

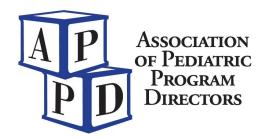
Resident Remediation

APPD Spring Meeting May, 2022 Grassroots Session



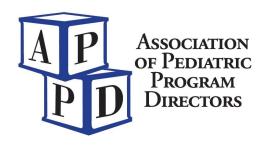
Introduction

- Comprehensive evaluation and remediation program is essential for all residency programs
- Evaluation System
 - identify & early detection
 - ensure competence
 - milestone/competency based
 - transparent expectations
 - longitudinal assessment
 - achievement at different stages of training
- Remediation System
 - deal with issues once identified
 - range: minimal guidance → not complete training



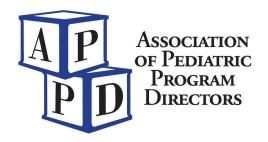
Evaluation System

- ACGME Milestones
- In Training Exams (ITE)
 - annually
 - mock boards
- Goals and Expectations
 - clear, concrete, well defined, readily available
 - residents and faculty familiarity
 - New Innovations and verbal communication
- Rotation/Faculty Evaluations
 - milestone based
- 360° Evaluations
- Procedure Logs
- Self Reflection
 - ILP, mentor meetings
- Feedback Sessions
 - "Feedback Fridays"
 - biannual PD meetings
- Clinical Competency Committee (CCC)



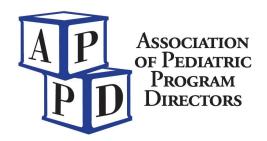
Evaluation System

- Resident Performance
 - written goals and expectations
 - well defined policies
 - consequences for failure
 - procedure for remediation/probation
 - orientation of residents
 - orientation of faculty
 - reminders of expectations
 - resident support networks



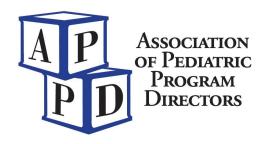
Remediation System

- not meeting expectations/identify deficiencies
- EARLY identification
- Goal: resident to identify, accept and treat the cause
- academic vs. professional/behavioral
 - resident & faculty perception
 - contributing factors (anxiety, depression, personal/family)
 - educational issues within program
 - o impact on patient care, personal health, professional growth, colleagues, program
- plan development
- feedback & reflection
- focused reassessment



Challenges

- Lack of validated tools
 - difficult to pinpoint
- Identification of deficiencies
 - academic vs. professional
- contributing/confounding issues
 - stress, depression, anxiety
 - cognitive (processing issue) vs. non-cognitive (integrity, honesty)
 - resident: does not feel problem exists, feels labeled as failure, slow improvement
 - o non-amendable (dishonesty, criminal behavior)
- development & implementation of plan
 - increased supervision, individual mentoring, ILP, neuropsych/psychometric evaluations
- ensurance of plan
- adherence to policies

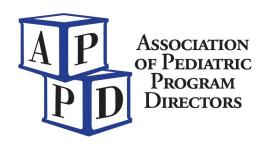


Development of Plan

- CCC/Leadership
 - resident discussion
 - review all evaluations
 - concrete, objective & direct

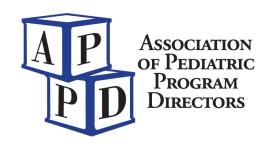
Documentation

- written plan
 - reasons for remediation
 - steps to be taken
 - time frame of remediation
 - individualized learning plan
 - desired outcomes
 - regular meetings
 - consequences
 - signatures of all parties



Development of Plan

- Monitor Remediation
 - o realistic, measurable, appropriate
 - resident progress & adherence
 - ongoing evaluations & meetings
 - consequences
- Resolution
 - CCC/Leadership
 - o successful remediation?
 - resume position
 - extension of training
 - ▶ not successful → GMEC & legal
 - formal evaluation at end of remediation period



Remediation Classification

Informal/Warning

- warning signs; not significant
- documentation; need for escalation
- resident's strengths/weaknesses, expectations for improvement, observation period, progress during remediation

Formal

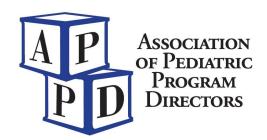
- substantial deficiency or failure to correct deficiency in informal remediation
- determine length, documentation with expected outcomes, time frame, potential consequences

Probation

- substantial deficiency or failure to correct deficiency in formal remediation
- formal documentation: status, expected outcomes, revised plan, time frame & consequences
- GME involvement

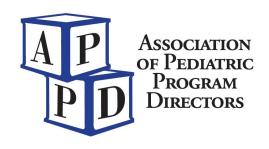
Termination

- substantial deficiency warrants immediate dismissal or fails probationary period
- GME, Human Resources, Legal Counsel



Example

- PGY-1 → PGY-2
 - informal 1 month remediation
- CCC recommendations
 - 3 month remediation plan
- 3 Month Individualized Improvement Plan
 - o role, time frame, area, schedule, extension of residency training, consequences
 - Goals and Expectations
 - New Innovations
 - attending on service
 - self study/questions & weekly meetings with hospitalist
 - weekly progress reports with PD/APD
- Completion of 3 month remediation period
 - Goals and Expectations
 - role, time frame, area, schedule
 - attending on service
 - weekly meetings with hospitalist; continue to broaden critical thinking skills
 - ▶ time frame for promotion to PGY-3



References

Accreditation Council for Graduate Medical Education, ACGME Common Program Requirements

Wu JS, Siewert B, Boiselle PM Resident Evaluation and Remediation: A Comprehensive Approach, Journal of Graduate Medical Education, June 2010, 242-245

Katz ED, Dahms R, Sadosty AT, Stahmer SA, Goyal D Guiding Principles for Resident Remediation: Recommendations of the CORD Remediation Task Force, Acad Emerg Med, October 2010, Vol 17, S95-S103

Smith JL, Lypson M, Silverberg M, Weizberg M, Murano T, Lukela M, Santen SA Defining Uniform Processes for Remediation, Probation and Termination in Residency Training, Western Journal of Emergency Medicine, January 2017, Volume XVIII, 110-113