



## **GRADUATE MEDICAL EDUCATION COMMITTEE POLICY NO. 05**

**A. SUBJECT:** Performance Assessment of Graduate Medical Education Trainees

**B. EFFECTIVE DATE:** March 20, 2019 (R)

**C. POLICY**

The following Performance Assessment of Graduate Medical Education Trainees Policy (hereinafter "Performance Policy") shall apply to all graduate medical education trainees (Trainees) at the University of Virginia Health System. The Performance Policy governs the qualification of Trainees to remain in training, promotion within their training program, as well as the certification requirements for completion of their training program, and its provisions shall apply in all instances in which such qualification, promotion and/or certification is in question.

This policy also addresses deficiencies in performance and options for performance improvement and remediation; failure to promote a trainee, and failure to renew a trainee for the educational program.

**Definition:**

*Deficiency:* Inadequate acquisition of or performance in any of the core competency areas, as expected for the Trainee's level of experience and education.

*Remediation:* A period of time at the discretion of the program director with advisement by the program's Clinical Competency Committee's (CCC) recommendation imposed on a Trainee to improve the competency area (s) of deficiency. Remediation can include repeating one or more rotations or participation in a special remedial program (e.g., participation in a program outlined through the Committee on Achieving Competency through Help [COACH] referral) and will be at least three months. Remediation per se is not appealable, and may be reportable. Adverse actions resulting from unsuccessful completion of remediation are appealable.

*Non-promotion:* The decision by a program director in collaboration with the program's CCC not to advance a Trainee to the next level of training based on deficiency(ies) in core competency areas. The Trainee may be required to repeat a full or part of an academic year, or the end date (i.e., graduation) of the training program may be extended based on requirements from either the program or the certification board.

*Non-renewal:* See GMEC Policy No. 04, Non-renewal of GME Trainees' Appointment.

*Misconduct:* See GMEC Policy No. 31, GME Procedures to Address Trainee Misconduct.

*Adverse Action:* An adverse action may include suspension, non-promotion, non-renewal of appointment, or dismissal of a Trainee from his or her training program. Adverse actions are generally reportable events and appealable.

*Reportable Events:* Those actions the program or institution must disclose to others upon request, including, but not limited to, future employers, privileging hospitals, and licensing and specialty certification boards and, if applicable, the Educational Commission for Foreign Medical Graduates (ECFMG).

## **D. PROCEDURE**

### **1. PERFORMANCE ASSESSMENT AND REVIEW OF TRAINEES**

Trainees shall be evaluated in a timely manner during each rotation or similar educational assignment in line with the relevant accreditation organization's requirements.

The evaluations of Trainee performance must be accessible for review by the Trainee, in accordance with institutional policy.

The program director for each training program has primary responsibility for monitoring the competence of the program's Trainees, for recommending promotion and board eligibility, and, when necessary, imposing any remediation or adverse action.

A CCC in each training program should review all Trainee evaluations regularly but no less than every six months. The CCC should evaluate each trainee with respect to the specialty-specific Milestones that each specialty's Residency Review Committee has designated. The CCC should advise the program director regarding Trainee progress, including promotion, deficiency(ies), remediation, and dismissal. There must be a written description of the responsibilities of the CCC in each program.

The program director must provide a summative evaluation for each Trainee upon completion of each training year and at time of graduation from the training program. The specialty-specific Milestones must be used for the ACGME-accredited programs as one of the tools to ensure Trainees are able to practice core professional activities without supervision.

### **2. PROMOTION**

Those Trainees judged by the program director in collaboration with the program's CCC to have completed satisfactorily the requirements for a specific level of training will be promoted to the next level of training unless the Trainee is enrolled in a training track of limited duration that is not designed to achieve full certification (e.g., a one-year preliminary position).

No Trainee shall remain at the same level of training for more than 24 months, exclusive of leave. A Trainee whose performance is judged to be satisfactory shall advance until the completion of the program/certification requirements.

A program director must provide timely verification of residency or fellowship education and summative performance evaluations for GME Trainees who may leave the program prior to completion.

3. **COACH (Committee on Achieving Competence through Help)**

The COACH program provides comprehensive assessment of the underperforming Trainee and development of an individualized coaching plan. Following assessment and development of a coaching plan, COACH faculty may act as a consultant to the learner's program leadership as the plan is carried out, and/or may participate in the actual coaching process. The COACH program is not directly involved in the learner's reassessment.

- 1) **Trainee Self-Referral to COACH**  
Trainees may self-identify as needing help through the course of their training and seek assistance from the COACH team. Such a self-referral is independent of a formal remediation plan, and there is no required communication between COACH and the Trainee's training program leadership.
- 2) Program directors may suggest that a Trainee consider self-referral to COACH. In this instance, such a recommendation would be outside of a formal remediation plan. The trainee may choose to self-refer to COACH in this instance, which would be voluntary and not mandatory. In this case, there is no required communication between COACH and the learner's training program leadership.
- 3) Trainees may also be referred to the COACH team as part of a formal remediation process. In these cases, participation is a mandatory element and must be included in the trainees' remediation plan, and there is ongoing communication between COACH and the Trainee's training program leadership.

4. **REMIEDIATION**

- 1) **Letter of Remediation:** When one (or more) deficiency (ies) is identified, the Program Director will issue the Trainee a Letter of Remediation. The Trainee must be informed in person of this decision and must be provided with a hard copy that includes the following:
  - A statement identifying the area(s) of deficiency;
  - A plan for remediation (which may include formal referral to COACH) including duration of the remediation;
  - Criteria by which successful remediation will be assessed; and
  - Written notice that failure to meet the conditions of remediation could result in additional remediation or extended training and/or suspension or dismissal from the training program at any point during the remediation period, or at the conclusion of the remediation period.
- 2) The Program Director or designee must document that that meeting with the Trainee has occurred and that the Trainee was provided the Letter of Remediation. The Designated Institutional Official ("DIO") and the program's CCC Chairperson must receive a copy of the Letter of Remediation.
- 3) At the end of remediation period, the program's CCC shall convene to determine if the remediation of the Trainee was successful. If the Trainee

successfully completes the remediation, the program director shall notify the Trainee of successful completion. Written documentation must be included in the Trainee's file describing the satisfactory completion of the remediation. The DIO and the program's CCC Chairperson must receive a copy of the documentation.

- 4) In the case of unsuccessful completion of the initial remediation, the CCC must determine further actions which may include extension of remediation, non-promotion, non-renewal of appointment, summary suspension, or dismissal of a Trainee from his or her training program. If an adverse action is taken, the Trainee must be given a copy of GMEC Policy 32, Adverse Actions and Appeals Process in Graduate Medical Education. The DIO and the GME Office must be notified of such decisions.
- 5) A Letter of Remediation issued to a Trainee constitutes notification that dismissal from the program can occur at any time during or at the conclusion of remediation. Dismissal prior to the conclusion of a remediation period may occur if the deficiency that gave rise to the Letter of Remediation is repeated and jeopardizes patient safety and quality of patient care.

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