



## POLICY ON REMEDIATION, PROBATION, SUSPENSION AND DISMISSAL OF RESIDENTS/FELLOWS

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### *Version control and change history*

<b>Effective Date</b>	<b>Version</b>	<b>Author/ Editor</b>	<b>Description of change</b>
15/03/2024	1	Prepared by: Designated Institutional Official (DIO) Reviewed by: Graduate Medical Education Committee (GMEC) Approved by: Provost	First release
21/06/2024	2	Prepared by: DIO (Dr. Le Van Phuoc) Reviewed by: GMEC Approved by: CHS Dean	Update version 2

## **1. ABBREVIATIONS**

ACGME-I: Accreditation Council for Graduate Medical Education International

CCC: Clinical Competency Committee

GME: Graduate Medical Education

DIO: Designated Institutional Official

GMEC: Graduate Medical Education Committee

MOH: Ministry of Health

MOET: Ministry of Education and Training

PD: Program Director

Resident: any resident/fellow in a VinUni GME program

## **2. RATIONALE**

This policy ensures appropriate institutional oversight as required by the ACGME-I requirements. The ACGME-I requires that VinUniversity, as the Sponsoring Institution of record, to have a written policies and procedures that address resident evaluation and promotion and that it must monitor each program for compliance. The policy describes the procedures to be employed when a VinUni resident fails to meet performance or academic standards for their training program or acts in a manner that violates a policy or procedure of VinUni, or the applicable VinUni teaching hospital, or applicable laws or regulations from the MOH/MOET, or who otherwise engages in unprofessional conduct. It is the policy of VinUni to employ procedural fairness in matters that may lead to disciplinary action of residents. Absent circumstances warranting immediate disciplinary action, residents will usually be provided with an opportunity to remediate a deficiency, concern, or conduct. In the interests of all concerned parties, the following procedure is to be followed whenever a resident's performance or conduct requires that action be taken under this policy. This policy will also refer to, and rely upon, VinUniversity-wide policies where applicable (e.g. VinUni Code of Conduct). This policy applies to all trainees enrolled in GME programs at VinUni.

### **3. DEFINITIONS**

#### **Extension of Training:**

Extension of training time at any PGY level may be required to meet the educational objectives of the program and/or certification requirements of the department and/or the specialty. The resident should be notified in writing of any requirements for a training extension. All extensions to training should be reviewed by the Clinical Competency Committee.

The final decision regarding a resident's needs for extension of training, advancement, and/or completion of the program is made by the Program Director. Residents may appeal the decision to extend training through the appropriate GMEC grievance procedure.

#### **Letter of Counseling for Feedback and Improvement:**

The Program Director may issue a resident a Letter of Counseling for Feedback and Improvement to informally address a deficiency, concern, or conduct that needs to be remedied or improved within a reasonable timeframe but is not significant enough to warrant formal disciplinary action. Letters of counseling for feedback and improvement should include: the nature of the deficiency, concern, or conduct; outline expectations for improvement; a reasonable observation period; and suggestions for remedial actions. Failure to achieve improvement within the identified timeframe, or repetition or escalation of the deficiency, concern, or conduct, may lead to a Notice of Concern or other actions. A Letter of Counseling for Feedback and Improvement does not constitute a formal disciplinary action and, absent further related incidents, may be removed from the resident's program file. In general, the issuance of a Letter of Counseling for Feedback and Improvement is not subject to disclosure if the program is queried by outside persons or organizations about any disciplinary action or performance concerns.

#### **Notice of Concern:**

The Program Director may issue to a resident a Notice of Concern to formally address a deficiency, concern, or conduct that needs to be remedied or improved immediately. The Notice of Concern shall be in writing and should include: the nature of the deficiency, concern, or conduct; an individualized learning or remediation plan; a time frame for reassessment; and potential consequences if the resident fails to successfully remediate. The Program Director shall review the Notice of Concern with the resident. Failure to achieve immediate and sustained improvement, or repetition of the deficiency, concern, or conduct, may lead to additional notices or other disciplinary actions, including probation, suspension, or **dismissal**. In most cases, the Notice of Concern is used when there has been inadequate improvement after a Letter of Counseling or other informal action.

However, it may be used initially when there is a problem of greater significance or that requires immediate improvement. A Notice of Concern, absent further related incidents, may be removed from the resident's file upon the completion of the program. In general, the issuance of a Notice of Concern is not subject to disclosure if the program is queried by outside persons or organizations about any disciplinary action or performance concerns. If the program director feels that the items identified in the Notice of Concern may impact the resident/graduate's performance as an attending physician, such as if remediation of the identified items has not been completed at the time of resident graduation, the program director may choose to report this to requesting bodies such as prospective employers of the resident/graduate.

### **Probation:**

Probation shall be used for residents who have been unsuccessful at remediating prior concerns, or if the initial concern is significant enough to warrant immediate probation. Conditions of probation shall be communicated to the resident in writing and should include: the reasons for the probation, an individualized learning or remediation plan that must be satisfied in order to be removed from probation, the expected time frame for the required remedial activity, and potential consequences if the resident fails to successfully remediate. Failure to correct the deficiency, concern, or conduct within the specified period of time may lead to an extension of the probationary period or other disciplinary actions, including suspension or **dismissal**. The probationary period should not be less than 30 days and its duration should be proportionate to the nature of the concern. Probation may result in limitations on clinical responsibilities and/or suspension of training credit and, therefore, extension of training may be necessary. In most cases, probation will be preceded by a Letter of Counseling and/or a Notice of Concern, unless the circumstances warrant more significant or immediate action. Probation will remain in the Resident's/Clinical Fellow's file and may be disclosed in response to requests for or queries relating to verification of training, letters of employment, letters of reference, performance concerns, or disciplinary actions.

### **Suspension:**

A resident may be suspended from part or all their usual and regular assignments in the training program, including clinical and/or didactic duties, when removal from the clinical service or a research site is required because of the failure to meet performance, academic, or conduct standards for the training program; failure to comply with a VinUni policy or procedure or applicable law or regulation; or due to otherwise unprofessional conduct. The suspension shall be confirmed in writing, stating the reason(s) for the suspension and its expected duration. Suspension generally should not exceed 60 calendar days and may be coupled with or followed by other disciplinary actions. Suspension will result in suspension of training credit and, therefore, extension of training may be necessary. The

resident's stipend and benefits may continue during the period of suspension, depending on the circumstances and at the discretion of the GMEC. Suspension will remain in the resident's file and may be disclosed in response to requests for or queries relating to verification of training, letters of employment, letters of reference, performance concerns, or disciplinary actions.

**Dismissal:**

A resident may be dismissed, or terminated, from the training program for failure to meet the terms of any prior disciplinary action or if an initial problem is significant enough to warrant immediate separation from the program. The termination shall be confirmed in writing, stating the reason(s) for the termination and the effective date. Training certification shall be granted for the period of months of acceptable service prior to the termination date. The resident's stipend and benefits shall terminate as of the effective date of the termination. Termination will remain in the Resident's/Clinical Fellow's file and may be disclosed in response to requests for or queries relating to verification of training, letters of employment, letters of reference, performance concerns, or disciplinary actions. Residents may appeal the decision to terminate through the appropriate GMEC grievance procedure.

**Investigatory Leave:**

A resident may be placed on investigatory leave in order to review or investigate allegations of deficiencies, concerns, or conduct that warrant removal from the training program for the period of investigation. The PD will notify the resident in writing, stating the reason(s) for and the expected duration of the investigatory leave, and specifying the activities the resident may and/or may not engage in during the duration of the investigatory leave. The investigation should be concluded as quickly as reasonably possible so that the resident can either be returned to the program or disciplinary action can be initiated under this policy. A stipend and other benefits will be continued during the period of investigatory leave. However, waivers of required activities of the program shall not be granted; all program requirements must be fulfilled and, accordingly, extension of training may be necessary. Investigatory leave does not constitute a disciplinary action and absent further related incidents, may be removed from the resident's official program file.

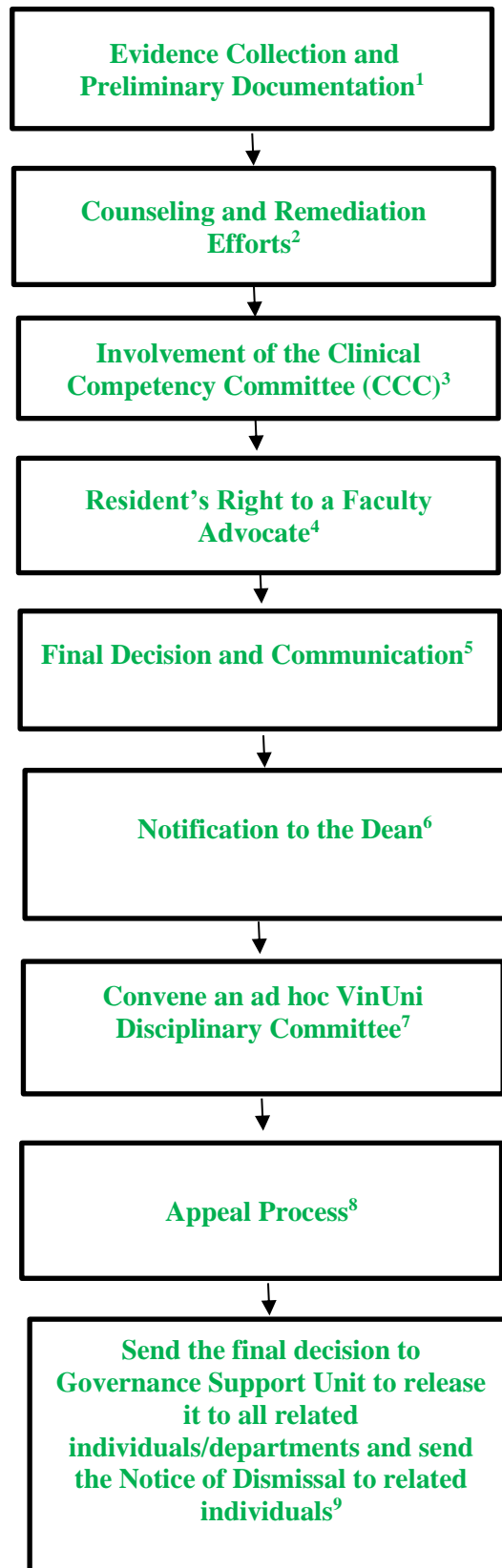
**4. PROCEDURES**

- In advance of issuing a Notice of Concern, probation, suspension, or dismissal, the Program Director should have evidence that supports the need for formal remediation or disciplinary action. This may include written documentation of the date and nature of previous warnings and other communications given to the resident whose performance or conduct fails to meet expected standards (e.g., prior Letter(s) of Counseling or Notice(s) of Concern).

- Before instituting a formal disciplinary action, Program Directors are expected to provide appropriate counseling and/or attempts at remediation, where appropriate and possible, to residents whose performance or conduct is less than satisfactory. However, if a concern is so serious that it poses immediate and/or serious danger to patients, members of the University or hospital community, immediate suspension prior to procedural review may be appropriate.
- A representative majority of the Clinical Competency Committee participates with the Program Director in the decision to institute a Notice of Concern, probation, suspension, or dismissal and development of any remediation plan. The Program Director will formulate a preliminary letter detailing the resident's deficiencies and the plan for remediation (as provided in "Definitions" above) and provide it to the Clinical Competency Committee or subcommittee) and the DIO for input. The Program Director will also provide any documentation of the concerns that led to the disciplinary action, including documentation of previous meetings or other communications with the resident and of any prior efforts to counsel the resident. The CCC will discuss the concerns and make any recommendations for revision of the letter to the resident.
- A resident may choose to have a faculty advocate support them through the process. The faculty advocate may be selected by the resident or recommended by the program director. The faculty advocate will not be a voting member of the Clinical Competency Committee for the purpose of this action.
- The Program Director makes the ultimate decision regarding the appropriate actions and then issues the resident a final letter detailing the deficiencies and the plan for remediation. A copy of the final letter will be provided to the Clinical Competency Committee and to the DIO.
- If the Program Director's final determination will have any effect on stipends, benefits, or training certification, the resident will be informed of this in writing.
- The Clinical Competency Committee shall assist the Program Director in reviewing the resident's progress periodically to determine whether the resident has satisfactorily addressed or remediated the concerns that led to the disciplinary action.
- The Vice Dean for Medical Education shall notify the Dean when a Resident is to be placed on probation, suspension, or is recommended for dismissal.
- If dismissal is recommended, then the Vice Dean for Medical Education shall request the creation of an hoc VinUni Disciplinary Committee. The committee composition shall be at a minimum: head of Student Affairs Management, president of the Student Council, Vice Provost for Student Experience, and a representative from the Registrar's Office. The residency representative shall summarize the rationale for dismissal but will not be a voting member. The committee's decision will be written up and submitted to the Provost for final endorsement and dissemination to appropriate stakeholders.
- The Resident may appeal an adverse decision to the Dean of the College of Health Sciences by notifying them in writing within 5 working days of written receipt of the decision. The Dean's review will be limited to review of whether the procedures set forth in this policy were followed and his/her decision will be final.

**Appendix**

**WORKFLOW FOR DISMISSAL PROCESS**



### *<sup>1</sup> Evidence Collection and Preliminary Documentation*

- **Program Director's Responsibility:** Gather evidence supporting the need for formal remediation or disciplinary action.
  - **Documentation Includes:**
    - Dates and nature of previous warnings/meetings
    - Prior communications with the resident (e.g., Letters of Counseling, Notices of Concern).

### *<sup>2</sup> Counseling and Remediation Efforts*

- **Program Director's Responsibility:**
  - Provide appropriate counseling and/or remediation attempts where possible.
  - Immediate suspension may be considered if the concern poses serious and/or immediate danger to patients or the community.

### *<sup>3</sup> Involvement of the Clinical Competency Committee (CCC)*

- **Decision-Making Process:**
  - A representative majority of the CCC participates in decisions regarding Notices of Concern, probation, suspension, or termination.
  - The Program Director drafts a preliminary letter detailing deficiencies and remediation plans.
  - The draft letter, along with all documentation, is provided to the CCC and DIO for input.
  - The CCC reviews the letter and recommends any necessary revisions.
- **Periodic Review of Resident's Progress**

#### ***CCC's Role:***

- Assist the Program Director in periodic reviews of the resident's progress.
- Determine whether concerns have been satisfactorily addressed or remediated.

### *<sup>4</sup> Resident's Right to a Faculty Advocate*

- **Support System:**
  - Residents may choose or be recommended a faculty advocate.
  - The faculty advocate supports the resident but does not vote in the CCC decision-making process.

### *<sup>5</sup> Final Decision and Communication*

- **Program Director's Authority:**
  - Makes the ultimate decision regarding the appropriate action.
  - Issues a final letter to the resident detailing deficiencies and remediation plans.
  - Provides copies of the final letter to the CCC and DIO.
  - If there are effects on stipends, benefits, or training certification, this is communicated in writing to the resident.

### *<sup>6</sup> Notification to the Dean*

- **Vice Dean for Medical Education:**
  - Informs the Dean when a resident is placed on probation, suspension, or recommended for dismissal.



<sup>7</sup> *Convene an ad hoc VinUni Disciplinary Committee*

- **Convene VinUni Disciplinary Committee** (minimum composition: head of SAM, Vice Provost for Student Experience, Registrar's office, head of student council)
- **GME program will summarize the rationale for dismissal**
- **Issue decision based on conclusion of committee and seek provost's signature.**

<sup>8</sup> *Appeal Process*

- **Resident's Right to Appeal:**
  - Appeal to the Dean of the College of Health Sciences within 5 working days of receiving the decision.
  - The Dean's review is limited to assessing adherence to procedural policies.
  - The Dean's decision is final.

<sup>9</sup> *Send the final decision to Governance Support Unit to release it to all related individuals/departments and send the Notice of Dismissal to related individuals.*

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