In this document, the “resident” refers to both specialty residents and subspecialty fellows.

**Policy:**

Professional behavior is a core expectation of all School of Medicine faculty members, students, residents/fellows, administrators and staff. Under the umbrella of professionalism lies a set of responsibilities that includes civil and courteous behavior and respect for patients, learners, colleagues and staff. The professionalism expectations for the residents/fellows are outlined in the GME Professionalism Policy.

The GME Professionalism Committee was established by the Graduate Medical Education Committee (GMEC) to ensure an optimum learning environment. To further that end, the GME Professionalism Committee has established and will monitor a system to enable medical students and residents/fellows to provide feedback on exemplary professional behaviors or behaviors that may be considered lapses in professional behavior. The GME Professionalism Committee is responsible for overseeing this feedback system and working through the Program Directors to address possible lapses in professional behavior by residents/fellows.

**Definitions:**

**Exemplary Professional Behavior:** Conduct that promotes an optimal learning environment, fosters a climate of respect, and exemplifies the highest standards of the medical profession.

**Lapses in Professional Behavior:** Conduct that adversely affects the ability of others to learn, provide good patient care, or function as part of an effective health care team, exemplified by, but not limited to, the following behaviors: inappropriate speech or conduct relating to an individual's race, age, religion, color, sex, sexual orientation, national origin, marital status, veteran status, mental or physical disability, political viewpoint or appearance; speech or behaviors that are hostile, intimidating or offensive to learners, patients or members of the health care team; and any form of physical abuse or verbal abuse of such a significant character and nature that no person of reasonable sensitivities should be expected to tolerate in the learning environment.

**Minor Lapses in Professional Behavior:** Speech or behavior that is unprofessional but does not interfere significantly with learning, the physician-patient relationship, or functioning of the health care team.

**Serious Lapses in Professional Behavior:** Speech or behavior that is unprofessional which interferes significantly with learning, the physician-patient relationship, or functioning of the health care team.
Procedure:

Composition, Selection and Responsibilities of the GME Professionalism Committee
The GME Professionalism Committee is a committee of the GMEC. It is composed of two (2) ACGME Program Directors representing residencies and fellowships, one (1) Housestaff Association member and, upon request by the Chair of the GME Professionalism Committee an ex officio member from the office of university office counsel.

New members of the Committee may be self-nominated, or they may be nominated by current members of the Committee, department chairs, or other individuals involved in resident education.

Committee members will be selected from the group of nominees by the Associate Dean for GME of the School of Medicine in consultation with the GMEC.

The Chair of the Committee will be designated by the Associate Dean for GME in consultation with the GMEC and be responsible for keeping the Associate Dean for GME appraised of Committee actions.

Committee members will be appointed for three year terms and may be re-appointed for one additional term.

Method of Review of Reports of Exemplary Professionalism or Lapses in Professionalism by Residents

EthicsPoint reports will be forwarded by the Chair of the Faculty Professionalism Committee to the Chair of the GME Professionalism Committee through the anonymous/confidential on-line system.

If a resident becomes faculty after the report is submitted, the Chair of the Faculty Professionalism Committee will send the initial report to GME for investigation. The record for the case will follow residents who become faculty and will be considered by the Faculty Professionalism Committee if there are subsequent EthicsPoint reports.

Reports of Exemplary Professionalism will be reviewed by the GME Professionalism Committee, which will recognize those residents, their programs, and program directors, as appropriate.

Reports of minor lapses: Unless specifically directed to the contrary by the reporter, reports of minor lapses in professionalism will be addressed. The rationales for this include that residents and fellows are trainees, that professional formation is a key element of post-graduate education, and that the duration of training programs is relatively short. The relevant Program Director will be asked to address the issue including providing education and counseling as appropriate. No investigation is required. All activities by the Committee and the PD will be confidential and protect the identity of the reporter. Reports will be addressed either (1) promptly if it can be determined that the reporter’s identity could not be revealed or presumed (e.g. incident in a large classroom with many in attendance), (2) after an interval determined by the Committee such that the reporter could not be identified or be subject to retaliation, or (3) as requested by the reporter. If these 3 conditions are not met, then no action will be taken. Unless a reporter has specifically directed otherwise, his/her identity will not be revealed to the Program Director or subject, and the Committee’s timing and actions will be ordered to prevent presumptive identification.

Allegations of serious lapses in professionalism will be reviewed by the GMEC Professionalism Committee to determine an appropriate course of action. The Committee will act promptly to address any potential threat to patient safety.
Training of GME Professionalism Committee Members

Following appointment, new Committee members will receive training on issues of professionalism as appropriate.

Remediation Plans

If the report of a serious lapse is found to be accurate, the Program Director will make a change in the status of the resident and require a remediation plan per the GME Disciplinary Policy. The remediation plan should be appropriate to the type and severity of the behavior requiring remediation. This may include counseling and/or referral to CPHP, and the remediation plan will be focused on the deficits listed by the 6 ACGME competencies.

The Program Director will closely supervise the resident and report to the GME Professional Committee upon completion of the remediation plan.

Recidivism or Failure to Complete Remediation Plan

If there is a pattern of recidivism (2 or more serious events), as determined by the Program Director in consultation with the Associate Dean of GME and the resident fails to complete the remediation plan, the resident may be Terminated from the program per the GME Disciplinary Policy.

Tracking Reports, Remediation Plans, Outcomes

Staff support will be identified to track all reports, results of inquiries and remediation plans. The Director of Administration and Finance for GME will keep these reports. Verified Reports will be maintained by the GME Office for the duration of the resident’s training program(s) at UCSOM. Unverified Reports will be kept for three years.