Post-Doctoral Fellow Due Process

References

Association of Psychology Postdoctoral and Internship Centers (APPIC)

Applicable To

All psychology postdoctoral fellows of Gundersen Lutheran Administrative Services, Inc., independently and as agent for Gundersen Lutheran Medical Center, Inc., Gundersen Clinic, Ltd., Gundersen Medical Foundation, Inc., Memorial Hospital of Boscobel Inc., Tri-County Memorial Hospital Inc., St. Joseph’s Health Services Inc., Palmer Lutheran Health Center, Moundview Memorial Hospital & Clinics, Inc., and Saint Elizabeth’s Hospital of Wabasha, Inc. (hereinafter referred to collectively as “Gundersen”).

Purpose Statement

This policy covers corrective actions, suspensions, and terminations of fellows, as well as any complaints or grievances that fellows may have related directly thereto. For complaints and grievances involving other issues, please refer to APPIC Postdoctoral Psychology Fellowship Grievance Policy.

Definitions

For purposes of this policy, the following terms have the following meanings:

A. “Academic Deficiency” means any one or more of the following: insufficient level of medical knowledge; inability to use medical knowledge effectively in connection with patient care; lack of appropriate technical skills; insufficient level of professionalism; insufficient level of
interpersonal and communication skills; lack of practice-based learning and improvement; or lack of system-based practice that bears on a Fellow's academic performance.

B. “Education Committee” means the Committee comprised of faculty of the fellowship training program who meet regularly to review Fellow performance; makes recommendations to the program director for fellow progress, including promotions, remediation, and dismissal.

C. “Director” means the Program Director of the Fellowship training program or an authorized representative thereof.

D. “DME” means Director of Medical Education of the Non-ACGME residency/fellowship programs.

E. “HR Partner” means Human Resource Partner.

F. “Serious Misconduct” means any one or more of the following: a violation of applicable federal, state or local law or regulation; a violation of professional or ethical standards commonly applied to physicians and Fellows; an act or omission defined as unprofessional conduct by chapter 448, Stats. or the Wisconsin Medical Examining Board; and any act in violation of chapters 161 or 450, Stats. involving unlawful use, transfer and prescription of various controlled and other substances.

G. “Performance Improvement Plan (PIP)” means a tool given to an employee with performance/academic deficiencies that provides the framework for an opportunity to succeed.

H. “Fellow” means a person appointed to a fellowship position in the Gundersen Lutheran Graduate Medical Education program sponsored by Gundersen Lutheran Medical Center, Inc., Gundersen Clinic, Ltd., and Gundersen Medical Foundation, Inc.

Implementation

REVIEWS:

I. The Program Director (PD) of each fellowship program shall meet with the respective education committee to review and assess the competency-based academic and professional performance of all fellows within their program. This periodic review shall be conducted no less than twice each year for all fellows. The fellow will receive in writing if there is problematic behavior that requires verbal or writing coaching. The PD will advise the fellow of what the PD is presenting to the education committee if corrective is needed beyond verbal or written coaching. If there are any significant concerns/issues with a fellow’s performance, the DME must be informed via written communication of the concerns/issues.

1. Need for Corrective Action: Whenever the academic or professional performance of a fellow is considered to be unsatisfactory to the operations and/or educational environment of the institution, to which the fellow is assigned, corrective action regarding the individual may be taken by the program director (PD). If a deficiency is found which requires corrective action beyond verbal or written coaching, the fellow will be notified in writing and a hearing will be scheduled with the fellow, so they have the chance to provide input on the problematic behavior.

   a. Hearing Guidelines:

      i. The DME will be responsible for chairing the hearing and drafting the report.

      ii. The fellow shall appear before the PD and DME.
iii. The fellow may have up to thirty (30) minutes to present to the PD and DME, though the chair may grant additional time as seen appropriate.

iv. The decision will be made by the PD and DME as to whether a Performance Improvement Plan is needed. A written report will include a brief summary of the facts found and the decision of the hearing. The written report will be provided to the fellow within three (3) business of the hearing.

b. **Appeal Process:**
   
i. To appeal a Performance Improvement Plan decision, a fellow must submit a written request for an appeal to the HR Partner within three (3) business days of receiving written notification of the PD and DME decision. Any request for appeal must include a statement of the adverse action being appealed; the grounds supporting the request of an appeal; and the requested alternate outcome.
   
ii. The fellow may submit documentation in support of their position with the written request to the HR Partner.
   
iii. The appeal hearing shall be held within two (2) weeks of the written request for an appeal.
   
iv. The decision will be made by the HR Partner as to whether the fellow’s appeal is granted. A written report will include a summary of the decision and be provided to the fellow, PD, and DME, within three (3) business of the hearing.

2. **Corrective Action:** Performance Improvement Plan (PIP) will be developed which will indicate the performance and/or academic concerns and define the performance and/or academic requirements, monitoring plan, timelines, and consequences of failing to meet the requirements of the PIP. The PD will collaborate with the education committee, the HR Partner, and the DME to develop a performance improvement plan of the performance and/or academic concerns. During the PIP timeline, the PD shall meet in person with and counsel the fellow and inform the fellow of progress related to the PIP.

3. **Concluding the PIP:** At the conclusion of the PIP (which is predetermined at the onset of the PIP), the PD will review the assessment data with the advisement from education committee and subsequently review with the fellow. One of four outcomes is possible:
   
a. Successful completion of PIP
   
b. Unsuccessful completion of PIP
   
c. PIP needs to be continued for an extended interval to collect more data
   
d. PIP needs modification to provide alternate or improved data about the fellow upon which to make an informed decision.

4. If the PD with advisement from the education committee, determines the fellow has successfully completed the PIP (outcome a. as listed above), the
decision will be documented by the PD and communicated in writing to the fellow, the HR Partner and the DME within two (2) business days of the decision.

5. If the PD with advisement from education committee, determines the fellow has outcome b., c., or d., the PD will determine the action to be taken in collaboration with HR Partner and the DME. The decision will be documented by the PD and communicated in writing to the fellow, the HR Partner and the DME within two (2) business days of the decision.

6. Fellows Options:
   a. If the recommendation in section 3 above is deemed adverse by the fellow (suspension, termination, non-renewal, non-promotion, extension), the PD shall give the fellow at least three (3) business days to elect one of the following options:
      i. Accept the decision of the PD in writing
      ii. Submit a written resignation from the program to the PD
      iii. Submit a written request to the PD requesting appeal of the decision. If the fellow does not reply in writing in three (3) business days, then the recommendation will be realized.
   b. If the fellow appeals the decision, the PD, and the education committee, shall meet with the fellow within three (3) business days of receiving the written request to appeal the decision. Any exception to the timeline must be approved by the DME. At the appeal meeting, fellow will provide a verbal basis for the appeal and the fellow and PD will provide a verbal account of the situation. The fellow will be advised of the appeal decision in writing within five (5) business days of the meeting. If the appeal decision recommends an employment outcome deemed adverse by the fellow (suspension, termination, non-renewal, non-promotion, extension) the fellow has three (3) business days to elect one of the following three options:
      i. Accept the decision of the PD in writing
      ii. Submit a written resignation, resigning the fellow’s appointment (resignation maybe done anytime during the appeal process)
      iii. Submit a written request to the DME requesting appeal of the PD’s decision
   c. If the fellow does not reply in writing in three (3) business days, then the recommendation will be realized.
7. **Graduate Medical Education Appeal Panel (GMEAP):**

   a. If the fellow elects to submit a written request for appeal to the DME the following process will be pursued:

      i. Appointed members: The panel, consisting of members from the current Graduate Medical Education Committee (GMEC), will be appointed by the DME. To avoid a potential conflict of interest, panel members may not be from the same department as that of the fellow’s training program and/or an educator that has evaluated the fellow. The appeal panel must include the DME and at least four GMEC members (one of which must be a fellow).

      ii. An issue for consideration by the appeal panel is whether the fellow was afforded due process, including receiving feedback of the specific performance concern and provided an opportunity through the formal PIP to improve.

II. **Process:**

   1. To appeal an adverse action, a fellow must submit a written request for an appeal to the DME within three (3) business days of receiving written notification of the PDs decision (Section 4.b.3.). Any request for appeal must include a statement of the adverse action being appealed; the grounds supporting the request of an appeal; and the requested alternate outcome.

   2. The fellow may submit documentation in support of their position with the written request. Copies of this submission shall be given to the appointed appeal panel members, the DME, and PD. The appeal panel may request additional information from the fellow.

   3. The appointed appeal panel member shall be given copies of fellow performance data and documentation deemed pertinent by the PD. The appeal panel may request additional information from the PD. The fellow will also receive a copy of this material.

   4. The appeal hearing shall be held within two (2) weeks of the written request for an appeal. A postponement of the appeal may be granted at the discretion of the DME.

   5. The fellow shall notify the appeal panel at least two (2) business days prior to the hearing of a request to bring a faculty member from the fellow’s program.

   6. The PD shall notify the appeal panel at least two (2) business days prior to the hearing of a request to have a faculty member from the fellow’s program.
III. **Hearing Guidelines:**

1. The DME will be responsible for chairing the appeal and drafting the report.
2. Both the fellow and the PD shall appear before the panel.
3. The fellow and the PD shall each have up to thirty (30) minutes to present to the panel, though the chair may grant additional time as seen appropriate. Both parties have the option of attending the other’s presentation.
4. Legal counsel or any other third party, other than the designated faculty member, shall not be permitted to appear; however, either party may consult with legal counsel prior to the hearing.
5. The panel may allow the fellow or PD to have a designated faculty member from the program speak, who may have up to ten (10) minutes to present to the panel.
6. The panel may ask either the fellow, the designated faculty member(s), or the PD additional questions.
7. The appeal panel shall deliberate in closed session.
8. The panel may determine to reconvene later if it is necessary to continue its deliberations and make its recommendations. If a decision is made to reconvene to continue deliberation or process additional information, effort should be made to expedite the time to reconvene.
9. The decision will be made by majority rule. A written report will include a brief summary of the facts found, pertinent findings of the panel, and decision. The written report will be provided to the fellow and PD within three (3) business days of the panel’s decision. A verbal report from the DME will be given to the fellow and PD when a decision is reached.
10. The appeal panel makes the final decision. No further appeal action can be made.

IV. **Serious Misconduct:**

1. Notwithstanding the above, the PD of each fellowship program and/or the DME, will have the authority to consult with the HR Partner to enforce section 2 of the Gundersen Health System Discipline Policy (HR-235). Please reference GHS Policy HR-235 for further information.

The provisions of this policy are constructed in good faith and shall be interpreted in a manner consistent with the best interests of all parties, including GHS. While adhering to the principles of due process, the fact that certain provisions of this Policy are not strictly followed will not invalidate any final action.
Responsibilities

The Administrative Director of Medical Education is responsible for the development and oversight of this policy. The Director of Medical Education may need to step in to review the PD decisions, dismissal or termination of appointment recommendations, and designate a review committee to review findings.

Fellowship Program Director: Maintain and routinely review performance of fellows in training. Report performance and/or personnel issues to Education Committee, DME, as well as Human Resources (as necessary).

Education Committee: Meet and regularly to review Fellow performance; provide suggested steps if PIP is warranted.