

Due Process

Grievance Procedures and Due Process:

a. Grievance procedures are governed by the GMEC. The GMEC is a fact-finding body that has the responsibility of hearing grievances regarding house staff and voting on necessary action to be taken. The GMEC is chaired by the ACOS/E or his/her designee and consists of program directors and resident representatives.

1) A resident may grieve an action taken against him or her through the GMEC. A request must be made to the Chair of the GMEC in order to have the Committee hear the grievance.

2) Residents may also request assistance from the GMEC in instances where a formal action has not been taken but a problem exists that cannot be worked out with the program director or the Chair of the GMEC.

b. Procedure for Routine Evaluations:

1) All teaching relationships with residents should be accompanied by conversations with the attending or staff physician or program director on a regular basis. The attending or staff physician for the rotation will complete a written evaluation of resident performance for the rotation.

2) Residents have the responsibility to review their evaluations following each rotation. Copies of evaluations may be obtained from the program director.

3) Formal evaluation sessions between the program director and each resident are conducted at least twice per program year to discuss written evaluations. The first review of the first program year will take place after the first six months. All reviews will be documented and signed by the program director. Following these sessions, the resident will be asked to sign indicating that the evaluations were discussed with the program director.

4) The program director may also determine if additional reviews are needed during the program year. In particular, attending physicians for specific rotations should bring any less than satisfactory evaluations to the attention of the program director who will review the matter with the resident and provide the resident with an opportunity to respond to the evaluation(s) verbally and/or in writing. Subsequent reviews may be scheduled to look particularly for the correction of any deficiency.

5) In addition to reviews with the program director, the resident may also meet personally and privately with the Professional Department Chair to present his/her point of view concerning evaluations or reviews. If he/she subsequently desires a further hearing, he/she may, with the knowledge of the Professional Department Chair, address himself/herself to the Chair of the GMEC. Grievances may be brought to the Chair of the GMEC at any time. However, delays of more than 2 weeks after an action is taken may interfere with the ability to remedy certain adverse actions.

6) Program directors should present the cases of residents who are likely to be considered for probation by the Department Clinical Competency Committee (or its equivalent) to the GMEC.

c. Problem Remediation

1) Problem remediation may be used if a resident is unable to perform his or her duties up to the expected level required by the program, but the problem is not of such a serious nature that patient welfare (or the welfare of the resident) is endangered.

2) Following discussion of the problem, a corrective plan with specific recommendations for action and time frames for review will be developed between the resident and the program director. The program director will document the discussion in writing. The resident is given an opportunity to respond in writing if desired.

3) The program director will meet with the resident at a specified interval to review the resident's progress. If the resident has complied with the plan and made improvements, a resolution of problem remediation will be noted in the resident's file.

4) If the resident is making an effort but the problem continues, the resident may be continued on problem remediation at the discretion of the program director. If the resident has not complied with problem remediation, he or she may be placed on probation.

d. Probation

1) Probation is an opportunity period for a resident to bring his/her performance to a satisfactory level with the aid of more intensive counseling and monitoring. The recommendation to place a resident on probation requires a majority vote of the Department Clinical Competency Committee (or its equivalent). The recommendation for placing a resident on probation must be presented to the GMEC for its concurrence.

2) The specific actions or deficiencies that led to the recommendation of probation must be specified in writing. The conditions of probation (i.e., what the resident will be expected to do differently), and the specific measures taken by the service to help the resident achieve these goals must also be detailed. A copy of this statement will be presented to the resident, and other program directors to which the resident may be assigned.

3) The length of probation will be specified, together with the various options that can occur following the completion of the probationary period. A period of probation will usually be from 1 to 3 months, but may occasionally be for the duration of an academic year. If the period of probation is continued for an additional specified period of time, a redefining of the problems and conditions must be produced according to the directions in section C above.

e. Appeals of Probation

1) A resident placed on probation has the right to appeal the action to the GMEC. The resident must make a written request to the Chair of the GMEC in order to have the committee hear the appeal. Following the receipt of such a request, the Chair of the GMEC will notify the resident of the time and place for the meeting at least two weeks prior to the date.

2) The resident will be given an opportunity to present additional information, take issue with the Department's decision, and/or call witnesses in support of his/her position before the GMEC. He or she will also be given the opportunity to bring a representative of choice who may aid and counsel the resident. Since the GMEC meets to investigate facts, and does not conduct an adversarial hearing, there is no cross-examination, and an attorney may not directly participate in questioning.

3) If the GMEC upholds the resident's appeal, then probation will be immediately terminated. All documentation of probationary action will be removed from the resident's file.

f. Options after Probation

At the end of probation, the following may occur:

1) The probation may be terminated with a statement in the resident's record that the conditions of probation were satisfactorily resolved and the issues are no longer considered to be a serious problem. Satisfactory completion of a period of probation cannot result in removal of documentation of the action from the resident's file.

2) Temporary Suspension

a) A resident can be temporarily suspended at once if the Department Clinical Competency Committee (or its equivalent) believes that the retention of a resident would jeopardize patient care or welfare, or that the resident should not be permitted to continue with his/her responsibilities for some other serious reason. This action must be presented to the GMEC for concurrence. The resident may then appeal to the GMEC according to section D above.

b) A temporary suspension may also follow a probationary period during which the resident has failed to bring up his/her performance to satisfactory standards.

3) Termination From the Program

a) Termination from the program may follow a temporary suspension in the absence of an appeal, or if the decision of the Department Clinical Competency Committee (or its equivalent) to terminate a resident is affirmed by a 2/3 majority vote of the GMEC members present and then presented to the Deans Committee, which assures that due process has been followed.

b) The minutes of the GMEC, transmitted by the Chair of the GMEC, will serve as the means of informing the Deans Committee of the actions undertaken.

c) The decision to dismiss a resident may be taken after the resident has been on probation. Under unusual circumstances, a Program Director may determine that an abrupt decision necessitating premature dismissal of a resident should be carried out without awaiting the normal probation process. Under these circumstances, the resident should be assigned a role in the service which removes him or her from any responsibility for direct patient care, until the case can be heard by the GMEC, and the decision of the GMEC approved by the Deans Committee. The resident will thus be considered to be temporarily suspended, pending completion of the grievance procedure.

d) The Director of the VA Greater Los Angeles Healthcare System will be informed of any final actions taken.

e) Any further appeals requested by the resident in addition to those covered by this document must be made directly to the Chief of Staff.

a. Non-renewal of Appointment

Residents must be informed in writing of any recommendation upheld by the GMEC not to renew his or her appointment no later than four months prior to the end of the resident's current agreement of appointment. An exception to this policy is if the primary reason(s) for the non-renewal occur(s) within the four months prior to the end of the agreement of appointment. In such a case, the recommendation not to renew an appointment must be considered as a premature dismissal. The resident will be allowed to grieve the decision of the GMEC in accordance with grievance procedures outlined in this section.

h. Withholding of Recommendation to Take Specialty Boards:

1) The withholding of recommendation to take specialty boards could result from the nature and/or frequency of the resident having received less than satisfactory regular periodic evaluations. The decision to withhold approval to take specialty boards is not made by the facility; this decision is made by the specialty board.

2) The resident must be afforded opportunity to grieve evaluations that were submitted that resulted in withholding of approval to take specialty boards. This request must be submitted in writing to the chair of the GMEC as in E1 above.

By:

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Resident