

1.4.1.4 Pharmacy Staff Onboarding

(a) Policy

California Correctional Health Care Services (CCHCS) shall provide all newly appointed civil service pharmacy staff including Pharmacy Services Manager, Pharmacist II, Pharmacist I, and pharmacy technicians who provide clinical and/or support services in California Department of Corrections and Rehabilitation (CDCR) institutions with relevant and job-specific orientation and training (New Pharmacy Staff Onboarding) during the probationary period. This policy shall not be construed as altering existing laws and regulations governing civil service probationary periods or the provisions of any applicable bargaining unit contract.

(b) Purpose

To establish a comprehensive and standardized onboarding process for new civil service pharmacy staff that:

- (1) Promotes consistency and standardization among all institutions statewide regarding minimum onboarding expectations for new pharmacy staff.
- (2) Supports newly appointed pharmacy staff with relevant orientation and training by experienced subject matter experts during the probationary period.
- (3) Facilitates adherence to applicable scopes of practice, standards of practice, applicable clinical guidelines, and CDCR/CCHCS standards.
- (4) Promotes job satisfaction while enhancing pharmacy staff effectiveness and efficiency.

(c) Responsibility

- (1) The Statewide Chief of Pharmacy Services is responsible for:
 - (A) Statewide planning, implementation, and evaluation of this policy and procedure.
 - (B) Supervising the completion of the onboarding requirements for the Central Fill Pharmacy (CFP) Pharmacy Services Managers.
- (2) The Chief Executive Officer (CEO) and the institution Pharmacist-in-Charge (PIC) are responsible for the local implementation of this policy and procedure.
- (3) The CFP Pharmacy Services Managers and Pharmacist IIs are responsible for supervising the completion of the onboarding requirements for all other CFP staff.
- (4) Pharmacy Services Managers with regional responsibilities are responsible for the implementation of this policy and procedure at the subset of institutions within an assigned region.
- (5) New civil service pharmacy staff are responsible for completing all standardized onboarding requirements including working with their supervisor to ensure their understanding in meeting the requirements.

(d) Procedure

(1) Orientation and On-the-Job Support during the Probationary Period

(A) The direct supervisor and appropriate subject matter experts shall use the [Pharmacy Staff Onboarding and Competency Checklist](#), located on the Pharmacy Services Resources Lifeline page under the Forms tab to ensure each newly hired employee completes, at a minimum, 12 weeks of formal orientation and training (hereinafter referred to as “onboarding”).

1. The pharmacy staff onboarding shall include, at a minimum, the following:
 - a. Initial introduction to the institution or work location including:
 - 1) Human Resources and Information Technology departments.
 - 2) Overview of the institution’s or work location’s missions and physical layout.
 - 3) Overview of the new employee’s work space.
 - 4) Issuance of the new employee’s identification card and other essential work items.
 - b. Institution-based or work-location-based onboarding covering the designated topics specified in the Pharmacy Staff Onboarding and Competency Checklist.
 - c. CDCR Non-Custody New Employee Orientation, as applicable to the employee’s assigned work location, to be completed by all employees within the six-month probationary period. This training is composed of classroom and computer based modules. The classroom portion is provided by the institution’s In-Service Training Office.
 - d. Electronic Health Record System (EHRS) training and competency validation including completion of CCHCS Learning Management System (LMS) EHRS Modules consistent with the employee’s duty statement.

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- e. Orientation and mentoring by pharmacy staff performing specific tasks identified in the Pharmacy Staff Onboarding and Competency Checklist.
2. Staff beginning independent work shall have access to pharmacy staff familiar with their job duties for questions and assistance.
3. Within 12 weeks after the new staff hire date, the direct supervisor shall ensure completion of the Pharmacy Staff Onboarding and Competency Checklist and shall review, sign, and maintain the completed forms in the employee's training file (proof of practice file). If the new pharmacy staff member is delayed in completing the Pharmacy Staff Onboarding and Competency Checklist, the direct supervisor may provide additional time on a case-by-case basis to complete the onboarding process and the checklists as soon as possible after the 12th week.
4. Any job-required and job-related training that is not listed in the Pharmacy Onboarding and Competency Checklist nor recorded in the CCHCS LMS shall be recorded on a CDCR 844, Training Participation Sign-In Sheet and be filed in the employee's supervisory file.

(2) Probationary and Professional Performance Evaluations

- (A) For staff who have a one-year probationary period: In accordance with civil service laws and regulations, the direct supervisor shall complete, at minimum, an STD 636, Report of Performance for Probationary Employee, at 4 months, 8 months, and 12 months after hire to assess professional performance and clinical competency.
 1. The 12-month STD 636 may be completed as soon as 11 months but no later than 12 months after the hire date.
 2. Additional STD 636s may be completed as needed to assess professional performance and clinical competency.
- (B) For staff who have a six-month probationary period: In accordance with civil service laws and regulations, the direct supervisor shall complete, at minimum, an STD 636 at 2 months, 4 months, and 6 months after hire to assess professional performance and clinical competency.
 1. The six-month STD 636 may be completed as soon as 5 months but no later than 6 months after the hire date.
 2. Additional STD 636s may be completed as needed to assess professional performance and clinical competency.
- (C) Two to four weeks prior to the end of the probationary period, the direct supervisor shall review the probationary evaluations and other clinical and performance observations in order to make a recommendation regarding permanent civil service employment.
- (D) After the probationary period ends, the direct supervisor shall complete, at a minimum, an annual evaluation of the employee's professional performance and clinical competency. In addition, on an annual basis, the direct supervisor shall review the pharmacy staff member's duty statement with the employee. This shall be acknowledged by signature of the employee on the duty statement which shall be retained in the employee's supervisory file.

(3) Determination of Permanent Civil Service Status

- (A) After completion of the second STD 636, but no later than one month prior to the end of probation, the direct supervisor shall review the findings and recommendations contained in the probationary evaluations and other documented professional observations in order to make a recommendation about whether to grant permanent civil service status.
- (B) If there are concerns regarding performance of the probationary employee, the direct supervisor shall immediately notify their supervisor and the Health Care Employee Relations Officer as soon as issues are identified.
- (C) A recommendation to reject the employee during the probationary period may occur any time during the probationary period if the previous probationary reports (STD 636), professional practice evaluations, competency validations, or other documented performance observations show significant concerns regarding the employee's performance or conduct.

(4) Re-orientation of Pharmacy Staff (Re-entry Training)

- (A) For staff who are out (e.g., long term sick) but did not separate from service with CDCR:
 1. If staff have been out for six months or less, the following is required:

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- a. There must be documentation of previous completion of the Pharmacy Staff Onboarding and Competency Checklist.
 - b. Staff must review all classes, updates, and mandatory training missed.
 - c. Skills competency validations shall be completed for the areas in which staff will be working.
2. If staff have been out for six months to one year, the following is required:
- a. There must be documentation of previous completion of the Pharmacy Staff Onboarding and Competency Checklist.
 - b. Staff must review all classes, updates, and mandatory trainings missed including CDCR Non-Custody Annual Block Training and In-Service Training.
 - c. Skills competency validations shall be completed for the areas in which staff will be working.
3. Staff who are out more than one year shall complete the onboarding process in its entirety upon return.
- (B) Staff who separate from CDCR, regardless of the length of time, shall be required to complete the onboarding process in its entirety.
- (5) Transferring Between Institutions Without a Break in Service or Performing Duties at More Than One Institution**
- (A) The direct supervisor is responsible to ensure that all pharmacy staff working at that institution are competent to perform all the duties of the position for which the pharmacy employee has been hired.
- (B) The direct supervisor may develop an abbreviated Pharmacy Staff Onboarding and Competency Checklist, for the pharmacy staff as necessary that takes into account the onboarding, clinical competency, and professional performance conducted and training provided to that pharmacy staff at another CDCR location.
- (C) Proof of completion of the onboarding process, clinical competencies, and professional performance shall be maintained at each CDCR location. This does not absolve the direct supervisor at each CDCR location from ensuring that annual performance evaluations are conducted or that pharmacy staff are competent to perform the duties required in their position.

References

- California Code of Regulation, Title 15, Division 3, Chapter 1, Subchapter 5, Article 4, Section 3435, In-Service Training
- California Department of Corrections and Rehabilitation, Department Operations Manual, Chapter 3, Article 18, General Training
- Health Care Department Operations Manual, Chapter 5, Article 9, Section 5.9.1, General Training Requirements

Revision History

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