

Probation and Dismissal

Content Applies To:

Mayo Clinic in Arizona, Florida, and Minnesota

Scope

This policy applies to students/trainees within the College of Medicine (COM).

Purpose

This College of Medicine, Mayo Clinic policy provides guidelines for due process when an appointee's performance is unsatisfactory.

Policy Statements

The goal of the College of Medicine, Mayo Clinic is for appointees to successfully complete training in a field consistent with their interests and capabilities. However, at times an appointee's performance is unsatisfactory. In these instances a number of options may be considered. Appointments may be extended at the option of the program to enable the appointee to satisfactorily complete the program. An appointee may receive a formal warning of deficiency, may be placed on probation, or may be dismissed pursuant to this Policy following appropriate due process.

Two types of behavior warrant disciplinary action:

Academic Deficiency - This includes documentation of: (a) insufficient medical or scientific knowledge or lack of appropriate technical skills, (b) inability to use medical or scientific knowledge effectively, or (c) any other deficiency that bears on an appointee performance. The following examples would be within the definition of "academic deficiency":

- Inability to master the technical skills required to competently practice in the specialty
- Inability to apply knowledge appropriately to the situation
- Unsatisfactory interpersonal and/or communication skills with patients, colleagues, and other personnel
- Unacceptable academic commitment, such as not fulfilling all responsibilities, participating in all required educational activities, and completing all required documentation and assignments
- Unsatisfactory recognition of own limits, such as failing to seek appropriate help when indicated

Non-Academic Deficiency - This includes violation of any of the following: school or institutional policies or rules, civil or criminal law. Such deficiencies may be of sufficient magnitude to warrant immediate dismissal. The following examples would be within the definition of "non-academic deficiency":

- Harassment, lying or cheating.
- Unauthorized use, possession, dispensing, disposal or introduction of drugs, narcotics, medications or other substances regulated by law into or on Mayo property.
- Unauthorized possession or consumption of alcoholic beverages during or before periods of work or on Mayo's premises.
- Unauthorized use, disposal or theft of Mayo property or the property of other students, employees, or patients, or the conversion of such property to personal use.
- Failure to qualify for required licensure/certification.
- Breaches of patient privacy or confidentiality
- Engaging in criminal behavior
- Violations of Mutual Respect
- Failure to report for expected assignment for three days without notification
- Misrepresentation
- Disregard for patient safety

Disciplinary Actions

Academic or non-academic deficiency could result in a formal warning, probation or dismissal. The Program Director must contact the school Administrator to initiate the action. The Program Director must discuss the concerns with the appropriate school Administrator and Dean or Associate Dean prior to determining the course of disciplinary action. There may be situations where an appointee may be dismissed without progressing through the steps outlined in this policy. Some steps can be repeated or omitted if the facts of the situation warrant it. The Dean or Associate Dean may determine that an appointee will be placed on a paid or unpaid leave of absence during the period of investigation and/or when patient safety or appointee health concerns exist.

Note: The term Program Director is used generically in this policy to refer to the physician or scientific leader of the educational program to which the appointee is appointed. The term Administrator is used generically to refer to the Administrator or Operations Manager of the appropriate school.

Academic Deficiencies:

1. **Formal Written Warning of Deficiency** – The Program Director may issue a formal warning in lieu of, or preliminary to, invoking probation. A formal warning should include:

- A clear description of academic deficiencies, citing examples of academic or clinical performance deficiencies, and referencing previous discussions and documentation of the problems, if any.
- A remedial plan with suggestions to improve performance or behavior.
- Next course of action and timeline.
- Signatures of the appointee and the Program Director and/or Associate Dean

The warning becomes part of the appointee's school record, but may be removed if the deficiency is fully remediated. The Associate Dean determines whether the formal warning document should be removed immediately after remediation or if it should remain in the school record until the appointee completes Mayo training. If performance does not improve following a warning the appointee may be placed on probation and/or subsequently dismissed.

2. **Probation** – When performance is below acceptable standards, as defined by the program/School and following discussion with the Associate Dean, the appointee will be informed in writing by the Program Director or appropriate school Administrator or Associate Dean that he/she has been placed on probation. Probation begins with the date of notification. A plan for remediation, which includes the items in a formal warning, should be provided to the appointee, along with a copy of this policy, and sent to the appropriate Associate Dean. The minimum probationary period is three months for programs of at least twelve months duration. The minimum probationary period may be less than three months for programs of less than twelve months duration. At the end of the probationary period, the Program Director, in consultation with the school Administrator and/or Associate Dean, will choose one of the following actions:
 - Remove the appointee from probationary status
 - Extend the probationary period
 - Dismiss the appointee

3. **Dismissal** – If at the end of the probationary period, the appointee has not successfully remediated the deficiencies, or if the gravity of the deficiency immediately warrants it, the Program Director, in consultation with the school Administrator and/or Associate Dean, may choose to dismiss the appointee from the Program.

The Program Director or school Administrator and/or Associate Dean will notify the appointee of the decision. The appointee will have five business days to elect one of three options:

- Accept the dismissal.
- Submit a resignation, effective at a mutually acceptable date. Resignation precludes appeal.
- Appeal the dismissal.

Non-Academic Deficiencies:

Discipline for non-academic deficiencies will be consistent with the discipline that would be given a Mayo Clinic employee for the same or similar deficiency.

1. **Formal Written Warning of Deficiency** - The program or school may issue a formal warning in lieu of, or preliminary to, invoking probation. A formal warning should include:
 - A clear description of non-academic deficiencies, citing examples of professionalism or behavior problems, and referencing previous discussions and documentation of the problems, if any.
 - A remedial plan to improve performance or behavior. Metrics to measure success in addressing the deficiencies must be reviewed with the trainee.
 - Next course of action and timeline.
 - Signatures of the appointee and the Program Director and school Administrator or Associate Dean

The warning becomes part of the appointee's school record, but may be removed if the deficiency is fully remediated. The Associate Dean determines whether the formal warning document should be removed immediately after remediation or if it should remain in the school record until the appointee completes Mayo training. If performance does not improve following a warning the appointee may be placed on probation and/or subsequently dismissed.

2. **Probation or Dismissal - Non-Academic Deficiency** – When non-academic deficiencies are identified by the Program Director and/or the school, the Program Director must contact the school to coordinate necessary action. The school Administrator, in consultation with the appropriate Associate Dean, will coordinate with the site Human Resources, the chair of the Personnel Committee, the Legal Department if necessary, and the Site Director of Education or designee to determine if probation or dismissal is appropriate. They may also determine that an appointee will be placed on an unpaid leave of absence (suspension) for severe or repeated deficiencies. Upon completion of the review and determination, the appointee will be informed of the decision by the Program Director and school Administrator or Associate Dean.

If the appointee is placed on probation, probation begins with the date of notification. A plan for remediation, which includes the items in the formal warning, should be provided to and signed by the appointee, Program Director, the school Administrator or Associate Dean, along with a copy of this policy, and sent to the appropriate Associate Dean.

If the decision is to dismiss the appointee, the Associate Dean, in consultation with the Designated Institutional Official (DIO) or Dean and the Executive Dean of the College of Medicine or the site CEO as deemed appropriate, will determine

if the appointee will be allowed to resign. The school Administrator or Associate Dean will notify the appointee of the dismissal decision and whether resignation is an option. The appointee will have five business days to elect one of three options:

- Accept the dismissal.
- Submit a resignation (if permitted), effective at a mutually acceptable date. Resignation precludes appeal.
- Appeal to the Dean to review the dismissal

Appeal of Dismissal for Academic and Non-Academic Deficiency

All appeals must be submitted to the Dean of the school in writing within five business days of the action. The Dean will contact the Executive Dean of the College of Medicine or the site CEO, as deemed appropriate where the appointee is in training. Together they will form an Appeal Committee to hear the appeal. The membership of this committee shall be at the discretion of the Dean and Executive Dean or site CEO, and should include at least three members.

Persons with information about the deficiency will be asked to attend the hearing to relate the facts. All relevant academic or other records will be made available. The appeal will proceed only if the appointee appears before the Appeal Committee. Attorneys representing either the appointee or Mayo do not attend the hearing. The appointee's ombudsperson may attend with the appointee. The decision of the Appeal Committee will be one of two options:

- Return the appointee to probationary status with a written remediation plan
- Uphold the dismissal of the appointee

In all cases of appeal, the decision of the Appeal Committee is final. The Grievance Policy is not available for further appeal.

Reference Requests – Applies to MSGME Only

The Program Director must provide the Associate Dean with a written report summarizing the outcome of the disciplinary action. This report will be used as the basis to respond to future reference inquiries. The report should contain information that will address questions about the appointee's performance relative to any disciplinary/remedial process and should include a balanced view of performance for the entire program. The report must be reviewed by the Legal Department prior to placement in the file. In most cases, the appointee may review but not amend the letter. All requests for verification/reference received by the program should be referred to MSGME.

UPMC Division of Vascular Surgery Policies and Procedures

Policy for Resident Remediation/Probation/Dismissal

Academic Probation is an administrative action recognizing that a resident's performance is below the level required for progression. Dismissal is a formal action removing the resident from the academic program. Grounds for remediation/probation/dismissal are as follows:

1. Professional misconduct
2. Violations of the University of Pittsburgh Medical Center policies
3. Failure to demonstrate adequate performance/progression
4. Moonlighting without approval from the Program Director
5. Failure to fulfill educational and administrative obligations
6. Persistent tardiness for shifts or conference
7. Persistently poor evaluations.

Residents requiring remediation will be notified in writing of:

1. Objectives
2. Schedule
3. Expectations
4. End point (time)

Reassessment of remediation objectives, schedule, and expectations is at a maximum of three months. Failure to comply with objectives, schedule, or expectations during the designated time period may result in probation. The minimum designated time period to attain objectives and expectations is not less than three months.

Residents placed on probation are notified in writing of:

1. Objectives
2. Schedule
3. Expectations
4. End point (time)

Reassessment of probation objectives, schedule, and expectations is at a maximum of three months. Failure to comply with objectives, schedule, or expectations during the designated time period may result in dismissal. The minimum designated time period to attain objectives and expectations is not less than three months.

Approved: Michel S. Makaroun, M.D.

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