

Policies and Procedures

<i>Section:</i> School of Medicine		<i>NO.</i>			
<i>Chapter:</i> Graduate Medical Education	<i>Issued:</i> <i>DATE</i> 09/2015	<i>REV. A</i> <i>DATE</i> 06/2019	<i>REV. B</i> <i>DATE</i> 8/2021	<i>REV. C</i>	
<i>Policy:</i> Resident Due Process & Grievance Policy		<i>Page 1 of 5</i>			

PURPOSE

The purpose of the policy is to describe the Graduate Medical Education due process and to establish appeals/grievance procedures consistent with the principles of due process related to academic/administrative adverse actions. These procedures provide guidance for the fair resolution of disputes regarding the resident's performance and conduct.

SCOPE

The policy applies to all Creighton University residents, fellows and their respective training programs.

DEFINITIONS

Appeal Officer: The person who will hear and decide all appeals filed by residents or fellows. For Residents based in Omaha, the Appeal Officer will be the Assistant Dean for Graduate Medical Education in Phoenix. For Residents based in Phoenix, the Appeal Officer will be the DIO.

ACGME: The body responsible for accrediting the majority of graduate medical training programs (i.e., internships, residencies, and fellowships, aka subspecialty residencies) for physicians in the United States. It is a non-profit private council that evaluates and accredits medical residency, fellowship and internship programs.

Clinical Competency Committee (CCC): ACGME-required committee that reviews all resident evaluations semi-annually; prepares and assures the reporting of Milestones evaluations of each resident semi-annually to ACGME; and advises the program director regarding resident progress, including promotion, remediation, and dismissal.

DIO: Designated Institutional Official, who is also the Associate Dean for Graduate Medical Education.

Resident: residents or fellows of any Creighton sponsored GME program.

POLICY

A. General Guidelines

- i. Promotion and re-appointment of a Resident, as well as completion of a training program, is contingent upon the Resident's satisfactory performance in meeting knowledge, performance and behavior standards and expectations as set by the institution, program, accrediting body or medical boards.
- ii. If a Resident does not satisfactorily meet the standards and expectations, they may be subject to a variety of adverse actions as outlined in the policy entitled "Corrective Action Policy."
- iii. All notices under this policy should be delivered to the recipient's official Creighton University email address. Residents are responsible for regularly checking their Creighton email for official communications.

B. Appealing an Adverse Action

- i. The appeals process for adverse corrective actions taken under the policy entitled

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“Corrective Action Policy” are dealt with in this section of this policy.

- ii. Corrective Actions which may be appealed are:
 - Probation
 - Election Not to Promote to the Next PGY Level
 - Extension of the Defined Training Period
 - Non-renewal
 - Dismissal (except where due to loss or restriction of licensure)
 - Determination not to certify a resident to sit for an Accrediting Board if decision is not related to board requirements.
- C. The following procedures will be followed for any appeal:
- i. The Resident notifies their Program Director and the Appeal Officer in writing by email of their desire to appeal within seven calendar days of receiving notification of the adverse action.
 - ii. The Program Director will submit to the Appeal Officer a written summary justifying the adverse action and any related documentation such as evaluations, comments from faculty or other items as related to the decision. This summary and supporting evidence must be submitted within seven calendar days of the notice of appeal.
 - iii. Within seven calendar days of submitting a notice of appeal, the Resident should submit a written summary of the reason the adverse action is not justified, along with supporting evidence.
 - iv. Faculty may submit letters of support for the Resident directly to the GME office. Faculty members who sit on the program’s Clinical Competency Committee cannot be asked to submit letters of support.
 - v. The Resident or the Program Director may ask the Appeal Officer to review relevant patient records. Should the Appeal Officer find that information to be relevant, the Appeal Officer will work with the applicable care facility to review those records in compliance with state and federal law.
 - vi. The Appeal Officer may ask for further clarification of any facts from the Resident and/or the Program Director. The Appeal Officer may also seek additional evidence they feel relevant to the matter.
 - vii. The Appeal Officer will review the documentation and make a final decision within 21 business days of the filing of the appeal. This deadline may be extended if the Appeal Officer needs additional time to obtain access to patient records or review all submitted materials. If such additional time is needed, the Appeal Officer will inform the Resident and Program Director.
 - viii. The appeal process is not controlled by legal rules of evidence nor procedure. No formal record of the appeal documentation or decision is required. The Resident and the Program Director do not have the right to question each other or witnesses. No live hearing will be held.
 - ix. The Appeal Officer’s decision is final and may not be further appealed.
 - x. The fact that the adverse action was appealed and the Appeal Officer’s decision should be properly documented in the resident’s file.
 - xi. If an adverse action is overturned, the adverse action is not reportable to licensing bodies,

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the ACGME or the medical specialty boards.

D. Concerns Related to the Work Environment, Program or Faculty

- i. In the event a Resident has concerns or complaints about her/his program or educational learning environment, it is recommended the resident discuss such concerns with the Program Director and/or Department Chair of their respective program.
- ii. If the Resident believes real or perceived conflicts of interest would preclude or render unproductive such a discussion, it is recommended they engage the DIO or Assistant Dean for GME (Phoenix) for advice and counsel on the most appropriate course of action to address their concerns (e.g., reporting mechanisms through Human Resources, reporting through the Office of Equity and Inclusion, or reporting to the Graduate Medical Education Office).

- E. **Assistance of the DIO and Assistant Dean for GME.** The DIO and/or the Assistant Dean for GME shall be readily available to assist Residents through these processes.

REFERENCES

ACGME

AMENDMENTS

This policy supersedes all program level policies regarding this area/topic. In the event of any discrepancies between program policies and this GME policy, this GME policy shall govern.

Creighton University reserves the right to modify, amend, or terminate this policy at any time.

Reviewed and Approved By:
Omaha GEC: June 11, 2021
Phx GEC: August 2, 2021
Exec GMEC: August 2, 2021