

School of Pharmacy

Students Right to Complain

(ACPE Complaints Policy)

Introduction

The Accreditation Council for Pharmacy Education (ACPE) is the national agency for the accreditation of professional degree programs in pharmacy and providers of continuing pharmacy education. The School of Pharmacy, University of Pittsburgh and other schools and colleges of pharmacy are accredited by the ACPE based on their demonstrated adherence to a set of standards, guidelines and policies and procedures published by the ACPE. The current version of the ACPE's *Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree* may be found at the following URL: <http://www.acpe-accredit.org>.

ACPE is required by the Department of Education to demonstrate a link between ACPE's review of complaints and its evaluation of a program in the accreditation process. Therefore in order to demonstrate compliance with the Department of Education Criteria for Recognition, and with the prior review and advice of Department of Education personnel, ACPE requires pharmacy schools to provide adherence to ACPE's Standards. Students have a right to complain (Standard 15) if the School is not meeting the standards.

The Complaint Process

The student who wishes to file a complaint that the School has failed to meet one or more of the standards for accreditation may visit the ACPE Standards web site (<http://www.acpe-accredit.org/complaints/default.asp>) for guidance. Colleges and schools of pharmacy accredited by ACPE, including the University of Pittsburgh School of Pharmacy, have an obligation to respond to any written complaints by students lodged against the college or school of pharmacy, or the pharmacy program, that are related to the standards established, implemented and maintained at the School of Pharmacy.

The file of student complaints held in the office of the Assistant Dean of Students, will be made available to ACPE at on-site evaluations, or otherwise at ACPE's written request. The findings of this inspection, and the resulting implication(s) to the accreditation of the professional program, shall be noted in the Evaluation Team Report.

My signature below certifies that I have been informed of the School of Pharmacy's complaint policy. I understand that I have a right to submit a written complaint to the Executive Director of the Accrediting Council on Pharmacy Education (<http://www.acpe-accredit.org>) should I find that the School of Pharmacy had failed to meet one or more of the standards for accreditation.

Name (print)

Signature

____/____/____
Date

August 7, 2016

Permission to Release Selected Student Information

The University and the School of Pharmacy act in accordance with the Family Education Rights and Privacy Act or FERPA (also known as the Buckley Amendment). This is a federal law that protects the privacy of student educational records and prohibits release of a student's information to anyone outside the University without the permission of the student. However there are instances when release of a student's name, address and perhaps his/her picture is entirely appropriate and beneficial. For example, schools may publish the pictures and hometown addresses of graduating seniors in school newsletters; these may be used by alumni who employ pharmacists, other potential employers and professional societies. Pictures may be used to create a class composite or announce a student award or honor in a professional publication.

We can not release any information without your permission, even though we may feel that the request is legitimate and in your best interest. Through the form provided below, we are requesting your permission to release or publish your name, address, telephone number and pictures for legitimate purposes in school publications or to persons inside or outside the University at the discretion of the Dean.

Your information

Name:

Campus Address:

Campus telephone number:

Home Address:

Home telephone number:

Please check the appropriate box:

- Yes, I am willing to permit my picture and information listed above to be published
- No, I do not wish my picture and information listed above to be published.

I, _____ hereby agree to permit the above information to be duplicated and distributed to prospective employers, professional societies, my fellow students and/or to be published in school publications at the discretion of the Dean. Completion of this form and permission to release the information are completely voluntary and will not, in any way affect my relationship with the School or its faculty.

School of Pharmacy

Professional Code of Conduct

As a learner (herein defined as inclusive of all professional program students, graduate students, pharmacy residents and fellows) in the School of Pharmacy, I pledge to:

- Act with honesty and integrity in academic and professional activities; obey all University of Pittsburgh policies and guidelines, local, state, and federal laws, as well as policies and regulatory standards that may be in place at locations internal and external to the School;
- Help to foster a positive environment for learning. I will not interfere with or undermine other learners' efforts to learn;
- Respect the knowledge, skills and values of pharmacists, instructors, mentors and other health care professionals;
- Respect the autonomy and dignity of fellow learners, instructors, staff, other health care professionals and patients;
- Seek treatment for any personal impairment, including substance abuse, which could adversely impact patients, instructors, mentors, health care providers or other learners. I will work with health care providers, university personnel or other professionals to eliminate or minimize the risk to patient safety posed by any members of the health care team who fail to adequately manage their impairment;
- Promote the good of every patient in a caring, compassionate and confidential manner;
- Protect the confidentiality of all medical, personal, academic, financial or business information obtained during the course of educational activities in any academic or professional setting. This includes full compliance with all tenets of the Health Insurance Portability and Accountability Act (HIPAA), including the prohibition of viewing written or electronic protected health information of any individual (including family members), unless it is within the context of meeting educational activities and goals, providing patient care or when working on research projects, quality assurance projects or administrative activities approved by faculty or preceptors.
- Strive for professional competence.

My signature below certifies that I have read, understand and agree to abide by the School of Pharmacy's Professional Code of Conduct for Students. I understand that any violation of this Code of Conduct will result in actions that may include course failure, suspension or dismissal from the professional pharmacy program.

Name (Print)

Signature

____/____/____
Date

**UNIVERSITY OF PITTSBURGH
SCHOOL OF PHARMACY
SUBSTANCE ABUSE POLICY FOR STUDENT**

(Return this page to the Office of Experiential Learning – 904 Salk Hall; Attention: Anna Schmotzer)

The School of Pharmacy recognizes and supports the University of Pittsburgh Policy #06-02-01, Drug-Free Workplace/Drug-Free Schools and the Student Code of Conduct regarding use of illicit substances, controlled substances and alcohol. Due to the unique patient care responsibilities inherent in the pharmacy profession, coupled with Pennsylvania law mandating reporting of impaired health professionals, and the desire of the School to seek a favorable health and professional outcome for impaired students, the School of Pharmacy has developed the following policy to supplement the University policy and outline the specific steps to be taken in cases of suspected or actual student substance abuse.

This policy is based on the American Association of Colleges of Pharmacy Guidelines for the Development of Addiction and Related Disorders Policies for Colleges and Schools of Pharmacy and reflects PittPharmacy's recognition that Addiction and Related Disorders (AARDs; also known as substance use disorders), including alcoholism, are diseases that affect all of society. The School therefore accepts a responsibility to assist student pharmacists with AARDs toward recovery. The School strongly supports referral of student pharmacists with AARDs or suspected AARDs to Secundum Artem Reaching Pharmacists with Help (SARPH), the Pharmacist Peer Assistance Program recognized by the Pennsylvania State Board of Pharmacy. Such referral is required by law and designed to both provide treatment to affected individuals and to protect public safety which may be compromised by the actions of a student pharmacist with AARDs.

The goals of the policy are to:

1. Provide compassionate assistance to student pharmacists with AARDs
2. Provide assistance in a way that protects the rights of student pharmacists with AARDs to receive treatment in compliance with statutes and policies concerning confidentiality
3. Afford recovering student pharmacists who are not legally restricted, and are no longer impaired, the opportunity to continue their pharmacy education without stigma or penalty
4. Protect society from harm that student pharmacists with AARDs may cause

POLICY

1. The Assistant Dean of Students (ADS) and the Director of Experiential Learning (DEL) are designated as the individuals responsible for administering this policy within the School of Pharmacy.
2. Student pharmacists who suspect they have an AARD may contact the ADS or DEL to request help in seeking evaluation and/or treatment for the disorder. The ADS or DEL will arrange for the student to contact Secundum Artem Reaching Pharmacists with Help (SARPH) for evaluation and possible treatment. In all cases, the DEL will also be notified of the referral. All actions surrounding the referral and subsequent events will be kept confidential.
3. Student pharmacists, faculty, staff, or preceptors who suspect that a student pharmacist has an AARD have a professional obligation to report such suspicion to the ADS or DEL. The identity of individuals reporting others with a possible AARD will be held in confidence. Such report will cause a confidential investigation to be undertaken by the ADS/DEL. If warranted by the investigation, the student pharmacist will be referred to SARPH for evaluation and possible treatment. In all cases, the DEL will also be notified of the referral and the student will be removed from experiential learning activities until the evaluation has occurred and the DEL notified of the results. All actions surrounding the referral and subsequent events will be kept confidential.
4. Occurrences that may lead to reasonable suspicion of an AARD include, but are not limited to, witnessed diversion or use, a positive drug screen, a citation or arrest involving drugs or alcohol, or changes in behavior consistent with impairment. Drug screening is required by many affiliated institutions prior to the placement of student pharmacists in practice experiences. The school is responsible for facilitating the drug screening process on behalf of many practice sites, and thus would be aware of positive drug screen results. A positive drug screen may preclude placement of the student pharmacist at a practice site and would also be cause for requiring evaluation by SARPH.
5. Student pharmacists referred to SARPH will undergo a substance use disorder evaluation at a site selected by SARPH. An evaluation deemed positive for a substance use disorder may result in SARPH placing the student pharmacist under a treatment program contract. The duration of enrollment in the SARPH program will be for the duration of the student's enrollment in the Doctor of Pharmacy program or for up to three years as determined by SARPH. When applicable, students progressing into the profession after graduation, but who have not completed a contracted time period in the SARPH program, will continue to be enrolled in the program, under the contract, until they have successfully completed the minimum monitoring requirement.

6. Student pharmacists with a suspected or documented AARD may not be placed in experiential practice sites until evaluated and approved by SARPH to do so.
7. Student pharmacists referred to SARPH will sign a release allowing appropriate designated individuals at the school to send and receive confidential information regarding the student pharmacist's treatment and progress.
8. PittPharmacy will support the continued enrollment of a student pharmacist with an AARD provided he or she agrees to undergo evaluation and, when necessary, treatment for a substance use disorder as coordinated through SARPH. Student pharmacists placed into a treatment program for a substance use disorder may obtain a leave-of-absence from the school for an unspecified period of time, with guaranteed reentry into the school (assuming academic eligibility is intact at the end of the most recently completed semester and that all administrative obligations due to the school have been met) at a level appropriate to his/her previous academic progress.
9. Refusal to contact SARPH for evaluation, refusal to undergo a SARPH-recommended substance use disorder evaluation, or refusal to cooperate with the terms of the SARPH-recommended treatment and monitoring program will necessitate reporting of the student pharmacist to the Pennsylvania State Board of Pharmacy, and will render the student ineligible to fulfill the requirements for graduation from the Doctor of Pharmacy program.
10. The School of Pharmacy reserves the right to dismiss a student who fails to comply with either the terms of the Substance Abuse Policy or a recommendation or contract with SARPH. In such matters, the decision for dismissal will be referred to the Dean by the Assistant Dean of Students.
11. All student pharmacists are encouraged to carry medical insurance with coverage for AARDs. All costs related to external evaluation and treatment, including urine and/or blood drug/alcohol testing, of an AARD are the responsibility of the student pharmacist.
12. All records related to actions involving a student pharmacist with a suspected or documented AARD will be securely collected, maintained, and disposed after graduation by the ADS. Access to these records will be restricted to only those individuals authorized to review them. All records may be released to the Dean or other authorized administrator if noncompliance with contractual terms necessitates termination of advocacy for the student by SARPH.
13. No person functioning in an advocacy role for the recovery of student pharmacists with AARDs can be held liable for damages resulting from actions or recommendations made in the interest of the student pharmacist if such person acts without malice and in the reasonable belief that such action or recommendation is warranted by the facts known to him after reasonable effort is made to obtain the facts on which such action is taken or recommendation is made. This includes persons who in good faith and without malice make a report of suspicion of a student pharmacist with suspected AARD to a school official or SARPH.

Note: Students who for any reason are unable to complete all experiential and didactic degree requirements will be required to leave the Doctor of Pharmacy program.

My signature on this document signifies that I have read and retained a full copy of the substance abuse policy and, understand, and agree to abide by the tenets of the UNIVERSITY OF PITTSBURGH SCHOOL OF PHARMACY SUBSTANCE ABUSE POLICY FOR STUDENTS.

Name (Print)	Signature	Date
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Class of 19/20 _____