

Notification: reporting

In an effort to balance the proper interests of the affiliated institution(s), the training program and the trainee, the policy outlined below is to be followed. If a Program Director determines that performance of a trainee does not jeopardize the safety of patients, family members, visitors or staff, and does not impair quality of care, reporting to the institution(s) to which the trainee is assigned is not required.

Institutional Reporting

Administrative probations must be promptly reported confidentially and in writing to the Medical Director of each affiliated institution.

Further, whether the threshold for administrative probation is reached or not, if at anytime a trainee's performance causes or is likely to cause harm to patients, family members, visitors or staff, the Program Director shall provide prompt written, confidential notification of such to the Senior Associate Dean for Graduate Medical Education, the Designated Institutional Officer and each hospital Medical Director using the following guideline:

A brief statement of the trainee's in ability to:

1. function within a hospital setting;
2. perform the expected clinical duties in a safe manner;

The notification should also specify any other limitations as determined by the Program Director and outline the general plan for correction and the anticipated length of time involved.

Upon receipt of a report to the medical directors, the institutions assume the responsibility to treat the information confidentially, prudently, sensitively and in a manner which is neither prejudicial to the trainee nor detrimental to the program's attempts to resolve the problems(s). To the extent possible, institutions will support the program's actions in ways that Program Directors regard as likely to be helpful. When the performance problem is corrected, the Program Director will promptly so report to the institutions and the Senior Associate Dean for Graduate Medical Education. Documentation is essential.

State Board Reporting

The importance of protecting the public by ensuring high standards of medical practice and professional conduct are matters deserving of everyone's serious attention. With some exceptions, state boards of medicine are increasingly authorizing (requesting) Program Directors to report "disciplinary actions" taken against residents.

After surveying contemporary practices and procedures in this regard and following consultation with officials at the West Virginia Board of Medicine, the Federation of State Medical Boards and administrative staff at affiliated institutions, the Graduate Medical Education Committee of the Joan C. Edwards School of Medicine has determined that defining what constitutes reportable “disciplinary actions” is essential and would be helpful to Program Directors.

While the reporting of disciplinary actions taken on residents unlicensed in West Virginia is not required by the West Virginia Board of Medicine, it is the position of the Graduate Medical Education Committee that a determination on reporting to the Board should be made using the following unambiguous distinctions. The report should be timely and would be the responsibility of Program Directors with consultation(s) as they deem appropriate using forms provided by the State.

Academic Remediation – nonreportable if deficiencies are corrected to the satisfaction of the Program Director e.g. time added to a rotation for remediation; academic deficiencies; medical record incompleteness (unless recurrent and refractory to corrective action).

Administrative (non-academic) Probation – reportable to the WV State Board of Medicine (or other States if requested). It could also be reported to the National Practitioner Data Bank upon due consideration of the circumstances by the Risk Management Office of the School of Medicine if involving:

- A. a threat to public health, safety or welfare
- B. a felony-level sexual assault
- C. proven boundary violation(s) involving documented sexual misconduct
- D. multiple similar incidents refractory to corrective interventions
- E. documented non-therapeutic prescribing
- F. dismissal from the program for reasons related to A, B, C, D or E or for other reasons which in the judgment of the Program Director indicate the necessity for involuntary termination of training.

Other States to which a resident may apply for licensure might stipulate additional criteria for mandatory reporting. If this situation arises, consultation by the Program Director is encouraged if a conflict or problem is thought to exist.

Policy approved and effective February 27, 2007