The purpose of these Due Process Policies is to provide residents and fellows with additional due process protections. Although residents are not entitled to periods of probation or to due process with respect to certain employment-related decisions, in order to comply with the Accreditation Council for Graduate Medical Education (ACGME), MHS adopts the following Due Process Policies for Residents and Fellows. All references to “Residents” in these Policies include “Fellows.”

**Statement of Due Process**
Residents are entitled to due process regarding decisions to impose disciplinary action, as defined below. Residents may exercise the following rights under these Policies and the MHS compliance with these rights will fulfill due process requirements for any disciplinary action it takes:

- the right to written notice of action contemplated or taken under these procedures; and
- the right to be heard in person and to present witnesses and written documentation in support of his/her position; and
- the right to question adverse witnesses, either personally or through an attorney licensed to practice in Texas; and
- the right to meet with an impartial review body; and
- the right to be accompanied by an advisor or attorney at such hearings; and
- the right to receive a written statement prepared by the review bodies setting forth their findings and decision and the facts the review body relied upon in reaching such decision; and
- the right to an appeal of an adverse decision, under the procedures set forth below.

All residents are asked to speak to the Program Director (PD), the Designated Institutional Official (DIO) or the GME office before filing a complaint and grievances. If this does not resolve the issue, then it is escalated to the appropriate department or person and then the resident is asked to follow the complaint process.

**Nature of Procedures and Proceedings**
These Policies and the procedures and proceedings described herein are not judicial. In cases in which residents request hearings to challenge a disciplinary action, formal rules of evidence do not apply. A Committee appointed under these Policies may consider any relevant evidence it determines would be helpful in making a decision in a particular matter before it, including “hearsay,” and will give such evidence the weight it deems appropriate under the circumstances.

Deviation from these procedures will not invalidate a decision or proceedings unless such deviation causes significant prejudice to the resident. If a resident believes s/he has suffered significant prejudice, then s/he must bring the matter to the attention of the Designated Institutional Official (DIO) immediately upon belief that such prejudice occurred. In determining whether a deviation caused significant prejudice, the DIO will consider whether the course of the proceedings would have been substantially difference had the deviation not occurred. The DIO also will determine whether the resident gave adequate notice of the allegedly prejudicial event to have taken appropriate and timely action.

**Definitions and Disciplinary Actions**
In this document, unless otherwise stated, the following words have the meanings indicated:
"Academic Deficiency" means an insufficient fund of medical knowledge, an inability to use medical knowledge effectively, a lack of technical skills based upon the resident's level of training, a lack of professionalism, or any other deficiency that bears on the resident's academic performance.

"Adverse witness" means an individual who presents evidence or testimony before a Discipline Review Committee against a resident.

"Advisor" means a faculty or staff member, another resident, a friend or family member, or an attorney, who may accompany a resident at a hearing described in these Policies. Only an attorney, licensed to practice in Texas, may actively represent a resident at a hearing described by these Policies. An advisor who is not an attorney may not actively participate in a hearing, but may be present to provide support to the resident during a hearing. Any expenses the resident incurs as a result of retaining the services of an attorney or advisor will be the resident's sole responsibility.

“Appeal” means a formal request for review of a decision of a Discipline Review Committee (DRC).

“Conflict of interest” means an inability to exercise independent judgment in reviewing a matter because that same individual had a substantial role in making an earlier decision that disciplinary action should be taken against the resident.

"Day" means a calendar day, except that where the last day of any time period falls on a Saturday, Sunday or a recognized holiday, the time period will run until 5:00 p.m. of the next business day that is not a Saturday, Sunday or recognized holiday.

"Department" means that administrative unit within Methodist Healthcare System that sponsors the residency program in which the resident is participating.

"Designated Institutional Official" means the MHS employee holding that job title in the department that sponsors the residency program in which the resident is participating.

"Faculty Committee" means that group of faculty members and residents established within the program that is charged with developing graduate medical education policy for that department or section.

“Disciplinary Action” means probation, emergency suspension that results in disciplinary action, retention or non-promotion, non-renewal or dismissal under these Due Process Policies. It does not include a written or verbal notice of academic deficiencies unless that notice constitutes the basis upon which a program takes disciplinary action against a resident.

"Discipline Review Committee" or "DRC" means that Committee comprised of members of the Faculty Committee selected to review a decision to take disciplinary action against a resident, after a Notice of Action issues. The constituency of such Committee may be modified for a particular matter, if either a member of the Committee or the affected resident identifies a conflict of interest, as defined above.

"Dismissal" means permanent removal from a residency program. Dismissal will occur when a resident fails to meet program requirements or engages in conduct that constitutes just cause.

In lieu of dismissal, a resident may accept the decision of the Program Director and submit a letter of resignation from the program; however, the Notice of Action, as described below, will remain in the resident's official personnel file, and will reflect the intentions of the department to dismiss him/her from the program, subject to his/her right to challenge that decision through a hearing process. If the resident tenders a resignation, s/he will not hereafter be entitled to a review of that decision before the DRC or to an appeal to the GMEC. The resident's official file will reflect a "resignation pending dismissal."

“Emergency Suspension” means temporarily removing a resident from the residency program after a determination that his or her continued presence at the facilities constitutes a substantial interference with the orderly functioning of the hospital or clinical area, pending a decision whether to permanently dismiss
the resident or take disciplinary action against the resident. The procedures to place a resident on an emergency suspension differ from those for imposing other forms of discipline, and are described below.

“GME” means Graduate Medical Education.

"Graduate Medical Education Committee" or "GMEC" means that Committee of MHS charged with monitoring and advising on all aspects of graduate medical education.

“GME Office” means the Graduate Medical Education Office of Methodist Healthcare System.

“Hearing” means an opportunity for a resident to present evidence and arguments related to why s/he believes the Program Director's or GMEC’s decision to take disciplinary action was unwarranted.

"Just cause" will include, but not be limited to, any or a combination of the following:

- Demonstrated incompetence or dishonesty in professional activities related to the fulfillment of assigned duties and responsibilities associated with the position;
- Inability to perform satisfactorily functions essential to rendering proper medical care to patients and otherwise required of physicians providing direct patient care;
- Personal conduct that substantially impairs the individual's fulfillment of properly assigned duties and responsibilities;
- Inability or failure to perform the essential functions of the job or tasks assigned;
- Failure to improve performance in an area identified in informal counseling or a written warning;
- Failure to complete satisfactorily a period of probation;
- Violation of a resident's employment agreement or policies
- Violation of the rules of the program in which the resident is assigned, of the institution to which the resident is assigned or of the law;
- Inadequate medical knowledge, deficient application of medical knowledge to either patient care or research, deficient technical skills or any other deficiency that adversely affects the resident's performance;
- Disruptive behavior; or conduct that violates the professional standards by which physicians in the State of Texas are governed.

"Mail" means to place a notice or other document in the United States Mail. Notices mailed via first class mail, postage prepaid, unless returned to sender by the United States Postal Service, are presumed to have been received five (5) days after mailing. Unless otherwise indicated, it is not necessary, in order to comply with the notice requirements in these Policies, to hand-deliver or use certified or registered mail; however, such methods of delivery, when documented, will verify actual notice.

"Non-renewal" means the decision not to renew a resident's employment agreement beyond the expiration of the current fiscal year. When a program decides not to renew a resident's agreement, the program must provide the resident a written Notice of Action no later than four (4) months (120 days) prior to the end of the resident's current agreement; however, if the primary reason(s) for the non-renewal occurs within the four months prior to the end of the agreement, then the program must provide as much written notice of the intent not to renew as circumstances will reasonably allow, prior to the end of the agreement.

"Notice of Action" means the written notice provided to the GME Office and to the affected resident of a Program Director's intention to take disciplinary action against the resident.

"Notice of Deficiency(ies)" means either verbal or written notice advising a resident that his/her performance is deficient, but not so deficient to warrant a formal Notice of Action.

"Preponderance of the evidence" means that quality of evidence which, when fairly considered, produces the stronger impression, and has the greater weight, and is more persuasive regarding the truth than the evidence presented in opposition. The standard of proof in disciplinary proceedings is “by a preponderance of the evidence.”
"Probation" means an action taken by MHS to advise a resident of his/her need to correct behavioral deficiencies; violations of the resident’s contract or policies; violations of rules of a training site; or violations of rules or statutes governing conduct of physicians practicing medicine in the State of Texas, following a finding of "just cause." Additionally, probation may be imposed to correct deficiencies in academic performance that are below a minimally acceptable standard for a resident’s level of training.

Probation is imposed only after a resident has been accepted and begun participating in a residency program. The terms of any probation established as a condition of acceptance into a residency program will be specifically set for the resident’s initial employment agreement. In such event, the contractual provisions will govern.

During a probation period, the Program Director will make efforts to offer guidance, counsel and supervision to aid the resident in correcting the deficiencies with the acknowledged goal of retaining him/her in the program. It will, however, remain the resident’s responsibility to correct any noted deficiencies.

Probation will last no longer than six (6) consecutive months. If, at the end of the probation period the Program Director determines that the resident successfully met the terms of the probation, then the Program Director will provide the resident a written notice of successful completion of probation, place a copy of such notice in the resident’s personnel file, and forward a copy of the notice to the GME Office.

If the Program Director determines that the resident failed to meet the terms of probation, then the Program Director will proceed in accordance with these Due Process Policies to take further disciplinary action, if deemed appropriate.

The Program Director may recommend or institute other forms of discipline during a period of probation, if just cause warrants such action. The resident’s personnel record will reflect all periods during which s/he was on probation, and will indicate the disciplinary nature of the action.

"Program Director" means the Program Director of the residency program in which a resident is participating.

"Resident" or "Fellow" means an individual who has earned a Doctor of Medicine degree who is employed by the graduate medical education training program at Methodist Healthcare System of San Antonio. All references to “resident” in these policies will apply equally to fellows.

"Retention" means continuing a resident at his or her current level of training. Non-promotion will have the same meaning as retention. When a program decides to retain a resident at his/her current level of training, it must provide the resident with a written Notice of Action no later than four (4) months (120 days) prior to the end of the resident’s current agreement; however, if the primary reason(s) for the retention occurs within the four months prior to the end of the agreement, then the program must provide as much written notice of the intent to retain the residents at his/her current level of training as circumstances will reasonably allow, prior to the end of the agreement.

"MHS representative" means the Designated Official or Program Director or his or her designee who will represent the interests of MHS in any disciplinary action contemplated under these Policies.

**Progressive Discipline**
It is not necessary to progressively discipline residents if just cause exists to take disciplinary action.

**Initiating Disciplinary Action**
Any hospital to which the resident is assigned, has been assigned, or in which duties under the residency agreement are otherwise performed; any faculty member serving in a supervisory position may submit a written statement to the Program Director of the program in which the resident is participating recommending that the program initiate disciplinary action against a resident.
Anyone submitting such a request will support the request by including documentation related to a specific activity, conduct, deficiency or other basis constituting the grounds for the request. Before a Program Director may take disciplinary action against a resident he/she must consult with the GME Office to ensure that just cause exists to take such action; that such action is consistent with actions taken under similar circumstances; that such action complies with accreditation and due process requirements; and that adequate documentation exists in the resident’s file to warrant such action.

Notice of Action and Justification for Imposing Discipline
After meeting with the Faculty Committee and determining that disciplinary action is necessary, and after consulting with the GME Office, the Program Director will prepare a Notice of Action form, as well as a detailed statement justifying the disciplinary action, and deliver them to the GME Office. The statement will include the specific bases for the action and the just cause upon which the action is taken. It will include a statement of relevant facts, including, if known, the time, date, and place of any incident or incidents giving rise to the action. The notice also will state the name of any complainant.

If the Program Director seeks to place a resident on probation, then the Notice of Action will also include requirements to improve the resident’s performance and state the terms and duration of the probation.

The Program Director may also provide other documentation to the GME Office, which justifies the decision to impose discipline, at the same time.

Notice to the Resident
The Program Director will meet personally with the resident to discuss the disciplinary action, and will, at that time, hand-deliver the Notice of Action and accompanying documentation to the resident. If the resident is either unwilling or unable to meet with the Program Director when requested to do so, then the Program Director will mail the Notice of Action form and accompanying documentation to the resident’s last known address. The date of hand-delivery will be the effective date of receipt of the notice; if mailed, the notice will be effective five (5) days from the date of mailing. The Program Director will include with the Notice of Action a copy of these Due Process Policies.

Acceptance of Disciplinary Action
A resident may accept the disciplinary action by signing a statement to that effect. In a case in which a resident accepts the discipline, the discipline will become effective on the date the resident signs the Notice of Acceptance of Disciplinary Action. A copy of that form is attached to these Policies, as Exhibit A.

Request for Hearing
If a resident does not accept the disciplinary action imposed, then s/he may request a hearing by providing a written notice to the DIO and the GME Office within seven (7) days of receipt of the Notice of Action and accompanying documentation. At the time the resident requests a hearing, s/he also may submit a written response to the action taken, along with documentation supporting that response. The GME Office will forward copies of all documents it receives to the Chair of the GMEC, and General Counsel.

Representation by Counsel
If a resident obtains counsel to represent him/her at a hearing, then s/he must notify the GME Office of the name, address and telephone number of such individual, as soon as s/he obtains counsel, but in no event less than ten (10) business days prior to a scheduled hearing.

If a resident will be represented by counsel at a hearing, then the Program Director will also be represented by counsel, who will prosecute the matter before the Discipline Review Committee.

System Attorney will advise the Discipline Review Committee (DRC) regarding procedural matters. The System Attorney may attend the deliberations following a hearing and advice on questions of procedure and otherwise assist in the deliberations, but will not vote. The System Attorney also may assist the DRC in preparing its findings and decision.

Hearing Procedures
Upon receipt of notice that a resident requests a hearing, the DIO will appoint a Disciplinary Review Committee (DRC), which will consist of no fewer than three (3) faculty members, MHS representative and at least one (1) resident (if available). The PD may not serve as a member of the DRC. The members of the DRC will, at the time of selection, appoint a Chair.

The Chair of the DRC will, within ten (10) days after his/her selection, set a date and time for a hearing, and will provide notice to the resident of the date, time and place of the hearing, as well as the names of the members of the DRC. The hearing should be set expeditiously, taking into consideration the schedules of the resident, the potential witnesses, the parties’ attorneys, if any, and the committee members.

If the resident believes that any member of the DRC has a conflict of interest, then s/he will immediately notify the DIO and identify the circumstances s/he believes will prevent the member from exercising independent judgment in the matter. The DIO will meet with the identified member and determine whether the individual will, because of the circumstances described, be unable to exercise independent judgment. If the DIO determines that a conflict of interest exists, then the DIO will disqualify the member and appoint a substitute Committee member, subject to the same provisions regarding disqualification. Should a member of the DRC believe that s/he has a conflict of interest that the resident does not identify, s/he shall disqualify him or herself from participating, advice the DIO, as ask that s/he appoint another member.

The Chair of the DRC will ensure that each of its members and both the Program Director and the resident have copies of the Notice of Action, the resident’s response, if any, and any other supporting documentation provided prior to the hearing to properly evaluate the matter. If a party has not provided such documentation to the Chair of the DRC prior to the hearing, then s/he must bring to the hearing adequate numbers of copies for all parties at the time of the hearing.

No later than seven (7) days prior to the scheduled hearing date, the Program Director and resident will provide the Chair and the other party a written list of the names and addresses of the witnesses the party intends to question at the hearing. No witnesses will be called at the hearing other than those listed except for good cause shown or upon written agreement of the parties.

**Conduct of the Hearing**

The Chair of the DRC will preside over the hearing, which will be conducted in an expeditious manner. No hearing should last more than one-half day. If, however, for good cause shown, either the Program Director or the resident provides notice and receives permission from the Chair of the DRC in advance of the scheduled hearing to extend the length of the hearing, then the Chair, in his/her discretion, may grant a longer time for the hearing. The Chair may conduct the hearing in an informal manner; however, the Chair may exclude irrelevant, immaterial, or unduly repetitious material. The Chair also may, either on his/her own, or at least at the request of a party, subpoena documents or other materials as necessary for a fair consideration of the evidence.

The DRC will engage a court reporter to record the proceedings. The court reporter will administer an oath to witnesses before they testify. If the resident later appeals the DRC’s decision, then the GME Office will notify the court reporter and request a transcript of the proceedings. The GME Office will provide a copy of the transcript, free of charge, to the resident for purposes of an appeal.

With the exception of the resident and the Program Director, no other witnesses will be permitted in the hearing room while other witnesses are presenting evidence to the Committee. The hearing will be closed to members of the public, unless they are participating in the hearing as a witness, party, or representative of the party. The resident may also be accompanied by a member of his/her immediate family for support, unless that individual is providing evidence to the Committee, in which case the family member will provide his/her evidence first, and remain thereafter in the hearing room. All participants will be reminded that the proceedings are confidential personnel matters and nothing learned during the hearing may be shared outside the context of the proceedings.
Each party may present an opening statement describing their evidence, call witnesses to testify, examine witnesses called by the other party, and make a closing statement summarizing the evidence they presented.

Because the hospital representative bears the burden of proof, s/he will present his/her evidence first and will be entitled to present evidence in rebuttal after the resident presents his/her evidence why s/he believes the disciplinary action was not appropriate.

The Committee members may question any individual presenting evidence at any time during the proceedings. At the conclusion of the evidence, each party will be permitted to make an oral or written summation. Following presentation of the evidence and summation, the DRC will deliberate in closed session.

Decision of the DRC
The DRC will consider all facts presented in a judicious manner. The DRC members will consider the disciplinary issues before it, noting that the purpose of their review is to safeguard and protect patients and other individuals, as well as to preserve the resident’s rights. Any decision must also consider the integrity of MHS and its programs.

The DRC will prepare a written statement setting forth its findings and decision (hereafter “decision”), The DRC may uphold the disciplinary action, or remand the matter to the Program Director for further consideration.

The Chair of the DRC will present the decision to the GME Office, which will provide a copy of the decision to the DIO, the Program Director, and the hospital General Counsel within ten (10) days after the conclusion of the hearing.

The GME Office either may hand-deliver or mail the decision to the resident. If the GME Office mails the decision to the resident, then the resident will have an additional five (5) days within which to file a Notice of Appeal, if s/he does not agree with the decision. If the resident does not file a Notice of Action in a timely manner, then the disciplinary action will be come effective as of the date on which s/he could have filed an appeal.

Requirements for Imposing Emergency Suspension
If a Program Director believes that a resident has engaged in conduct that justifies temporarily removing him/her from the residency program because his or her continued presence at the facilities constitutes a substantial interference with the orderly functioning of the hospital or of a clinic pending an investigation and decision to impose discipline, then s/he can place the resident on an emergency suspension, in accordance with the procedures below.

Procedure
After the Program Director determines that just cause exists to suspend a resident on an emergency basis, the Program Director immediately will meet with the resident and advice him/her that s/he is suspended with pay pending an investigation to determine whether the resident should be dismissed or that other discipline should be imposed. The resident may be directed not to appear at a particular work site or to appear at a difference work site, including the resident’s place of residence, pending the results of the investigation. The resident may be required to cease providing clinical care to patients, and may be reassigned to other duties during the period of the suspension.

If time permits prior to meeting with the resident, the PD will hand-deliver a written Notice of Action to the resident stating the reasons that the resident has been placed on emergency suspension pending investigation and will provide the resident a copy of these Due Process Policies. If the PD does not have time prior to meeting with the resident to prepare the written Notice of Action because of the emergency nature of the situation, then s/he will prepare the Notice of Action immediately following the meeting and either hand-deliver the notice or mail the notice to the resident’s last known address.
An emergency suspension may be imposed independently of or in addition to any other disciplinary action provided in these Due Process Policies.

If, after the investigation, the Program Director determines that just cause exists for dismissal or other disciplinary action, then the Program Director will proceed with such action in accordance with these Due Process Policies. A resident is not entitled to appeal a decision to suspend him/her on an emergency basis.

If the Program Director does not pursue disciplinary action following an investigation, then the resident may continue in his/her program after the conclusion of the investigation without prejudice, and such emergency suspension will not be considered disciplinary action in his/her permanent record.

Appeal Process
A resident may appeal an adverse decision only on the following grounds:

1. The DRC did not conduct the hearing in a manner substantially consistent with the procedures set forth in these Policies, abused its discretion, or acted arbitrarily or capriciously;

2. Either the Committee members or one of the parties engaged in misconduct; or the decision resulted from accident or surprise, which could not have been prevented by ordinary prudence.

3. The resident obtained newly discovered material evidence, which with reasonable diligence could not have discovered and produced at the hearing; or

4. Error occurred in the admission or rejection of evidence, error in the charge to the Committee, or other errors of law occurred before or at the hearing that resulted in significant prejudice.

5. The DRC’s decision was not supported by a preponderance of evidence as disclosed by the record or is contrary to the law; or

6. The decision was the result of passion or prejudice; or

7. The decision was arbitrary or capricious or an abuse of discretion.

If the resident desires to appeal the DRC’s decision, then s/he must submit a written statement outlining the grounds for appeal to the Chair of the DRC and to the GME Office within ten (10) days of receipt of the decision.

Upon receipt of the Notice of Appeal, the GME Office will contact the court reporter who recorded the proceedings and order a transcript. Upon receipt of the transcript, the GME Office will provide a copy of the transcript to the resident and will also forward a copy of the transcript, the Notice of Appeal, any written statement the resident provides, and any other documents or evidence presented to the DRC, to the Graduate Medical Education Committee (GMEC).

The GMEC Chair will appoint a subcommittee, consisting of no fewer than three (3) of its faculty members, and at least one resident (if available), to review the entire record.

The subcommittee will meet within ten (10) days of receipt of the record, and may obtain additional information from either the Program Director or the residents, if it requires further clarification of the record. The subcommittee will address no issues that were not raised either in the original Notice of Action or the Notice of Appeal.

The subcommittee will uphold, overrule, or modify the DRC’s decision, but will entertain no new evidence nor hear from the parties directly. It will prepare written findings and a decision, and provide that decision to the GME Office within seven (7) days of the conclusion of its meeting.
The GME Office will either hand-deliver or mail a copy of the decision to the resident, the DRC members, the Program Director and the hospital General Counsel. If mailed, the decision becomes final five (5) days after mailing. If hand-delivered, the decision becomes final upon delivery of the decision to the resident.

The resident will be entitled to no further appeal or additional administrative review.

**Failure to Appear and Continuances**
A resident’s failure to request a hearing to review a decision to impose discipline, to appear at a scheduled hearing, or to appeal from an adverse decision, will be treated as consent to the action. If a resident requests a hearing but fails to attend, such failure to attend will result in the cancellation of the hearing, except that, for good cause shown, a hearing may be rescheduled or continued.

Any continuance or rescheduling of a hearing will not be subject to the time limits set forth above; however, due regard will be given to scheduling a time that is mutually convenient to the resident, witnesses, DRC members, the attorneys for the parties, and the System representative.

**Payment of Salary pending final discipline**
Until a final decision is made to dismiss a resident from his/her training program, the resident will be entitled to receive his/her full compensation. Residents are entitled to receive their full compensation during any period of emergency suspension or probation, and are entitled to receive their full compensation until their residency agreement terminates, if such agreement is not renewed.

**Notification to State Licensing Board**
The Program Director may be required to notify the Texas Medical Board when a resident has been disciplined under these Policies if the reason for discipline constitutes unprofessional conduct, or as otherwise required by state law.
EXHIBIT A

Methodist Healthcare System of San Antonio, Ltd., L.L.P.

NOTICE OF ACCEPTANCE OF DISCIPLINARY ACTION

I, __________________________________, a resident in the Program of

____________________________________, consent to the disciplinary action taken by Notice of

Action form dated _____________ and forego my right to a hearing to challenge that decision.

____________________________________                        ____________________
Signature of Resident       Date
## Notice of Action

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(May attach additional sheets as necessary.)

### Justification:


### Provisions:

(List expectations, what assistance will be provided, what method of evaluation to determine improvement, and what consequences if expectations are not met.)


### REQUIRED SIGNATURES

Program Director: ___________________________ Date: ______________ 

Designated Institutional Official: ___________________________ Date: ______________

### REQUIRED ATTACHMENT: Due Process Guidelines
Due Process Flowchart (excluding suspension)

Program Director make decision to impose discipline after consulting with the Graduate Medical Education Office. Resident continues to receive pay until final decision on dismissal, throughout suspension or until contract expires, if non-renewed.

PD meets with resident and provides a Notice of Action form and supporting documentation, unless resident is unable or unwilling to meet with PD. Resident may accept discipline, or request a hearing. Effective date of disciplinary action is either acceptance of discipline or final decision after hearing(s).

If resident requests hearing, must provide notice and response, if desired to DIO and GME Office within 7 days of receipt of Notice of Action. Resident must notify GME office when retains counsel. GME Office provides copies of all documents to all parties, and DRC once constituted.

Faculty Review Committee appoints Discipline Review Committee (DRC) which notifies parties of hearing date within 10 days of appointment. Hearing must be set thereafter as expeditiously as possible.

No later than 7 days prior to hearing, each party provides names of witnesses to each other. Only those witnesses will be permitted to testify. Hearing is closed to the public, is recorded by court reporter, and if appeal occurs, GME Office orders transcript. The System representative carries the burden of proof, presents first and last, and each party is entitled to opening statement, cross-examination of witnesses and summation.

DRC deliberates in closed session, makes decision within 10 days. Resident may appeal decision to GMEC if grounds exist. No new evidence will be considered. Appeals Committee submits decision. Decision is FINAL. PD may have to notify licensing board if discipline is imposed.