

PERFORMANCE IMPROVEMENT AND REMEDIATION

I. Introduction

1. The goal of performance improvement and remediation is to improve the resident's performance and/or correct a deficiency in an effort to retain the resident in the program.
2. Identified deficiencies may be in academic, clinical, and/or professionalism domains. All of these categories are eligible for either a Performance Improvement Plan or a Remediation Plan.

II. Policy

1. It is the responsibility of the department to identify residents who may benefit from a Performance Improvement Plan (PIP) and/or a Remediation Plan, and to offer guidance, counseling and supervision to aid the resident in correcting the deficiencies during the performance improvement or remediation period.
2. It is the responsibility of the resident to correct the deficiencies identified in the PIP or Remediation Plan, and comply with the requirements of the plan.
3. The decision to employ performance improvement and/or remediation rests with the Departmental Clinical Competency Committee. The implementation of performance improvement and/or remediation is the responsibility of the Program Director. The Clinical Competency Committee may make its determination at any regularly scheduled meeting, or at a meeting scheduled outside of its regular meeting timeframe, if necessary.
4. In limited situations where it would not be feasible to convene the Clinical Competency Committee in a timely manner so as to be responsive to a resident's need for performance improvement or remediation, a Program Director may make the decision to implement performance improvement or remediation. The decision must be made in collaboration with the Associate Program Director, Department Chair and the Associate Dean for Graduate Medical Education.
5. Except as indicated in this paragraph below, a Performance Improvement Plan may only be offered one time to a resident. Thereafter, a Remediation Plan shall be implemented, which is generally reportable on licensing applications and credentialing forms. In the event a Performance Improvement Plan is implemented as a result of poor performance on an In-training Exam (ITE), a subsequent Performance Improvement Plan may be offered to the resident to address a future academic deficiency, at the discretion of the Program Director or Department Chair. Multiple Performance Improvement Plans may be implemented to improve poor ITE scores.
6. There is no requirement that a resident be placed on a Performance Improvement Plan prior to being placed on remediation. A Program Director or Department Chair may determine the need for remediation without a Performance Improvement plan.

7. The Associate Dean for Graduate Medical Education will be informed of the intent to place a resident on a Performance Improvement Plan or Remediation Plan, and will have the opportunity to provide input into the PIP or Remediation Plan.
8. Performance Improvement
 - a. A Performance improvement Plan may be implemented to advise a resident of his/her need to correct behavioral deficiencies or lapses in professionalism, which may include:
 - i. Violations of NSHE policies
 - ii. Violations of institutional/departmental policies
 - iii. Violations of rules at a training site
 - iv. Violations or rules or statutes governing conduct of physicians practicing in the state of Nevada
 - v. Any act or omission that is serious enough to require performance improvement
 - b. A Performance Improvement Plan may be implemented to advise a resident of his/her need to correct deficiencies in academic and/or clinical performance that fall below a minimally acceptable standard at his/her level of training.
 - c. These performance improvement procedures apply only to residents *after* they have been accepted and begin participating in a residency program. The terms of any performance improvement established as a condition of acceptance into a residency program will be specifically set forth in the resident's initial employment agreement. In such an event, the contractual provisions will govern.
9. Remediation
 - a. Remediation may be implemented under the following circumstance:
 - i. The resident is not successful with his/her Performance Improvement Plan;
 - ii. The resident demonstrates a clinical or academic deficiency that resulted or may have resulted in harm to a patient and/or other healthcare providers; or
 - iii. The resident demonstrates performance, professionalism, actions, or inactions that are concerning enough to place him/her on a Remediation Plan.
 - b. The Program Director or Department Chair will provide the resident with a written Notice of Action notifying the resident of the intention to place him/her on remediation.
 - c. A Notice of Action shall contain, at a minimum, the following information:
 - i. A statement indicating that the resident is being placed on remediation
 - ii. A statement describing the specific basis for the decision to implement remediation
 - iii. Clearly written expectations and/or requirements to improve the resident's performance, including the terms of the remediation
 - iv. The timeframe for remediation
 - v. The consequences for insufficient performance on remediation
 - d. Copies of all Notices of Action must be provided to the Associate Dean for Graduate Medical Education.

III. Procedure

1. Performance Improvement

- a. Following a decision to implement performance improvement, the Program Director or Department Chair will notify the resident in a private meeting of the decision.
- b. Performance Improvement requires the use of a standardized form (attached). The duration of the Performance Improvement Plan shall be determined by either the Program Director or the department's Clinical Competency Committee as deemed necessary to address the deficiency. The Performance Improvement Plans (PIP) must be reviewed every three months.
- c. The Performance Improvement Plan must identify the consequences of incomplete or failed PIPs, which may include, among other things:
 - i. Extension of the PIP;
 - ii. Progression to remediation;
 - iii. Non-promotion and extension of training;
 - iv. Dismissal or termination from the program; and/or
 - v. Non-renewal of contract
- d. If it is determined that the resident has successfully met the terms of the performance improvement period, the Program Director or the Department Chair will provide the resident with a written notice of successful completion of the Performance Improvement Plan, place a copy of such notice along with the PIP in the resident's training file, and forward a copy of the notice to the Associate Dean for Graduate Medical Education. These actions are generally not included on licensing applications or credentialing forms unless an extension of training is needed.
- e. If it is determined that the resident has failed to successfully meet the terms of a Performance Improvement Plan, the Program Director or the Department Chair will notify resident that the case will be reviewed by the department's Clinical Competency Committee (CCC) to determine which of the potential actions delineated in the PIP will be taken, including the possibility of a notice of non-reappointment or a Notice of Action for remediation. Residents shall have the opportunity to address the department's Clinical Competency Committee prior to the CCC's discussion and decision. A resident may:
 - i. Address the committee in person;
 - ii. Prepare a written submission for the committee's consideration; or
 - iii. Relay information to the committee through his/her advisor

2. Remediation

- a. Following a decision implementing remediation, the Program Director or Department Chair will inform the resident in a private meeting of the decision.

- b. If the resident consents to such action, the period of remediation will begin as of the date of the Notice of Action.
- c. In the event that the resident does not consent and appeals the decision, if the appeal results in the imposition of remediation, the effective date of the remediation will be on the date the appeal decision becomes final
- d. The length of the period of remediation will be determined by the Program Director and departmental Clinical Competency Committee. The resident's performance during the remediation period must be reviewed AT LEAST every three (3) months, during which time the resident will continue to receive his/her regular compensation.
- e. The Program Director or Department Chair will notify the resident of his/her right to request review of the decision to place him/her on remediation by the Resident Performance Review Committee (RPRC) and include a copy of the Due Process policy with the Notice of Action.
- f. The Program Director or Department Chair may recommend or institute revisions or other forms of disciplinary action during a period of remediation, if just cause warrants such action.
- g. If it is determined that the resident has successfully met the terms of the Remediation Plan, the Program Director or the Department Chair will provide the resident with a written notice of successful completion of remediation, place a copy of such notice in the resident's training file, and forward a copy of the notice to the Associate Dean for Graduate Medical Education. Remediation is considered to be reportable when completing licensing applications and/or credentialing forms.

Approved by GMEC April 2017