



Policies and Procedures

Policy MFMR10	Adverse Academic Decisions and Due Process Policy
Effective Date:	10/26/2022
Reviewed/Revised Date:	
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References:	

Purpose

1. Methodist Medical Center shall provide residents with an educational environment that MMC believes is fair and balanced.
2. This policy outlines the procedures which govern adverse academic decisions and due process procedures relating to residents during their appointment periods at Methodist Medical Center regardless of when the resident matriculated.
3. Actions addressed within this policy shall be based on an evaluation for family medicine residency.

Scope:

1. All MMC administrators, faculty, staff, residents, and administrators at participating affiliates shall comply with this and all other policies and procedures that govern both Graduate Medical Education programs and resident appointments at MMC.
2. Residents shall be given a copy of this Adverse Academic Decisions and Due Process Policy at the beginning of their training.

Definitions:

Academic Deficiency

1. A residents academic performance is deemed deficient if performance does not meet/does not satisfy the program and/or family medicine standards.
2. Evidence of academic deficiency for a resident can include, but is not limited to:
 - a. Inability to use medical knowledge effectively
 - b. Lack of technical skills based on the residents level of training
 - c. Lack of professionalism, including timely completion of administrative functions such as charting, duty hours, and case logging
 - d. Unsatisfactory written evaluation(s)
 - e. Failure to perform assigned duties
 - f. Unsatisfactory performance based on program faculty's observation
 - g. Any other deficiency that affects the residents academic performance

Corrective Action

1. Corrective action is defined as written formal action taken to address a resident's academic, professional, and/or behavioral deficiencies and any misconduct.
2. Typically, corrective action includes/may include probation which can result in disciplinary action such as suspension, non-promotion, non-renewal of residency appointment agreement, dismissal, or termination pursuant to the due process guidelines outlined in this policy or in other appropriate MMC policies.

Dismissal - the immediate and permanent removal of the resident from the educational program for failing to maintain academic and/or other professional standards required to progress in or complete the program. This includes conduct described in this policy.

Due Process

1. For matters involving academic deficiency(ies) in resident performance, due process involves:
 - a. Providing notice to the resident of the deficient performance issue(s);
 - b. Offering the resident a reasonable opportunity to cure the academic deficiency; and
 - c. Engaging in a reasonable decision-making process to determine the appropriate course of action to take regarding whether to impose corrective action.

Due Process Disciplinary Actions include suspension, non-renewal, non-promotion, or dismissal.

Meeting

1. The appeals process outlined in this policy provides the resident an opportunity to present evidence and arguments related to why he or she believes the decision by the program director, department chairperson, or Clinical Competency Committee to take action for non-renewal or dismissal is unwarranted.
2. It is also the opportunity for the program director, department chairperson, or Clinical Competency Committee to present documentation.

Misconduct – involves violations of standards, policies, laws, and regulations that affect professional and ethical standards of a physician in training.

Non-Renewal of Appointment - if the residency program determines that a resident's performance is not meeting the academic or professional standards of MMC, the program, the ACGME program requirements, the GME requirements, or the specialty board requirements, the resident will not be reappointed for the next academic year.

- Reappointment in a residency program is not automatic
- The program may decide not to reappoint a resident, at its sole discretion
- Non-renewal of a contract will be notified to the resident by March 15th.

Notice of Deficiency - the residency program director may issue a written warning to the resident to give notice that academic deficiencies exist that are not yet severe enough to require a formal corrective action plan or disciplinary action, but that do require the resident to take immediate action to cure the academic deficiency. It is at the program director's discretion to require a written remediation or not.

CCC - The Clinical Competency Committee reviews all resident evaluations at least semi-annually; prepares and ensures the semi-annual reporting of Milestones evaluations of each resident to ACGME; and advises the program director regarding resident progress, including promotion, remediation, or dismissal.

Probation – a residency program may use corrective action when a resident's violations include but are not limited to:

- Providing inappropriate patient care
- Lacking professionalism in the education and work environments
- Failure to cure notice of academic deficiency or other corrective action
- Negatively impacting healthcare team functioning; or
- Causing residency program dysfunction.

Reportable Adverse Actions - probation, non-renewal, and dismissal may be reportable actions by the program/MMC for state licensing, training verifications, and hospital/insurance credentialing.

Policy

1. When a resident fails to achieve the standards set forth by the program, decisions must be made about notice of academic deficiency, probation, suspension, non-promotion, non-renewal of residency appointment agreement, and in some cases, dismissal. MMC is not required to impose progressive corrective action but may determine the appropriate course of action to take regarding its residents depending on the unique circumstances of a given issue.
2. Residents engaging in conduct violating the policies, rules, bylaws, or regulations of MMC or its educational affiliates, or local, state, and federal laws regarding the practice of medicine and the standards for a physician in training may, depending on the nature of the offense, be dismissed.
3. Such misconduct will be considered a breach of the Resident Appointment Agreement or Reappointment Agreement.
4. In such instances, the Graduate Medical Education Office and Human Resources Department may be involved in the process of evaluating the violation.
5. A resident who exhibits unethical or other serious behaviors that do not conform to achieving the skills required for the practice of medicine may be summarily dismissed.

Procedures

1. If any clinical supervisor deems a resident academic or professional performance to be less than satisfactory, the residency program director will require the resident to take actions to cure the deficiencies.
2. Notice of Academic Deficiency
 - a. The residency program director may issue a Notice of Academic Deficiency to a resident to give notice that academic deficiencies exist that are not yet severe enough to require corrective action, disciplinary action, or other adverse actions but that do require the resident/fellow to take immediate action to cure the academic deficiency.

- b. This notice may be concerning both progress in the program and the quality of performance.
 - c. Residents/fellows will be provided reasonable opportunity to cure the deficiency(ies) with the expectation that the resident academic performance will be improved and consistently maintained.
 - d. It is the responsibility of the resident using necessary resources, including advisor, faculty, PDs, chairperson, etc., to cure the deficiency(ies).
 - e. The residency program director will notify the GME director in writing of all notices of deficiency(ies) within five (5) calendar days of the program director's decision.
3. Probation
- a. The program may use this corrective action when a residents actions are associated with:
 - i. Providing inappropriate patient care;
 - ii. Lacking professionalism in the education and work environments;
 - iii. Negatively impacting healthcare team functioning; or
 - iv. Failure to comply with MMC, GME, and/or program standards, policies, and guidelines.
 - v. Causing the residency program dysfunction.
 - b. Probation can be used as an option when a resident fails to cure a notice of academic deficiency or other corrective action.
 - c. The program director must notify and consult with the GME DIO and/or director before issuing a probation letter to a resident.
 - i. A probation letter must be organized by ACGME core competencies and detail the violations and academic deficiencies.
 - ii. A probationary period must have a definite beginning and ending date and be designed to specifically require a resident to correct identified deficiencies through remediation.
 - iii. The length of the probationary period will depend on the nature of the particular infraction and be determined by the program director. However, the program director should set a timed expectation of when improvement should be attained. The duration will allow the resident reasonable time to correct the violations and deficiencies.
 - iv. A probation period cannot exceed six (6) months in duration and residents cannot be placed on probation for the same infraction/violation for longer than twelve (12) consecutive months (i.e., maximum of two (2) probationary periods).
 - d. Probation decisions shall not be subject to the formal appeals process.
 - e. While on probation, a resident is not in good standing.
 - f. Remediation must be used as a tool for probation. Developing a viable remediation plan consists of the following actions:
 - g. The resident must be informed that the remediation is not a punishment, but a positive step and an opportunity to improve performance by resolving the deficiency.
 - ii. The resident may be required to make up time in the residency if the remediation cannot be incorporated into normal activities and completed during the current residency year.

- iii. The resident must prepare a written remediation plan, with the express approval of the program director as to form and implementation. The program director may require the participation of the residents advisor in this process.
 - The plan shall clearly identify deficiencies and expectations for reversing the deficiencies, organized by ACGME core competencies.
 - It is the responsibility of the resident to take actions to meet all standards, and to take the initiative to make improvements as necessary.