


Name of Policy: <u>Physical Therapy Resident Remediation and Termination</u> Policy Number: 3364-137-RES-02 Department: Rehabilitation Services Approving Officer: Chief Operating Officer Responsible Agent: Director of Rehab Services Scope: Rehabilitation Services	 Effective Date: 3/1/2021 Initial Effective Date: 3/2018
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	
<input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

The Rehabilitation Services Department must provide all physical therapy residents with fair, reasonable, and readily available written policies and procedures for remediation due to academic or non-academic deficiencies. This policy and procedure will minimize conflict of interest.

(B) Purpose of Policy

To provide a formalized process for implementing fair process and guidelines for remediation to allow successful completion of program.

(C) Types of Offenses/Deficiencies

The remediation process will be utilized if the resident fails to present him/herself in a professional manner, follow policies and procedures of the Medical Center, make satisfactory progress on any of the residency goals and objectives, and make satisfactory progress towards the completion of a residency requirement.

Examples include but are not limited to:

1. More than two instances of tardiness
2. Missed deadlines for completion of didactic content on Medbridge.

When corrective or disciplinary action is to be implemented, the program director or designate shall:

1. The RPD or designate, prior to initiating corrective action, will conduct a thorough investigation. This includes meeting the resident to investigate the concern and offer the resident an opportunity to provide information relevant to the identified problem.
2. Following the investigation, the RPD will review the results of the investigation to determine the need to initiate the remediation process. The RPD or designate shall inform the resident of the results of the review regardless of the final decision.
3. The remediation process consists of the following:
 - a. Schedule an appointment with the resident.
 - b. Review with the resident the verbal and written performance evaluations and concerns of the program faculty.
 - c. State clearly to the resident what action is to be taken by the program.
 - d. State clearly to the resident what is expected of them for improved performance or behavior.

- e. Give the resident a schedule for the proposed remediation.
- f. Schedule a follow-up meeting with the resident in agreement with the schedule for remediation.
- g. Give the resident, in writing, an outline of the content of the meeting and dates of the required remediation, and the date of the follow-up meeting using the "Remediation Report".
- h. Written documentation is essential in any remediation. Copies of all correspondence must be maintained by the program and copies must be provided to the Director of Therapy Services. Copies will also be provided to the resident.

Grounds for immediate dismissal

Just cause for dismissal includes failure to perform the normal and customary duties of a resident, substantial or repetitive conduct considered professionally or ethically unacceptable or which is disruptive of the normal and orderly functioning of the department. Specific concerns, behaviors or actions fulfilling these requirements are listed below. Residents meeting any criteria below will be dismissed from residency program and employment will be terminated at UTMC.

1. The resident fails to obtain physical therapist licensure in the state of Ohio prior to the start of the residency program
2. The resident loses physical therapist licensure while a part of residency program.
3. The resident knowingly or due to negligence of action places a patient, employee or any other person in danger.
4. The resident displays acts or threats of violence toward any other person including aggressive behavior or stalking.
5. The resident is found to be using alcohol, illegal substances or other recreational substances at any time during work and non-work hours with which use of these substances interferes with their ability to perform work duties in a professional, responsible and safe fashion.
6. The resident is found to carry, possess or use any weapon on medical center property.
7. The resident falsifies information on a document.
8. The resident commits plagiarism determined by a majority decision of the Resident Advisory Committee (RAC) called to review the materials suspected of plagiarism. This committee must consist of the director of therapy services, residency program director, and a clinical specialist in the appropriate area of practice.
9. The resident is absent from work more than 10 days beyond allotted personal time off and is unwilling to make up this time.
10. The resident sexually harasses a patient, employee or any other person while in performance of their duties as a resident.
11. The resident commits an act of vandalism or theft of medical center property.
12. The resident knowingly commits malicious acts against another employee.

<p>Approved by:</p> <p><u>/s/</u> _____ <u>03/16/2021</u> Marci Cancic-Frey PT, MBA Date Director of Therapy Services</p> <p><u>/s/</u> _____ <u>03/16/2021</u> Christine Stesney-Ridenour, MBA Date Chief Operating Officer</p>	<p>Review/Revision Date: 1/28/2021</p>
<p>Next Review Date: 3/2024</p>	
<p>Policies Superseded by This Policy:</p>	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.