

**2007-2008 UNIVERSITY OF WISCONSIN HOSPITAL AND CLINICS  
APPOINTMENT INFORMATION  
FOR RESIDENTS AND FELLOWS  
IN GRADUATE MEDICAL EDUCATION PROGRAMS**

The University of Wisconsin Hospital and Clinics (UWHC) and its affiliates are committed to provide a training program for Residents\* that meets all requirements for programs\*\* accredited by the Accreditation Council for Graduate Medical Education (ACGME). The Program Director will be responsible for determining the educational program, the professional responsibilities, specific hours of duty and the rotation schedules necessary to comply with the ACGME requirements.

**I. Responsibilities of the Resident**

**A. Residents are expected to:**

1. Participate in safe, compassionate and cost-effective patient care under a level of supervision commensurate with their achieved cognitive and procedural skills.
2. Participate fully in the educational activities of their program and, as required, assume responsibility for teaching and supervising other Residents and students.
3. Fulfill the educational requirements of the training program established for their specialty and demonstrate the specific knowledge, skills and attitudes to demonstrate the following:
  - a) **Patient care** that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.
  - b) **Medical knowledge** about established and evolving biomedical, clinical, and cognate (e.g., epidemiological and social-behavioral) sciences and the application of this knowledge to patient care.
  - c) **Practice-based learning and improvement** that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care.
  - d) **Interpersonal and communication skills** that result in effective information exchange and teaming with patients, their families, and other health professionals.
  - e) **Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
  - f) **Systems-based practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is of optimal value.
4. Participate in institutional programs and activities involving physicians, and adhere to applicable laws, regulations, rules, policies, procedures and established practices of the sponsoring institution and all other institutions to which they are assigned.
5. Participate in institutional committees and councils, especially those related to patient care review activities and residency education.
6. Learn and apply reasonable cost containment measures in the provision of patient care.

*\*To be concise, whenever the term "Resident" is used in this document, it is intended to include all residents and fellows in ACGME accredited training programs.*

*\*\*Further use of "program(s)" in this document will refer to ACGME-accredited programs.*

**B. Professional activities outside the educational program.** The primary responsibility of the Resident is to the care of his/her patients and the continuity of care at the hospital to which they are assigned. Outside activities shall not adversely affect residents' primary responsibility to patients at the training institution. No compromise of a patient's medical care shall occur to fulfill an outside activity obligation. Residents are expected to take into consideration duty hour requirements, patient load, reading requirements, rotations, and other training responsibilities, when scheduling outside activities (e.g., moonlighting), so as not to compromise their capabilities. In addition, Residents must follow UWHC and departmental policies regarding the scheduling and reporting of outside activities. UWHC policies regarding outside activities are included in the UWHC Code of Ethics. Residents and training programs must adhere to institutional and specialty specific ACGME requirements regarding outside activities, including the following:

1. Training programs must not require Residents to engage in moonlighting.
2. Residents must get written permission from their Program Director and from the Senior VP of Medical Affairs to moonlight.
3. The Program Director must forward the signed form to the Graduate Medical Education (GME) Office, indicating that s/he has approved the Resident's moonlighting plan. Following review by the Senior VP of Medical Affairs, the signed document will be returned to the program to be maintained in the Resident's file.
4. All alleged infractions of this policy will be reviewed initially by the Program Director, then by the Senior VP of Medical Affairs. Appeals of any decisions may be submitted to the House Staff Committee.

## **II. Appointment, promotion and stipend**

### **A. Appointments**

**1. Non-discrimination statement.** The UWHC does not discriminate on the basis of sex, age, race, color, national origin, religion, sexual orientation or disability or any other applicable legally protected status in appointments to, or conduct of, residency programs. Allegations of such discrimination shall be referred to the UWHC Human Resources Department or GME Office.

**a) Harassment/discrimination.** It is UWHC's policy to provide a work environment free from unlawful discrimination and harassment for all persons. Discrimination and harassment are unacceptable and will not be tolerated. Complaints of discrimination and harassment will be investigated and resolved in accordance with this policy and any applicable federal, state and local laws. A copy of the *UWHC Equal Employment Opportunity and No Harassment/Discrimination/Retaliation Policy # 9.27* is available on U-Connect. Harassment or discrimination should be reported to a Labor Relations Consultant in the Department of Human Resources (263-6500) or the GME Office.

**b) Ethical/religious Beliefs.** No Resident shall be penalized for refusing to perform medical procedures he/she finds contrary to his/her ethical or religious beliefs, provided that the Resident has given reasonable notice of such beliefs. However, Residents must complete the training required by the applicable accreditation body before UWHC can certify that the Resident has completed the training program.

**2. Initial appointments.** Residency and fellowship appointments made through the matching process are made for one year. Residency and fellowship appointments made outside the matching process are made for the period specified in the appointment letter, not to exceed one year.

**3. Probationary/remedial appointments.** If a Resident has been placed on probation due to inadequate scholarship or professional growth and the terms of the probation extend beyond the training year, a special limited-term appointment based on the terms of the probationary letter will be provided.

**4. Non-renewal of appointment.** Four months written notice with specific reasons for non-renewal is given to a Resident whose appointment may not be renewed. If notice of non-renewal is given less than four months prior to the end of the current appointment, the notice period will run four months from the date it is given, and the Resident will remain at the level in effect at the time notice was given for the four-month period. A special limited-term appointment will be provided. This four-month notice requirement does not apply to terminations during the training year in accordance with the Procedures for Discipline and Dismissal (see section VI in this document).

**5. Resident resignation.** Residents are required to give three months notice, in writing, when intending to leave the program prior to a normal completion date.

**B. Stipends.**

**1. Stipend rates.** It is the objective of the hospital to maintain house staff stipend levels at the mean of Midwest teaching hospitals. Annual stipend rates will be based on the mean levels reported in the Council of Teaching Hospitals annual survey and will be adjusted on a yearly basis as necessary.

**2. Determination of stipend levels.** A Resident's annual stipend is stated in the letter of appointment. The stipend level is determined by counting the number of years after receiving an MD or DO (or equivalent degree) that have been spent in a training program accredited by the Accreditation Council for Graduate Medical Education that apply toward board certification in the current specialty. Residents may receive up to one additional stipend level for a chief resident year or non-accredited research year completed during their training at UWHC.

**C. Promotions.** Appointments beyond the initial appointment are made for one year, except as specified in Section D below. A Resident is promoted to subsequent levels in the program unless the Department Chair or Program Director determines that the Resident has demonstrated inadequate scholarship and professional growth. Semi-annual evaluations are provided to apprise Residents of their progress.

**D. Program closure/reduction policy.** It is the policy of the UWHC to inform Residents as soon as possible of a decision to reduce the size of or close a training program. In the event of such a reduction or closure, UWHC will make every effort to allow Residents already in the program to complete their education. If Residents are displaced by the closure of a program or reduction in the number of trainees, UWHC will make every effort to assist the Resident in identifying a program in which they can continue their education

**III. Requirements of appointment**

**A. Medical school graduation.** Appointment to a residency/fellowship program is contingent upon graduation from a LCME-accredited or ECFMG-certified medical school. PG 1s must show proof of medical school graduation at orientation. Graduation of PG 2s and above will be verified through the AMA profile or the ECFMG.

**B. USMLE or COMLEX.** (*effective 12/31/2007*)

**1. Requirements.**

**a) All PG levels.** All Residents entering training at UWHC must have passed USMLE Steps I and II (CK & CS) or COMLEX Levels I and 2.

**b) PG 3 and above.** All residents appointed to a PG 3 level and above must have passed USMLE Step III or COMLEX Level 3.

**2. Exam fees.** All exam and reporting fees are the responsibility of the Resident.

**C. Wisconsin licensure.**

**1. Requirements.** In the State of Wisconsin, all physicians beyond their first year of postgraduate training are required to obtain a Wisconsin medical license. Failure to obtain and maintain a valid and appropriate Wisconsin medical license will result in termination of appointment.

**a) WI temporary educational permit (TEP).** PG1s must apply for a temporary education permit (TEP) to be effective at the beginning of their PG 2 year. At UWHC, the TEP is intended to be used from the first day of the PG 2 year until the full medical license is obtained.

**b) Full WI medical license.** A full WI medical license is a contingency of appointment to a PG 3 year or above at UWHC. (*effective 12/31/2007*)

**2. License fees.** The hospital will pay for the TEP fee (\$10) obtained for the PG 2 year. The hospital will reimburse PG 2 residents for the initial license application fee (\$125) upon receipt of full licensure. All other licensure fees are the responsibility of the Resident.

**D. Drug Enforcement Administration (DEA) registration.**

**1. Requirements.** All Residents will be issued DEA registration upon full licensure. Applications are submitted by the GME Office. Residents must maintain their DEA registration throughout their training at UWHC.

**2. Registration fees.** The hospital will pay initial application and renewal fees to cover up until the last year of training at UWHC. Application and renewal fees will be pro-rated during the last year of training.

**E. Pre-training health assessment and drug screen.** In compliance with state law and hospital policy, all Residents must undergo a pre-training health assessment through the Resident Health Service. All Residents must also complete a urine drug screen in accordance with *UWHC Pre-employment Drug Testing Policy #9.23* before beginning training. Residents will not be allowed to begin their training program prior to being cleared for work by the Resident Health Service.

**F. Annual tuberculosis (TB) testing.** All Residents must have a TB test at least annually, as required by State regulations and UWHC policy. In conjunction with the pre-training health assessment and annual TB testing, Residents who are at risk of contact with patients with suspected or diagnosed tuberculosis will be fit-tested for appropriate respiratory protection prior to providing care to such individuals.

**G. Certification of cardiopulmonary resuscitation & other life saving interventions.**

**1. BLS/CPR.** All incoming Residents are required to show current certification or become certified in basic life support or CPR within the first 3 months at UWHC. Certification must be kept up-to-date throughout training at UWHC.

**2. ACLS/PALS.** Those Residents required to be certified in ACLS or PALS must also show current certification or be certified within the first 3 months at UWHC. Residents required to be certified in ACLS or PALS must keep their ACLS or PALS certification up-to-date throughout their training at UWHC, as well as their BLS/CPR certification

**3. ATLS/Advanced PALS.** Those Residents who must be certified in ATLS or Advanced PALS must achieve certification prior to the rotations or PG level for which it is required and must keep their ATLS or Advanced PALS certification up-to-date throughout their training at UWHC, as well as their BLS/CPR and ACLS/PALS certifications.

**4. Training fees.** Training sessions are held in the hospital throughout the year and are offered at no charge to the Resident. Fees for training obtained outside the UW EMS program will not be reimbursed.

**5.** Residents are released from other responsibilities to attend the training sessions for certification or re-certification (*UWHC Certification Cardiopulmonary Resuscitation and Other Life Saving Interventions Policy # 9.35*).

**H. Dress code.** White coats are furnished to Residents. They are laundered by the hospital. Hospital issued photo ID badges are required to be worn. Residents are expected to dress in a professional manner as outlined in the *UWHC Dress and Appearance Policy for All Employees #9.16*.

**I. Duty hours.** All Residents must take joint responsibility with their program for abiding by the duty hours requirements of the ACGME and their program. If a Resident finds him/herself in a situation where s/he is approaching the limits of the requirements, s/he must notify his/her Program Director immediately. Patterns of problems experienced by the Resident should be reported to the Program Director and/or the GME Office for correction.

**J. Caregiver background check.** Under Wisconsin law, all Residents must complete a Background Information Disclosure (BID) Form prior to the start of training and every four years thereafter. The Hospital will then perform a criminal and regulatory background check, as required by state law. If certain offenses are disclosed or discovered, the hospital is required by law to terminate an appointment. Completion of the Background Information Disclosure Form and not having a forbidden offense are conditions of all Resident appointments.

**K. New arrests or convictions.** All Residents have a continuing obligation to report any new arrests and/or convictions as they occur, to the GME Office, who will immediately report the information to a Human Resources (HR) Department's Employee and Labor Relations Consultant (ELRC) (608/263-6500). A Resident may be subject to disciplinary action and/or sanctions if they provide false information on a BID form or if they fail to report new arrests, convictions, findings, or license limitations (*UWHC Pre-Employment and Renewal Caregiver Background Checks Policy # 9.03*).

**L. Additional conditions of appointment.** Each Resident shall notify the Senior Vice President for Medical Affairs or designee within 10 days following the receipt of any of the following. Failure to notify shall constitute grounds for corrective action.

1. Any voluntary or involuntary loss or lapse of any license, registration or certification regarding professional practice; any disciplinary or monitoring measure and any change in such discipline or monitoring measure by any licensing or registration body or certification board that licenses, registers, or certifies clinical professional practice.
2. Any settlements, judgments, or verdicts entered in an action in which the practitioner was alleged to have breached the standard of care other than those arising out of his/her employment by the UWHC or his/her training at the UWHC.
3. Pending disciplinary or other adverse action by a governmental agency or any other action adversely affecting his or her privileges at another health care facility.
4. The voluntary or involuntary termination of medical staff membership or voluntary or involuntary limitation or reduction of clinical privileges at another hospital or institution. The affected Resident shall provide the hospital with complete information as to the reasons for the initiation of corrective or disciplinary action and the progress of the proceedings.
5. Each Resident shall notify the Senior Vice President for Medical Affairs or designee within 30 days following the receipt of any notice of complaint or investigation by any licensing or registration body or certification board that licenses, registers, or certifies clinical professional practice. Failure to notify shall constitute grounds for corrective action.

**M. Notification.** The Senior Vice President for Medical Affairs will forward to the Program Director of the applicable training program and Chair of the applicable clinical service a copy of any notice received under sections J, K or L.

**IV. Leaves.** When scheduling leave time, Residents must adhere to the requirements of UWHC, their RRC and specialty board, and get approval from their Program Director. In some cases, the GME Office and Senior Vice President for Medical Affairs must also give approval. Residents should be aware that any leave time taken may extend the length of time required to complete their training. In some cases, space for such additional training time may not be available at this hospital or at the time desired.

**A. Family/medical leave.** State and federal FMLA/WFMLA laws mandate minimum family and medical leave benefits. The Graduate Medical Education *Leave of Absence Procedure* is available in the GME Office.

**1. Family leave.** UWHC will grant unpaid family leave (leave due to birth of a child, adoption or a serious health condition of a spouse, parent or child, which necessitates the Resident's care) in compliance with state and federal laws (see medical leave section regarding paid medical leave after childbirth). In order to meet notice requirements, the Resident must contact the GME Office as soon as possible after deciding that he/she intends to take family leave.

**2. Medical leave.** There is no provision for regular paid sick leave for Residents. The hospital will grant unpaid medical leave in compliance with applicable state and federal laws. Any medical leave of more than 3 days requires being cleared to return to work through UWHC Employee Health (*UWHC Fitness for Duty: Health Service Clearance to Return to Work/Continue Work Policy# 9.22*).

**a)** The Program Director may approve up to one week of paid medical leave per year if needed. For any leave exceeding one week, the Resident and program must notify the GME Office and fill out the appropriate leave forms.

**b)** Paid medical leave will never exceed six months (at which time the hospital provided disability insurance will begin), and in some instances may not cover the entire length of absence. For any leave exceeding the initial week approved by the Program Director, the Resident and program must notify the GME Office.

**c)** In the event of a short-term disability (i.e. a temporary inability to work as a result of illness, injury, childbirth, etc), the hospital may grant paid leave for a "usual and customary" recovery period. Paid leave after childbirth shall be four weeks, unless the Resident has continuing medical complications certified by her treating physician. All cases will be individually evaluated by the Senior Vice President for Medical Affairs / Associate Dean for Hospital Affairs and the Program Director to determine disability, reasonable recovery period, follow-up requirements, and whether some portion of the leave will be paid.

**B. Personal leave.** A Resident may be granted a leave of absence without pay at the discretion of the Program Director. All unpaid leaves must be reported to the GME Office by the Resident and program.

**C. Bereavement leave.** In the event of the death of a Resident's spouse/partner, or the child, parent, grandparent, brother, sister, grandchild, (or spouse of any of them), of either the Resident or his/her spouse, or any other person living in the Resident's household, the Resident is granted time off with pay to attend the funeral and/or make arrangements necessitated by the death. However, time off with pay cannot exceed three (3) workdays. Reasonable additional time off without pay may be granted in accordance with religious or personal requirements and must be reported to the GME Office by the Resident and program.

**D. Military leave.** Residents may take time off for military service as required by federal and state statutes. The Resident is required to provide advance documentation verifying the assignment and pay to the GME Office.

**1.** UWHC will pay the excess of a Resident's standard wages over military base pay for military leaves of three (3) to thirty (30) days to attend military schools and training.

**2.** For Residents who are recalled to active duty, UWHC will pay the difference between the Resident's wages and the active duty military pay for up to one year (average hospital pay over the past year minus military pay). For the first month of recall, UWHC will pay the difference between the Resident's base pay and hospital pay. For the next eleven months, UWHC will pay the difference between the Resident's total monthly military pay (limited to base pay, Basic Allowance for Housing and Basic

allowance for Subsistence) and the Resident's hospital pay. If the Resident's active duty pay is more than his/her hospital pay, UWHC will not compensate any wages

**The following types of leave are tracked by the programs.**

**E. Vacation.** UWHC Residents are entitled to three (3) weeks (21 days including weekends or 15 days not including weekends) paid vacation per year. This vacation time is to be used during the fiscal year in which it is allotted. In exceptional circumstances, if the Resident is unable to use all allotted vacation during the training year due to service requirements; he/she may carry over unused vacation with prior approval of the Program Director (not to exceed one and a half weeks) to the following year. When the Resident is leaving UWHC permanently, accrued vacation entitlement must be used prior to termination.

**F. Professional meetings.** Each Resident is entitled to a maximum of one (1) week to attend professional meetings each year with pay. The meeting is to be approved in advance by the Program Director and attendance documented. This meeting is in addition to vacation leave.

**G. Holiday leave.** When program patient care responsibilities allow, holidays will be observed, and paid leave given. If Residents request time off for religious holiday, in lieu of state holidays, they should be allowed comparable leave where scheduling permits.

**H. Career development leave.** Each Resident is entitled to a maximum of one (1) paid week for fellowship and other employment searches per residency program. Unpaid leave may be granted for additional time. All time used must be approved by the Program Director. The GME Office must be notified of any unpaid time granted.

**I. Witness leave.**

Residents may take time off without loss of pay during regularly scheduled hours of work when subpoenaed as a witness in a matter directly related to their work duties. However, when not called for actual testimony, but instead on call, the Resident shall report back to work unless authorized otherwise by his/her Program Director. Residents needing time off for witness leave must provide advance notice to their Program Director and provide a copy of the subpoena.

If a Resident is subpoenaed as a witness in a matter not directly related to their work duties, the Resident must use vacation or, if none is available, take time off without pay. The Resident and program must report unpaid leave to the GME Office.

**J. Jury duty leave.**

Residents may take time off without loss of pay during regularly scheduled hours of work for jury duty. However, when not impaneled for actual service, but instead on call, the Resident shall report back to work unless authorized otherwise by his/her Program Director. Residents needing time off for jury duty must provide advance notice to their Program Director and provide a copy of the jury summons.

**K. Time off to vote.**

An Resident eligible to vote in an election who finds it impossible to vote during non-working hours may be absent from work for up to three (3) hours without loss of pay during regularly scheduled work hours to vote, including travel time. The supervisor can designate the time of day for the absence. The Resident must notify his/her Program Director before Election Day of the intended absence and must submit a written statement in advance to their Program Director explaining why they cannot vote during non-working hours.

NOTE: All Residents are strongly urged to vote during non-working hours or by absentee ballot. Contact the clerk of your municipality for more information.

**V. Benefits**

**A. Liability insurance.** Comprehensive liability protection is provided for all Residents for any training-related incident. Protection is granted for specific training activities approved by the Program Director and the UWHC Risk Management Office for activities that take place outside the UWHC. No protection is provided for activities outside the scope of the training program, such as moonlighting or unapproved electives not related to the program.

Additional information on coverage can be found in the Liability Protection for Health Professionals information on *uconnect*, the UWHC intranet.

**B. Disability insurance.** All Residents are covered by a hospital paid long-term disability plan. Details on the current disability insurance plan are available in the GME Office.

**C. Optional insurance and benefit plans.** Residents employed by UWHC are eligible for a variety of optional insurance plans, at additional cost. Resident contributions for these insurance plans can be made through payroll deduction. Additional information on these plans, including enrollment deadlines and premiums, is available in the GME Office and Human Resources Benefits Office.

**1. Health insurance.** Residents can choose from a variety of comprehensive health plans, including one fee-for-service plan and several health maintenance organizations (HMOs). Individual and family coverage is available. Most HMO plans include basic dental coverage. Residents are also eligible for supplemental major medical dental, and vision insurance coverage.

**2. Life insurance.** Residents are eligible for two term life insurance plans, the National Guardian Individual and Family plan and the UW Employees Inc plan.

**3. Accidental death and dismemberment insurance (AD&D).** AD&D insurance pays benefits for accidental loss of life, sight, or limb. Residents are eligible for individual or family coverage.

**4. Tax sheltered annuity/deferred compensation programs.** Residents are eligible to participate in a variety of tax-sheltered annuities and deferred compensation retirement plans. Contributions to the tax sheltered annuity (403b) and deferred compensation plans are made on a pre-tax basis, reducing federal and state taxable income. The contributions purchase retirement benefits that are not taxable until distribution is made, usually at retirement.

**5. Employee reimbursement account (ERA).** The ERA program allows Residents to pay for certain expenses, including dependent care and/or approved out-of-pocket medical expenses, with pre-tax rather than after-tax income. The amount of contribution directly offsets taxable income, resulting in reduced federal and state income tax, and social security tax liability.

**D. On-call meals.**

**1. In-house call.** Residents required to be on-call at UWHC overnight are provided with the evening meal the night they are on-call and breakfast the following day.

**2. Home call.** Residents who are on-call from home and required to be in the hospital during the night and are unable to return home are provided with breakfast and lunch the following day.

**3. Food in lounge.** The hospital delivers food to the house staff lounge (F5/606) every evening for Residents who are on-call and are unable to obtain an evening meal during cafeteria hours.

**4. Meriter, St. Mary's and Veterans Administration hospitals** provide meals, with limits established by the individual hospital.

**E. On-call rooms.** On-call rooms are provided for Residents required to be in the hospital overnight. A lounge with a television, refrigerator, and microwave oven is also available (F5/606).

**F. Parking.** Parking is available to Residents. Fees are set annually by the University of Wisconsin. Additional information can be obtained in the GME Office.

**G. Safe escort.** An after-hours safe escort to a distant parking lot is available by calling UWHC Security.

**H. Inclement weather car service.** During periods when local weather conditions indicate a reasonable probability that Residents who are parked on UWHC grounds may have difficulty getting their car started, UWHC will provide free jump starts through a contracted service center. Contact the Security Office if assistance is needed.

**I. UW affiliate photo ID.** The University of Wisconsin affiliate photo ID allows Residents to access library services and recreational facilities on the UW campus. The ID also qualifies for discounts at various local businesses.

**J. Membership on Medical Staff committees.** Residents have voting representation on the UWHC Medical Board and its committees. These representatives are selected jointly by the Chair of the Medical Board and the President of the House Staff Association.

**K. Counseling and support services.** Confidential counseling, support and assistance with issues such as psychological, marital, legal and financial problems are available to all Residents and their immediate family at no cost through the Resident Assistance Program. Information is available in the GME Office.

**L. Physician impairment.** The Resident Assistance Program is available to assist Residents with issues of impairment including substance abuse, mental disorders and physical disabilities. Information is available in the GME Office.

**M. Ombudsperson.** The Ombudsperson is available to serve as a neutral, independent and confidential resource, for faculty, Residents and students, for dealing with conflicts with your colleagues that arise during the course of your training. The Ombudsperson can listen to your concerns, clarify procedures, discuss options and when appropriate, may act as an intermediary. The Ombudsperson can be reached by calling 265-9666.

**VI. Procedures for Discipline and Dismissal.** UWHC follows these procedures to provide an opportunity for review when actions are contemplated which could result in discipline or dismissal of a Resident. For the purpose of the following procedure, when the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs is not available, the physician designee of the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs will serve.

**A.** Residents may be subject to restriction or suspension from clinical rotations, or suspension or dismissal from the house staff during the term of the appointment for misconduct in violation of standards, rules and regulations of the Medical Staff of the UWHC, the hospital, and its affiliated hospitals or for failure to perform at the academic or clinical level required by their program.

**B.** Whenever, in the best interest of patient care, action must be taken immediately, the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs may summarily suspend a Resident after consultation with the Department Chair. Such summary suspension shall become effective upon imposition. The Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs shall promptly notify the Resident – in writing – of the summary suspension and give the Resident an opportunity to present information. Any information provided by the Resident within two (2) days of the notice shall be considered. The Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs shall decide within five (5) days of the notice whether to continue or end the summary suspension.

**C.** A Resident who is facing discipline or dismissal, as stated in “A” above, or who has had summary suspension continued under “B” above, shall be informed of the intended action or the suspension and the reasons therefore. The Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs shall send the Resident written notification of the intended action or the suspension and of all charges or complaints brought against him/her, and shall offer the Resident an opportunity for appeal to the House Staff Committee.

**D.** The Resident may request a review within fifteen (15) days of the day he/she receives written notification by filing a written appeal with the House Staff Committee. If no review is requested, the discipline or dismissal will take effect as specified in the written notification or charges and appeal of the discipline, dismissal or suspension shall be deemed waived. If a review is requested, the Resident will have an opportunity to present evidence and arguments concerning the allegations to the Committee. The Resident will receive written notice, at least five (5) days before the review conference with the Committee, of the available documentary evidence against him/her. The House Staff Committee will make a determination of the facts involved and of whether discipline or dismissal is appropriate, and provide a written decision

with reasons to the Resident. A written decision will be provided within twenty (20) days of the review conference. This decision will be a recommendation to the CEO, who shall review the matter and make the final decision.

E. "Days" means calendar days exclusive of Saturdays, Sundays, and legal holidays.

## VII. Procedures for Resident grievances and appeals.

**A. Purpose.** It is recognized that misunderstandings, disputes or disagreements may occur as a result of the application of the hospital's policies and procedures affecting Residents. The following grievance procedure has been established to provide for orderly resolution of such disagreements or of appeals of non-renewal decisions. This procedure does not apply to discipline, dismissal, or suspension for which an opportunity for review under section VI is or was available. This procedure does not apply to allegations of discrimination based on sex, age, race, national origin or disability. Such allegations shall be submitted to the UWHC Human Resources Department.

### B. Definitions.

1. **Grievance** means a misunderstanding, dispute, disagreement or controversy concerning the interpretation or application of the terms of the appointment and this appointment information document. A grievance can come from an individual or group of Residents.

2. **Days** mean calendar days exclusive of Saturdays, Sundays and legal holidays. If there is not a response within the time limits stated in Steps 2 or 3 below, the Grievance may be taken immediately to Step 4.

### C. Policy.

1. At any step of the grievance/non-renewal appeal process the Resident may be aided or accompanied to any meeting by another member of the medical profession.

2. When the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs is not available, the physician designee of the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs will serve.

3. Any appeal of a decision of non-renewal must be filed within 30 days of receipt of non-renewal notice, unless longer time period is stated in the notice of non-renewal. Any other grievance must be filed within thirty days of the decision or action that is the subject of the grievance.

4. No Resident shall be penalized in any way for filing grievances or appeals.

### D. Procedure.

**Step 1.** A Resident shall bring a grievance concerning policies, training issues or a non-renewal appeal to the attention of his/her Program Director. Within ten (10) days, these parties shall meet, discuss and attempt to reach a satisfactory solution.

**Step 2.** If not resolved at Step 1, within five (5) days after the discussion, the Resident may reduce his/her grievance/appeal to writing and submit it to his/her Department Chair or designee. This person shall, within ten (10) days of receipt of the written grievance/appeal, provide a written response to the Resident.

**Step 3.** If not resolved at Step 2, within five (5) days after receipt of the written decision, the Resident may file a written request for review by the House Staff Committee of the Medical Staff. This committee will provide a written response to the Resident within a reasonable time not to exceed thirty (30) days of receipt of the written request for review.

**Step 4.** If not resolved at Step 3, within ten (10) days after receipt of the written response at Step 3 decision, a Resident or Department Chair or designee may file a written request for review to the Senior Vice President for Medical Affairs/Associate Dean for Hospital Affairs. He/she will review the grievance/appeal, and provide a written decision within ten (10) days of filing of the request for review.

**Step 5.** The Resident may file an appeal on the grievance/ non-renewal to the CEO within ten (10) days of the receipt of the decision in Step 4. The CEO or his/her

designee, will conduct an impartial review of the grievance/appeal, make a final decision and provide the Resident with written reasons for the decision.

**E. House Staff Committee.** The House Staff Committee, a standing committee of the Medical Staff, is appointed to deal with grievances and appeals of non-renewal decisions filed by Residents. Members are appointed by the President of the Medical Staff. The committee consists of two members of the Medical Staff plus one alternate and three Residents plus one alternate. The Committee Chairperson is appointed by the President of the Medical Staff from among the committee members. The alternate(s) serve in case of a conflict of interest of any member.

### **VIII. Additional Resources**

The following UWHC policies and resources are available on *uconnect*, the UWHC intranet.

*UWHC Bylaws and Rules & Regulations of the Medical Staff*

*UWHC Code of Ethics*

*UWHC Liability Protection for Health Professionals*

*UWHC Equal Employment Opportunity and No Harassment/ Discrimination/Retaliation Policy # 9.27*

*UWHC Pre-employment Drug Testing Policy # 9.23*

*UWHC Pre-Employment Health Assessment Policy # 9.20*

*UWHC Certification Cardiopulmonary Resuscitation and Other Life Saving Interventions Policy # 9.35*

*UWHC Dress and Appearance Policy for All Employees # 9.16*

*UWHC Pre-Employment and Renewal Caregiver Background Checks Policy # 9.03*

*UWHC Fitness for Duty: Health Service Clearance to Return to Work/Continue Work Policy # 9.22*

*UWHC Employee Assistance Program Policy # 9.15*