

UCF/HCA Florida Healthcare GME Consortium Physician Learner Performance, Renewal, Promotion and Discipline Policy (IV.D)

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

Policy Summary: This policy details conditions for performance, renewal and promotion, methods of handling concerns about performance; non-reportable actions such as feedback, counselling, individual learning plans, written coaching plans, notes to file and letters of concern; and reportable actions including a remediation, probation, suspension, non-renewal, and termination. A separate policy addresses the grievance process and appeals. Each program has a Clinical Competency Committee involved with assessing progress and advising the program director on performance, advancement, and formal actions.

Addendum 1 summarizes the levels of actions covered under this policy.

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 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 minimum twice a year) to evaluate each physician learner'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 (3) members, the program may select three (3) members to meet immediately when urgent action regarding disciplinary, patient safety, or professionalism concerns arise. All program actions provided in writing to the physician learners should be kept in the physician learner's residency management system profile and available to those with access (currently New Innovations).

2. Non-reportable Actions by the Program

- A. Most concerns should be managed initially with feedback including informal verbal feedback, written feedback, mid- and end-of-rotation evaluations, semiannual

CCC reports, and milestone assignment by the CCC. Failure of the physician learner to appropriately remediate after such intervention, or concerns that should not be addressed with informal verbal counseling alone should be managed with additional interventions described in this policy.

- B. Verbal counseling involves a formal meeting with the program leadership or a mentor. Documentation of these meetings must be done by the physician learner, typically in the form of an email to the program director or mentor. Just-in-time verbal feedback is an expected, ongoing part of training and would not raise to the level of verbal counselling, unless a formal meeting were called to deliver the feedback.
- C. Individualized Learning Plans (ILPs) are a learner-centered tool that customizes learning to the physician learner and may include learning objectives, resources, a plan for improvement, and a timeline. It should be acknowledged by the physician learner. ILPs are typically created by the learner with the guidance of the program director and/or a mentor. See Addendum 2 for a templated ILP letter from the program and the CCC to the learner, and Addendum 3 for a templated ILP Action Plan that the physician learner can complete with their mentor. ILPs will typically focus on educational milestones. ILPs are not appealable through the grievance process.
- D. A Written Coaching Plan is typically focused on professionalism/behavioral milestones and performance and should be prepared by the program director with guidance from the CCC. These should be acknowledged by the physician learner. Written coaching plans are not appealable through the grievance process.
- E. Notes to File are notes to oneself or to the program about a concern or issue that was addressed, usually informally, with the physician learner. It can also be used for formal actions. These are typically not given to the physician learner, but rather serve as documentation and a reminder to the faculty who addressed an issue.
- F. Letters of Concern document addressing an issue or concern with a physician learner and is given to both the physician learner and to the program leadership. Letters of Concern are not appealable through the grievance process.

Moonlighting may be limited during any non-reportable actions at the discretion of the program director, or Clinical Competency Committee, or Designated Institutional Official (DIO), or Division Vice President for GME, or Associate Dean for GME.

Actions that may adversely impact health or safety of patients or others or pose significant concern are addressed by written Remediation, Suspension, Probation and/or Immediate Dismissal. Significant concerns and disciplinary actions should be reviewed and evaluated by

each program's CCC. The CCC should take into account the nature and/or severity of the deficiency, actions, or conduct, the physician learner's overall performance, including previous evaluations, results of any previous non-reportable or reportable actions, etc. **Review of the remediation plan by the site Administrative Director of GME (ADME) or division Assistant Vice President of GME (AVP) is suggested prior to a** consultation by the program director with the Office of the DIO and UCF Human Resources (HR), which is required prior to issuing a written notification of Remediation, Probation, Non-promotion, Dismissal, or Non-renewal. Use of template notices with recommended wording is best practice; completed notices should be placed in the physician learner's official GME file.

3. **Reportable Actions by the Program, University of Central Florida College of Medicine Human Resources (HR), the Office of the Designated Institutional Official (DIO), and/or Associate Dean for GME.**

If a physician learner'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 Program Intervention(s), the physician learner should be placed on a formal Remediation or Probation Plan.

Remediation or Probation may include, but are not limited to, special requirements or alterations in scheduling a physician learner's responsibilities or on-call time, a reduction or limitation in clinical responsibilities, or enhanced supervision. This could include additional rotations, repeating rotation or increases or decreases in on-call time during rotations. These temporary modifications of the physician learner's participation in, or responsibilities within the training program, are designed to facilitate the accomplishment of the program requirements.

- A. **Remediation** plans are focused written plans that typically are three (3) months in length and include actionable improvement items agreed upon by the program director as recommended by the CCC (when time permits), and provide regular documented feedback (outlined in the remediation plan) to the physician learner. The physician learner will be informed in writing by the program director they are being placed on a remediation plan with copy in the physician learner's official GME file. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email).

Remediation may be appealed to Step 1 of the formal grievance procedure. Appeals cannot be made if the physician learner has refused to acknowledge the remediation letter. The program director and CCC may reevaluate the plan after the specified duration and may choose to extend the remediation plan by 30 or 60 days maximum, and such extensions cannot be appealed in accordance with the grievance policy.

Failure to meet the terms of the remediation plan may result in probation, non-promotion, non-renewal of contract, or dismissal from the program. Note that episodes of probation may be subject to reporting to outside entities. Moonlighting is not allowed while a

physician learner is on remediation.

- B. **Probation** plans are appropriate if a physician learner is not improving in accordance with their formal remediation plan or may be put in place for more serious concerns without prior actions being required. Probation typically includes a 3- to 6-month written plan with actionable improvement items agreed upon by the program director as recommended by the CCC (when time permits) and outline a plan of regular documented feedback to physician learner. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email). If the physician learner does not meet the requirements of the probation plan, it may result in non-promotion, non-renewal, or termination. Probation can be appealed through Step 2 of the formal grievance procedure. Appeals cannot be made if the physician learner has refused to acknowledge the probation letter. Note episodes of probation may be subject to reporting to outside entities. Moonlighting is not allowed while a physician learner is on probation.
- C. **Final Warning** may be issued in the last six (6) months of the program if the physician learner exhibits gross misconduct or similar concerns, and failure to abide by the warning may result in termination. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email). Final warnings may be appealed through Step 2 of grievance process. Appeals cannot be made if the physician learner has refused to acknowledge the final warning letter. Moonlighting is not allowed while a physician learner is under a final warning.

4. Promotion or Non-promotion of a Physician Learner

Each individual residency/fellowship program has defined criteria for promotion of a resident physician to the next level of training. The program director and CCC together make a decision to promote the physician learner. If a physician learner has not sufficiently met the program standards in his or her current training level, the CCC and program director may decide not to promote the physician learner to the next level of training in lieu of dismissal from the program. The physician learner will be notified in writing of this decision with a copy placed in physician learner's official GME file. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email). The notice of non-promotion will outline the corrective steps to be accomplished prior to the physician learner'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 physician learner will be paid at his or her present level until he/she is advanced to the next level. If the physician learner does not successfully complete the corrective steps, they may be terminated from the program. Non-promotion can be appealed through grievance procedure Step 2. Appeals cannot be made if the physician learner refused to acknowledge the non-promotion letter. Moonlighting is not allowed when a physician learner is not being promoted within the usual 12-month timeframe.

5. Administrative Leave or Suspension

In urgent circumstances, a physician learner may be suspended from all assigned responsibilities by their department leadership, the DIO, Division GME leadership, or hospital leadership. Causes for suspension includes, but are not limited to, failure to meet general or specific academic standards, failure to provide patient care in a manner consistent with expectations, potential or concern for impairment of the physician learner, potential misconduct by the physician learner, or failure to work in a collegial manner with other providers.

A physician learner may only be placed on administrative leave by UCF HR 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, probation, or dismissal, as described in other policy sections. Pay status during suspension or being placed on administrative leave is determined according to reason for the disciplinary action, and pay status will be defined by UCF HR. The physician learner must be notified in writing as to the reason for the administrative leave or suspension within 24 hours, and a copy of the letter will be sent to UCF HR and retained in the physician learner's official GME file. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email).

A physician learner suspended from clinical services may not participate in other program activities. Suspension and/or administrative leave may be coupled with or followed by other academic actions such as a remediation, probation, termination, or conclude in reinstatement. Moonlighting is not allowed while a physician learner is suspended or on administrative leave. Physician learners may appeal suspensions exceeding 30 days using the grievance procedure through Step 2. Appeals cannot be made if the physician learner refused to acknowledge the administrative leave or suspension letter.

Referrals to the Professional Resources Network (PRN) Impaired Physicians program are not subject to appeal or grievance process.

6. Non-Renewal of Contract or Non-Renewal of Appointment

While physician learners 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 due to deficiencies in academic progress or for other reasons including patient safety or professionalism concerns. A prior Remediation Plan, probation, or suspension is not required. A decision regarding reappointment should be reached by the program director and CCC in a timely manner in order to provide timely notice to the physician learner as circumstances allow. The notice should be in writing using language approved by

UCF GME and HR and a copy placed in physician learner's official GME file.

The physician learner 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 physician learner at the discretion of the program director with input from the CCC and the guidelines of the individual board. If deficiencies in professional competence that may endanger patients arise during continued training under a non-renewal status, the physician learner may be terminated or suspended immediately after consultation with the GME leadership and UCF HR. Physician learners may resign from the program and their employment prior to the effective non-renewal date. A decision of non-renewal of appointment may be reportable to outside agencies and may be appealed using the grievance procedure through Step 2.

7. Dismissal or Termination

A physician learner may be dismissed from a program for reasons including (but not limited to): failure to correct deficiencies or progress as expected; suspension or revocation of the physician learner's license or permit; conduct constituting criminal activity; gross and serious violation of expected standards of patient care and safety; falsification of records; failure to abide by the behavioral standards or the applicable policies and regulations of UCF COM/HCA Healthcare GME Consortium and clinical facilities to which the physician learner may rotate; failure to complete or comply with PRN recommendations and follow-up; gross and serious failure to work in a collegial manner with other providers; and unapproved absences.

A dismissal decision must involve the CCC, the program director, GME leadership, and UCF GME and HR. Dismissal may, depending upon the situation, be immediate or follow a period of suspension or remediation/probation. Insofar as is possible, a physician learner should be notified in person and must be notified in writing about the dismissal decision. This notification should be reviewed by UCF GME and HR and include the reason for the dismissal decision, the date of the dismissal, and method for appeal. If the written notice cannot be given in person, it will be mailed to the home address on file. The physician learner must acknowledge receipt of the letter by signing a copy (or, if unable to, by acknowledging receipt via email). The physician learner 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. Physician learners may resign from the program and their employment prior to the effective termination date. Physician learners may appeal being dismissed through all steps of grievance procedure. Appeals cannot be made if the physician learner refused to acknowledge the dismissal or termination letter. Termination is reportable to outside agencies.

Addendum 1

Physician Learner Performance

Types of Concerns / Remediation / Discipline

- Non-Reportable Actions (Program Level)
 - Written and Verbal Feedback
 - Mid- and End-of-Rotation Evaluations
 - Semiannual CCC Reports
 - Milestones
 - Verbal Counselling (formal meeting with the program leadership or mentor)
 - Individualized Learning Plan
 - Written Coaching Plan
 - Note to File
 - Letter of Concern
- Reportable Actions (Any of these must go through the Office of the DIO and UCF HR)
 - Remediation
 - Probation
 - Administrative Leave or Suspension
 - Dismissal or Termination

Addendum 2 – Templated ILP Letter

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Addendum 3 – ILP Template

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Addendum 4 – Remediation Template

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Addendum 5 – Probation Template

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