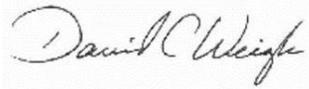


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**Policy Title:** Academic Improvement and Corrective Action



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**PURPOSE**

To establish the procedures for all UT Southwestern Graduate Medical Education (GME) training programs to follow if a resident fails to meet academic expectations and/or engages in misconduct.

**SCOPE**

This procedure applies to all GME training programs at UT Southwestern and all residents training in those programs. For purposes of this procedure, a “resident” means any physician in any GME program at UT Southwestern, including interns, residents, fellows and subspecialty residents. For purposes of this policy and procedure, Accreditation Council for Graduate Medical Education (ACGME) Common Program Requirements will apply to all residents receiving training at UT Southwestern, regardless of whether the program is accredited by ACGME or sponsored by some other body.

**DEFINITIONS**

**Academic Deficiency** - the resident is not meeting an objective assessment of competence in one or more of the ACGME Core Competencies (patient care and procedural skills, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice). Examples of academic deficiencies include but are not limited to:

- Issues involving knowledge, skills, job performance or scholarship;
- Failure to timely achieve acceptable exam scores (USMLE, in-training exam, etc.);
- Tardiness or absenteeism; and
- Unprofessional conduct.

**Misconduct** - the resident’s conduct or behavior violates workplace rules or policies, applicable law, or widely accepted societal norms. Examples of misconduct include but are not limited to:

- Unethical conduct, such as dishonesty or falsification of records;
- Illegal conduct (regardless of criminal charges or criminal conviction);
- Sexual misconduct or sexual harassment;
- Workplace violence;
- Job abandonment; and,
- Violation of UT Southwestern, UT System, or other applicable policies or procedures.

**Structured Feedback** – giving a resident documented assessment of his/her competence in one or more of the ACGME Core Competencies for the purpose of helping the trainee understand aspects of his/her performance in order to reflect on, and where necessary, improve learning and practice.

**Performance Improvement Plan (PIP)** - a plan of remediation designed to improve a resident's proficiency in one or more ACGME Core Competencies. A PIP is not Corrective Action or formal disciplinary action, but rather an educational tool to correct areas of unsatisfactory academic performance by a resident. Therefore a resident may not appeal a PIP pursuant to the General Grievances and Due Process for Corrective Actions Policy. The issuance of a PIP does not trigger a report to any outside agencies, but may be reported should an outside agency specifically inquire whether a resident ever received a PIP.

**Corrective Action** - formal disciplinary action issued to a resident as the result of unsatisfactory academic performance and/or misconduct. The program is not required to issue a resident a PIP as a prerequisite to Corrective Action. Serious academic deficiencies and/or misconduct may warrant Corrective Action up to and including dismissal, regardless of whether a resident ever received a PIP. A Corrective Action may include one or more of the following measures:

- **Probation** - formal notification to the resident that there are identified areas of unsatisfactory performance that will require remediation and/or improvement or the resident will not be permitted to continue in program.
- **Repetition of Rotation** - due to identified areas of unsatisfactory performance, the resident must repeat a rotation and perform at an acceptable level in order to advance to the next level of training.
- **Non-promotion to the Next PGY Level** - due to identified areas of unsatisfactory performance, the resident will not be promoted to the next level of training unless or until the resident's performance improves to the level required.
- **Extension of the Defined Training Period** – due to identified areas of unsatisfactory performance, the resident will not complete the program on time and the defined training period will be extended to allow the resident an opportunity to perform at the level required.
- **Suspension** – the resident is temporarily not permitted to perform any job duties due to unsatisfactory performance.
- **Dismissal** – the resident is permanently separated from the program.

A Corrective Action may trigger a report to outside agencies (*e.g.*, licensing or accreditation boards) and is appealable pursuant to the General Grievances and Due Process for Corrective Actions Policy.

## **PROCEDURES**

### **Providing Structured Feedback**

- A. When a program determines a resident has an academic or performance deficiency, the program may elect to first provide structured feedback to the resident concerning the deficiency.
- B. Structured feedback should include discussion with the resident of the specific (or global) deficiencies and strategies for improvement.
- C. Structured feedback should be documented in the resident's file.
- D. If the program determines that structured feedback has not produced the necessary improvement, or the deficiency is significant enough to warrant more formal action, the program may elect to issue a PIP or Corrective Action.

### **Issuing a Performance Improvement Plan (PIP)**

- A. A PIP must be in the form of a letter from the program director to the resident and should follow the PIP Template available from the UT Southwestern GME Office. A PIP must include:
  - i. formal notice to the resident of the specific academic deficiencies;
  - ii. the remedial action or improvement that is required;
  - iii. a plan of remediation to cure the deficiencies;
  - iv. a defined period of time (*e.g.*, 60 days) with a start and end date.
- B. The PIP must be reviewed and approved by the Designated Institutional Official (DIO) and the Vice President for Legal Affairs before it is delivered to the resident.
- C. The PIP must be signed by the program director (or appropriate designee), delivered to the resident in person, and co-signed by the resident.
- D. A copy of the signed PIP must be placed in the resident's file and forwarded to the UT Southwestern GME Office and the Vice President for Legal Affairs.
- E. At the end of the PIP period, the program director must provide the resident with written notice as to whether the resident has or has not satisfactorily cured the deficiency. A copy of this written notice must be placed in the resident's file and forwarded to the UT Southwestern GME Office and the Vice President for Legal Affairs.
- F. If the program director determines that the PIP is not producing the necessary improvement or the resident has failed to satisfactorily cure the deficiency by the end of the PIP period, the resident may be issued an updated or new PIP or Corrective Action.
- G. A PIP is academic in nature and is not appealable pursuant to the General Grievances and Due Process for Corrective Action Policy.

### **Issuing Corrective Action**

- A. When a program director has determined that Corrective Action is warranted, the program director should first consult the UT Southwestern GME Office. A Corrective Action cannot be issued to a resident until it has been reviewed and approved by the DIO and the Vice President for Legal Affairs.
- B. A Corrective Action must be in the form of a letter from the program director to the resident and must include:
  - i. the specific Corrective Action measure(s) to be taken;
  - ii. a description of the academic deficiencies and/or incidents of misconduct that are the basis for the Corrective Action;
  - iii. the specific remedial action or improvement that is required (unless the Corrective Action is dismissal);
  - iv. a defined period of time (*e.g.*, 60 days) with a start and end date (if applicable);
  - v. notice of the right to appeal, the deadline to initiate an appeal, and that failure to timely appeal constitutes the resident's waiver of all appeal rights.
- C. The Corrective Action should be signed by the program director, delivered to the resident in person, and co-signed by the resident.
- D. A copy of the signed Corrective Action must be placed in the resident's file and forwarded to the UT Southwestern GME Office and the Vice President for Legal Affairs.

- E. If the Corrective Action was suspension or dismissal and the resident timely submits an appeal, the program director may remove the resident from participation in the program pending final resolution of the appeal.

**RESPONSIBILITIES**

**Clinical Competency Committee or Clinical Education Committee** - advise the program director about resident performance and progress and make recommendations to the program director regarding promotion, remediation, and dismissal decisions.

**Designated Institutional Official** – review and approve all PIPs and Corrective Actions before they are issued to the resident; provide guidance to the program director regarding this procedure and the proper handling of academic improvement and corrective action issues involving residents.

**Program Director** - make decisions regarding resident performance; ensure structured feedback, PIPs and Corrective Actions are given in accordance with this procedure and in consultation with the DIO and the Vice President for Legal Affairs.

**Office of Graduate Medical Education** – facilitate the issuance of PIPs and Corrective Action in accordance with this procedure and maintain appropriate documentation.

**Vice President for Legal Affairs** - review and approve all PIPs and Corrective Actions before they are issued to the resident; provide legal guidance to the DIO, the GME Office and the program director regarding this procedure and the proper handling of academic improvement and corrective action issues involving residents.