New Program Directors Orientation

Resident Issues: Group Discussion

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Introduction

• Residents may have a variety of issues
  • Some issues are addressed by program requirements
  • Most are not

• Cases illustrate problems that could arise with residents in your program
Resident Issues: Case 1

A resident is in her final year of the program. Early in her sixth month of pregnancy, she is ordered to bed rest by her obstetrician. She has used her full (three-week) quota of vacation during each prior year but has not used any during this academic year. She returns to work two weeks after delivery having missed a total of 14 weeks of her final year.

What should you do?
Resident Issues: Case 1

A. Extend her training by 3 months
B. Allow her to complete training without any make-up time
C. Do not allow any more vacation in her final year so she can finish on time
D. Give her additional calls to make up for lost time
E. Promote several junior residents to senior year positions
Resident Issues: Case 1

• Considerations:
  • The maximum allowed time off by specialty board that does not have to be made up
  • Curriculum and learning needs of the resident
  • Coverage of responsibilities during absence
  • Taking away vacation time to use for making up absences
  • Adding calls to make up for absences
  • Payback for residents who provided coverage
Resident Issues: Case 2

You accept a student from your school into your program as a PGY-1 through the scramble. He was quarterback on a major university football team and was well liked by his classmates and the faculty. His scores and grades were adequate.

During his second month of residency on a rotation at a participating site, he is noted to be acting erratically. A urine drug test is positive for cocaine. What should you do?
Resident Issues: Case 2

A. Remove him from clinical care duties
B. Dismiss him from the program
C. Tell him to stay off cocaine and leave it at that
D. Refer him to a drug rehabilitation center
E. Work with his parents to have him hospitalized
Resident Issue: Case 2

Considerations:

- What is the medical staff policy on impairment?
- Are there other resources?
- What are your state licensing board requirements?
- Would you have a different plan if he had elevated blood alcohol level instead?
- Would you have a different plan if he were in his last year of training?
- What are your responsibilities as program director?
A PGY-2 resident scores in the 4th percentile on her in-training examination. She has consistently had good clinical evaluations, including high marks for “Medical Knowledge”. She is a responsible and hard-working resident who is well liked by other residents, faculty, nurses and patients. Of note, she scored in the 12th percentile on the ITE during her PGY-1 year but you and other faculty did nothing about it thinking, “She had a bad day. She’ll improve.”

What should you do now?
Resident Issue: Case 3

A. Nothing. Write it off to her “poor test-taking skills”
B. Assign her to a faculty member and begin remediation immediately
C. Advise her to read more
D. Put her on probation
E. Dismiss her from the program
Resident Issues: Case 3

Considerations:

• How would you advise this resident?
• What would you do differently for a PG1 vs consecutive low PG1 and PG2 scores?
• What expectations would you set for the future?
• Would you put the resident on probation? If so, what are the requirements to come off probation?
• What remediation would you require?
• What other resources can you use to help?
Resident Issue: Case 4

Dr. Who is a quiet resident who has previously received average evaluations, has never needed counseling for any deficiency and has never been brought to your attention by other faculty. It is now November of his final year. Several faculty members have noted on evaluations and mentioned to you personally that Dr. Who is not able to meet typical responsibilities expected of senior residents. He must be closely supervised and supported.
Resident Issue: Case 4

You meet with the CCC and review his files but find no documentation of any deficiencies. What should you do?

A. Reassign rotation responsibilities with one-on-one supervision by faculty
B. Place him in remediation
C. Place him on probation
D. Reassess in 2-3 months
E. Have faculty members recall problems they have had with him and write them down
Resident Issues: Case 4

Considerations:

- How would you approach this issue?
- Consider issues going on that might be influencing this resident’s performance.
- Would you put the resident on probation? If so, for how long and what are the parameters for coming off?
- What would you do differently for a first time offense vs a recurring pattern?
- How would you approach this if it were July of the resident’s senior year?
It is now March in the PGY-1 year of Dr. I.B. Gone. His end of rotation faculty evaluations have been satisfactory. However, several senior residents recently told you that they have concerns about Dr. Gone’s professionalism. He frequently fails to answer pages from residents and nurses. He often arrives late for rounds and leaves the hospital early. When confronted with these issues, he always proffers plausible explanations. He has told other residents that he has been singled out and harassed by his seniors.

What should you do?
Resident Issues: Case 5

A. Discuss the issues with him and set parameters (including a timeline) for improvement
B. Nothing. Agree with his comments about being singled out and harassed
C. Refer him to Employee Assistance Services for counseling
D. There is no formal documentation so I cannot do anything
E. Threaten him with dismissal if he does not improve
Resident Issues: Case 5

Considerations:

• Probation:
  • Conditions
  • Components of the notification letter
  • Involvement of general counsel
  • Frequency of monitoring
  • Expectations should be made clear to the resident and all faculty
  • Define parameters to end probation or for dismissal from the program
Resident Issues: Case 5

Considerations:

- Remediation
  - What is it? Components?
  - Who do you remediate?
  - Setting conditions?
  - Who remediates?
  - Time period
  - Definition of success
  - Follow-up
Resident Issues: Case 6

Dr. Dose is a PGY-2 in your program. She has scored well on the ITE both years. Faculty and senior residents find her capable, reliable and affable. However, junior resident and student evaluations state that she doesn’t teach, is cynical, sloughs all of her work off on them and blames them for all of the things that go wrong on the service. Morale among PGY-1s is sinking and they have begun asking you to change their rotation schedules so they won’t have to work with her.

What should you do?
Resident Issues: Case 6

A. Find out what else might be going on in her life and set up a structured improvement plan
B. Refer her to a psychiatrist for counseling
C. Nothing. Accept her explanation that the junior residents just dislike her because she is “strict and demanding” of them
D. Remove her from all clinical rotations for the next six months
E. Tell her to “act nicer” and continue to monitor
Resident Issues: Case 6

Considerations:

• What would you do at this point?
• Would you put this resident on probation?
• Are there other data you could use to help?
• What other issues might be going on?
• What expectations would you set?
• What is the role of Employee Assistance Services?
• What options are there to address unprofessional behavior?
Resident Issues: Wrap-up

Assign someone at each table to present discussion summary