceptance of an early commitment offer by the applicant.

### Policy Implementation



A resident must meet the following in order to successfully complete the residency and be awarded a residency certificate. A resident must:

1. Obtain pharmacist licensure in the State of Ohio (as described in the CCAG Pharmacy Resident Licensure Policy).
2. Complete all required residency Learning Experiences as outlined by the specific residency program (as outlined in Acceptance Letter).
3. Have all assigned resident evaluations (in PharmAcademic) completed.
4. Meet the following:
  - a. PGY1 Pharmacy (includes first year Health System Pharmacy Administration and Leadership): A resident must achieve for the residency (ACHR) all goals in domain R1. A resident may have only 1 goal in any one of the following domains R2, R3, and R4 that is not achieved for the residency (ACHR). By the end of the residency there can be no objectives that are rated as Needs Improvement that have not been specifically addressed in the resident's Development Plan followed by evaluation demonstrating at least Satisfactory Progress.
  - b. PGY2 (includes all PGY2 programs except Health System Pharmacy Administration and Leadership): A resident must achieve for the residency (ACHR) all goals in R1 (or specific "R" domain for patient care). A resident may have 2 goals in other domains that are not achieved for the residency (ACHR). By the end of the residency there can be no objectives that are rated as Needs Improvement that have not been specifically addressed in the resident's Development Plan followed by evaluation demonstrating at least Satisfactory Progress.
  - c. PGY2 Health System Pharmacy Administration and Leadership: A resident may have 2 goals that are not achieved for the residency (ACHR). No domain(s) specified. By the end of the residency, there can be no objectives that are rated as Needs Improvement that have not been specifically addressed in the resident's Development Plan followed by evaluation demonstrating at least Satisfactory Progress.
5. Complete research or project(s) as outlined by the specific residency program (as outlined in Acceptance Letter).
6. Complete a project manuscript that is suitable for publication.
7. Present a project (poster or podium) at assigned conferences (e.g., Ohio College of Clinical Pharmacy (OCCP), ASHP Midyear, Regional Residency Conference, CCAG Scientific Session, or others as assigned).
8. Complete all staffing requirements (as outlined in Acceptance Letter); including on-call program if applicable. The staffing component may vary from year-to-year but will be no more frequent than every other weekend and will include up to three (3) national holidays.
9. Complete all presentation requirements (e.g., case presentations, pharmacotherapy conference, research project/Medication Use Evaluation (MUE) proposal and findings) (as outlined in Acceptance Letter). Presentations may be repeated if necessary to demonstrate proficiency.
10. Complete assigned certificate program (e.g., Teaching Certificate, Leadership Certificate), as outlined in Acceptance Letter.
11. Participate in required hospital committees (e.g., Pharmacy and Therapeutics Committee, Pharmacy Residency Subcommittee, others meetings as determined by the RPD) as outlined in the acceptance letter.

12. The following deliverables, specific to the PGY2 HSPAL resident will be required for graduation:
- a. Precepts all Cleveland Clinic Akron General pharmacy residents to guide their completion of their MUE projects.
  - b. Oversees internship program as leader/manager role and performs an annual evaluation of our internship program by surveying all interns and develops a plan for continuous quality improvement.
  - c. Attends all House Staff Senate meetings and/or provides the necessary follow-up required (when attendance not possible).
  - d. Completes leadership/Secretary Position responsibilities for a Pharmacy and Therapeutics Committee meeting.
  - e. Creates two 8-week pharmacy operations schedules and is responsible for primary management of one of the 8-week schedules.
  - f. Pharmacy Administrator at-home on-call coverage (Monday through Sunday) 1 out of 6 weeks.
  - g. Completion of research project that also fulfills University of Cincinnati Master's Degree Program requirements.
  - h. Serves as Chief Resident with associated responsibilities as outlined in residency program.

The RPD and the resident's advisor will collaborate throughout the year to determine if the resident is on target to graduate. Resident progress toward accomplishing specific requirements and the resident's Development Plan will be presented quarterly to the Residency Advisory Committee by the resident's advisor or designee.

### **Regulatory Requirement/References**

American Society of Health System Pharmacists (ASHP) Accreditation Standard for Postgraduate Year One (PGY1) Pharmacy Residency Programs.

Accessed at:

<https://www.ashp.org/professional-development/residency-information/residency-program-resources/residency-accreditation/accreditation-standards-for-pgy1-pharmacy-residencies>.

American Society of Health System Pharmacists (ASHP) Accreditation Standard for Postgraduate Year Two (PGY2) Pharmacy Residency Programs.

Accessed at:

<https://www.ashp.org/-/media/assets/professional-development/residencies/docs/pgy2-guidance-document>.

### **Oversight and Responsibility**

The Pharmacy Residency Committee is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements.

## COVID-19 Vaccine Policy

<b>Target Group:</b> Cleveland Clinic Akron General Medical Center		<b>Original Date of Issue:</b> Not Set	<b>Version</b> 4
<b>Approved by:</b> AGMC Board Policy Committee, AGMC Medical Council	<b>Date Last Approved/Reviewed:</b> 03/31/2022	<b>Prepared by:</b> Carrie Lowe (Director Human Resource Services)	<b>Effective Date</b> 04/04/2022

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### Purpose

To protect patients, the community, and all individuals covered by this policy from COVID-19 infection, and to comply with the rules promulgated by the Centers for Medicare and Medicaid Services (CMS), by requiring all Individuals to obtain a COVID-19 vaccine.

### Policy Statement

Akron General Medical Center is committed to promoting public health and complying with the rules promulgated by CMS.

#### A. COVID-19 Vaccine Requirement

1. All Individuals must have received a complete primary COVID-19 vaccination series and provided proof thereof to Akron General Medical Center within previously established deadlines, subject to approved exemptions and extensions.
2. Individuals who are joining Akron General Medical Center or newly providing services on behalf of Akron General Medical Center are required to be Fully Vaccinated by completing a primary COVID-19 vaccination series or being granted an exemption consistent with this policy.
3. In the event that CMS or any other agency promulgates rules that extend current COVID-19 vaccination requirements to include booster shots or additional doses or series following completion of a primary COVID-19 series, this policy will incorporate any such additional requirements.

#### B. Exemptions

1. Medical. Akron General Medical Center may grant exemptions from the COVID-19 vaccine requirement to Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students with recognized medical contraindications to COVID-19 vaccines.
2. Religious. Akron General Medical Center may grant exemptions from the COVID-19

vaccine requirement to Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students whose sincerely held religious observances, practices, or beliefs conflict with their receipt of the COVID-19 vaccine.

## Definitions

**Akron General Medical Center:** Includes Akron General Main Campus and any and all Akron General provider based locations.

**Individuals** – Any and all individuals who provide care, treatment, or other services to Akron General Medical Center or its patients. This includes, but is not limited to, all employees, all employed physicians and non-employed licensed independent providers both privileged at and/or affiliated with Akron General Medical Center or under contract with Akron General Medical Center, as well as trainees, students, volunteers, vendors/third parties/contractors, and contracted employees. This does not include non-employed licensed independent providers who are privileged solely to provide remote/telehealth services and/or are affiliated with, but not privileged at, Akron General Medical Center and who are not providing any services at Akron General Medical Center locations.

**Employed Individuals** – All Akron General Medical Center employees, members of the Professional Staff, employed licensed independent providers, and trainees, regardless of worksite or location.

**Akron General Medical Center Students** – All persons enrolled in a Akron General Medical Center educational program or activity who are not employed by Akron General Medical Center, as determined by the Education Institute. This term does not include students enrolled in an educational program through an institution with which Akron General Medical Center has an affiliation agreement.

**Fully Vaccinated** – Having received the Primary COVID-19 vaccination series as defined below, and any boosters or doses that may additionally be required.

**Non-employed Privileged Providers** – All licensed independent providers, privileged at and/or affiliated with Akron General Medical Center but who are not employed by, or under contract with Akron General Medical Center. This does not include non-employed licensed independent providers who are privileged solely to provide remote/telehealth services and/or are affiliated with, but not privileged at, Akron General Medical Center and who are not providing any services at Akron General Medical Center locations.

**Primary COVID-19 vaccination series** – Two doses of the Pfizer-BioNTech (COMIRNATY) (BNT162b2) vaccine, two doses of the Moderna (mRNA-1273) vaccine, or one dose of the Johnson & Johnson / Janssen (JNJ-78436735) vaccine and any other COVID-19 vaccine series approved by the FDA.

## Policy Implementation

### A. COVID-19 Vaccine Requirement

1. All Individuals must have completed a primary COVID-19 vaccination series and

provided Akron General Medical Center with proof thereof or received an approved exemption or extension.

2. All Individuals who are joining Akron General Medical Center or who are newly providing services on behalf of Akron General Medical Center must complete a primary COVID-19 vaccination series and provide Akron General Medical Center with proof of their vaccination status before commencing their relationship with Akron General Medical Center, unless they receive approval for a medical or religious exemption as set forth below.
  - a. For Individuals who are part of an arrangement between Akron General Medical Center and another entity (not Employed Individuals or Akron General Medical Center Students), such as affiliate students, contractors, and Non-employed Privileged Providers, proof of receipt of the vaccine may be provided by either the Individuals or the Individuals' schools, employers, or other institutions, based upon the type of arrangement with Akron General Medical Center.
  - b. All newly Employed Individuals will be required to provide a copy of their vaccine card/other documentation of receiving the COVID-19 vaccine.
  - c. Akron General Medical Center Students must submit a copy of their vaccine card/other documentation of receiving the COVID-19 vaccine to the educational program or activity in which they are enrolled.
  
3. Some Individuals may be unable to complete a primary COVID-19 vaccination series prior to commencing their relationship with Akron General Medical Center because their vaccination is temporarily delayed due to clinical precautions and considerations consistent with recommendations by the Centers for Disease Control and Prevention (CDC). To request an extension under these circumstances, Employed Individuals and Akron General Medical Center Students must submit a written request to Akron General Medical Center by filling out the form attached to this policy as Appendix A and submitting the completed form and letter from the attending provider to [COVID19RequestMedical@ccf.org](mailto:COVID19RequestMedical@ccf.org). **Non-employed Privileged Providers seeking a temporary delay should contact Medical Staff & Credentialing Services, at [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org).** An Employed Individual, Non-employed Privileged Provider, or Akron General Medical Center Student whose extension request is approved must complete a primary COVID-19 vaccination series and provide Akron General Medical Center with proof of their vaccination as soon as possible consistent with CDC recommendations. Individuals who are not Employed Individuals, Non-employed Privileged Providers, or Akron General Medical Center Students should submit a request for extension to their school, employer, or other institution.
  
4. Applicants for employment with Akron General Medical Center will be informed of the COVID-19 vaccine requirement and will have the option to receive the COVID-19 vaccine from Occupational Health as part of their pre-placement medical assessment. They must complete a primary COVID-19 vaccination series and provide Akron General Medical Center with proof of their vaccination before commencing their relationship with Akron General Medical Center, unless they receive an approved medical extension as set forth above or an approved medical or religious exemption as set forth below.

## B. Exemptions

1. All Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students who are joining Akron General Medical Center may request a medical or religious exemption from the COVID-19 vaccine requirement through Akron General Medical Center by submitting a written request. Individuals who do not fall into the categories of Employed, Non-employed Privileged Providers, or Akron General Medical Center Students are not eligible to process exemption requests through Akron General Medical Center.
  - a. Medical Exemptions.
    - i. To be eligible for a medical exemption from Akron General Medical Center, an Employed Individual, Non-employed Privileged Provider, or Akron General Medical Center Student must have a recognized medical contraindication to all authorized COVID-19 vaccines.
    - ii. To request a medical exemption, an Employed Individual or Akron General Medical Center Student must submit a written request to Akron General Medical Center by filling out the form attached to this policy as Appendix B and sending the completed form and letter from the attending provider to [COVID19RequestMedical@ccf.org](mailto:COVID19RequestMedical@ccf.org). **Non-employed Privileged Providers seeking a medical exemption should contact Medical Staff & Credentialing Services, at [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org).**
    - iii. A request for a medical exemption must be signed and dated by the Individual's licensed provider who is acting within their scope of practice based on applicable state and local laws.
    - iv. A licensed healthcare provider who is requesting a medical exemption may not sign the Healthcare Provider Attestation on their own exemption request form.
    - v. To request a medical exemption, an Individual who is part of an arrangement between Akron General Medical Center and another entity (not an Employed Individual, Non-employed Privileged Provider, or Akron General Medical Center Student) should submit a request to their school, employer, or other institution.
  - b. Religious Exemptions.
    - i. Requests for religious exemptions are subject to the Religious Exemptions and Accommodations Policy.
    - ii. To request a religious exemption, an Employed Individual or Akron General Medical Center Student must submit a written request to Akron General Medical Center by filling out the form attached to this policy as Appendix C and submitting the completed form to [COVID19RequestReligious@ccf.org](mailto:COVID19RequestReligious@ccf.org). **Non-employed Privileged Providers seeking a religious exemption should contact Medical Staff & Credentialing Services, at [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org).**
    - iii. To request a religious exemption, an Individual who is part of an arrangement between Akron General Medical Center and another entity (not an Employed Individual, Non-employed Privileged Provider, or Akron General Medical Center Student) should submit a request to their school, employer, or other institution.

2. Interdisciplinary committees will evaluate and make a determination regarding each exemption request received from Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students.
3. Akron General Medical Center will notify each Employed Individual, Non-employed Privileged Provider, and Akron General Medical Center Student of the final decision concerning their request.
4. Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students granted a religious or medical exemption or who have a temporary medical extension are required to comply with additional precautions to mitigate the potential spread of COVID-19, which precautions will be required even if not required for Fully Vaccinated Individuals. These additional precautions include wearing an ear loop or surgical face mask while on Akron General Medical Center property, maintaining appropriate physical distancing, appropriate hand hygiene, and compliance with COVID-19 educational program(s) , and being subject to COVID-19 testing per Akron General Medical Center's established practices. Failure to comply with these requirements may result in corrective action up to and including termination.
5. The contingency plan for employees who have not completed their primary vaccination series is outlined in clauses A.1 to A. 4.

#### C. Accommodations

1. Employed Individuals, Non-employed Privileged Providers, and Akron General Medical Center Students who have received an exemption from the COVID-19 vaccine requirement will be required to comply with any assigned workplace accommodations as determined by Akron General Medical Center, including the additional precautions described in B.4 above.
2. Individuals who are not Employed Individuals, Non-employed Privileged Providers, or Akron General Medical Center Students and who have requested and received a documented exemption from the COVID-19 vaccine requirement from their school, employer, or other institution will be required to comply with any assigned workplace accommodations as determined by Akron General Medical Center, including the additional precautions described in B.4 above. The school, employer, or other institution will be required to provide Akron General Medical Center with documentation of the reason for the exemption.
3. Volunteers will be required to demonstrate proof of receiving the COVID-19 vaccine in compliance with this policy. No exemptions or accommodations are available to volunteers.

#### D. Record-Keeping

1. Akron General Medical Center, through Occupational Health, Human Resources, and Protective Services, will collect, monitor and securely manage all information that it receives regarding an Individual's COVID-19 vaccination status, including any additionally required boosters or doses and the status of all exemption and extension requests.
2. Akron General Medical Center, through Occupational Health, will utilize its occupational health/employee health record system to securely record and track the COVID-19

vaccination status and all approved exemption and extension requests of Employed Individuals.

3. Akron General Medical Center, through Human Resources and Protective Services, will utilize its applicant tracking/recordkeeping systems to securely record and track the COVID-19 vaccination status and all approved exemption and extension requests of Individuals who are not Employed Individuals.

## **Compliance**

Any Individual who fails to comply with this policy or who knowingly provides Akron General Medical Center with false information related to the COVID-19 vaccine requirement, including but not limited to their own vaccination status, will be subject to responsive action as appropriate and applicable under the circumstances and relevant to their role, including but not limited suspension of privileges, termination of employment, expulsion, removal from Akron General Medical Center premises or rescindment of an offer of employment with no Right of Review or Fair Hearing, or other right of appeal or due process rights under applicable policies or Medical Staff Bylaws.

## **Regulatory Requirement/References**

Centers for Disease Control and Prevention

Centers for Medicare & Medicaid Services

Occupational Safety and Health Administration

Federal Regulation, State and Local Laws, and FDA U.S. Food and Drug Administration

Religious Exemptions and Accommodations Policy

Corrective Action Policy

## **Oversight and Responsibility**

Human Resources, the Office of Professional Staff Affairs, the Medical Staff Office, the Title IX Coordinator, the Graduate Medical Education Department and/or the Law Department, as appropriate, in collaboration with Occupational Health, are responsible to review, revise, update and operationalize this policy to maintain compliance with regulatory or other requirements.

It is the responsibility of each hospital, institute, department and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

All institutes and services are responsible for adhering to the COVID-19 Vaccine Policy.

**Issuing Office:** Occupational Health, Human Resources

## **Appendices**

Appendix A REQUEST FOR MEDICAL EXTENSION OF TIME TO RECEIVE COVID-19 VACCINE

Appendix B REQUEST FOR MEDICAL EXEMPTION FROM COVID-19 VACCINE POLICY



Appendix C REQUEST FOR RELIGIOUS EXEMPTION AND ACCOMMODATION RELATED TO  
COVID-19 VACCINE POLICY

**APPENDIX A**  
**REQUEST FOR MEDICAL EXTENSION OF TIME TO RECEIVE COVID-19**  
**VACCINE**

To request an extension of time to receive the COVID-19 vaccine under Akron General Medical Center's COVID-19 Vaccine Policy, please fill out Section I of this form, have your healthcare provider complete Section II of this form and separate letter on the provider's letterhead, and then submit the completed form and letter to COVID19RequestMedical@ccf.org. **Non-employed Privileged Providers should email the form to [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org).** To qualify for an extension, you must verify that your vaccination has been temporarily delayed due to clinical precautions and considerations consistent with recommendations by the Centers for Disease Control and Prevention (CDC).

**Section I.** To be completed by the Akron General Medical Center employee, Non-employed Privileged Provider, or student requesting a medical extension of time to receive the COVID-19 vaccine:

I am a Akron General Medical Center:  Employee  Non-employed Privileged Provider  Student

**I attest that I am a patient of the provider completing this form below.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Akron General Medical  
Center ID

**Section II.** To be completed by a licensed healthcare provider:

If the above-named individual's vaccination for COVID-19 should be delayed due to clinical precautions and considerations consistent with CDC recommendations, please answer the following questions:

1. Please identify the applicable clinical precautions and considerations.
  
  
  
  
  
  
  
  
  
  
2. If possible, please provide a date on which the above-named individual may receive the COVID-19 vaccine consistent with CDC recommendations.



**APPENDIX B**  
**REQUEST FOR MEDICAL EXEMPTION FROM COVID-19 VACCINE POLICY**

To request an exemption from Akron General Medical Center's COVID-19 Vaccine Policy based on your allergy, medical condition, or disability, please fill out Section I of this form, have your healthcare provider complete Section II of this form and separate letter on the provider's letterhead, and then submit the completed form and letter to COVID19RequestMedical@ccf.org. **Non-employed Privileged Providers should email the form to [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org).** To qualify for a medical exemption, you must have a recognized clinical contraindication to receiving the COVID-19 vaccines.

**Section I.** To be completed by the Akron General Medical Center employee or Non-employed Privileged Provider or student requesting a medical exemption:

I am a Akron General Medical Center:  Employee  Non-employed Privileged Provider  Student

**I attest that I am a patient of the provider completing this form below.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Akron General Medical  
Center ID

**Section II.** To be completed by a licensed healthcare provider:

1. Please identify all authorized COVID-19 vaccines to which the individual named in Section I has a clinical contraindication.
  - Pfizer-BioNTech (COMIRNATY) (BNT162b2)
  - Moderna (mRNA-1273)
  - Johnson & Johnson / Janssen (JNJ-78436735)
2. Please indicate the recognized clinical reasons for the contraindication to the vaccines identified above.

**APPENDIX B**  
**REQUEST FOR MEDICAL EXEMPTION FROM COVID-19 VACCINE POLICY**

*Healthcare Provider Attestation*

I have determined that my patient named in Section I has a recognized clinical contraindication to all authorized COVID-19 vaccines as stated above. On that basis, I recommend that the individual be exempted from Akron General Medical Center's COVID-19 Vaccine Policy. In making this determination and recommendation, I am acting within my scope of practice under applicable state and local law.

Signature	Specialty	Date
Name	Credentials	
Address		
Phone		

**APPENDIX C**  
**REQUEST FOR RELIGIOUS EXEMPTION AND ACCOMMODATION**  
**RELATED TO COVID-19 VACCINE POLICY**

To request an exemption and accommodation related to the COVID-19 Vaccine Policy based on your sincerely held religious observance, practice, or belief (referred to below as an “exemption” and “accommodation” based on your “religious belief”), please fill out this form and submit it to [COVID19RequestReligious@ccf.org](mailto:COVID19RequestReligious@ccf.org). **Non-employed Privileged Providers should email the form to [credentialingservices@ccf.org](mailto:credentialingservices@ccf.org)** After reviewing your completed form, Akron General Medical Center may follow up with additional questions before determining whether you are entitled to an exemption and whether a reasonable accommodation will be provided to allow for the exemption. If you have any questions as you fill out this form, please contact [COVID19RequestReligious@ccf.org](mailto:COVID19RequestReligious@ccf.org).

1. Please identify whether you are a Akron General Medical Center
  - Employee
  - Applicant
  - Student
  - Non-employed Privileged Provider
2. Please describe the nature of your religious belief that conflicts with Akron General Medical Center’s COVID-19 Vaccine Policy.
3. Would complying with the COVID-19 Vaccine Policy substantially burden your religious exercise? If so, please explain how.
4. How long have you held the religious belief underlying this request?
5. As an adult, have you received any vaccines against any other diseases (such as the flu, shingles, or tetanus)? If so, to the best of your recollection, please indicate what vaccine you most recently received and when you received it.
6. Do you have a religious objection to the use of all vaccines? If not, please explain why your objection is limited to particular vaccines.
7. Have you previously requested an exemption or accommodation related to any other Akron General Medical Center requirement, policy or practice? If so, please indicate when and on what basis you made the previous request.

8. If Akron General Medical Center grants you an exemption from the COVID-19 Vaccine Policy, please describe the accommodation that you are requesting in lieu of compliance with the COVID-19 Vaccine Policy. Please identify all potential accommodations.
  
9. Please provide any additional information that you think may be helpful in reviewing your request.

By signing below, you declare that, to the best of your knowledge and ability, the information you have provided in this form is true and correct. Any intentional misrepresentation on this form will subject you to responsive action as appropriate under the circumstances and relevant to your role, including but not limited to removal, suspension (including suspension of privileges), expulsion, rescindment of an offer of employment, and corrective action up to and including termination.

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Print Name

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Signature

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Date

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Akron General Medical  
Center ID