

SECTION: Graduate Medical Education Policies

ISSUED: September 14, 1992

SUBJECT: Policy on Selection, Evaluation,
Advancement, Supervision and
Due Process for House Officers

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RHODE ISLAND HOSPITAL

I. Selection

Rhode Island Hospital has as its policy to consider all candidates for graduate medical education regardless of race, sex, creed, nationality, age, or sexual orientation. Performance in medical school, personal letters of recommendation, official letters of recommendations, achievements, humanistic qualities, and qualities thought important to the desired specialty will be used in the selection process.

II. Evaluation and Advancement of House Officers

There is a clearly stated process for the evaluation and advancement of house officers at Rhode Island Hospital.

A. Evaluation of House Officers

1. Each house officer is evaluated by the program director and/or designee with the assistance of the teaching staff, for evidence of satisfactory progressive scholarship and professional growth, including demonstrated ability to assume graded and increasing responsibility for patient care. The evaluations must be accurately documented, dated and signed by both the evaluator and the house officer.
2. The evaluations will be based in part on written reviews provided by faculty members at the end of each rotation.
3. The evaluations are performed at least semi-annually.
4. The evaluation of performance is discussed with the house officer. When weaknesses or deficiencies are identified, steps are taken promptly to improve performance and counsel the house officer where appropriate.

5. The evaluations are based on the following elements:
 - Fund of medical knowledge and application of that knowledge
 - Judgment
 - Personal character traits displayed and interpersonal skills
 - Clinical and technical skills
 - Ability to assume increased responsibility for patient care
 - Ethical and Professional Conduct
6. The house officers are evaluated against the same criteria (A.4 above) when assigned to facilities outside the Hospital as part of the residency training.

B. Advancement of House Officers

Advancement of house officers to the next level of the program depends upon the house officer's performance and qualifications. Each program has criteria and goals which are expected to be met by a house officer before he or she is advanced to the next level of training in the program. These criteria and goals are reviewed annually by the program and the program director and are made known to the house officers and faculty.

C. Dates of Notification

Decisions about advancement or reappointment are concluded by the program director and communicated to the house officer no later than four months prior to the end of the house officer's current contract.

III. Supervision

Faculty are ultimately responsible for the clinical care given to patients. Supervision of residents may be provided by a combination of upper level residents, fellows and faculty. Each department within the hospital identifies supervisory faculty for given periods.

IV. Assurance of Due Process for House Officers

A. Application of Policy

The procedures described below are applicable to all post-doctoral trainees enrolled in the Hospital graduate medical education program. The term "post-doctoral trainees" shall include physicians, or other graduates of a doctoral program who are enrolled in a Hospital-sponsored training program as residents or clinical fellows (hereinafter, "trainees").

Although trainees may also be appointed to the Medical Staff and/or may be employed by the Hospital, the procedures described below, and not the review and appeal procedures described in the Medical Staff bylaws for other Medical Staff members or the grievance or similar procedures afforded to Hospital employees through the Hospital Human Resource Department, constitute the exclusive process by which any adverse action affecting a trainee's program appointment, employment, medical staff appointment or clinical privileges will be reviewed.

B. Grievances

Residents who feel they have been treated unfairly under the interpretation or application of a policy, rule or procedure may file a grievance. Residents who believe that they may have a complaint involving sexual harassment are advised to follow the procedure set forth in the hospital's policy on "Sexual Harassment". Reasonable efforts should be made within each department and residency program to resolve grievances on an informal basis. Residents may also seek out the Director of Graduate Medical Education/DIO for assistance with informal resolution of a grievance. The grievance process shall be conducted without the presence of legal counsel. This grievance procedure is not applicable to any decision regarding probation, suspension, non-renewal or termination. Resident appeals of these actions must be filed under the appeals process set forth in the "Right to Review" sections of this policy.

A request for formal resolution of a grievance shall be submitted in writing by the resident to the Program Director within thirty (30) days following the date when the resident first had knowledge of the incident that gave rise to the grievance. The Program Director shall notify the Director of Graduate Medical Education/DIO. The Program Director may elect to respond and resolve the grievance, or may in his/her judgment, request that the Director of Graduate Medical Education/DIO review and adjudicate the grievance. The Director of Graduate Medical Education/DIO may elect to respond to the grievance or may elect to convene a committee of three members of the GMEC, one member may be selected by the resident. The Program Director, Director of Graduate Medical Education/DIO or the committee may review any records, or interview any persons whom they consider helpful for resolution of the grievance. The committee will provide a decision of the grievance to the Director of Graduate Medical Education/DIO. The Program Director or Director of Graduate Medical Education/DIO shall issue a decision of the grievance within thirty (30) days.

Residents who believe that they may have a complaint involving their training program, Program Director or faculty may submit the grievance in writing to the Director of Graduate Medical Education/DIO. The Director of Graduate Medical Education/DIO may elect to respond to the grievance

or may elect to convene a committee of three members of the GMEC, one member may be selected by the resident. The Director of Graduate Medical Education/DIO or the committee may review any records or interview any persons whom they consider helpful for resolution of the grievance. The committee will provide a decision of the grievance to the Director of Graduate Medical Education/DIO. The Director of Graduate Medical Education/DIO shall advise the resident in writing of the proposed resolution of the grievance within thirty (30) business days after receiving the notification of the grievance.

C. Procedures Prior to Initiating Formal Disciplinary Action

Program Directors are encouraged to address and resolve minor instances of unsatisfactory performance or misconduct prior to invoking the formal disciplinary actions set forth below. Any trainee whose performance is assessed to be less than satisfactory by the Program Director may be placed on a remedial training status for a specified period of time, not to exceed six months. In such cases, the Program Director shall inform the trainee in writing of the deficiencies noted in academic, clinical and/or professional performance, and shall outline a program of remediation, as well as criteria for successful completion of the program. The trainee shall be requested to acknowledge being advised of his/her remediation status by signing the notification; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee. The Director of Graduate Medical Education/DIO shall also be notified of the trainee's remedial status, the reasons for the decision, and the plan for remediation.

If the trainee is successful in completing the remedial program, the trainee will be removed from remedial training. Remedial status is not a formal disciplinary action and not subject to disclosure to any external inquiries. Documentation of the remedial training process will be incorporated into the trainee's evaluation and will be disclosed only upon written authorization of the trainee or legal process. In the case where deficiencies in the trainee's clinical performance are identified, the trainee may receive reduced or limited credit for the relevant portion of the training program pursuant to Section 7 below. The Program Director shall inform the trainee of such reduction in credit as part of the remedial training process.

If the remedial training efforts are unsuccessful or where performance or misconduct is of a serious nature, the Chief or Program Director may initiate formal disciplinary action as described below.

D. Formal Disciplinary Action

Disciplinary action may be taken for due cause, including but not limited to any of the following:

- a. failure to satisfy the academic or clinical requirements of the training program;
- b. professional incompetence, misconduct or conduct that might be inconsistent with or harmful to patient care or safety;
- c. consistently substandard performance;
- d. conduct which calls into question the professional qualifications, ethics, or judgment of the trainee;
- e. failure to function in a cooperative and reasonable manner with other trainees, employees, medical staff, patients, volunteers and/or visitors of the Hospital;
- f. violation of the bylaws, rules, regulations, policies, or procedures of the medical staff, Hospital, or applicable department, division or training program, including, without limitation, any violation of the Hospital sexual harassment policy;
- g. scientific misconduct.

E. Specific Procedures

Formal disciplinary action may include, but is not limited to probation, suspension, or termination of the trainee from the training program during an academic year. Except under circumstances requiring an immediate emergency disciplinary action to preserve acceptable standards of care, safety, integrity or ethics at the Hospital, the following procedures will be followed.

1. Training Program Probation

A. General

- i. Training program academic probation (or "probation") means a temporary modification of the trainee's training program participation or responsibilities, designed to facilitate the trainee's accomplishment of program requirements. Generally, a trainee will continue to fulfill training program requirements while on probation, subject to the specific terms of the probation.
- ii. The Program Director, after consultation with the Chief, shall have authority to place the trainee on probation (with pay) and to

determine the terms of the probation.

- iii. Probation may include, but is not limited to, special requirements or alterations in scheduling a trainee's responsibilities, increased supervision, and/or a reduction or limitation in clinical responsibilities.
- iv. The Program Director shall notify the trainee and the Director of Graduate Medical Education/DIO in writing of the probation, the reasons for the decision, the required method and timetable for correction, and the date upon which the decision will be re-evaluated. The trainee shall be requested to acknowledge being advised of his/her probation status by signing the notification; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee.
- v. Within thirty (30) days of receiving this notice, the Director of Graduate Medical Education/DIO will meet with the trainee for counseling and appropriate guidance after consultation with the Program Director.
- vi. The Program Director shall evaluate, in writing, the trainee at not less than 30-day intervals from the date of sending notification to the trainee. These evaluations must be signed by the Program Director and reviewed and discussed with the trainee. The trainee shall also sign the evaluation; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee.
- vii. Each such evaluation will be sent to the Director of Graduate Medical Education/DIO, who shall meet with the Program Director and/or trainee as deemed appropriate.
- viii. No trainee shall remain on probation for more than six months in total over the course of his/her training. If the trainee's performance remains unsatisfactory or other reasons for the probation have not been resolved, he/she may not continue as a trainee in a training program. The trainee will be informed in writing of his/her termination from the program pursuant to this provision.

B. Right to Review

- i. The trainee shall have the right to a review of the probation decision and shall be informed of this right when placed on probation. To initiate such a review, a trainee must submit a written request for a review of the probation to the Director of Graduate Medical Education/DIO within five (5) business days of the trainee's receipt of the notification of the probation decision. Failure to make a timely request for a review will constitute a waiver of the trainee's right to a review.
- ii. If the trainee requests review of the probation status, the Director of Graduate Medical Education/DIO shall meet with the trainee within ten (10) business days and afford the trainee an opportunity to provide any information in his or her defense. After this meeting, the Director of Graduate Medical Education/DIO or his/her designee (s) following consultations with the Program Director, Department Chief and other appropriate individuals, if any, will render a final decision.
- iii. The trainee shall receive written notification of the decision of the Director of Graduate Medical Education/DIO and the reasons for and consequences of the decision.
- iv. Probation is a part of the trainee's permanent record.
- v. There is no further appeal from a decision to place a trainee on probation.

2. Suspension

A. General

- i. The Program Director, after consultation with the Chief, may temporarily suspend the trainee from training program duties by placing him or her on an unpaid leave of absence for seriously deficient performance or seriously inappropriate conduct. Except when the interests of patient care may be adversely affected, the Program Director shall also consult with the Senior Vice President of Medical Affairs at the Hospital and the Director of Graduate Medical Education/DIO, before imposing suspension. A voluntary leave of absence that is approved by the Program Director in advance shall not be considered a suspension or other form of disciplinary action.
- ii. The Program Director shall provide the trainee with written notification of the reasons for the suspension, the required method and timetable for correction, and a date upon which the decision will be re-evaluated. The trainee shall be requested to

acknowledge being advised of his/her suspension by signing the notification; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee. The written notification shall include a statement that suspension, if final, may be reported to the Rhode Island Board of Medical Licensure and Discipline. The written notification should also advise the trainee of his or her right to request a review of the suspension in accordance with the procedures outlined below. This notice shall precede the effective date of the suspension, unless a serious risk to patient care or the health or safety of an employee warrants immediate suspension, in which case the notice shall be provided at the time of the suspension.

B. Right to Review

- i. The trainee shall have the right to a review of the suspension decision. To initiate such a review, the trainee must submit a written request for a review of the suspension to the Director of Graduate Medical Education/DIO within five (5) business days of the trainee's receipt of the notification. Failure to make a timely request for a review will constitute a waiver of the trainee's right to a review.
- ii. If the trainee requests review of the suspension, the Director of Graduate Medical Education/DIO or his/her designee(s) shall meet with the trainee within ten (10) business days and afford the trainee an opportunity to provide any information in his or her defense. After this meeting, the Director of Graduate Medical Education/DIO or his/her designee (s) following consultations with the Program Director, Department Chief and other appropriate individuals, if any, will render a final decision.
- iii. The trainee shall receive written notification of the decision of the Director of Graduate Medical Education/DIO and the reasons for and consequences of the decision.
- iv. There is no further appeal from a decision to suspend a trainee.
- v. No trainee shall remain on suspension for more than three months in total over the course of his/her training. If the reasons for the suspension have not been resolved at the end of the three month period, he/she may not continue as a trainee in a training program. The trainee will be informed in writing of his/her termination from the program pursuant to this provision.
- vi. Suspension is reportable to the Rhode Island Board of Medical Licensure and Discipline and part of the trainee's permanent

record.

3. Involuntary Termination From the Program During an Academic Year

A. General

- i. The Program Director, after consultation with the Chief, shall have authority to terminate a trainee from a training program, for reasonable cause, including but not limited to a failure satisfactorily to fulfill the requirements of the training program. Prior to the recommendation for termination of any trainee, the Chief and/or Program Director shall consult with the Senior Vice President of Medical Affairs for the Hospital and the Director of Graduate Medical Education/DIO. Dismissal of a trainee during an academic year shall constitute a termination. Failure to continue a trainee in a program beyond the academic year or failure to certify successful completion of a training program does not constitute a disciplinary action, as discussed more fully in Sections 6 and 7 below.
- ii. Written notice of a recommendation of termination from a program, including the reasons for the decision and the effective date, shall be provided by the Program Director to the trainee. The trainee shall be requested to acknowledge being advised of his/her involuntary termination by signing the notification; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee. The notice shall include a statement that termination, if final, may be reported to the Rhode Island Board of Medical Licensure and Discipline, and that an explanatory statement may also be submitted to the Accreditation Council of Graduate Medical Education of the American Medical Association. The notice shall also state that the trainee may request a formal review of the termination in accordance with the procedures described below.

B. Right to Review

- i. The trainee shall have the right to a review of the termination decision. To initiate such a review, the trainee must submit a written request for a review of the termination to the Director of Graduate Medical Education/DIO within five (5) business days of receiving notification. The written request must specify the reasons the trainee believes his/her case warrants review and special consideration. Failure to make a timely request for a review will constitute a waiver of the trainee's right to a review.
- ii. If the request for a review is timely, the Director of Graduate

Medical Education/DIO will arrange a hearing before a committee composed of the Director of Graduate Medical Education/DIO (who shall serve as chairperson), three faculty members on the Hospital staff association members and two Hospital house officers. The hearing committee members shall be selected by the Director of Graduate Medical Education/DIO. The Director of Graduate Medical Education/DIO shall not serve on the committee if he or she made the recommendation to terminate or if he or she desires to be, or is to be, called as a witness at the hearing. In such event, or in the Director of Graduate Medical Education/DIO's absence or inability to serve, the Director of Graduate Medical Education/DIO shall appoint one other staff association member to the committee, which shall select a chairperson. The committee will conduct the hearing as soon as practicable, but in no instance more than 30 days from the date of receipt of the trainee's request for a review. By mutual agreement of the parties, this time may be further extended.

- iii. The committee's sole function shall be to ascertain whether or not (a) there was any reasonable basis to recommend termination, and (b) the provisions of this Policy were substantially adhered to. It shall not be the function of the committee to recommend alternative disciplinary action.
- iv. The House Officer at his/her own expense, may be accompanied by counsel at the hearing with whom he/she may confer, and counsel for other interested parties, as determined by the Committee, shall be entitled to attend. Such counsel shall be entitled to participate as may be determined in advance by the Committee. Furthermore, a record shall be kept of the hearing.
- v. Prior to the hearing, the trainee and the Hospital will exchange pertinent information concerning their respective presentations, including a list of witnesses. Prior to the hearing, the trainee and the Hospital will be given copies of, or be permitted to review, documents that will be submitted at the hearing. Both the trainee and the Hospital are responsible for contacting their respective witnesses, scheduling the order of their presentations at the hearing and coordinating the witnesses' appearance with the committee chairperson. The committee may prepare specific procedure guidelines for use at the hearing.
- vi. The Program Director (or designee) will present the Hospital response, and both the Program Director and the trainee may present witnesses and submit documentary material to the committee. Both parties will be permitted to question the other party and its witnesses and rebuttal statements may be made by

either party on evidence presented by the other party.

- vii. The committee will render a written decision which shall be forwarded to the trainee and the Program Director within 14 days after completion of the hearing. Based on the committee's decision, the Program Director may reconsider the proposed disciplinary action. If the Program Director's recommendation is for termination, this recommendation and the committee's decision shall be forwarded to the Graduate Medical Education Committee for review. If the Graduate Medical Education Committee agrees with the recommendation to terminate, the recommendation shall be forwarded to the Hospital Board of Trustees for final action. If the Graduate Medical Education Committee disagrees with the recommendation to terminate, then it shall, after discussion with the hearing committee and the Program Director, decide upon an alternative action, which action shall be communicated to the trainee and the Program Director for implementation.
- viii. The trainee's stipend and benefits will continue during the period of the hearing process until action by the Board of Trustees, except that the stipend and benefits will cease at the end of the current appointment period should the hearing process continue beyond that period.

4. Independent Evaluation

If an evaluation of the trainee's performance by the Program Director and/or designee suggests a situation (such as, but not limited to: medical/mental health, behavioral and/or substance abuse problems) which places the trainee or his/her patients at risk, the Director of Graduate Medical Education/DIO may require an independent evaluation by the Physician's Health Committee of the Rhode Island Medical Society. The purpose of this independent evaluation is to determine the trainee's ability to perform his/her clinical duties and responsibilities. This independent evaluation may be required on its own or in addition to other formal disciplinary action described above.

5. Other Disciplinary Actions

A trainee who is aggrieved by a formal disciplinary action other than probation, suspension or termination, may request a review of the action under the procedures described in Section D.1(B) above.

6. Nonrenewal of Contract

Failure in performance to progress academically or professionally may be cause for a Program Director, after consultation with the Chief, to choose not to renew a trainee's contract. The resident must be provided with a written notice from the Program Director of intent not to renew the resident's contract no later than four months prior to the end of the resident's current contract. The trainee shall be requested to acknowledge being advised of the program's intent to not renew the trainee's contract by signing the notification; refusal to do so shall be noted by the Program Director, setting forth the reasons for refusal if stated by the trainee. The notice shall also state that the trainee may request a formal review of the intent not to renew in accordance with the procedures described below. If the primary reason(s) for the non-renewal occur(s) within the four months prior to the end of the contract, the program director must provide the resident with as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the end of the contract.

Evaluation by the teaching faculty must be considered when a Program Director decides to non-renew the contract for academic reasons. If the trainee is not already on probation or suspended when the decision to not renew is made, then the trainee should be informed and/or be placed in a remedial program prior to the decision to not renew his/her contract. When the decision to non-renew the contract is made, if the trainee is in remedial status, the remedial status may be extended to cover the remainder of the employment period. The Director of Graduate Medical Education/DIO should be notified of any decision by a Program Director of any non-renewal of contract prior to the notification of the trainee.

A failure to continue a trainee in a program beyond the current academic year does not constitute a disciplinary action.

A. Right to Review

- i. The trainee shall have the right to a review of the intent not to renew decision and shall be informed of this right. To initiate such a review, a trainee must submit a written request for a review of the intent not to renew to the Director of Graduate Medical Education/DIO within five (5) business days of the trainee's receipt of the notification of the intent not to renew decision. Failure to make a timely request for a review will constitute a waiver of the trainee's right to a review.
- ii. If the trainee requests review of the intent not to renew, the Director of Graduate Medical Education/DIO shall meet with the trainee within ten (10) business days and afford the trainee an opportunity to provide any information on his or her behalf. After this meeting, the Director of Graduate Medical Education/DIO, following consultation with the Program Director, Department

Chief and other appropriate individuals, if any, will render a final decision.

- iii. The trainee shall receive written notification of the decision of the Director of Graduate Medical Education/DIO and the reasons for and consequences of the decision.
- iv. There is no further appeal from a decision to not renew a trainee's contract.

7. Failure to Promote to Next Level of Training.

The decision to re-appoint and promote a trainee to the next level of post-graduate training shall be based on the amount of academic credit received for the year as determined by the Program Director upon review of the trainee's performance. The Program Director shall consider all evaluations of the trainee's performance and any other criteria that is deemed appropriate by the Program Director. Any trainee who is, in the opinion of the Program Director, subject to not being promoted due to academic performance should be placed in a remedial training program and should be notified at the earliest opportunity of any decision to reduce or restrict the credit given for one or more rotations during a given academic year. If the trainee continues in the program but his/her performance continues to be unsatisfactory, he/she may be placed on the next level of discipline. In the event a trainee is in a remedial training program at the time of the contract renewal, the Program Director may choose to (i) extend the existing contract for the length of time necessary to complete the remediation process, not to exceed six months; (ii) promote the trainee to the next level; or (iii) non-renew the contract pursuant to Section 6 above.

A failure to provide full credit for a rotation or academic year or a failure to certify successful completion of a training program does not constitute a disciplinary action, and the trainee shall have no right to appeal such actions.