

Number:	001-001
Section:	Selection/Promotion/Evaluation/Dismissal Process
Title:	Selection of Housestaff

Effective Date: 2/12/2015

Previous Review & Approval by GMEC: 5/24/07, 1/17/08, 4/19/2012

Responsible Office: NJMS Graduate Medical Education

Update: Every five years from effective date or as needed

Purpose: To establish guidelines for eligibility and selection of Housestaff in graduate medical education programs sponsored by Rutgers New Jersey Medical School (NJMS) and core teaching hospitals.

Scope: This policy will apply to all of the postgraduate training programs at Rutgers NJMS

Definitions:

1. **Housestaff/House Officer-** refers to all interns, residents and subspecialty residents (fellows) enrolled in a Rutgers New Jersey Medical School (Rutgers NJMS) graduate medical education program. A member of the Housestaff may be referred to as a house officer.
2. **Designated Institutional Official (DIO)** – refers to the individual who has the authority and responsibility for the graduate medical education programs.
3. **Program** – refers to the structured medical education experience in graduate medical education, which conforms to the Program Requirements of a particular specialty, the satisfactory completion of which may result in eligibility for board certification.
4. **Program Director** – the one physician designated to oversee and organize the activities for an educational program.
5. **Review Committee-** the Accreditation Council for Graduate Medical Education delegates authority to accredit programs/institutions to its Review Committees. The Review Committees are comprised of peer specialists in the field and resident physicians.

Reference(s):

1. ACGME Common Program Requirements (effective July 1, 2013) III.A-III.D.1
2. ACGME Institutional Requirements (effective July 1, 2013) II.A.1-II.D.6
3. Committee of Interns and Residents (CIR) 2012-2018 Agreement
4. Rutgers University Policy (policies.rutgers.edu)
5. N.J.S.A. 13:35-1.5 found at http://www.njconsumeraffairs.gov/laws/BME_Regs.pdf

Policy:

A. Eligibility for Admissions to Rutgers NJMS Graduate Medical Education (GME) Programs and Educational Requirements:

1. In order to be admitted to graduate medical education programs, a candidate must have satisfied the educational requirements for registration as a resident in the State of New Jersey under the regulations promulgated by the New Jersey Board of Medical Examiners (NJBME). Candidates must be graduates of

GRADUATE MEDICAL EDUCATION POLICY

a medical school accredited by the Liaison Committee on Medical Education (LCME), the American Osteopathic Association (AOA), or the WHO-sanctioned World Directory of Medical Schools.

- a) For admission to the first postgraduate year (PGY-1), the applicant must qualify for registration with the NJBME as defined in NJBME regulations.
 - b) For admission to PGY-2 and subsequent years, the applicant must qualify for a permit issued by the NJBME as defined in NJBME regulations 13:35-1.5(c) and 12:35-1.5(l).
 - c) For admission to PGY-3 and subsequent years, the applicant must have passed United States Medical Licensing Examination (USMLE) Step 3, or Comprehensive Osteopathic Medical Licensing Examination (COMLEX) Level III.
 - d) For admission to any postgraduate year after the applicant has used up his or her five years of eligibility for registration/permit in the State of New Jersey, the applicant must have a New Jersey medical license. All Housestaff at the PGY-6 level or above are required to obtain a NJ State medical license.
2. International Medical Graduates (IMG) must be U.S. citizens, U.S. permanent residents, or holders of J-1 Exchange Visitor visas issued by the Educational Commission on Foreign Medical Graduates (ECFMG) in order to be eligible for admission to a position in any of the Rutgers University's graduate medical education (GME) programs. An eligible IMG must hold a currently valid ECFMG certificate or hold a full and unrestricted license to practice in New Jersey.
 3. Before accepting residents transferring from other programs (including fellows or others who have completed other programs), the Program Director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident.

B. Housestaff Selection Process

1. Residency programs should select from among eligible applicants on the basis of residency program-related criteria such as their preparedness, aptitude, academic credentials, personal characteristics and ability to communicate.
2. The programs will not discriminate with regard to sex, race, age, religion, color, national origin, disability, or any other applicable legally protected status.
3. Applicants who are invited for an interview must be informed, in writing or by electronic means, of the terms, conditions and benefits of their appointment, including financial support; vacations; parental, sick and other leaves of absence; professional liability, hospitalization, health, disability and other insurance provided for the resident and their families; and the conditions under which the institution provides call rooms, meals, laundry services or their equivalents.

Procedure:

A. Housestaff Selection

1. The Program Director (PD) or a designee must interview all candidates and is responsible for the resident selection process.
2. PGY-1 year positions are filled through the National Resident Matching Program (NRMP) for all fourth year medical student applicants of US medical schools. Graduates of non-US medical schools may be taken outside of the match only if approved in advance by the DIO.

B. Housestaff Credentialing:

1. The following credentials will be collected for each candidate for a Housestaff position:
 - a) GME application (completed and signed)
 - b) Medical Student Performance Evaluation (MSPE)
 - c) Medical school transcript indicating degree and date awarded
 - d) Notarized copy of medical school diploma
 - e) In addition to MSPE, a minimum of two letters of reference (a total of 3) from faculty familiar with the individual's performance. If a candidate is applying for PGY-2 or above, one letter must be from the candidate's former Chief of Service or Program Director.
 - f) If the candidate is applying from another ACGME Program, the Program Director must receive written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident.
 - g) Notarized copy of ECFMG certificate (if applicable)
 - h) USMLE Step 1 and 2 scores (or equivalent COMLEX Examination scores).
 - i) Notarized copy of Housestaff diploma (or equivalent documentation) if Housestaff is applying for a position beyond the PGY-1 level.
2. Housestaff Contracts
 - a) Contracts are prepared by the Program Director and forwarded to the Office of Graduate Medical Education and accompanied by all credentials and documentation as required by the Human Resources and the Graduate Medical Education Office.
 - b) The Office of Graduate Medical Education and staff will review the contracts and forward them to the Associate Dean for Graduate Medical Education for approval and signature. Upon his/her approval, the contract is forwarded to the Dean of New Jersey Medical School for approval and signature. Copies of the executed contracts are distributed to the program office.
 - c) The contract for each Housestaff in a graduate medical program shall:
 - 1) Specify the specialty and sub-specialty, where applicable, and the level or Postgraduate Year (PGY), e.g., Internal Medicine PGY 1, 2, 3, or Internal Medicine-Cardiology PGY-4, PGY-5, etc., and the term of the contract;
 - 2) Specify that registration/permit/licensure requirements of the New Jersey State Board of Medical Examiners must have been met as a precondition of the contract;
 - 3) Contain reference to scope of practice of registration or permit holders as per regulations of the New Jersey Board of Medical Examiners;
 - 4) Describe benefits including vacations, professional and/or sick leave, family leave, liability insurance, health insurance and other insurance for residents and their families, and meals and laundry or their equivalent, consistent with hospital or University policies or the collective bargaining agreement between the Committee of Interns and Residents (CIR) and the University, where applicable;
 - 5) Specify whether or not extramural employment (moonlighting) is permissible. Where moonlighting is permissible, specify that malpractice coverage is not provided by the University for moonlighting and additionally specify that the Housestaff must: (a) have approval of the Program Director and DIO; and (b) must give assurance that this activity will not interfere with the responsibilities to the residency program;

**GRADUATE MEDICAL EDUCATION
POLICY**

- 6) Have reference to required copies of Rutgers University policies;
- 7) Specify that compliance with the Rutgers University's Housestaff Immunizations and Health policy is required as a condition of the contract.
- 8) Contain all of the required elements as listed in the ACGME Institutional Requirements.

Number:	001-002
Section:	Selection/Promotion/Evaluation/Dismissal Process
Title:	Promotion of Housestaff

Effective Date: 2/12/2015

Previous Review & Approval by GMEC: 5/24/07, 1/17/08, 4/19/2012

Responsible Office: NJMS Graduate Medical Education

Update: Every five years from effective date or as needed

Purpose: To provide a guideline for Housestaff reappointment to the next level of postgraduate training in accordance with the agreement between the Rutgers New Jersey Medical School and the Committee of Interns and Residents (CIR).

Scope: This procedure applies to all Housestaff.

Definitions:

1. **Housestaff/House Officer-** refers to all interns, residents and subspecialty residents (fellows) enrolled in a Rutgers New Jersey Medical School (Rutgers NJMS) graduate medical education program. A member of the Housestaff may be referred to as a house officer.
2. **Designated Institutional Official (DIO)** – refers to the individual who has the authority and responsibility for the graduate medical education programs.
3. **Program** – refers to the structured medical education experience in graduate medical education which conforms to the Program Requirements of a particular specialty, the satisfactory completion of which may result in eligibility for board certification.
4. **Program Director** – the one physician designated to oversee and organize the activities for an educational program.
5. **Review Committee-** the Accreditation Council for Graduate Medical Education delegates authority to accredit programs/institutions to its Review Committees. The Review Committees are comprised of peer specialists in the field and resident physicians.

Reference(s):

1. ACGME Common Program Requirements
2. ACGME Institutional Requirements (effective July 1, 2013) II.A.1-II.D.6
3. Committee of Interns and Residents (CIR) 2012-2018 Agreement
4. Rutgers Policy (policies.rutgers.edu)
5. N.J.S.A. 13:35-1.5

Policy:

- A. Criteria for promotion in each residency program shall be specified, maintained current, documented and communicated to Housestaff at the beginning of each academic year.
- B. The Program Director, the Department Chair and the DIO determine postgraduate levels on the basis of previous training and evaluation.

- C. In addition to fulfilling the requirement of satisfactory academic progress, Housestaff must satisfy the following requirements with regard to registrations, permits, and licenses.
1. For promotion to PGY-2 or higher, the Housestaff must obtain and maintain a permit issued by the New Jersey State Board of Medical Examiners as defined in its statutes N.J.S.A. 13:35-1.5. A Housestaff who does not obtain or make application for such a permit shall automatically be terminated at the conclusion of PGY-1. A Housestaff who fails to maintain such permit shall be terminated upon loss of the permit. A New Jersey state medical license shall satisfy this requirement.
 2. For promotion to PGY-3, the Housestaff must have passed USMLE Step 3 or COMLEX Level III; a Housestaff who has not passed USMLE Step 3 or COMLEX Level III shall automatically be terminated at the conclusion of PGY-2.
 3. For promotion to any postgraduate year after a Housestaff has used up the 5-year limit for registration/permit eligibility or before the start of the PGY-6 year as specified in NJSA 45:9-21d, the Housestaff must have a New Jersey license; a Housestaff whose eligibility for a permit has expired and who has not obtained a New Jersey license shall automatically be terminated at the conclusion of the last academic year of eligibility for a permit.
 4. Residency programs have the option of requiring Housestaff to obtain New Jersey licensure as a condition of promotion to PGY-3 if eligible at that time, or to any succeeding postgraduate year. (For IMGs, there can be no requirement for licensure until PGY-4 as they are ineligible for New Jersey licensure until they have completed three years of graduate medical education.)
- D. The decision to promote a Housestaff will be conveyed to the Housestaff by the Program Director after the documented semiannual evaluation of performance, in conjunction with the program's Clinical Competency Committee, in accordance with the program's promotion policy.
- E. Written notification shall be given to the Housestaff for non-renewal of contracts. Housestaff who have appointments that begin July 1st will be notified, in writing, by December 15th of the first year of service and not later than November 15th of the second year of service and thereafter, if their services are not to be renewed for the next year of a given residency training program. In the event that a Housestaff commences work on a date other than July 1st, the last date for non-renewal shall be five and one half months (5.5) or four and one half months (4.5), respectively, following the date on which such work commences. When possible, earlier notice of non-renewal will be given to such Housestaff.
- F. In the event a Housestaff's performance is not satisfactory, the Program Director will inform the Housestaff in writing. The outline or plan for remediation must be provided to the Housestaff in writing. This shall include the time period for remedial training and subsequent re-evaluation of the Housestaff suitability for promotion. A timely written nonrenewal notification will be given which can be reversed if on re-evaluation the Housestaff satisfies the criteria for promotion. Resident grievance procedure for Non-Renewal/Non-Promotion is detailed in Policy 006-002.

Number:	001-003
Section:	Selection/Promotion/Evaluation/Dismissal Process
Title:	Performance Evaluation

Effective Date: 2/12/2015

Previous Review & Approval by GMEC: 5/24/07, 1/17/08, 4/19/2012

Responsible Office: NJMS Graduate Medical Education

Update: Every five years from effective date or as needed

Purpose: To establish a general guideline within which each program will provide Housestaff with periodic evaluations as required by the ACGME, Rutgers New Jersey Medical School, and the Residency Review Committee specific to each Program.

Scope: This applies to all Housestaff in all postgraduate training programs.

Definitions:

1. **Housestaff/House Officer-** refers to all interns, residents and subspecialty residents (fellows) enrolled in a Rutgers New Jersey Medical School (Rutgers NJMS) graduate medical education program. A member of the Housestaff may be referred to as a house officer.
2. **Designated Institutional Official (DIO)** – refers to the individual who has the authority and responsibility for the graduate medical education programs.
3. **Program** – refers to the structured medical education experience in graduate medical education, which conforms to the Program Requirements of a particular specialty, the satisfactory completion of which may result in eligibility for board certification.
4. **Program Director** – the one physician designated to oversee and organize the activities for an educational program.
5. **Review Committee-** the Accreditation Council for Graduate Medical Education delegates authority to accredit programs/institutions to its Review Committees. The Review Committees are comprised of peer specialists in the field and resident physicians.

Reference(s):

1. ACGME Common Program Requirements
2. ACGME Institutional Requirements
3. Committee of Interns and Residents (CIR) 2012-2018 Agreement (CIR)

Policy:

- A. Each residency program must have in place a system of evaluation used to assess the academic performance of Housestaff on a continuing basis; this system must be followed uniformly for all Housestaff in the program. This serves to enhance the education process and keep trainees apprised of their progress. Faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment. The Program must provide objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice; use multiple evaluators (e.g., faculty, peers, patients, self, and other

professional staff) consistent with the milestone evaluation system; and the Program Director must provide each resident with documented semiannual evaluation of performance with feedback. There must also be a final evaluation, which must document the resident's performance during the final period of education, and verify that the resident has demonstrated sufficient competence to enter practice without direct supervision.

- B. The Program Director must appoint a Clinical Competency Committee (CCC), which is composed of at least three members of the program faculty. Other members of the committee may include non-physician team members. The role of the committee is to review all resident evaluations semi-annually, to prepare and assure the reports of the Milestones evaluations of each resident to the ACGME, and to advise the Program Director regarding resident progress including recommendations for promotion, remediation and dismissal.
- C. The Program Director will assume responsibility for establishing the mechanism and frequency of performance evaluations in compliance with the ACGME essentials for the specific program, however the specialty-specific Milestones must be used as one of the tools to ensure that residents are able to practice core professional activities without supervision upon completion of the program. This is monitored through the GME internal review process.
- D. The Program Director will inform the Housestaff annually of the departmental procedure and schedule for performance evaluations.
- E. Documentation of periodic performance evaluations must occur semiannually at minimum and shall be maintained in the Housestaff's academic record located in the program office; alternatively, an electronic file may be maintained. The program must have a mechanism in place by which the resident can review his/her file promptly upon request. A paper copy of the final evaluation must be maintained in the resident's permanent file, even if an electronic file is maintained.
- F. All academic matters, including in-training exams, should be considered in determining whether a Housestaff is making satisfactory academic progress. Academic matters include acquisition of knowledge related to the discipline as well as all aspects of the development of clinical and professional skills necessary for effective functioning as a health care professional. The demonstration of competence in the ACGME competency domains is essential for promotion and graduation; therefore performance in all six areas is to be regularly assessed (see GME Policies Section 13).
- G. Each Housestaff shall be continuously evaluated for his/her academic performance as follows:
 - 1. Evaluation of knowledge and of clinical and professional development shall be prepared periodically by attending physicians who interact to a significant extent with the Housestaff. Programs shall develop evaluation forms that are consistent with the aims of the ACGME program requirements. Standards developed by the appropriate specialty board or college may be utilized for this purpose (ex: Milestones). Evaluation intervals shall be established by the program and shall, at a minimum, meet accreditation standards. Evaluations are to be completed at the conclusion of each rotation by the Housestaff's supervising attending(s), utilizing the department/program evaluation forms.
 - 2. Multiple assessment approaches and instruments are to be utilized as measures of performance. In addition to faculty evaluation of residents, other assessment sources may include nurses, students, peers, administrators, and patients and their families, collected in fulfillment of a multi-source feedback (360-degree) evaluation. Programs are responsible for defining how these evaluations are to be used in the assessment of resident performance, particularly as they relate to promotion, graduation, and dismissal. Measures of performance may include but are not limited to:

- a. Multi-source feedback (360-Degree Evaluation)
 - b. Chart Stimulated Recall Oral Examination
 - c. Checklist Evaluation of Live or Recorded Performance
 - d. Objective Structure Clinical Examination
 - e. Procedure/Operative/Case Logs
 - f. Patient Surveys
 - g. Portfolio
 - h. Chart or Electronic Medical Record Review
 - i. Simulations and Models
 - j. Standardized Oral Examination
 - k. Standardized Patient Examination
 - l. Written Examinations, including In-service examinations
 - m. Quality of research and scholarly activity
 - n. Success in achieving assigned goals, including remediation
3. Personal communications between the Program Director and faculty or other persons in supervisory roles may occur, but are not a substitute for the written evaluation. In order for such personal communications to be used meaningfully in evaluation, oral communications should be documented, with a copy placed in the Housestaff's file and another copy provided to the Housestaff.
 4. Periodic review of each Housestaff's progress in the program is conducted by the Program Director in which all of the above performance measures will be discussed.
- H. The program must evaluate faculty performance as it related to the education program at least annually. This should include a review of the faculty's clinical teaching abilities, commitment to the educational program, clinical knowledge, professionalism, and scholarly activities. This evaluation must include annual (or more frequent) written and confidential evaluations completed by the residents.
- I. The Program Director must appoint the members of the Program Evaluation Committee. This committee must be composed of at least two program faculty members and should include at least one resident. This committee should actively participate in planning and evaluating educational activities in the program, reviewing competency-based curriculum goals, addressing areas of noncompliance with ACGME standards, and reviewing the program annually using evaluations from faculty, residents, and others as is appropriate. This evaluation must be documented annually, known as an Annual Program Evaluation. This should include assessment of resident performance, faculty development, graduate performance, program quality, and review of progress on previous year's action plans. The action plan portion of the Annual Program Evaluation should be reviewed and approved by the teaching faculty and documented in the meeting minutes.

Number:	001-004
Section:	Selection/Promotion/Evaluation/Dismissal Process
Title:	Academic Appeals Process

Effective Date: 1/17/2019

Previous Review & Approval by GMEC: 5/24/07, 1/17/08, 4/19/12, 2/12/15

Responsible Office: NJMS Graduate Medical Education

Update: Every five years from effective date or as needed

Purpose: To establish procedures for evaluation of the academic performance of Housestaff at Rutgers New Jersey Medical School, as well as procedures for appeals of actions, including dismissal, based on such academic evaluations.

Scope: This policy is directed to all members of the Housestaff. These procedures are not intended to be applicable to non-academic matters; procedures for dealing with non-academic discipline are specified in the University's contract with the Committee of Interns and Residents (CIR). However, all matters that are academic in nature shall be addressed via this process even if such matters have both academic and non-academic implications.

Definitions:

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4. **Program Director** – the one physician designated to oversee and organize the activities for an educational program.
5. **Review Committee-** the Accreditation Council for Graduate Medical Education delegates authority to accredit programs/institutions to its Review Committees. The Review Committees are comprised of peer specialists in the field and resident physicians.

Reference(s):

Committee of Interns and Residents (CIR) 2012-2018 Agreement

Policy:

Academic matters include acquisition of knowledge related to the discipline as well as all aspects of the development of clinical and professional skills necessary for effective functioning as a health care professional. Academic issues include Medical Knowledge, Professionalism, Practice-Based Learning and Improvement, Interpersonal & Communication Skills, and Systems-Based Practice. Since the academic development of residents is the paramount reason for the existence of residency programs at Rutgers NJMS, it is incumbent upon residency program administrators and faculty to give the highest priority to and place the strongest emphasis upon the academic significance of Housestaff difficulties. Therefore,

when particular Housestaff issues are both academic and employment-related, they should ordinarily be treated as academic issues.

Procedure:

- A. Each Housestaff shall be evaluated for his/her academic performance as delineated above (Performance Evaluation GME Policy 001-003).
- B. In the event that academic deficiencies are identified:
 1. The Program Director or designee shall counsel the Housestaff. If a designee conducts counseling, the Program Director shall be informed in writing.
 2. When a Housestaff is asked to attend a personal interview for the purpose of investigating his/her performance or conduct and such interview may reasonably be expected to lead to actions that could be characterized as disciplinary in nature (such as a formal letter of reprimand, a suspension or a dismissal), written or oral notice of the interview shall be given to the DIO and to the CIR. A CIR representative may accompany the Housestaff to hear the matter being discussed, but may not speak or in any way interfere with the interview. Upon determining in good faith that the matter is academic in nature, the CIR representative will leave.
 3. The Program Director shall outline corrective measures, including criteria and time frame for correction of the deficiency(ies). For issues related to professionalism and/or interpersonal skills and communication, the Program Director should initiate a Program-based Improvement Plan (PIP), and if necessary, escalate to Performance Enhancement Plan (PEP); refer to GME Policy 13-002 for algorithm.
 4. The Program Director shall document in writing the above interview with the Housestaff, with a copy placed in the Housestaff's file and a copy given to the Housestaff.
 5. The Program Director shall evaluate compliance with corrective actions as established at the interview.
 6. If performance is restored to a satisfactory level, the Program Director will indicate this orally to the Housestaff as soon as it has occurred. A written notation of this interaction will also be placed in the Housestaff's file, with a copy to the Housestaff.
 7. If the Housestaff fails to correct the identified academic deficiency(ies) to the satisfaction of the Program Director within the specified time frame, the Program Director may either extend the performance improvement period, using the same procedure as for an initial performance improvement effort, or proceed with termination in accordance with the process described in the following subsection of this document.
 8. For severe deficiency(ies) warranting immediate termination, the Program Director may proceed in accordance with the steps outlined below.
 9. Copies of all documentation regarding academic deficiencies of Housestaff should be provided to the DIO.
- C. Termination
 1. In the event of severe academic deficiency(ies) or failure to remedy lesser deficiency(ies), the Program Director may make the determination that the Housestaff should be terminated from the program. The Program Director should consult with a representative group from among the faculty who interact to a significant extent with the Housestaff, and report to the program's Clinical Competence Committee (CCC). For this purpose, the CCC must be convened and minutes kept of the deliberations.
 2. Once the Program Director/CCC has made the decision to terminate a Housestaff from the program, the DIO shall be advised about the circumstances in writing.

3. The Program Director shall notify the Housestaff in writing of the termination. Copies of this notice shall be provided to the DIO and to the CIR. Termination shall ordinarily become effective not less than two weeks after receipt of the written notice. The Program Director may remove the Housestaff from clinical duties during this period if, in the judgment of the Program Director, continuance of the Housestaff in the program during the notice period poses risk of danger to patients, or risk of harm or damage either to the program itself or to other University personnel. The notification shall include the following:
 - a) Reasons for dismissal
 - b) Effective date of dismissal
 - c) Process for appealing the dismissal as outlined below (GME Policy 001-004)

D. Appeals Process

1. The Housestaff may appeal the Program Director's adverse academic decision to an Ad Hoc Appeal Committee, established as indicated below, or to the residency program's standing Committee on Housestaff Evaluation (or its equivalent). This appeal must be made in writing to the Program Director within five working days of having received the notification of termination or adverse action.
2. If the Housestaff submits a timely notice of appeal, the Program Director shall schedule a meeting within 14 calendar days excluding holidays of the residency program's Committee on Housestaff Evaluation (or its equivalent) or convene the Ad Hoc Appeals Committee. The Ad Hoc Appeals Committee should consist of the DIO, the Assistant Dean for GME, and at least four faculty members of the division, department or group of departments responsible for the program. The number of members of the Ad Hoc Committee shall be large enough to be representative of the faculty of the division, department or group of departments responsible for the program. The committee considering the Housestaff's appeal should include at least one Housestaff who is a current member of the Executive Committee of the Resident's Council.
3. The Housestaff may request to meet with the Committee in person and be accompanied at the hearing by a faculty member or fellow Housestaff who may act as an advisor. If a CIR representative has not previously determined that the matter at issue is academic, a representative of the CIR who shall not participate in the proceedings may also accompany the Housestaff. (The CIR representative's only role in the hearing is to make a determination that the matter under discussion is a bona fide issue of academic performance.) The Program Director will also be present at the hearing at which time he or she shall set forth the circumstances leading to the planned adverse action or the reasons for which the Housestaff has been dismissed. Following the presentation, the Housestaff and/or his/her advisor shall be permitted to set forth whatever information the Housestaff wishes the Committee to consider as reasons to vacate the decision to endorse the adverse action or to dismiss the Housestaff.
4. Following the hearing before the Committee, the Committee will immediately confer and, following deliberations, advise the Department Chair in writing of its recommendation and the reasons for that recommendation. The Department Chair shall render a decision, and the decision of the Chair (if he/she is not also the Program Director) shall be final. If the Department Chair is the Program Director, the decision of the Committee shall be final. This decision shall be conveyed to the Housestaff in writing. The Chair shall provide copies of the notice of adverse action or dismissal to the DIO.

All academic appeals and other related matters shall be presented to the GMEC immediately upon notification of any such action. The DIO and Chair of the GMEC are apprised of any and all academic matters. The GMEC Chair informs the GMEC about any proposed actions and appeals during regular meetings and discusses the issue with committee members.

Number:	001-005
Section:	Selection/Promotion/Evaluation/Dismissal Process
Title:	Termination of Employment

Effective Date: 2/12/2015

Previous Review & Approval by GMEC: 5/24/07, 1/17/08, 4/19/2012

Responsible Office: NJMS Graduate Medical Education

Update: Every five years from effective date or as needed

Purpose: To provide guidelines and procedure for the voluntary and non-voluntary termination of an appointment prior to the established expiration date of the Housestaff's contract.

Scope: This policy is applicable to all members of the Housestaff.

Definitions:

1. **Housestaff/House Officer-** refers to all interns, residents and subspecialty residents (fellows) enrolled in a Rutgers New Jersey Medical School (Rutgers NJMS) graduate medical education program. A member of the Housestaff may be referred to as a house officer.
2. **Designated Institutional Official (DIO)** – refers to the individual who has the authority and responsibility for the graduate medical education programs.
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Reference(s):

Committee of Interns and Residents (CIR) 2012-2018 Agreement

Policy:

Termination of a Housestaff appointment prior to the established expiration date may be accomplished only for good reason.

A. Voluntary Termination (Withdrawal)

1. If a Housestaff desires such a termination due to personal hardship, he or she is required to write a letter to the Program Director and the Chair of the Department stating the reason for the request.
2. An interview may be requested.
3. Termination may be granted with the concurrence of the Program Director and Chair.

B. Non-voluntary Termination (Dismissal)

1. Reasons for non-voluntary termination of a Housestaff prior to the established expiration date of contract may include but is not limited to:
 - a. Unsatisfactory performance
 - b. Excessive absenteeism, which effectively disrupts training
 - c. Personal misconduct
 - d. Non-compliance with Rutgers NJMS policies and standards
 - e. Non-compliance with the New Jersey State Board of Medical Examiners regulations
2. The procedure for due process regarding decisions based upon resident academic issues is:
 - a. All complaints by Housestaff regarding academic issues are to be referred to the Program Director for initial discussion.
 - b. If resolution of the problem cannot be achieved at this level, the issue is to be directed to the Chair of the Department within six (6) working days.
 - c. Complaints that are not resolved by the Chair should be referred promptly to the DIO for consideration.
 - d. In accordance with both University policy and the CIR, dismissals for academic cause are not subject to grievance. Academic decisions may be appealed by the process described in Procedures for Appeals of Academic Decisions (Policy 001-004).
3. Housestaff may be disciplined or discharged for cause, however these actions shall be subject to grievance rights, and in the event the involved Housestaff files a grievance, the burden of proving just cause shall be upon the University.
4. The University shall give five (5) working days advance notice to the affected Housestaff and the CIR, in writing, of any intended disciplinary action. The notice shall state the nature and extent of discipline, the specific charges against the Housestaff and describe the circumstance(s) upon which each charge is based.