

Date of Last Review Month Year: 5/2022 Policy Owner(s) Department GME

Institutional Requirement IV.D.1.b)

2022 Accreditation Council for Graduate Medical Education (ACGME)

# Graduate Medical Education: Resident probation, dismissal, nonrenewal of contract

#### 1. Purpose:

The purpose of this policy is to establish disciplinary improvement procedures for a Resident in an Ochsner Lafayette General Medical Center sponsored Graduate Medical Education training program accredited by the Accreditation Council for Graduate Medical Education.

### 11. Scope:

All Ochsner sponsored residency and fellowship programs.

#### Ш. **Definitions:**

- ACGME: Accreditation Council for Graduate Medical Education
- Resident: Trainee in an Ochsner Lafayette General Medical Center sponsored **Graduate Medical Education program**
- Program Director: Appointed faculty member with overall authority and accountability for the Ochsner Lafayette General Medical Center accredited training program
- Designated Institutional Official (DIO): Individual responsible for oversight of **Graduate Medical Education programs**
- Graduate Medical Education Committee (GMEC): Responsible for policy and oversight of Ochsner Lafayette General Medical Center Graduate Medical Education, chaired by the DIO

#### IV. **Policy Statement:**

The sponsoring institution must have a policy that provides Residents with due process relating to the following actions regardless of when the action is taken during the then current appointment period.

Each training program is structured to assure that Residents assume increasing levels of responsibility commensurate with individual progress in experience, skill, knowledge, and judgment.

Residents in accredited programs having shown satisfactory progression in meeting the training requirements of his/her program have an expectation to complete the training program. The following policy outlines considerations for probation, dismissal and/or non-renewal of contract for a Resident.



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### V. Non-Disciplinary Measures for Academic Improvement:

Program Directors shall confer with their Clinical Competency Committee and/or the Designated Institutional Official (DIO) in making determinations as to the existence of an academic deficiency and the appropriate course of action. Depending on the nature of the academic deficiency, disciplinary action may be indicated, rather than the nondisciplinary, remedial measures set forth below.

Program Directors shall use the following non-disciplinary measures to resolve academic deficiencies. These measures are designed to give notice to the Resident of deficiency and to identify strategies to address the deficiency. The Program Director has discretion to use any of the measures below based on evaluation of all facts and circumstances, and such measures need not be used in a particular order. Non-disciplinary actions need not follow nor precede any disciplinary action. Failure to achieve immediate and/or sustained improvement may lead to further disciplinary action(s). Any future action will be determined by the Program Director exercising his/her professional and academic judgment. These remedial actions do not constitute disciplinary action and Nondisciplinary remedial measures are not subject to review or appeal under the GME-8242-012 Grievance Procedure-Fair Hearing Policy.

### Informal Conversation

An Informal Conversation, sometimes referred to as an "awareness conversation" may be undertaken by the Program Director to address a Resident's academic deficiency of a nonserious nature that needs to be remedied or improved. The purpose of an Informal Conversation is to describe the academic deficiency and to recommend actions to rectify the deficiency. After a Program Director has conducted the Informal Conversation with the Resident, the Program Director shall summarize the discussion in writing and provide the Resident with a copy of the summary. The summary should include a succinct statement of the issue and the steps recommended to rectify the deficiency.

### Non-Disciplinary - Performance Improvement Plan (ND-PIP)

Performance with respect to any element of a Resident's conduct, skills, duties, or responsibilities that is determined to be less than satisfactory, the Program Director shall meet and discuss the unsatisfactory performance with the Resident. As a result of this less than satisfactory performance, the resident will be placed on a Non-Disciplinary -Performance Improvement Plan.

A Non-Disciplinary PIP may be issued to a Resident who has demonstrated an academic deficiency, the underlying causes for which the Program Director, in his/her



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professional judgment, believes are amenable to remediation. The ND-PIP must be in writing and should describe the nature of the academic deficiency, necessary corrective actions required, and date by which corrective actions must be completed by the Resident. The ND-PIP must utilize the standard Graduate Medical Education Performance Improvement Plan template. The ND-PIP is designed to give the Resident notice of the academic deficiencies as identified and set out specific expectations of how to address deficiencies. Where appropriate, the Program Director may seek the Resident's input to elicit his/her judgement of how to best address the deficiencies. The Program Director in collaboration with the Associate Program Director, Program Manager or other Key Faculty member should present and review the ND-PIP with the Resident. Failure to achieve sustained improvement or a repetition of the conduct may lead to additional remediation plans or formal disciplinary action.

Copies of written summaries of Non-Disciplinary Performance Improvement Plan(s) will be maintained in the departmental resident file. Non-disciplinary PIP's are not required to be on file in the Department of Graduate Medical Education.

A Fitness for Duty (FFD) / Wellness Check evaluation may be requested by the Program Director, DIO or leader in the Department of Graduate Medical Education. Such evaluations may include, but is not limited to, medical examinations, drug and/or alcohol testing, and psychological assessment. FFD evaluation(s) will be scheduled on behalf of the Resident by the Department of Graduate Medical Education.

### Administrative Leave Pending Investigation

If the Program Director and the Designated Institutional Official (DIO) (or their designees) determine that immediate action is required prior to completion of a review or investigation of possible misconduct or academic deficiency, in order to protect the health and safety of patients, staff or other persons, or the interests of Ochsner Lafayette General Medical Center, the Resident may be placed on immediate administrative leave, with or without pay as appropriate depending on the circumstances. This action is not disciplinary in nature and therefore cannot be appealed pursuant to the GME-8242-012 Grievance Procedure-Fair Hearing Policy. Administrative leave is intended to be a short-term measure to allow for a review of the underlying concern and determination as to whether Disciplinary Action is warranted.

### Discipline, Probation, Dismissal, Non-Renewal of Contract: VI.

In circumstances under which non-disciplinary measures are unsuccessful, formal disciplinary action may be undertaken. These may be issued to a Resident because of academic deficiency or misconduct.



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A program is not required to issue a Resident any form of non-disciplinary, remedial action as a prerequisite to recommending or taking formal disciplinary action. Serious academic deficiencies and/or misconduct may warrant further disciplinary action, up to and including dismissal, regardless of whether a Resident received or was subject to any prior form of remedial action.

Program Directors will confer with the training program Clinical Competency Committee (CCC) and the Designated Institutional Official (DIO) in making determinations as to the academic deficiency and the course of action.

Grounds for disciplinary action, probation, dismissal, or non-renewal of contract of a resident include, but are not limited to, the following:

- a) Unsatisfactory academic performance, defined as a failed rotation; relevant exam scores below program requirements; and/or marginal or unacceptable performance as evidenced by faculty evaluation in the areas of clinical diagnosis and judgment, medical knowledge, technical abilities, interpretation of data, patient management, communication skills, interactions with patients and other healthcare professionals, professionalism, motivation and/or initiative.
- b) Failure to comply with the bylaws, policies, rules, or regulations of the sponsoring or affiliate hospital, medical staff, department, or with the terms and conditions of this policy and/or the Residency Agreement.
- c) Charges of an offense under federal, state, or local laws or ordinances which impacts upon the abilities of the Resident to appropriately perform his/her normal duties in the residency program.
- d) Conduct, violating professional and/or ethical standards; disrupts the operations of Ochsner Health, its departments, or affiliated hospitals; or disregards the rights or welfare of patients, visitors, or hospital/clinical staff.
- e) Ineligible for non-promotion continued appointment based on ongoing absence/unavailability to perform training duties; failure to satisfy state board licensure requirements or visa, immunization, registration, or other eligibility requirements for training.

The Program Director will prepare a written notice of recommendation of disciplinary action utilizing the Department of Graduate Medical Education Performance Improvement Plan (PIP) template. The written notice of recommendation will be reviewed by the DIO prior to being presented to the GMEC by the Program Director for approval. This notice must include:



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- 1. A recommendation of the specific disciplinary action to be taken:
- 2. A description of the academic deficiency(ies) and/or incident(s) of misconduct that are the basis for the disciplinary action;
- 3. The specific remedial action or improvement that is required, unless the corrective action is probation, dismissal or non-renewal of contract;
- 4. A defined period of time with a start and end date for improvement (if applicable);
- 5. Notice of the right to appeal, along with a copy of the GME-8242-012 Grievance Procedure-Fair Hearing Policy.

The notice of recommendation for disciplinary action must be signed by the Program Director and delivered by the Program Director to the Resident in person. The Resident should be asked to sign the notice to acknowledge receipt. If the Resident refuses to sign the notice, the Program Director shall obtain a witness to join in the in-person session. The witness' signature is only to verify the discussion occurred and documentation in accordance with policy were provided to the Resident.

### Probation

Based on the Resident's performance during the disciplinary PIP, the possible outcomes are: successful remediation with a return to good academic standing; probation with new or remaining deficiencies cited; and/or non-promotion to the next training level with further probationary training required. Before a Resident is placed on probation, the Program Director must present all performance deficiency documentation records and basis for such a determination to the GMEC for approval. On the recommendation of the Program Director, the CCC and approval of the GMEC, the Program Director must notify the Resident, in writing, that his/her performance is not satisfactory, and the Resident has been placed on formal probation status. The formal probationary status must include a description of the basis for such a determination. A copy of probationary recommendation shall be forwarded to the DIO and the Department of Graduate Medical Education for inclusion in the Resident's official academic file. As a result of probation, a temporary modification of a Resident's participation in or responsibilities within the training program including clinical duties and other activities may be restricted by the Program Director. The Resident is expected to continue fulfilling training program requirements while on probation, subject to the specific terms of the probation.

A Resident placed on probation shall have his/her status reviewed and documented by the Program Director at defined intervals (e.g. weekly, monthly). If upon expiration of set



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probationary terms, or during any extension thereof, the Resident's performance has not improved to the extent considered acceptable by the Program Director and the GMEC. the resident may be immediately dismissed from the program. The Resident may be immediately dismissed without counseling or probation for serious violations of ethical or legal standards of conduct.

### Dismissal

The basis for dismissal may include but not limited to failure to achieve the learning objectives of the program, unprofessional behavior, substandard clinical practice and/or judgment, failure to develop sufficient technical skill, failure to develop sufficient teaching skills or unprofessional teaching behavior. Attempts at counseling and probation must have been made, documented and been unsuccessful. Dismissal from a training program must be at the recommendation of the Program Director and the department chairman (if they are not the same) and approved by the GMEC. The Resident shall be advised of such, in writing, by the Program Director. This notice shall include a brief description of the grounds for dismissal. All related records and documentation, including attempts at remedial action, are to be maintained in the Department of Graduate Medical Education as the official academic record of the Resident maintained within the New Innovations residency management system. Resident may appeal dismissal by invoking due process using the established grievance procedure process. GME-8242-012 Grievance Procedure-Fair Hearing Policy

### Non-Renewal of Residency Agreement

serious violations of ethical or legal standards of conduct.

In instances where a Resident's Residency Agreement will not be renewed, or when a Resident will not be promoted to the next level of training, the Program Director must provide the Resident with written notice of intent no less than 120 days (4 months) prior to the expiration of the Resident's current agreement. If the primary reason(s) for the non-renewal or non-promotion occur(s) within the four months prior to the end the agreement, the Program Director must provide the Resident with as much written notice as circumstances will reasonably allow, prior to the end of the agreement.

Residents also may be immediately dismissed without counseling or probation for

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**Approved** 

Al Patin, RN, MBA

Chief Executive Officer, Ochsner Lafayette General Medical Center

Ronald G. Amedee, MD Dean - Medical Education

Ziad Ashkar, MD, ScD, MPH, MBA Designated Institutional Official

**Policy History** 

Date of Issue:

05/2022

Attachments:

Performance Improvement Plan Action Report

**PIP Template** 



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### Performance Improvement Plan - PIP

# Check one

Check one	
Non-Disci	olinary action report
	(for program file only)
Formal Discip	linary action report:
Disciplinary Action, Probation, Dismissal, or Non-	Renewal of Residency
	Agreement
(Subm	ission to GME required)

Resident/Fellow Name
Program Name
PGY level
Date

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Dear	Dr	•
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It is the goal of the (enter program) training program and the Department of Graduate Medical Education to provide exemplary patient care and training.

Effective (enter date) you are being placed on a Performance Improvement Plan (PIP) as indicated. The program director in combination with the Clinical Competency Committee (CCC) have reviewed your progress in the program finding your performance to be below what is expected for a physician at your level of training. The following details will describe the exact nature of identified deficiencies or behavior, the necessary improvement, the timeframe for improvement, the consequences of inadequate improvement and how we will assist you in reaching this goal.

The program director and the CCC recommend a (time frame) disciplinary action status ending (date).

#### 1. **Identified Deficiencies**



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You are identified as not having established advancing knowledge or demonstrated improvement in performance related to the (program) milestones listed below.

#### 11. **Necessary Improvement**

During the timeframe of your PIP, you are expected to (detail how necessary improvement is expected to be accomplished).

Additionally, you are expected to demonstrate the following improvements in your performance: (enter details)

#### III. Timeline and means for reassessment

During your PIP you will be expected to successfully remediate in areas defined while completing and conducting activities associated with the training program. You are expected to meet with your program director (expected frequency of meetings?). Specific areas of focus will include: (enter details below)

#### IV. **Return to Good Standing**

Satisfactory performance and significant improvement on reassessment will be determined by the (program) program director and the CCC. Expected improvement must be demonstrated by (date) to successfully meet the requirements set forth in this PIP.

A review and update of your PIP is scheduled to occur on the following dates: (enter specific date(s))

### V. Consequences of failure to remediate

This notice is provided so that you will have an opportunity to correct and/or address issues that have been discussed and identified in this PIP. Should you fail to successfully remediate the requirements identified during the PIP period, further disciplinary action will be taken, which may result in probationary status, non-renewal of training contract or dismissal from the Ochsner (program) training program.



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VI. Policy of Resident Grievance and Appeal Procedure  For probationary actions resulting in termination or non-renewal of contract, you have the right to appeal this decision. Contesting evaluations, letters of recommendation, documentation of performance, and probation are not grounds for a grievance-fair hearing process.  GME-8242-012 Grievance Procedure-Fair Hearing Policy						
Signature	e of House Staff Physician		Date of Signature			
I have met with (name of HS physician)and personally discussed with him/her the subject matter of this Performance Improvement Plan. The physician has been provided a copy of this report.						
Signature	e of Program Director		Date of Signature			
Signature	e of Witness		Date of Signature			