

Policy Name: GME Policy for Supervision, Evaluation, Promotion, Dismissal, Corrective Action, and Due Process for Grievance	
Originating Officer (Title), Council, or Committee: Shelly Monks, Vice President, and Chief Academic Officer, Designated Institutional Official	Effective Date: April 14, 2025
Approved By: Graduate Medical Education Committee	Last Reviewed Date: April 14, 2025
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1.0 Scope:

1.1 Applicable Entities:

This policy applies to:

- Texas Health Resources (Texas Health) and its member entities
- Excludes the Texas Health joint venture entities (except those listed in the Formulation and Adoption of System-Wide Policies and Procedures in Section 4.1.6 or in Section 4.1.7)

1.2 Applicable Departments:

This policy applies to all Texas Health Graduate Medical Education residents and fellows (hereafter referred to as Trainees) employed by Texas Health ("Institution").

2.0 Purpose:

- 2.1 To provide guidelines and define the Graduate Medical Education policy on the required supervision of Trainees in a manner consistent with the educational goals of the applicable ACGME-accredited training program and proper patient care, to assess the competence of Trainees in accordance with the applicable program requirements and standards of professionalism, and to encourage fair, efficient and equitable solutions for problems that arise from appointment of Trainees.
- 2.2 In addition, to provide guidelines and define the Graduate Medical Education policy on the required establishment and implementation of fair institutional policies and procedures for academic or other disciplinary actions taken against Trainees and the establishment and implementation of fair institutional policies and procedures for adjudication of Trainee complaints and grievances related to actions which could result in dismissal, non-renewal of a Trainee's contract or other actions that could significantly threaten a trainee's intended career development.

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3.0 Policy Statement:

- 3.1 At Texas Health, we are committed to creating a workplace where diversity is celebrated, and inclusion exists at all levels. As such, Texas Health does not tolerate discrimination in any form or any behaviors that are incompatible with our core values – Respect, Integrity, Compassion, and Excellence and Our Texas Health PromiseSM.

4.0 Provisions:

4.1 Trainee Supervision and Evaluation:

- 4.1.1 Trainees will be supervised by attending physicians in a manner that is consistent with the ACGME common program requirements and program requirements for the applicable training program. Supervision shall be structured to provide Trainees with progressively increasing responsibility commensurate with their level of education, ability, and experience. The Program Director, with input from the program's Clinical Competency Committee, shall make determinations on advancement of Trainees to positions of higher responsibility. As defined in the ACGME Common Program Requirements, the following classification must be used when supervising trainees:

- a. Direct Supervision: The supervising physician is physically present with the resident during the key portions of the patient interaction.
 - i. PGY-1 Trainees must initially be supervised directly as described by ACGME common requirements and program requirements that may describe the conditions under which PGY-1 residents progress to supervised indirectly.
 - ii. the supervising physician and/or patient is not physically present with the Trainee and the supervising physician is concurrently monitoring the patient care through appropriate telecommunication technology. Program requirements must be reviewed as some ACGME review committees may choose not to permit this requirement.
- b. Indirect Supervision: the supervising physician is not providing physical or concurrent visual or audio supervision but is immediately available to the Trainee for guidance and is available to provide appropriate direct supervision.

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- c. Oversight: the supervising physician is available to provide review of procedures/encounters with feedback provided after care is delivered.

- 4.1.2 The Program Director will provide explicit written descriptions of lines of responsibility for the care of patients, which shall be made clear to all members of the teaching teams. Each patient admitted to a Trainee has his/her own private physician. This is the person with whom the Trainee will communicate regarding patient care. There must be a prompt means of accessing input and assistance from these physicians.
- 4.1.3 Each Trainee will be assigned a faculty supervisor for each rotation or clinical experience (inpatient or outpatient). The Trainees shall be provided regular opportunities to meet with the supervising physician. The supervising physician will provide to the Program Director a written evaluation of each Trainee's performance for the period that the Trainee was under his or her direct supervision. The evaluations will be in a format that is uniform within the applicable program. Trainees will be provided an opportunity to review the evaluations. If the Trainee disagrees with the substance of the evaluation, or any part thereof, the Trainee may so indicate and provide written comments and/or an explanation to the Program Director indicating the basis for the disagreement.
- 4.1.4 The Program's Clinical Competence Committee (the "Committee") will meet periodically to review the written evaluations and overall performance of each Trainee. The Committee will advise the Program Director regarding the competence of each Trainee's performance and make recommendations regarding advancement of each Trainee.
- 4.1.5 The Program Director or his or her designee will counsel Trainees individually on their performance at least twice annually during each year of training. The purpose of this counseling is to provide feedback on clinical performance and suggest ways to improve knowledge and skills. More frequent counseling may be held where the Program Director or his/her designee or the Committee determines that a problem exists that deserves more immediate attention.
- 4.1.6 Trainees may review records on their performance with permission from the program, but copies of the records may not be released. The evaluation process, and any action taken regarding a Trainee's status in the program, including, but not limited to, probation, suspension, non-renewal and termination, is performed as "medical peer review" as that

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term is defined under Texas state law.

4.2 Evaluation, Dismissal, Reappointment and Promotion (IR IV.D):

- 4.2.1 The evaluation of each Trainee will be made on a periodic basis and documented in Trainee's record. This evaluation will be based upon overall performance, including observation of patient care and medical record documentation as assessed by Program's supervising physicians, peer evaluations, and other methods appropriate to the specialty. If Trainee performance is considered unsatisfactory, counseling and corrective action up to and including termination of the Trainee's Residency Agreement may be imposed in accordance with conditions indicated in Residency Agreement and Institution policy(ies).
- 4.2.2 Appointment, reappointment, and promotion of Trainee to a subsequent PGY level shall be based on several factors including evaluation of Trainee and the recommendation of the Committee, and in accordance with Institution and Program policies as may be amended from time to time.
- 4.2.3 Each ACGME-accredited program, sponsored by Institution will have a Committee that will establish specific criteria for Trainee promotion. Criteria for promotion will include, but not be limited to:
 - a. Evaluations based on the six ACGME competencies patient care, medical knowledge, professionalism, practice-based learning and improvement, interpersonal and communication skills, and systems-based practice.
 - b. Achievement of milestones specific to program specialty/sub-specialty.
 - c. Performance on examinations throughout the academic year.

4.3 Corrective Action:

- 4.3.1 Conduct Subject to Corrective Action. Trainees may be subject to corrective action as a 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 (collectively "job performance").

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- 4.3.2 Counseling Prior to Corrective Action. Where the Program Director determines that an adverse evaluation or evaluations indicate(s) unsatisfactory job performance in the program, the Trainee may be requested to meet with a program representative for purposes of discussion and counseling regarding the Program Director's concerns prior to the imposition of any corrective action or disciplinary measures. The counseling conference serves as an opportunity to promote a mutual discussion regarding the specific issues or areas of concern, as well as to encourage mutual communications. The Program Director or the Committee will designate a representative from the program to conduct the counseling conference with the Trainee. During the conference, the program representative will inform the Trainee of the basis for the unsatisfactory performance assessment and may advise the Trainee regarding any corrective action that is being considered. The Trainee will have an opportunity to respond to the issues raised and may offer any explanation and/or additional information regarding the facts and/or circumstances surrounding the Trainee's job performance. The Trainee may elect to submit a written statement in response to the conference to the program representative. The program representative will document the event(s) of the counseling conference and any required action by the Trainee in a written summary, a copy of which will be retained in the Trainee's program file. Counseling is not a prerequisite to the imposition of corrective action.
- 4.3.3 Referral for Investigation. The Program Director, the Committee, and/or the Designated Institutional Official (DIO) shall refer allegations of (i) harassment or unlawful discrimination made against a Trainee, and (ii) substance abuse or other impairment of a Trainee for investigation by the Institution's Human Resources, Employee Relations or Compliance department, as applicable, in accordance with Institution Policies and Procedures.
- 4.3.4 Imposition of Corrective Action. "Corrective action" may include, but not be limited to probation, suspension, non-renewal of contract, or dismissal from the program. In the event the Program Director determines at any time that corrective action is warranted with regard to a Trainee, the Program Director will provide written notice to the Trainee stating: (i) the specific corrective action to be taken, (ii) the reason(s) for the corrective action, (iii) notice of the Trainee's right to an appeal of the corrective action, (iv) that failure to request a hearing constitutes waiver of all rights to appeal. If the Program Director determines that the Trainee's job performance presents a threat to patient safety or welfare, the Trainee may be immediately removed from the patient care environment pending

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a corrective action determination. In addition, the following supplemental requirements shall apply for each of the following corrective action measures:

- a. Probation or Suspension. Probation is where the Trainee is formally notified that there are identified areas of unsatisfactory job performance requiring remediation and/or improvement if the Trainee is to continue in the program. Suspension is where the Trainee is temporarily not permitted to perform his or her duties due to unsatisfactory performance requiring remediation and/or improvement if the Trainee is to continue in the program. The notice to the Trainee of either probation or suspension will set a commencement date and duration period for the probation or suspension status and describe the specific remedial action or improvement that is required during this time period.

The Program Director will re-evaluate the Trainee at the end of the probation or suspension period and make a determination to (i) continue the probation or suspension period, (ii) remove the Trainee from probation or suspension status, or (iii) impose another corrective action measure. The Program Director's decision will be documented in the program file and communicated in writing to the Trainee and the Committee chairperson.

- b. Dismissal. Notice of dismissal of a Trainee from the program will include the effective date of the dismissal.

4.4 Appeal of Corrective Action:

- 4.4.1 A Trainee has the right to appeal, any measure of corrective action imposed. The procedures governing the process for Trainee appeals of corrective action determinations are set forth in the Appeal Procedures, a copy of which is attached as Appendix A.

4.5 Non-renewal of Contracts.

- 4.5.1 In the event the Program Director and/or the Committee elects not to renew a Trainee's contract for the next year, the Program Director will provide the Trainee with written notice of this decision. Notice must be provided to the Trainee at least four (4) months prior to the expiration date of the current Resident Agreement, unless the primary reason for the non-renewal occurs within the four (4) months prior to the expiration date, in which case the Program Director must provide the Trainee with as

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much written notice of the non-renewal prior to the expiration date as the circumstances will reasonably allow.

4.6 Trainee Grievances (IR IV.E)

4.6.1 General Grievances. If a Trainee has a complaint or grievance related to matters other than performance, corrective action, discrimination or sexual harassment, the Trainee should first attempt to resolve it by consulting with the Chief Resident(s)/Fellow(s) and/or the Program Director. If the Trainee is unable to resolve it at that level, the Trainee should then present the grievance to the DIO who, if deemed appropriate by the DIO, will present it to the Graduate Medical Education Committee. The decision of the Graduate Medical Education Committee shall be final and binding.

4.6.2 Harassment and Discrimination. If a Trainee has a complaint or grievance related to discrimination or harassment, the Trainee has the right to address said complaint in accordance with the policies and procedures set forth in the Institution Policies and Procedures.

5.0 Definitions:

5.1 DIO – Designated Institutional Officials

5.2 ACGME – Accreditation Council for Graduate Medical Education

5.3 Graduate Medical Education Committee (GMEC) – Responsible for policy and oversight Graduate Medical Education.

5.4 Resident/Fellow – Trainee in a sponsored Graduate Medical Education program.

6.0 Responsible Parties:

6.1 Graduate Medical Education Committee

6.1.1 Implementation and oversight of the policy is the responsibility of the Program Director and the Graduate Medical Education Committee.

7.0 External References:

[ACGME Policies and Procedures](#)

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8.0 Related Documentation and/or Attachments:

8.1 Appendix A – Appeal Procedures

9.0 Required Statements:

Not Applicable

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Appendix A Appeal Procedures

1. FIRST APPEAL – COMMITTEE TO EVALUATE CLINICAL COMPETENCE.

a. Exercise of Right. A Trainee shall first have a right of appeal of a decision to impose corrective action to the program's Clinical Competency Committee ("Committee"). The Trainee may exercise this right by notifying the program's chairperson of the Committee, in writing, of the Trainee's intent to appeal within twenty (20) calendar days of the Trainee's receipt of the notice of corrective action.

b. Appeal Conference. The program's Committee chairperson shall arrange for an appeal conference to be held among the members of the Committee and the Trainee. The appeal conference shall be held within ten (10) business days of the date the chairperson's receipt of the Trainee's notice of appeal. At the conference, the Trainee shall have an opportunity to make a statement, to present any written documentation relevant to the issue(s) and to bring any new or additional information to the attention of the Committee. The program's Committee chairperson shall within ten (10) business days after the date of the appeal conference notify the Trainee in writing of the decision of the Committee and the Trainee's right to appeal that decision.

If the Trainee does not agree with the decision of the Committee, the Trainee may appeal in writing within ten (10) business days of receipt of the Committee's decision to the Designated Institutional Official (DIO). The DIO shall consider the matter and within ten (10) business days provide a written determination to the Trainee. The determination of the DIO shall be final, and binding and no further review or appeal process will be available.