ACADEMIC IMPROVEMENT POLICY

Policy Statement

The purpose of this policy is to establish a process for evaluating and assessing the competence and progress of Residents enrolled in ACGME-accredited post-graduate training programs at The George Washington University School of Medicine and Health Sciences. Specifically, this policy addresses the process to be utilized when a Resident/fellow is not meeting the academic expectations of a program.

Who Needs to Know This Policy

All Accreditation Council for Graduate Medical Education (ACGME)-accredited residency and fellowship programs sponsored by the GW School of Medicine and Health Sciences (SMHS)

Policy Contact

Associate Dean for Graduate Medical Education, DIO

Who Approved This Policy

Graduate Medical Education Committee (GMEC)

History/Revision Dates

Created: May 16, 2011
Amended: June, 2015
Definitions

Resident – refers to all Interns, Residents and Fellows participating in an ACGME-accredited program of post-graduate medical education.

Post-Graduate Training Program – refers to an ACGME-sponsored residency or fellowship educational program.

Process

Structured Feedback

All Residents and fellows should be provided routine feedback that is consistent with the educational program. Feedback techniques may include verbal feedback, rotational evaluations, summative evaluations, and recommendations of a program’s Clinical Competency Committee. Each residency program must have a Clinical Competency Committee (“CCC”),1 that is charged with routinely assessing Resident performance.

Letter of Deficiency

When the Program Director, in consultation with members of the CCC, determines that routine structured feedback is not resulting in the necessary improvement or that a deficiency is significant enough to warrant something more than routine feedback, the Program Director, may elect to issue a “Letter of Deficiency” to the Resident. The Associate Dean for Graduate Medical Education must be notified prior to the issuance of a Letter of Deficiency. A Letter of Deficiency provides the Resident with: (a) notice of the deficiency: and (b) an opportunity to cure the deficiency. The issuance of a Letter of Deficiency does not trigger a report to any outside agencies such as credentialing organizations, hospitals, or licensing boards.

After a Letter of Deficiency has been issued, the Program Director will provide the Resident with feedback consistent with the Letter of Deficiency. If the Resident satisfactorily resolves the deficiency and continues to perform acceptably thereafter, the period of unacceptable academic performance should not affect the Resident’s progress in the program.

Failure to Cure the Deficiency

If the Program Director, in consultation with members of the CCC and Associate Dean for GME, determines that a Resident has failed to satisfactorily cure the deficiency and/or

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1 The Clinical Competency Committee may be referred to as the “Progress and Promotions Committee” or such other nomenclature as the Program Director may select. This is a departmental committee that consists of the faculty and others as deemed appropriate by the department. This committee should meet regularly to assess Resident/fellow performance and make recommendations to the program director regarding further action.
improve his/her overall performance to an acceptable level, the Program Director may elect to take further action, which may include one or more of the following: Issuance of a new Letter of Deficiency; Non-promotion to the next PGY level; Repetition of a rotation that results in extension of the required period of training; Extension of contract, which may include extension of the defined training period; Denial of credit for previously completed rotations; and Dismissal from the residency or fellowship program.

**Reportable Actions**

A decision not to promote a Resident to the next PGY level, to extend a Resident’s contract, to extend a Resident’s period of training, to deny a Resident credit for a previously completed rotation, and/or to terminate a Resident’s participation in a residency or fellowship program are each considered “Reportable Actions.” Reportable Actions are those actions that the program must disclose upon request to certain individuals or entities such as future employers hospitals, credentialing organizations, and licensing and specialty boards. Residents who are subject to a Reportable Action may request a review as provided in this Policy.

**Review**

**Request for Review**

A Resident may request a review of a decision to take a Reportable Action. This request must be submitted by the Resident to the Associate Dean for GME within fourteen (14) days of notification by the Program Director of the Reportable Action. Upon receipt of a request for review, the Associate Dean for GME will first determine whether the matter is reviewable under this Policy. If so, the Associate Dean for GME shall appoint a neutral physician reviewer to conduct the review. The physician reviewer may be a neutral program director from another program or a core faculty member. The purpose of the review is to determine whether the Resident received notice and an opportunity to cure his/her deficiencies, and that the decision to take the Reportable Action was reasonably made.

*The Associate Dean for GME will:*

1. appoint the physician reviewer;
2. assist the physician reviewer to identify other potential participants, if warranted;
3. attend meetings held by the physician reviewer;
4. coordinate communications between the physician reviewer and the Resident;
5. monitor timely completion of the review process;
6. notify the Resident and the Program Director of the determination of the reviewer; and
7. notify the Dean of the School of Medicine and Health Sciences of the determination of the reviewer.

*The physician reviewer will:*


1. review the request of the Resident;
2. meet with the Resident;
3. review the Resident’s file;
4. talk with the Program Director;
5. consider any extenuating circumstances;
6. consult with others, as appropriate, to assist in the decision making process; and
7. make a determination whether the Resident received notice and an opportunity to cure, and the decision to take the Reportable Action was reasonably made.

**Opportunity for a Final Review**

If either the Resident or the Program Director disagrees with the decision of the physician reviewer, either can request a final review by the Dean of the School of Medicine and Health Sciences of the decision to take a Reportable Action. A request for final review shall be submitted to the Dean of the School of Medicine and Health Sciences within fourteen (14) days of notification by the Associate Dean for GME of the decision of the physician reviewer. The final review by the Dean of the School of Medicine and Health Sciences or his/her designee will be based solely upon whether the process set forth in this Policy was followed. The decision of the Dean of the School of Medicine and Health Sciences or his/her designee will be the final review. The decision of the Dean of the School of Medicine and Health Sciences or his/her designee will be provided to the Resident, Program Director, and Associate Dean for GME.