



## **UCF COM/HCA GME Consortium Policy regarding Resident Performance, Renewal, Promotion, and Discipline (IV.C)**

Purpose/Intent: The ACGME requires that sponsoring institutions have policies addressing resident performance, promotion/advancement, and conditions of reappointment, including non-renewal and dismissal (IV.C)

Policy Summary: This policy details conditions for performance, renewal and promotion, methods of handling concerns about performance, and formal disciplinary steps including a remediation/performance plan, suspension, non-renewal, and termination. A separate policy addresses the grievance process and appeals. Each residency program has a Clinical Competency Committee involved with assessing progress and advising the program director on performance, advancement, and formal disciplinary actions.

Procedures: See each section for details.

### **1. Performance and Advancement**

Each program must clearly define and establish the standards of academic performance, evaluation criteria, and criteria for advancement based on the principles of graduated responsibility and achievement of milestones. A Residency Clinical Competency Committee (CCC) that includes at least three key faculty members and program leadership and is appointed by the program director will meet regularly (at least twice a year) to evaluate each resident's progress in attaining the advancement criteria and achieving milestones as defined by the ACGME and program. If the CCC membership and quorum is greater than three members, the program may select three members to meet immediately when urgent action regarding disciplinary or professionalism concerns arise.

The program director and supervising faculty must provide and document timely feedback on an ongoing basis for residents including formative "on-the-spot" and summative feedback. This must include both positive feedback as well as feedback on performance or conduct concerns as they occur. Documentation must appropriately and accurately reflect the feedback provided.

### **2. Concerns and Discipline**

Most concerns should be managed initially with feedback including informal verbal counseling by the program director and supervising faculty. Failure of the resident to appropriately remediate after such intervention, or concerns that should not be addressed with informal verbal counseling alone should be managed with additional intervention (written Notice of Concern, written Remediation/Performance plan, Non-Promotion, Suspension, Dismissal or Non-renewal). Program directors are encouraged to use the Notice of Concern to resolve minor instances of poor performance or misconduct that do not impact the health or safety of patients or others. Actions that may adversely impact health or safety of patients or others or significant concern are addressed by written Remediation/Performance Plan, Suspension and/or Immediate Dismissal.

Significant concerns and disciplinary actions must be reviewed and evaluated by each program's Clinical Competency Committee (CCC). The CCC should take into account the nature and/or severity of the deficiency, actions, or conduct, the resident's overall performance, including previous evaluations,

results of any informal counseling related to performance, etc. Consultation with the DIO or Associate DIO is required prior to a decision of a Remediation/Performance plan, Non-promotion, Suspension, Dismissal, or Non-renewal.

### 3. Notice of Concern

A Notice of Concern may be issued by the appropriate program director when (1) a resident's unsatisfactory performance or conduct is too serious to be dealt with by informal verbal counseling or (2) a resident's unsatisfactory performance or conduct continues and does not improve in response to verbal counseling. A notice of concern must be in writing, provide an explanation of the unsatisfactory performance or conduct in competency-based language with the expectation of improvement and time frame outlined. The program director or designee will then review the notice of concern with the resident, and both must sign the notice, with a fully signed copy placed in the resident's file and forwarded to GME office. During or at the end of the notice of concern period the resident will meet with the program director or designee to determine whether the unsatisfactory performance or conduct has been corrected or whether further academic disciplinary actions will be taken as described below (Remediation/Performance Plan, Non-promotion, Non-renewal, or Immediate Dismissal). The notice of concern need not precede formal disciplinary actions. For the purposes of this policy and for responses to any inquiries, a notice of concern does not constitute a disciplinary action.

### 4. Formal Disciplinary Actions

Formal disciplinary action may be taken for any appropriate reason, including but not limited to any of the following examples:

- a) Failure to satisfy the academic or clinical requirements or standards of the training program expected for the level of training;
- b) Any inadequacy which adversely bears on the individual's performance, such as attitude, conduct, interpersonal skills, communication skills.
- c) Violations of professional responsibility, policies and procedures, state or federal law or any other applicable rules and regulations.

### 5. Remediation/Performance plan

If a resident's academic or clinical performance, attitude, behavior, or interpersonal or communication skills puts him/her in jeopardy of not successfully completing the requirements of the training program or other deficiencies exist which have not or cannot be addressed by informal verbal counseling, the resident will be placed on a Remediation/Performance plan. Remediation should be used instead of a Notice of Concern when the underlying deficiency requires a substantial change in oversight. Remediation may include, but is not limited to, special requirements or alterations in scheduling a resident's responsibilities, a reduction or limitation in clinical responsibilities or enhanced supervision. These temporary modifications of the resident's participation in or responsibilities within the training program are designed to facilitate the accomplishment of the program requirements. The resident will be informed in writing by the CCC and program director that he/she is being placed on a remediation/performance plan. Written notification should include an explanation of the deficiencies, performance or conduct in competency-based language giving rise to the remediation/performance plan, remediation requirements (what the resident must accomplish in order to come off remediation/performance plan), the anticipated duration of the plan (see below), method of ongoing evaluation, and a faculty advisor/supervisor. The length and conditions of the remediation/performance plan must be determined by the program director and CCC, and the remediation letter approved by the assistant DIO/GME director, and either the DIO or associate DIO, with fully signed copy presented to

GME office. Remediation/performance plans must be time-limited and are usually no longer than 3 months in duration. All rotations during the plan should be within major participating sites. The site directors and core faculty in the participating sites where the resident rotates during this time period will be notified of the remediation/performance plan and expectations. Failure to meet the terms of the remediation/performance plan may result in dismissal from the training program or non-renewal of contract. If a resident is on a remediation/performance plan within 4 months of the end of the contract year, the fact that the resident is on a remediation/performance plan will serve as notice that the contract may not be renewed or he/she may be dismissed from the program if the plan is not successful. Residents may appeal being placed on a remediation/performance plan using the formal grievance procedure (medical knowledge remediation is not subject to grievance).

#### 6. Promotion and Non-promotion of a Resident

Each individual residency program must have criteria for promotion of a resident to the next level of training. The Program Director and CCC together make a decision to promote the resident. If a resident has not sufficiently met the program standards in his or her current training level, the CCC and Program Director may make a decision not to promote that resident to the next level of training in lieu of dismissal from the program. Such decisions and the disciplinary letter must be reviewed by the assistant DIO/GME director, and the DIO or associate DIO, with fully signed copy presented to GME office. The resident should be notified of this decision as soon as circumstances reasonably allow, and at least 4 months prior to the end of the contract year. If a resident is on a remediation/performance plan, and the end of the plan is within 4 months of the end of the contract year, the fact that the resident is remediating will serve as notice that the resident may not be promoted. Exceptions to this timeframe would include performance issues that primarily arise within the final 4 months of the contract year. The notice of non-promotion should outline the corrective steps to be accomplished prior to the resident's advancement to the next level and provide an estimation of the amount of time anticipated for the completion of corrective steps. As determined by the applicable specialty/subspecialty board, the total training time in the program may be lengthened by the additional time required to advance to the next level. The resident will be paid at his or her present level until he/she is advanced to the next level. If the resident does not successfully complete the corrective plan, the process listed for dismissal will apply. The resident may appeal his/her non-promotion using the grievance procedure.

#### Administrative Status and Suspension

In urgent circumstances, a resident may be suspended from all or part of assigned responsibilities by his/her department chair (if applicable), program director, the DIO or Associate DIO, the assistant DIO/GME director, or the Hospital Chief Medical Officer for cause, including but not limited to failure to meet general or specific academic standards, failure to provide patient care in a manner consistent with expectations, potential impairment of the resident, potential misconduct by the resident, or failure to work in a collegial manner with other providers. A resident may be placed on administrative status first pending an investigation of an allegation of any of the above concerns and then a decision may be made as to whether to proceed to suspension, remediation/performance plan, or dismissal, as described in other policy sections. A hospital site director, chief medical officer or core faculty member may place a resident on administrative status for an event occurring at that site and then must inform the program director and GME office immediately. A resident must be notified verbally and in writing as to the reason for the particular decision. The program shall maintain documentation that the resident has received written notification and a copy of the notification must be sent to the GME Office. The hospital GME office, the DIO and Consortium GME office should be notified prior to suspension or as soon as possible thereafter. Unless otherwise directed by the program director, a resident suspended from

clinical services may not participate in other program activities. If allowed by program director, residents on administrative status may participate in educational activities, but not in clinical services. Suspension and/or administrative status must be time-limited but can be extended as appropriate. Suspension and/or administrative status may be coupled with or followed by other academic actions such as a Remediation/Performance plan, or conclude in reinstatement. Suspension and/or administrative status are generally with pay. Moonlighting is not allowed while a resident is suspended or on administrative status. Residents may appeal being placed on suspension using the grievance procedure.

#### Non-Renewal of Contract/Appointment

While residents are generally granted a renewal of contract annually until they have achieved board eligibility, the CCC and program director may determine that continuation in the program is not warranted because of deficiencies in academic progress or for other reasons. A prior Remediation/Performance plan or suspension is not required. A decision regarding reappointment must be reached by the program director no later than March 1 (unless the resident is on suspension or a remediation/performance plan) of the year of the current appointment for July 1-June 30 contract year, or no later than 4 months prior to end of the current appointment if on an off-cycle contract. The notice of non-renewal of contract must be approved by the assistant DIO/GME director, the DIO or associate DIO with signed copy forwarded to GME office. The notification will be made in writing to the resident with a copy to the official CGME file. If the primary reason for the non-renewal occurs within the four months prior to the end of the contract, the program must provide the resident with as much written notice of the intent not to renew as the circumstances will reasonably allow. The resident may be offered the opportunity to conclude the remainder of the academic year or to resign from the program. For those who continue for the remainder of the contract year, full credit for the year may be given to the resident at the discretion of the program director and guidelines of the individual board. If deficiencies in professional competence that may endanger patients arise during continued training under a non-renewal status, the resident may be terminated or suspended immediately after consultation with the assistant DIO/GME director, and the DIO or associate DIO. A decision of non-renewal of appointment may be appealed using the grievance procedure.

#### Dismissal/Termination

A resident may be dismissed from a program because of failure to correct deficiencies; suspension or revocation of the resident's license or permit; conduct constituting criminal activity; gross and serious violation of expected standards of patient care; failure to abide by the behavioral standards or the applicable regulations of the UCF COM/HCA GME Consortium and clinical facilities to which the resident may rotate; or gross and serious failure to work in a collegial manner with other providers. A dismissal decision must involve the CCC, the program director, the departmental chair (if applicable), the assistant DIO/GME director, and the DIO or associate DIO. Dismissal may, depending upon the situation, be immediate or follow a period of suspension or remediation. Insofar as is possible, a resident should be notified in person and must be notified in writing about the dismissal decision. This notification must include the reason for the dismissal decision, the date of the dismissal, and method for appeal. Credit for training may be given in the event of any satisfactory performance prior to dismissal, per the guidelines of the individual American Board of Medical Specialties (ABMS) certification board. Residents may appeal being dismissed using the grievance procedure.