Tiouse Starr Foneles and Froedates	
Policy	Source
HS 18.0 House Staff Performance	Graduate Medical Education Office

1.0 Purpose

To ensure House Staff are performing at an adequate level of competence for a GME training program and to provide program guidance if a House Staff is not performing at an adequate level of competence.

2.0 Definitions

- 2.1 Remediation: a term used to define an improvement process which is below the level of probation and does not require reporting outside of the institution
- 2.2 Probation: a term used to define a significant improvement process and disciplinary action which must be reported outside of the institution (e.g., for practice site privileging purposes, to certifying boards, to state licensure boards)

3.0 Procedure for remediation

- 3.1 The Program Director, upon learning of or observing a performance problem with a House Staff, must counsel them about the problem and document the counseling in the House Staff's training file. The Program Director may present the House Staff's performance issue to the Clinical Competency Committee (CCC) for additional input and may appoint a mentor to assist the House Staff in improving their performance. If the performance problem is significant enough to warrant remediation or other more significant action, the CCC should assist and a mentor should be provided. If probation, non-promotion, or more significant disciplinary action is considered, the GME Office must be notified to allow for due process. Programs should contact the GME Office before discussing or formalizing plans with House Staff if considering probation, non-promotion, or higher disciplinary action.
- 3.2 If, after documented counseling, a House Staff is not performing at an adequate level of competence as demonstrated by unprofessional or unethical behavior, engagement in misconduct, meeting ACGME core competencies for year of training, or failing to fulfill the responsibilities and requirements set forth by the Program, GME, and/or ACGME, the House Staff should be placed on formal remediation following CCC review. Program Directors have the sole authority to determine disciplinary actions and may choose to place the House Staff on probation or more significant disciplinary action to include non-renewal or dismissal at any point of the training period. However, programs must follow all GME policies to include GME HS policies 13.0 and 3.0. The GME Office must be notified if considering probation, non-promotion, or more significant disciplinary action to allow due process. Programs should contact the GME Office before discussing or formalizing plans with House Staff if considering probation, non-promotion, or higher disciplinary action. The program is encouraged to notify the GME office if considering remediation to allow for impartial input and resource identification.
- 3.3 The House Staff must be informed in person of these decisions and must be provided with a formal academic plan document, which includes the following:
 - 3.3.1 Statement of the grounds for the remediation/probation, including identified deficiencies or problem behaviors;
 - 3.3.2 The duration of the remediation/probation which ordinarily will be at least three months, but may be extended to six months;
 - 3.3.3 A plan for remediation/probation and criteria by which successful remediation/probation will be judged;
 - 3.3.4 Notice that failure to meet the conditions of the remediation/probation could result in extension of the training program period, extension of the remediation/probation to include potential

Policy	Source
HS 18.0 House Staff Performance	Graduate Medical Education Office

modification of the remediation/probation plan, progression to probation (if on remediation), dismissal, or non-renewal during or at the conclusion of the remediation/probation period; and

3.3.5 Written acknowledgement by the House Staff of the receipt of the remediation/probation document. Signing of the document does not necessarily imply the House Staff fully agrees with the document. If a House Staff refuses to sign, this should be noted on the document.

3.3.6 Documentation

3.3.6.1 A copy of the remediation document may be forwarded to the Senior Associate Dean for Graduate Medical Education. Programs are encouraged to contact GME regarding remediation and to use the standard GME remediation form, which should be placed on Department letterhead.

3.3.6.2 A copy of the probation document must be forwarded to the Senior Associate Dean for Graduate Medical Education. Programs are encouraged to use the standard GME probation form, which should be placed on Department letterhead.

- 3.4 During this remediation/probation time, a faculty member should be appointed to serve as the House Staff's mentor. The House Staff is expected to work closely with the mentor and meet with them at least once a month or as determined by the mentor, Program Director, and House Staff. The mentor may also serve as the House Staff's advocate and will keep the Program Director informed of the House Staff's progress.
- 3.5 If non-renewal of contract or dismissal is upheld as per GME HS policy 13.0 and involves a J1 Visa holder, ECFMG will be notified with assistance from the GME Office.
- 3.6 If the House Staff holds a Temporary Training Permit issued by the Georgia Composite Medical Board, the Board will be notified of the non-renewal or dismissal by the Program Director with assistance from the GME Office. The Program Director must report to the Board within 15 days of the permit holders withdrawal or termination from the Training Program. The Board must also be notified, by the Program Director, of any leave in excess of two weeks unless approved FMLA leave.

(Une

David Hess, M.D. Dean, Medical College of Georgia

3/14/23 Date

Natasha M. Savage, M.D, Date Senior Associate Dean, Graduate Medical Education and DIO