

Project Vida Health Center
Community Psychiatry Residency
Graduate Medical Education Policies and Procedures

Disciplinary Policy

APPROVED: 1/31/2024

REVISED:

EFFECTIVE:

Purpose: For the Sponsoring Institution and its accredited residency program(s) to have a policy that provides the trainee due process when a disciplinary action is needed.

Policy: Project Vida Health Center along with its residency program(s) require that all of their trainees conduct themselves in a professional and competent manner and to abide by institutional and program policies and procedures including those associated with our affiliates as well as local, state, and federal laws. Should a resident have issues of misconduct, falling short of expectations, violate policies and or fail in their performance they will be subject to discipline/counseling depending on the severity of the resident matter. The following procedures outline different types of disciplinary actions. The residency program has the right to enforce any disciplinary actions including immediate termination of a resident without necessarily going through lesser disciplinary actions. Some disciplinary actions are reportable to the state medical board of licensing and may require a performance improvement plan. Disciplinary actions may affect a reappointment of the resident.

Disciplinary Actions

Verbal Warning

A resident may receive a verbal warning from their Program Director, Supervising Faculty, or Department Chair due to a minor violation of standard practice, policy, and or expectation. The verbal warning should serve the resident to understand the violation, so they are able to correct and avoid it in the future. The disciplinarian should be professional while being firm and fair and document the encounter and will be kept in the resident's file.

Written Warning

A written warning may only derive from the Program Director of the residents training program. The written warning serves as a stronger action if there is a prior verbal warning or if the resident's violation exceeds the lesser discipline. The written warning will document the violation and provide the resident a performance improvement plan. The resident and the disciplinarian must both sign the written warning, a copy will be provided to the resident and the original will be filed in the residents educational file.

Probation

Contributing actions that result in a resident receiving probation are failing educational expectations, continuance of violations, not meeting performance improvements, wrongful conduct and or any other

serious problems. Only the residents Program Director of the residents training program may serve the trainee with probation. This action is reportable to the Texas Medical Board. Probation entails communicating with the resident the programs expectations and affected policies, documentation of the resident's action that prompted the disciplinary action, the length of probationary time, notate improvements a resident must meet during the probationary period and disciplinary action taken should the resident not meet the performance improvement within the probationary period.

The resident will receive notification of their probation in writing with probationary details. A copy will be placed in the residents educational file with the residency program as well as their administrative file with the office of Graduate Medical Education. The letter will include probationary details and will be notified and receive a copy of the resident's probation letter. This disciplinary action is not appealable under the adverse actions appeals policy

Suspension

The Program Director or the Department Chair are authorized to place a resident under suspension for egregious violations or misconduct that go against standards, policies, and laws, problems with performance and patterns of violations to include not meeting medical record requirements. Suspension may prolong the completion of the residents training as time lost will need to be made up to fulfill program requirements. Before the suspension of the resident the program director may consult with the program's Clinical Competency Committee for any recommendations. The office of Graduate Medical Education must also be notified prior to the suspension with details noting reason of suspension, length of suspension and if suspension will delay completion of training requirements. It must also include any other notation relevant to the suspension.

The resident will be notified in writing of suspension and include the reason for suspension, acts that precipitated this disciplinary action, length of suspension, loss of wages and benefits during suspension, prolonging completion of training requirements (time), restrictions during suspension and that the action is reportable to the State Medical Board. A copy of the letter will reside with the Office of Medical Education in the resident's administrative folder as well as their education folder in the residents training program. Letters of recommendation or verification of education on the resident's behalf will note the suspension.

Termination

A resident who is terminated during their appointment period may appeal the decision. The resident should refer to the Adverse Action Appeals Policy and Dismissal Policy for more information.

Administrative Leave

There may be various circumstances that may cause a resident to be placed on administrative leave without pay due to institutional, program, or departmental violations related to administrative issues. Administrative leave may not be used to discipline a resident in matters not related to administrative issues. Administrative issues include but are not limited to non-compliance of resident's administrative responsibilities, medical licensure issues, expiration of life support certification, and inability to fulfill necessary requirements to practice and treat patients. It is at the discretion of the Program Director to keep leave permanently notated in the resident's educational record.

The resident will be notified in writing that they have been placed on administrative leave in person, through certified mail, or by hand delivery. Any encounter notifying trainees will require a signature of acknowledgement from the resident. The resident cannot appeal this decision. Details of an administrative leave will include areas of deficiencies and a reasonable deadline for correcting deficiencies, no more than 10 calendar days. The resident will be relieved of all clinical duties without pay. Inability to correct deficiencies will result in additional disciplinary actions as mentioned above to include termination appointment.

Other Administrative Actions

Other Administrative actions as set forth below are non-disciplinary in nature. Residents do not have the right to request review of administrative actions pursuant to the Adverse Action Appeal policy. .

Automatic Resignation: The Resident may be considered to have automatically resigned under the following circumstances:

- Failure to provide Visa or License Verification: Failure of the Resident to provide verification of eligibility to work legally in the United States or verification of current compliance with state licensing requirements of the New Hampshire Board of Medicine and/or DEA registration may result in the Resident's automatic resignation from the GME training program.
- Unapproved Absence: Residents must communicate directly with the Program Director in the event he or she is unable to participate in the training program for any period of time in excess of twenty-four (24) hours. Based on the Resident's communication, the Program Director may grant a leave in times of exceptional circumstances and/or pursuant to D-H policy.
 - If a Resident is absent without leave for forty-eight (48) hours or more, he or she may be considered to have resigned voluntarily from the program unless they submit an acceptable written explanation of any absence taken without leave. This written explanation must be received by the Program Director within ten (10) days of the first day of absence without leave.
- The Program Director will review the explanation and any materials submitted by the Resident regarding the absence without leave in question. The Program Director will notify the Resident in writing of their decision within ten (10) days of submission of the Resident's written explanation. Failure of the Resident to submit a written explanation or failure to explain adequately or to document the unexcused absence to the satisfaction of the Program Director may result in the Resident's automatic resignation from the GME training program.
- The Program Director will consult with the GME office prior to deeming the Resident to have automatically resigned based on the circumstances set forth in this section. The Program Director will provide written notice to the Resident of the Resident's automatic resignation.
- The notice of deemed resignation should be delivered by the Program Director to the Resident in person, if possible. If hand delivery is not possible, the notice should be delivered to the Resident's residence by certified mail/return receipt requested or by national overnight courier service.

- Automatic resignation does not entitle the Resident to the appeal procedures in the Adverse Action Appeal policy.
- Failure of the Resident to Pass the United States Medical Licensing Examination (“USMLE”) Step 3 or Comprehensive Osteopathic Medical Licensing Examination (“COMLEX”) Level 3 in accordance with the requirements and timeframe set forth the USMLE Step III and COMLEX-USA Level 3 Policy of this institution. In this event, automatic resignation will be effective as of the conclusion of the academic year in which the timeframe for passing the licensing examination as set forth above expired.

When a Program Director believes that disciplinary measures are necessary, they must discuss their intended actions with the Clinical Competence Committee, and DIO (unless DIO is the Program Director). When determining the suitable disciplinary actions to propose, the Program Director should weigh various factors, such as the severity of the Resident's conduct, the risk of harm to patients, past attempts to modify behavior, the outcomes of these attempts, and the Program Director's own experience and judgment regarding the Resident's knowledge, skills, and professional progression.

Residents will have the opportunity to meet with the Program Director to discuss the disciplinary action, present their perspective, and attempt to resolve the issue informally.

- If the disciplinary action is not resolved informally, a formal hearing will be scheduled. Residents have the right to present their case, including evidence and witnesses, before an impartial committee or individual.
- Residents will receive a written notice of the hearing outcome, including the committee's findings and the final action taken.

The Program Director will prepare written notice of recommended disciplinary action, adhere to the Adverse Actions Policy and provide a copy of the appeal process for the resident.

The Program Director has the authority to temporarily exclude the Resident from program participation until the appeal request timeframe expires and the appeal reaches a final resolution. When deciding whether to suspend the Resident pending resolution, the Program Director should assess whether the Resident's continued involvement poses a risk to the health or well-being of patients, staff, or others. Additionally, the nature of the underlying concern leading to the Disciplinary Action, such as a serious misconduct allegation, should be considered, favoring suspension during resolution. The Resident will continue receiving their stipend until a final decision on the Disciplinary Action and, if initiated, the appeal.

Residents have the option to appeal a Disciplinary Action following the procedures outlined in the Adverse Action Appeal policy. under the “Appeal Process” section. No disclosure of the Disciplinary Action to external entities, including certifying bodies, professional associations, or other training programs, is allowed until the appeal process concludes or the appeal rights

expire. Exceptions to this rule require written authorization from the Resident or compliance with compulsory legal processes, in which case consultation with counsel is necessary before disclosure. This does not restrict the Program or the GME Office from informing relevant individuals or entities about the Resident's leave to ensure appropriate patient coverage.

The proposed Disciplinary Action will be considered final under the following conditions: when the appeal request timeframe elapses, and the Resident does not submit an appeal; when the Resident withdraws an appeal; or when the appeal process concludes, and the hearing panel either upholds or modifies the recommended Disciplinary Action, in accordance with the procedures outlined in the Appeal of Disciplinary Action Policy.

Certain actions involving physician discipline or adverse action must be reported to the Texas Medical Board. In addition, behavior incompatible with the role of a physician including illegal, immoral or unethical behavior must also be reported to the Texas Medical Board. Required reports shall be made by the Program Director following the conclusion of the appeal process, if invoked by the Resident, or following conclusion of the time period for the Resident to request an appeal (pursuant to Appeal Process from the Adverse Action Appeal policy.). The Program Director will make required reports in connection with GME matters to the Texas Medical Board within 30 days of final decision. A copy of the report will reside at the GME office.

For the appeal process to disciplinary actions see the Adverse Actions Appeals Policy.