DISCIPLINARY ACTION, SUSPENSION, OR TERMINATION

a. **Informal Procedures**

Each program must develop written program specific procedures for addressing academic or professional issues in residents and clinical fellows. Program Directors are encouraged to use informal efforts to resolve minor instances of poor performance or misconduct. In any case in which a pattern of deficient performance has emerged, the program specific policy shall include notification by the Program Director to the House Officer in writing of the nature of the pattern of deficient performance and remediation steps, if appropriate, to be taken by the House Officer to address it. Individual training programs may outline other department or division resources that residents/clinical fellows should use to discuss disputes over information actions related to poor performance and/or misconduct. If the remediation efforts are unsuccessful or where performance or misconduct is of a serious nature, the Department Chair or Program Director may impose formal adverse disciplinary action.

b. **Formal Adverse Disciplinary Action**

Formal adverse disciplinary action may be taken for due cause, including but not limited to any of the following:

i. Failure to satisfy the academic or clinical requirements of the training program.

ii. Professional incompetence, misconduct, or conduct that might be inconsistent with or harmful to patient safety.

iii. Conduct that is detrimental to the professional reputation of the Hospital or School of Medicine.

iv. Conduct that calls into question the professional qualifications, ethics, or judgment of the House Officer or that could prove detrimental to the Hospital’s or School of Medicine’s patients, employees, staff, volunteers, or operations.

v. Violation of the bylaws, rules & regulations, policies or procedures of the Consortium, School of Medicine, Hospital, Department, Division, or training program, including violation of the Responsibilities of House Staff set forth above.

vi. Scientific misconduct.

Programs will develop written program specific policies for decisions regarding formal adverse disciplinary actions.

c. **Specific Procedures**

Formal disciplinary action includes (1) suspension, termination, or non-reappointment; (2) reduction, limitation, or restriction of the House Officers clinical responsibilities; (3) extension of the residency or fellowship program or denial of academic credit that has the effect of extending the residency or fellowship; or (4) denial of certification of satisfactory completion of the residency or fellowship program.

The Department Chair or Program Director shall notify the House Officer in writing of the action taken and the reasons. A copy of the notification shall be furnished to the Hospital’s GME office and the DIO. The notification should advise the House Officer of his or her right to request a review of the action in accordance with the Procedure for Review of Academic and Disciplinary Decisions Relating to Residents and Clinical Fellows set forth below. In the case of a suspension, the written notification should precede the effective date of the suspension unless the Department Chair or Program Director determines in good faith that the continued appointment of the House Officer places safety or health of Hospital or School of Medicine patients or personnel in jeopardy or immediate suspension is required by law or necessary in order to prevent imminent or further disruption of Hospital or School of Medicine activities, in which case the notice shall be provided at the time of suspension.
In the case of non-renewal, the written notice of intent not to renew a House Officers appointment must be given no later than four months prior to the end of the current appointment. However, if the primary reason(s) for the non-reappointment occur(s) within the four months prior to the end of the appointment, as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the end of the appointment, is required. The notification should advise the House Officer of his/her right to request a review of the action in accordance with the grievance procedures sent forth below.

d. **Complaints by Hospital**

If the President of the Hospital or his or her designee has a complaint about performance or conduct of a House Officer, the matter should first be brought to the attention of the Department Chair or Program Director. If the Hospital’s complaint is not resolved at the departmental level, then the Hospital shall have the right to request a review of the compliant under the Procedure for Review of Academic and Disciplinary Decisions relating to Residents and Clinical Fellows set forth below.

e. **Reporting Obligation**

Section 383.133 of the Missouri Revised Statutes requires the chief executive officer of any hospital or ambulatory surgical center to report to the State Board of Healing Arts any final disciplinary action against a physician holding a temporary or permanent license in Missouri for activities which are also grounds for disciplinary action by the State Board, as determined by law. In addition, the CEO must report the voluntary resignation of any physician licensed in Missouri against whom any complaints or reports have been made which might have led to such disciplinary action as determined by law.