

**TORONTO GENERAL HOSPITAL/ MCGILL UNIVERSITY HEALTH CENTRE
HIV SPECIALTY RESIDENCY PROGRAM**

DISCIPLINARY ACTION POLICY AND PROCEDURE

It is expected that throughout the program, the resident will conduct him/herself in a manner consistent with provincial and institutional professional codes of ethics and codes of conduct. Unprofessional attitudes or behaviours will not be tolerated, and may be grounds for termination from the residency program.

The HIV Specialty Residency Program has adopted the following policy and procedure for handling issues related to disciplinary action regarding complaints about the resident's performance. This may include complaints regarding academic performance, non-professional behaviour or attitudes, or other incidents involving patients and/or staff. Depending upon the nature of the complaint, one or more of the following conditions may be imposed by the Residency Directors in consultation with the Residency Advisory Committee.

OBSERVATIONAL STATUS

- Observational status is a step that may be utilized prior to probation.
- In the event that a resident is at risk of rotation failure because of unsatisfactory performance and/or behaviour, the preceptor will notify the residency program directors as soon as possible (preferably before the rotation midpoint).
- The preceptor and residency director(s) should meet with the resident at the earliest possible date, outlining in writing the deficiencies, how they are to be corrected, and the time span in which this correction is to occur. This plan should be signed and dated by the resident, preceptor, and residency director(s). A copy of this written plan will be kept in the resident's personnel file and Learning Portfolio.
- If after a specified amount of time, progress has not been made, the resident may be placed on probation.
- The resident may not appeal observational status.

PROBATION

- Where there is concern that a resident's performance consistently fails to meet the standards set for the training program, the resident may be placed on probationary status by the residency program directors.
- The resident will be notified verbally and in writing by the residency program director(s) that that his/her progress or professional development is poor and that continuation in the program is at risk.
- The specific areas of concern and rationale for the decision will be clearly documented. Example(s) of resident deficiency should be recorded.

- After discussion, the resident and residency director(s) should outline a specific remedial plan with appropriate time line. In general, re-evaluation of the resident will occur after approximately 30 days. Some probationary periods may be for shorter or longer periods of time depending on the specific area(s) of concern. The resident and program director(s) should sign and date this document. A copy of this document will be kept in the resident's file.
- If the residency directors are satisfied that the resident has corrected his/her identified deficiencies, then the resident will be notified in writing that the probationary status has been lifted.
- If the resident has NOT corrected his/her identified deficiencies by the end of the probationary period, the residency directors may recommend remedial work or program dismissal. The Residency Advisory Committee will be consulted where program dismissal is recommended.

The resident may not appeal probation and/or remedial work. The resident may appeal program dismissal. (See below)

SUSPENSION

- The residency directors, with approval from the Residency Advisory Committee, may suspend a resident with or without pay, depending on the circumstances.
- Suspension may be considered, but is not limited to any situation where a serious professional charge is brought against the resident or there is concern that the resident's performance of his/her duties is seriously compromised or may constitute a danger to patients.
- Investigation will be initiated within 7 working days, with a goal for judgment within 30 days. This will allow the relevant institutional and/or professional bodies time to investigate the matter and determine what action(s) are deemed necessary.
- The resident will be notified of his/her suspension verbally and in writing. The resident, residency directors and Pharmacy Executive Director will sign and date this document. A copy of this document will be kept in the resident file.
- Suspension will be lifted when the investigation is completed.
- The resident may not appeal a suspension.

DISMISSAL

- Upon recommendation of the residency directors, consultation with the Residency Advisory Committee and approval of the Pharmacy Executive Director, a resident may be dismissed during the term of the residency program for unsatisfactory performance or conduct. Examples of such unsatisfactory performance or conduct include, but are not limited to:
 - Resident performance fails to meet the standards set for the training program:
 - The resident fails more than one rotation, or
 - The resident fails the midpoint oral exam, or
 - The resident fails the final oral exam, or
 - The resident fails to complete the project within 2 months of the end of the program
 - Performance which presents a serious compromise to acceptable standards of patient care or jeopardizes patient welfare
 - Unethical conduct
 - Illegal conduct
 - Excessive tardiness and /or absenteeism
 - Unprofessional conduct
 - Job abandonment [3 consecutive days absent from the program without notice to the preceptor and/or residency director(s)]