Name of Policy: **GME: Inadequate Resident Performance and Due Process for Appeal of Corrective Actions** **Policy Number**: **3364-86-008-00** **Approving Officer**: Dean, College of Medicine and Life Sciences **Responsible Agent: DIO (Designated Institutional Official)** **Scope**: UT College of Medicine Residents	**Revision/Reviewed date:** **10/6/2026 Original effective** **date: 05/1997**

	New policy proposal		Minor/technical revision of existing policy
X	Major revision of existing policy		Reaffirmation of existing policy

POLICY

The University of Toledo must provide residents with fair, reasonable, and readily available written institutional policies and procedures for due process for appeal of corrective actions. The policy and procedures minimize conflict of interest by adjudicating parties in addressing:

1. Corrective actions taken against residents that could result in dismissal, non-renewal of a resident's agreement, non-promotion of a resident to the next level of training or being placed on probation.

2. Providing Program Directors with procedures for implementing appropriate processes and guidelines for remediation and corrective actions for residents based on Academic and Non- Academic Deficiencies.

DEFINITIONS

Corrective Action: Any or all actions intended to improve the resident's academic, behavioral, and/or professional performance necessary in order to ensure patient safety and expected academic and clinical development.

Academic Deficiency: Such deficiencies include but are not limited to (a) insufficient fund of medical knowledge; (b) an inability to use medical knowledge effectively in patient care; (c) lack of appropriate technical skills; (d) any other deficiency which materially bears on an individual's academic clinical performance.

Non-Academic Deficiency: Such deficiencies include but are not limited to a violation of professional responsibility, humanism, collegiality, dishonesty, risks to patient care or a violation of University standards, rules or law.

Corrective Actions eligible for Appeal:

1. Dismissal from the residency program.
2. Non-renewal of resident agreement.
3. Renewal of resident agreement, but without promotion to the next level.
4. Probation from the residency program.

PROCEDURE

Corrective Actions

1. Programs may have individual policies that include corrective actions for Academic or Non-Academic Deficiencies that are of a lesser degree than those that warrant a Warning, Probation or other significant action. These actions are internal to the program and do not require approval by Associate Dean of GME. Such actions may include Informal Remediation or a similar action, and documentation of such an action should be maintained in the resident/fellow's file.

2. When corrective actions for Academic or Non-Academic Deficiency requiring greater action than only internal program mechanisms becomes necessary, the Program Director will first discuss the matter with the Associate Dean for Graduate Medical Education (GME) before proceeding to any of the following steps. The remedial or disciplinary action must be approved by the Associate Dean of GME.

3. Corrective Action(s) for Warning Status for Academic Deficiency or Non-Academic Deficiency:

   If the Program Director deems a correction of this level sufficient, the procedure is as follows:

   a. Schedule an appointment with the Resident to discuss the Resident's performance.
   b. Review with the Resident the written performance evaluations and concerns of the program.
   c. State clearly to the Resident what action is to be taken by the program.
   d. State clearly to the Resident what is expected of him/her for remediation and that he/she is placed on "Warning Status".
   e. Give the Resident a time-frame schedule for the suggested remediation for a minimum period of 60 days.
   f. Schedule a meeting(s) with the Resident during the period of Warning.
   g. Complete an *Individualized Plan* (appendix A) and review with the resident.
   h. Provide the Resident a copy of the completed *Individualized Plan* outlining the content of the meeting that informs the Resident that he/she is on "Warning Status", a clear listing of the remediation requirements, the date of the follow-up meeting, and a copy of this policy. A copy of the letter will be sent to the Graduate Medical Education Office (GME).
   i. If the resident cannot be located or otherwise fails or refuses to meet with the Program Director, the Program or Sponsoring Institution will notify the resident in writing about the Corrective Action by any available means designed to reach the resident which will be deemed sufficient notice. Certified mail will be used as the preferred method of communication when an in-person meeting is not possible.

4. Corrective Actions for Probationary Status for Academic or Non-Academic Deficiency.

   If the Resident does not achieve remediation during the Warning Status period, or if the Program deems the deficiency too severe to be remedied by "Warning Status", the program may place the resident on "Probationary Status". The procedure is as follows:

   a. Schedule an appointment with the Resident to discuss the Resident's performance.
   b. Review with the resident the written performance evaluations and concerns of the program.
   c. State clearly to the Resident he/she has been placed on Probationary Status.
   d. Complete an *Individualized Plan* and review with the resident.
   e. After the Resident is informed, the Program Director shall give written notice and a copy of the *Individualized Plan* to the resident. A copy shall also be provided to the GME Office.
   f. The Probationary Status period will begin with the date of the notice and shall be a minimal period of sixty (60) days.
   g. Written suggestions for improvement, as outlined in the *Individualized Plan*, of the Resident's performance shall be given to the Resident along with a copy of this policy.
   h. During the probationary period, efforts shall be made to advise, tutor, and otherwise aid the Resident to correct deficiencies with the acknowledged goal of keeping him/her in the program. It shall, however, remain the Resident's responsibility to correct the deficiencies.
   i. Schedule a meeting(s) with the Resident during the period of probation.
   j. If the Resident's performance continues to be deficient at the end of the probationary status period, he/she shall be given written notice, from the Program Director of the deficiency; and an *Individualized Reassessment Plan* will be completed, reviewed and provided to the resident. A copy shall also be provided to the GME Office.
   k. After the Resident receives this notice, within 1 week he/she may respond, in writing or in person, and provide his/her explanation for such deficiency.
   l. If the resident cannot be located or otherwise fails or refuses to meet with the Program Director, the Program or Sponsoring Institution will notify the resident in writing about the Corrective Action by any available means designed to reach the resident which will be deemed sufficient notice when an in-person meeting is not possible.
   m. After the Resident has responded or failed to respond, the Program Director may take the following actions:
      - Remove the Resident from Probationary Status
      - Extend the Probationary Status period
      - Recommend non-promotion, dismissal, or non-renewal of the Resident from the training program

      The Program Director shall inform the Associate Dean for GME of the decision.

5. Non-Renewal/Dismissal for Academic and Non-Academic Deficiency

    a. If the Program Director recommends Non-renewal or Dismissal of a Resident, either because the Resident has not benefited adequately from a Warning or Probationary Status or because the Program Director deems the deficiency so grave as to warrant Non-Renewal or Dismissal the Associate Dean for GME must approve the decision of the Program Director.
    b. The notice to the Resident must include a description of the basis upon which the decision for Non-Renewal or Dismissal was made and the process for lodging an appeal. The Program Director will complete an *Individualized Plan* and review with the resident. A copy of the *Individualized Plan* will be provided to the resident and GME office. The resident will also receive a copy of this policy.

Appeal Process for all Eligible Corrective Actions

1. The Resident will have five calendar days from the date of the meeting with the Program Director and receipt of the *Individualized Plan* in which to appeal the Corrective Action decision and request a review of the case. This request must be submitted to the Associate Dean for GME. After five calendar days the right to appeal is waived and the decision of the Program is final. The following steps for requests for Appeal Review of Corrective Action shall occur:

    a. The Resident will request an appeal by emailing the Associate Dean for GME.
    b. After submitting the appeal request, the Resident has seven (7) calendar days to provide additional documentation supporting their case to the Associate Dean for GME.
    c. The Associate Dean for GME or his/her designee will review the information provided on the Corrective Action and the response from the Resident.
    d. The Associate Dean for GME will render a summary decision regarding the matter. The decision will be sent in writing to the resident, with feedback to the appealing resident's program.
    e. The summary decision from the Associate Dean for GME will be one of two forms:
        - Support of the Program's decision as it pertains to the eligible Corrective Action
        - Non-support of the Program's decision as it pertains to the eligible Corrective Action
    f. The Associate Dean for GME's decision will be final, and the resident shall have no further right of appeal.
    g. This is not a formal legal hearing, and rules of evidence will not apply. The Resident is not entitled to legal or other representation. Prior to the appeal, the Resident will be given copies of applicable and significant materials. However, an appealing resident shall not have the right to discovery of non-relevant, privileged or confidential records, nor documents containing private and protected health information of patients.

Pendency of Action

Generally, implementation of disciplinary action will be suspended until all appeals made by the resident have been exhausted. However, the Associate Dean for GME, Dean of the College of Medicine, or their designee may, at their discretion, impose interim suspensions or restrictions on the Resident if they reasonably believe that the alleged conduct represents a threat to the safety of any person.

Resignation

1. Resignation

    a. Except as provided in subsection (d) below, a Resident may waive their rights to appeal and resign from the program.
    b. If the resident chooses to resign once placed on Non-Renewal or Dismissal Status the resident's file will indicate he/she "resigned in lieu of Non-Renewal or Dismissal"
    c. If the resident chooses to resign once placed on Probation, the resident's file will indicate he/she "resigned while on Probation"
    d. The University reserves the right to not accept a resignation in lieu of Non-Renewal or Dismissal status if the reason for Non-Renewal or Dismissal involves, but is not limited to, conviction of a criminal activity, suspected criminal conduct, act of moral turpitude, forgery, alteration or misuse of University documents, and/or misuse of controlled substances; in this case the resident's file will reflect a Non-Renewal of contract or Dismissal from the program.

Approved by: */s/* Shaza Aouthmany, M.D. Chair, Graduate Medical Education Committee */s/* Imran Ali, M.D. Dean, College of Medicine and Life Sciences *Review/Revision Completed by:* *Graduate Medical Education Committee*	**Policies Superseded by this policy:** None **Initial effective date**: 05/1997 **Review/revision date**: Reviewed 5/99, Revised 4/01, Reviewed 4/03, Reviewed 4/05, Revised 6/05, Revised 2/6/07, Review 2/3/09, Revised 7/6/10, Revised 6/7/11, Revised 6/4/13, Revised 6/3/14, Revised 4/14/15, Revised 8/6/19, Reviewed 8/3/21, Reviewed 8/25/23, Revised 2/25/2025, Revised 10/6/2026 **Next review date**: 10/6/2029

Note: The printed copy of this policy may not be the most current version; therefore, please refer to the policy website *http://utoledo.edu/policies)* for the most current copy.