
Policy Title: Academic Improvement and Corrective Action

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PURPOSE

To establish a policy and process for all resident and fellow training programs at the University of Texas Southwestern Medical School to use in the normal process of evaluating and assessing competence and progress of residents and fellows enrolled in post-graduate medical education programs. Specifically, this policy will address the process to be utilized when a resident or fellow fails to meet the academic expectations of a program.

SCOPE

This policy applies to all Graduate Medical Education (GME) training programs at the University of Texas Southwestern Medical School including Texas Medical Board (TMB) and American Board of Obstetrics and Gynecology (ABOG) approved programs. For the purposes of this policy, ACGME Common Program Requirements will apply to residents and fellows receiving training in TMB and ABOG approved programs.

DEFINITIONS

Fellow: A physician in a program of graduate medical education accredited by the ACGME who has completed the requirements for eligibility for first board certification in the specialty. The term "subspecialty residents" is also applied to such physicians.

Formative Evaluation: Assessment of a resident or fellow with the primary purpose of providing feedback for improvement as well as to reinforce skills and behaviors that meet established criteria and standards without passing a judgment in the form of a permanently recorded grade or score.

Performance Improvement Plan (PIP): A plan of remediation designed to improve a resident's or fellow's proficiency in-patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.

Post-Graduate Training Program: A residency or fellowship educational program.

Program: A structured educational experience in graduate medical education designed to conform to the Program Requirements of a particular specialty/subspecialty, the satisfactory completion of which may result in eligibility for board certification.

Resident: Any physician in an accredited graduate medical education program, including interns, residents, and fellows.

PROCEDURE

1. **Structured Feedback:** The ACGME states all programs "must provide objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice; use multiple evaluators (e.g., faculty, peers, patients, self, and other professional staff); document progressive Resident and Fellow performance improvement appropriate to educational level; and, provide each Resident and Fellow with documented semiannual evaluation of performance with feedback. The evaluations of Resident or Fellow performance must be accessible for review by the Resident and Fellow, in accordance with institutional policy. (ACGME Common Program Requirements CPR.V.A.1.a-c). Feedback techniques include verbal feedback, rotational evaluations and summative evaluations. Each residency and fellowship program must

have a Clinical Competency Committee (CCC) or Clinical Education Committee (CEC), charged with routinely assessing resident performance.

2. **Performance Improvement Plan (PIP):** When a Post-Graduate Training Program identifies a Resident or Fellow as having an academic deficiency, it is expected that the Post-Graduate Training Program will provide routine structured feedback to the Resident or Fellow concerning the deficiency. Feedback must include discussion of the specific (or global) deficiencies and the development of a written Performance Improvement Plan (PIP) to correct the deficiency. If the program director and/or CCC or CEC deems that routine structured feedback is not effecting the necessary improvement, or if the program director, CCC or CEC determines that the deficiency is significant enough to warrant interaction more formal than routine feedback with the Resident or Fellow, the program director, CCC or CEC may elect to issue a PIP. The PIP, which should take the form of a letter addressed to the Resident or Fellow, should provide the Resident or Fellow with (a) formal notice of the deficiency and (b) an opportunity and plan to cure the deficiency. Any feedback provided to the Resident or Fellow after the issuance of the PIP shall be consistent with the content contained in the PIP.

A PIP must be co-signed by the Resident and the program director (or the program director's designee). A copy of the signed PIP should be forwarded to the UT Southwestern GME office. If the Resident or Fellow refuses to sign the PIP, the program director should note the Resident or Fellow refusal on the PIP. **The issuance of a PIP does not trigger a report to any outside agencies but may be reported should an outside agency specifically inquire whether a Resident or Fellow was ever given a PIP.**

3. **Failure to Cure the Deficiency:** If the program director, CCC or CEC determines based on subsequent evaluations that the Resident or Fellow has failed to satisfactorily cure the deficiency and/or improve his/her overall performance to an acceptable level, the program director, CCC or CEC may elect to take further action, which may include one or more of the following steps:
 - a. Issuance of a new or updated PIP.
 - b. Initiation of Corrective Action (Probation).
 - c. Initiation of Corrective Action (Repetition of Rotation and Extension of Training Period)
 - d. Initiation of Corrective Action (Election Not to Promote to the Next PGY Level)
 - e. Initiation of Corrective Action (Extension of the Defined Training Period)
 - f. Initiation of Corrective Action (Dismissal)
 - g. Determination not to certify a resident to sit for an Accrediting Board.
4. **Corrective Action:** Residents may be subject to corrective action as the result of unsatisfactory academic performance and/or misconduct, including but not limited to, issues involving knowledge, skills, scholarship, unethical conduct, illegal conduct, excessive tardiness and/or absenteeism, unprofessional conduct, job abandonment, or violation of applicable policies or procedures. Corrective Action may include, but is not limited to, probation, suspension, non-renewal of contract, or dismissal from a Post-Graduate Training Program.

In the event that a program director, CCC or CEC determines that Corrective Action is warranted, the program director shall provide written notice to the Resident or Fellow which states: (1) the specific Corrective Action to be taken; (b) the reasons for the corrective action; (c) notice of the Resident or Fellow's right to an appeal of the Corrective Action; (d) the time period within which the Resident or Fellow must initiate the appeal; and (e) that failure to request a hearing constitutes a waiver of all rights to appeal. In the event a program director determines that the Resident's or Fellow's job performance presents a threat to patient safety or welfare, the Resident or Fellow may be immediately removed from the patient care environment pending a Corrective Action determination.

The following supplemental requirements shall apply for each of the following Corrective Action measures:

- a. Probation or Suspension: Probation means the Resident or Fellow is formally notified that there are identified areas of unsatisfactory job performance that will require remediation and/or improvement if the Resident or Fellow is to continue in the Post-Graduate Training Program. Suspension means the Resident or Fellow is temporarily not permitted to perform his or her job duties due to unsatisfactory job performance that will require remediation and/or improvement if the resident is to continue in the Post-Graduate Training Program. The notice to the Resident or Fellow of either probation or suspension shall set a commencement date and duration period for the probation or suspension status and shall set forth the specific remedial action or improvement that is required during this period. The program director shall re-evaluate the Resident or Fellow at the end of the probation or suspension period and make a determination to (i) continue the probation or suspension; (ii) remove the resident from probation or suspension status; or (iii) impose another Corrective Action measure. A program director's decision shall be documented in the file and communicated in writing to the Resident or Fellow and the chairperson of the CCC or CEC.
 - b. Non-Renewal of Contracts: In the event a program director, CCC or CEC elects not to renew a Resident's or Fellow's contract for the next year, the program director shall provide the resident with written notice of this decision. Notice must be provided to the Resident or Fellow at least four (4) months prior to the expiration date of the current contract, unless the primary reason for the non-renewal occurs within the four (4) months prior to the expiration of the current contract, in which case the program director must provide the Resident or Fellow with as much written notice of the non-renewal prior to the expiration date as the circumstances will reasonably allow.
 - c. Dismissal: Notice of dismissal of a Resident or Fellow from a Post-Graduate Training Program shall set forth the effective date of the dismissal.
5. Initiation of Corrective Action: It should be noted that while the decision to initiate Corrective Action is in the Post-Graduate Training Program's purview, it must be reviewed in consultation with the DIO and Office of Legal Affairs before the action is discussed with the resident. The DIO and Legal Office will make every attempt to review the file and provide guidance within 10 business days. A Post-Graduate Training Program should schedule the CCC or CEC meetings to consider the Resident's or Fellow's performance in a timely manner to allow for review time by the DIO or Legal Affairs should corrective action be a possible result of the CCC or CEC meeting.