

GRADUATE MEDICAL EDUCATION POLICIES AND PROCEDURES

Subject:	PROMOTION, APPOINTMENT RENEWAL AND NON-RENEWAL/DISMISSAL POLICY
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PROMOTION AND APPOINTMENT RENEWAL

Residents and fellows (“trainees”) in accredited and GMEC approved training programs will be promoted to higher levels of responsibility based on their accomplishments and achievements during the past year. Successful completion of training at the current year or approval for graduation is dependent upon the trainee demonstrating achievement of the competency-based milestones and objectives and successfully completing all required rotations at each level of training.

Programs must have a policy that determines the criteria for promotion of a resident/fellow. The Program Director, in consultation with the Clinical Competence Committee (CCC), determines if a resident/fellow has successfully met those requirements. The decision to offer a promotion to a trainee will be conveyed to the trainee by the Program Director after a review of his/her faculty evaluations, all other required evaluations, performance, in-training exams and other specified measures. Documentation of trainee performance must be done at least semi-annually with the trainee (semi-annual evaluation) and at graduation (summative evaluation), as consistent with ACGME requirements.

If a Program Director, in consultation with the CCC determines that a resident/fellow is not meeting the criteria for promotion, the Program Director has several options. The Program Director must determine, on a case by case basis, which of the following options is most appropriate to address perceived deficiencies in performance for a particular trainee. The option for an academic deficiency is remediation. The option for other deficiencies (i.e. interpersonal communication, professionalism) may be individualized for the particular deficiency noted.

The Program must define the remediation period and expectations, and review with the trainee. A signed copy of the remediation plan must be provided to the trainee and the DIO. In addition, the remediation plan must be signed/dated by both the Program Director and the trainee. The deficiency(ies) and plan must be noted in the semi-annual evaluation. The semi-annual evaluation, including remediation plan, must occur no later than two (2) weeks before submission of the milestones.

No trainee may remain at the same level of training for more than 24 months exclusive of leave.

On an annual basis by December 31st of each year, all Program Directors must provide the GME office with a list of trainees to be promoted. This must be done after consideration by the Program

Director, the CCC and as a result of the semi-annual evaluation. The GME office will authorize the program to generate renewal agreements.

The annual contracts/agreements for renewal must be distributed to trainees by February 1st. Trainees who are eligible for contract renewal must return their signed contracts to the Program Director or designee by March 1st. All contracts/agreements must be posted in resident MedHub profiles in a timely manner. All information is to be current by April 1st.

USMLE Step 3 (Final Exam) Requirements

Residents/fellows are expected to complete all three (3) steps of the USMLE or COMLEX (if applicable) sequence before advancement beyond the 2nd year of training. Completion of these are required in order to qualify for a license to practice medicine without supervision.

If the PGY 2 resident does not pass the USMLE Step 3 or COMLEX exam by the end of the PGY 2 year (June 30th), the resident's Bridgeport Hospital Resident Agreement will NOT be renewed for the PGY 3 year. A resident's PGY 2 year will NOT be extended to meet these requirements.

Every trainee is responsible for providing copies of the USMLE/COMLEX Step 3 Exam results to the Program Director.

Program Directors are responsible for ensuring all USMLE/COMLEX information (date taken, score, status, etc.) are posted in resident MedHub profiles in a timely manner. All information is to be current prior to the start of the next academic year.

Exceptions to this requirement will only be made by Bridgeport Hospital's Designated Institutional Official (DIO), in consultation with the Program Director, and only in extremely rare circumstances.

NON-RENEWAL/DISMISSAL

Programs must have a policy for non-renewal/dismissal for their program.

On an annual basis by December 31st of each year, Program Directors must provide the GME office with a list of trainees who will either not be promoted or for whom promotion is questionable (where a remediation or other plan is in place or Step 3 non-compliance). Program must provide on-going communication to the GME office about those trainees for whom promotion is questionable so appropriate action can be taken (either GME office authorizes the program to generate a renewal agreement or the program follows the Institutional and Program policies for non-renewal/dismissal).

Residents/fellows whose contracts/agreements will not be renewed due to performance deficiencies must be provided with written notice of intent not to renew their agreement/contract. This must occur no later than four months prior to the end of the trainee's current agreement. In addition, the Program Director must also inform the trainee of the right to implement grievance procedures under that circumstance. If the primary reason(s) for the non-renewal/non-promotion occurs within the four months prior to the end of the agreement/contract, residents/fellows will be given as much notice of the intent to not renew/promote as the circumstances will reasonably permit, prior to the end of the agreement/contract. All written notices must be signed/dated by the

trainee and Program Director and provided to the trainee and DIO. The trainee must be provided with a copy of the Grievance Policy.

Any and all RRC Requirements governing resident evaluation, promotion, appointment renewal, non-renewal/dismissal should be strictly followed.