

Augusta University  
House Staff Policies and Procedures

Policy  
HS 13.0 House Staff Due Process

Source  
Graduate Medical Education Office

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1.0 Purpose

1.1 To define the procedure to allow for due process for House Staff receiving disciplinary actions regardless of when the action is taken during the appointment period that could result in:

- Probation;
- Non-promotion;
- Non-renewal;
- Dismissal; or
- Other actions that could significantly threaten a House Staff's career development such as suspension.

2.0 Procedure

The following applies to all House Staff in GME training and will be followed by each Program evaluating House Staff for promotion or for disciplinary actions at the level of probation, non-promotion, or higher.

2.1 Each ACGME accredited Program shall have a Clinical Competency Committee (CCC) as defined by ACGME specialty-specific requirements. Non-ACGME-accredited GME programs should develop a similar committee. The CCC shall have the following functions:

- To certify that House Staff have met the academic criteria for promotion;
- To periodically review the performance and academic progress of House Staff;
- To recommend feedback, remedial action, and/or counseling as needed to correct deficiencies;
- To recommend disciplinary action for House Staff who have failed to make adequate progress even though adequate feedback, documented remedial or probation action, and/or counseling have been provided;
- To recommend disciplinary action of a House Staff who has violated ethical norms, any applicable law or policy, or otherwise failed to meet the criteria for continued training.

2.2 The CCC shall make recommendations on promotion, remediation, probation, non-renewal, and dismissal to the Program Director. If the Program Director accepts the CCC recommendations, they will work with the Department Chair to enforce such actions, which must include following due process pursuant to this policy. The recommendation must be in writing and a copy on file with the GME if disciplinary action is at the level of probation, non-promotion, or higher. Programs must follow all GME policies including HS18.0.

2.2.1 Recommendations of non-renewal must be made at least four months before the end of the current contract period unless the primary reason(s) for the non-renewal occur(s) within the four months prior to the end of the contract or a substantial egregious event were to occur. Regardless, due process will be allowed pursuant to this policy. The House Staff must be notified. See HS3.0.

2.2.2 Prior to making a recommendation, the CCC may request the House Staff in question to appear before the CCC to answer questions and provide additional information. Moreover, after receiving disciplinary action notification, the House Staff may ask to meet with the CCC.

2.3 The Program Director shall make decisions considering the CCC recommendations.

2.3.1 If the Program Director considers a decision of non-promotion, probation, non-renewal, or dismissal, the Program Director must request a meeting of the GMEC Due Process Subcommittee (DPSC) to hear the Program's concerns and potential planned actions prior to informing the House Staff of the potential action. A meeting will be scheduled within 10 business days of the request and recommendations with guidance provided to the Program based on the Subcommittee's review. This time may be extended if needed to allow for GMEC DPSC quorum. Per ACGME

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- requirements, the Program Director has the ultimate authority to determine the disciplinary action, but they must allow due process pursuant to this policy.
- 2.3.2 The Program Director's final decision after GMEC DPSC review will be in writing.
  - 2.3.3 The final decision must be personally delivered to the House Staff.
  - 2.3.4 Copies must be sent to the CCC and the GME Office.
  - 2.3.5 The written notice must inform the House Staff of the right to request a grievance hearing by a separate *ad hoc* committee (AHC) in cases of serious disciplinary action of non-promotion, probation, or higher.
- 2.4 The House Staff shall have ten business days to file a request for an AHC grievance hearing.
- 2.4.1 The request for a hearing shall be in writing to the GME Office;
  - 2.4.2 The request shall state the reason(s) for the request with a complete description of the basis for the grievance.
- 2.5 The Senior Associate Dean of GME and DIO or Associate Dean for GME shall appoint an AHC within five business days of receipt of the request for a grievance hearing. This time may be extended if needed to allow for the identification of appropriate members.
- 2.6 The AHC will be composed of three individuals: one Faculty, one House Staff, and one GME Program Coordinator.
- Note: No member of the three-person AHC shall have previously been substantially involved in any other decision or action directly involving the House Staff. Where possible, the committee shall not consist of members of the House Staff's Department or Training Program.
- 2.6.1 Parties, including the Program and House Staff, may request the removal of a member of the three person AHC for cause.
  - 2.6.2 House Staff have the right to a single non-participating advocate (not an attorney or representative from their legal office). The House Staff and their advocate may confer during the grievance hearing but the advocate is not permitted to speak on the House Staff's behalf during the grievance hearing.
  - 2.6.3 The Program Director may designate a person of their choice to represent the Program including themselves.
  - 2.6.4 AHC shall conduct a grievance hearing within ten business days of the appointment. This time may be extended if needed to allow for quorum of the AHC members.
  - 2.6.5 All documents to be presented at the grievance hearing shall be submitted to the GME Office no later than four business days prior to the designed grievance hearing.
  - 2.6.6 The AHC will have the opportunity to review these documents and additional documentation may be requested by the AHC prior to the designated grievance hearing.
  - 2.6.7 There shall be a tape or transcript of the grievance hearing.
- 2.7 AHC will make recommendation(s) to the Dean of the Medical College of Georgia.
- 2.7.1 Recommendation will be in writing and will state facts and reasons for the recommendation.

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- 2.7.2 Recommendation will be delivered within five business days of the grievance hearing.
- 2.8 The Dean of the Medical College of Georgia shall make a decision based upon AHC's recommendation within five business days of receipt. This time may be extended if needed due to leave or illness. The Dean may either:
- Uphold the decision;
  - Overturn the decision; or
  - Modify the decision.
- 2.8.1 The decision shall be in writing.
- 2.8.2 The decision will be delivered to the House Staff, Program Director, GME Office, and AHC.
- 2.8.3 For cases regarding dismissal or non-renewal only, the House Staff will be informed of the right to appeal to the President of Augusta University.
- 2.9 The House Staff shall have five business days from receipt of the Dean's decision to submit an appeal to the President of the University. If needed, the House Staff may contact the GME office for the contact information of the President of the University.
- 2.9.1 The request for appeal shall be in writing.
- 2.9.2 The request shall state the reason(s) for the request with a complete description of the basis for the appeal.
- 3.0 Appeal to the President: The President or their designee (e.g., Provost) shall review the appeal within five business days. This time may be extended if needed due to leave or illness. The President or their designee may either:
- Uphold the decision;
  - Overturn the decision; or
  - Modify the decision.
- 3.1 The President or their designee shall notify in writing the concerned parties (i.e., House Staff, Program, DIO, and the Dean).
- 3.2 The decision must inform House Staff of the right to apply to the University System of Georgia (USG) for a discretionary review. <https://www.usg.edu/policymanual/section6/C2714/>
- 4.0 Application to the USG Office of Legal Affairs
- 4.1 Review of the decision is not a matter of right but is within the sound discretion of the University System Office of Legal Affairs.
- 4.2 The decision by the USG Office of Legal Affairs and the Committee shall be binding and final for all purposes.
- 5.0 Pursuant to the Official Code of Georgia, a licensed physician who qualifies as a Program Director is required to report to the Board the following within 15 days of the event:

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- 5.1 House Staff with a Temporary Training permit who withdraws or is terminated from a postgraduate Training Program and reasons for such termination or withdrawal.
- 5.2 Occurrence of any event identified as grounds for disciplinary action, violations, or practice restriction taken against a Temporary Training permit holder or any disciplinary action regarding quality of care and/or ability to practice with reasonable skill and safety.
- 5.3 Any permit holder who has an unauthorized absence from the Program for any length of time in excess of two weeks and reason.
- 5.4 At the completion of the Program year, Program Directors must report to the Board whether a permit holder has failed to advance in the Program for performance or behavioral reasons.
- 5.5 Failure to notify the Composite State Medical Examiners of a House Staff's change in status will have negative consequences for the Program Director, and the Program Director shall be subject to disciplinary action(s) by the Board.
- 5.6 Complete rules may be viewed at <https://medicalboard.georgia.gov/>.

  
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David Hess, M.D.  
Dean, Medical College of Georgia

2/27/23  
Date

  
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Natasha M. Savage, M.D.  
Senior Associate Dean, Graduate Medical Education and  
DIO

2/27/23  
Date

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