ACADEMIC PERFORMANCE IMPROVEMENT ACTIONS

Academic Performance Improvement actions are designed to define and correct areas of marginal and/or unsatisfactory performance by a resident in order to close an identified learning gap. These actions include structured feedback, developing a Performance Improvement Plan (PIP), repeating rotation(s), and repeating an academic year. Each of these actions is designed to correct a deficiency. If an academic performance improvement action, such as failure to successfully complete a PIP, results in non-promotion of a resident to the next level of training, non-renewal of appointment, dismissal, or other adverse academic action, then it is subject to the University of Tennessee Graduate Medical Education Academic Appeal process (GME Policy #630). Academic failure may be reportable for future credentialing and verification purposes. It will become a permanent part of the resident training record.

A resident may be subject to any level of academic performance improvement actions which can be tailored to fit the individual. There is no mandatory “step” process, and the level of action can be based on the severity of the academic deficiency or action based upon the sound judgment of the program director and the University. Consistent with other University policies, this policy is not to be construed as a contract and as warranted by the circumstances, the University may terminate or dismiss a resident at any point in the academic process.

Forms for academic performance improvement actions are found at: https://uthsc.edu/graduate-medical-education/administration/coordinator-corner/index.php.

Structured Feedback
Structured Feedback regarding resident performance in the six core competencies can occur in multiple ways including but not limited to routine verbal discussions during training, written evaluations, and semi-annual evaluation meetings. Some poor performance may require program directors to provide some corrective action but not a formal intervention e.g., PIP. In this case, program directors may choose to utilize the “single incident” form to document the poor performance and discussion with the resident.

Performance Improvement Plan (PIP)
A PIP is an individualized academic improvement strategy that may be used by program directors in situations where a resident fails to comply with the academic requirements established by the residency training program, University of Tennessee Graduate Medical Education, and/or participating institutions. Placement on a PIP may serve as an official notice to the resident of unsatisfactory performance and expectations for academic improvement. Typically, the deficiencies are associated with a significant lapse in one or more of the six ACGME competencies.

Each residency program should establish written criteria and thresholds for placing resident on a PIP. Although program-level criteria are not required for every specialty, examples include but are not limited to the following: poor academic performance as documented by unsatisfactory faculty evaluations; poor performance on program examinations and/or written in-service examinations; failure to attend scheduled monthly departmental activities; clinical performance or surgical skills which are below those expected for the level of training as documented by written evaluations by the
faculty; unprofessional or inappropriate actions; disruptive behavior; failure to complete medical records in a timely manner; lapses in professionalism; and failure to maintain procedure or surgical logs or EMR records in a timely manner. Residency programs requiring their resident to achieve minimum standards, i.e., in-training scores, conference attendance, etc. must publish these requirements.

If the program director implements a PIP, he or she is required to provide the resident with a written PIP letter advising the resident of PIP status, the area(s) of unsatisfactory performance, reassessment criteria and strategies, time frame for completion, and consequences of not successfully completing the PIP. A copy of the PIP letter, signed by the program director and resident, must be sent to the Associate Dean of Graduate Medical Education (GME). The PIP checklist can assist the program director in documenting the elements necessary for successful performance improvement but is not a substitute for the GME PIP letter nor is its use mandatory. At the end of the PIP timeframe, the program director or designee must document in writing the outcome of the PIP (e.g., GME Outcome Letter, CCC assessment, etc.). This document must be signed by both the program director and resident. (NOTE: The PIP is in effect whether or not the resident signs the form).

**Failure to Meet Academic Expectations**
If a resident fails to satisfactorily meet the expectations documented in the PIP or other feedback, additional improvement plans, repeating the academic year, or other adverse academic action may be implemented (see GME Policy #620 – Disciplinary and Adverse Academic Actions).