GME Standardized Process for Academic and Professional Deficiencies

Background

With the emphasis by the ACGME on competency-based education, it is acknowledged that some resident physicians and fellows may take longer than others to achieve some or all of their educational milestones and a rare few may never be ready for unsupervised practice. As they progress through their training, resident physicians and fellows deserve a consistent and standardized process whereby they are notified of Milestone or other competency deficiencies, the prescribed plan and timeline for expected improvement, and the consequences if they fail to improve.

Improvement may be required of resident physicians and fellows for any Milestone within the six ACGME Core Competencies of Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-Based Learning and Improvement and Systems-Based Practice. Such deficiencies may include but are not limited to poor performance on in-training exams, subpar scholarly activity performance, lack of academic progression as noted on evaluations, patient complaints, incomplete medical records, difficulty working in inter-professional teams, or integrity issues.

Standardized Process

When conventional feedback and coaching result in insufficient progress, the Program Director should use the following actions as formal notifications to a resident physician or fellow of a deficiency or lack of progress and the need for improvement. The action chosen by the Program Director will depend on the level of deficiency and urgency for action.

**Letter of Concern** – Is issued in writing by the Program Director to a resident physician or fellow as a formal notification that a deficiency requires action and improvement. Letters of Concern should describe in detail the nature of the deficiency (including the relevant Milestones or competencies), the necessary actions required of the resident physician or fellow and the expected timeframe for completion of the necessary actions. The Letter of Concern should include a notification that failure to achieve sustained improvement may lead to additional actions. Both the Program Director and the resident physician or fellow should sign the Letter of Concern. Refusal of the resident physician or fellow to sign should be noted by the Program Director. A Letter of Concern becomes part of the resident or fellow’s permanent file though it does not constitute a disciplinary action, but may be disclosed to third parties upon appropriate request. Upon resolution of the deficiency, written documentation that conditions of the Letter of Concern have been met should also become part of the resident or fellow’s permanent file.

**Remediation without Extension** – The Program Director should use Remediation without Extension (of the resident or fellow’s annual contract) as the initial course of action for resident physicians and fellows who are judged by the Clinical Competency Committee (CCC) or Program Director as being in jeopardy of not
successfully achieving the Milestones or other competencies in a timely fashion. The decision to place a resident physician or fellow on Remediation without Extension may be made by the Program Director independently, however, the CCC must be informed of this course of action. Conditions of Remediation without Extension must be communicated to the resident physician or fellow in writing and should include: a description of the deficiencies (including the relevant Milestones or competencies), all required remedial actions, the expected timeframe for completion of remedial activity, and the anticipated consequences for failure to complete the remedial activity or for failure to improve on the relevant Milestones. The notification of Remediation without Extension should include a statement that failure to correct the deficiencies within the specified time period may lead to continued remediation, non-reappointment or termination. A Remediation without Extension notification can follow a Letter of Concern without improvement or may be used in lieu of the Letter of Concern when the deficiencies are deemed by the CCC or Program Director as especially significant. Both the Program Director and the resident physician or fellow should sign the Remediation without Extension plan. Refusal of the resident physician or fellow to sign should be noted by the Program Director. The Office of Graduate Medical Education (GME) must be notified of and provide approval for any resident physician or fellow on Remediation without Extension. Remediation without Extension does not constitute a disciplinary action, but may be disclosed to third parties upon appropriate request. Upon resolution of the deficiency, written documentation that conditions of the Remediation without Extension have been met should also become part of the resident or fellow’s permanent file.

**Remediation with Extension** – Remediation with Extension of training beyond the time necessary for most residents or fellows in the same program may be used when improvement fails to occur with Remediation without Extension. A resident physician or fellow may only be placed on Remediation with Extension when this action is deemed appropriate by both the Program Director and CCC. A Remediation plan comprised of the same elements outlined in Remediation without Extension is required and should be signed by both the Program Director and the resident physician or fellow. Refusal of the resident physician or fellow to sign should be noted by the Program Director. The notification of Remediation with Extension should include a statement that failure to correct the deficiencies within the specified time period may lead to continued remediation, non-reappointment or termination. The proposed extra time, including, if necessary, a requirement that the resident physician or fellow repeat an academic year, is determined by the Program Director in conjunction with the CCC. The Office of GME must be notified of and provide approval for any resident physician or fellow on Remediation with Extension. Remediation with Extension does not constitute a disciplinary action, but may be disclosed to third parties upon appropriate request. Upon resolution of the deficiency, written documentation that conditions of the Remediation with Extension have been met should also become part of the resident or fellow’s permanent file.

**Summary Suspension and Disciplinary Action**

**Summary Suspension** - The Chief of Staff, Chief of Service, Program Director or Associate Dean of Graduate Medical Education, solely in his or her discretion, may summarily suspend a resident from clinical activities whenever action must be taken immediately in the best interest of patient care. The Vidant Health Chief Human Resources Officer and the Institutional Official should be immediately notified of all summary suspension. Such suspension shall be in accordance with the following provisions:

a. Any resident receiving a summary suspension shall be notified in writing of the reasons for the suspension by the Program Director immediately.

b. Upon receipt of the written notice of the suspension, as part of the investigation, the Program Director shall meet with the resident physician or fellow and allow the resident physician or fellow the opportunity to present information relevant to the summary suspension. The Program Director shall review such evidence and, in consultation with the Chief of Service and Chief of Staff, decide whether the summary suspension should be terminated.

c. If, following investigation, disciplinary action is taken; this disciplinary action may be appealed as set out in the Resident Reappointment and Grievance policy.

d. There is no right to appeal a summary suspension itself.
Disciplinary Actions - Disciplinary actions are those actions taken by the sponsoring institution, which limit, suspend or terminate the ability of the resident to participate in the educational program provided by the training program or actions which could significantly threaten the resident's intended career development. Vidant Medical Center (VMC) is empowered to independently investigate any circumstances leading to the possibility of disciplinary action. The institution of disciplinary actions is independent of and not contingent upon any resolution of the matter in the judicial system. The Institutional Official and the Vidant Health Chief Human Resources Officer shall be notified prior to the institution of disciplinary actions. Grounds for disciplinary action may include, but are not limited to:

a. Professional or ethical behavior by the resident physician or fellow that is considered to be lower than the standards or aims of GME programs or which are disruptive to the objectives and efficient operation of the GME program.

b. Failure of the resident to comply with rules, regulations or policies of VMC and/or BSOM.

c. Behavior or actions of the resident physician or fellow which disrupt the training of other residents and fellows or which place the care and safety of patients in jeopardy.

d. Indictment of any felony.

e. Conviction of any disqualifying crime pursuant to the policies and procedures of Vidant Health.

f. Misrepresentation by the resident in the application for initial or continuing GME or misrepresentation in any documentation submitted to obtain or maintain a position in any graduate education program sponsored by VMC.

g. Failure to complete the training program in a timely manner, as allowed by law.

The resident physician or fellow shall be notified in writing of disciplinary actions taken. Disciplinary actions taken may remain in effect pending final resolution of any subsequent grievance process.
Template – Academic and Professional Deficiencies

Letters of Concern and notices of Remediation (with or without extension) should include following elements:

1. **A detailed description of the areas of deficiency, which includes:**
   - Citing specific issues or concerns
   - Referencing previous discussions, notifications and interventions utilized to address the specific issues or concerns
   - Referencing the corresponding Milestone descriptor(s) as applicable

   **If referencing a Milestone, state the Milestone performance that best describes the resident or fellow’s current status per the CCC, as well as the expected Milestone performance**

2. **A detailed, specific outline of all actions required of the resident physician or fellow. These actions could include, but are not limited to:**
   - Additional assigned reading with corresponding assessment
   - Repeating a rotation
   - Required meetings with an assigned mentor
   - Required meetings with the Program Director
   - Referral to the NC Physicians Health Program
   - Additional educational evaluation
   - Completion of OSCEs specific to the area of deficiency (ECU Office of Clinical Skills Assessment and Education)
   - Recommendations regarding physician wellness, such as use of stress management tools, follow up with a primary care physician or referral to the Vidant Employee Assistance program

3. **The expected timeframe for the completion of the required actions.**
   - The expected timeframe may be determined by each required action and/or the overall timeframe in which improvement must be demonstrated could be stated.

4. **Notification that failure to achieve sustained improvement may lead to additional actions**
   - Letter of Concern – Additional action could be remediation
   - Remediation without Extension – Additional action could be remediation with extension, non-reappointment or termination
   - Remediation with Extension – Additional action could be non-reappointment or termination

5. **Signatures by both the resident physician or fellow and the Program Director**
   - The resident physician or fellow signature is to acknowledge that the contents of the notification have been discussed with him/her and that he/she understands the information, but does not necessarily indicate that he/she agrees with the information. A statement to this effect may be included prior to the signature lines.

Please note that the GME Office must be notified of and provide approval for any resident physician or fellow placed on Remediation without Extension or Remediation with Extension.