

UCSD MEDICAL CENTER

# HOUSE OFFICER POLICY AND PROCEDURE DOCUMENT

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**UC San Diego**  

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**HEALTH SCIENCES**

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# HOUSE OFFICER POLICY AND PROCEDURE DOCUMENT

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## STATEMENT OF COMMITMENT TO GRADUATE MEDICAL EDUCATION

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The University of California, San Diego School of Medicine and Medical Center are committed to graduate medical education (GME) as a central component of their mission to improve the health of the public. UCSD seeks to educate outstanding physicians and medical scientists. Investing in graduate medical education assures that current residents and future generations of health care professionals are prepared for California's and the nation's evolving health care needs. In this context UCSD Healthcare is committed to providing the necessary educational, financial and human resources required to assure excellence throughout the continuum of graduate medical education.

The School of Medicine and the Medical Center provide a supportive and challenging educational environment within which residents of diverse backgrounds can prepare themselves for careers characterized by commitment to excellence in service to others through patient care, research, teaching, and lifelong learning. Faculty members offer residents state-of-the-art knowledge, demonstrate the latest developments in patient care, model compassionate and ethical care, and provide guidance and supervision to ensure patient health and safety.

UCSD School of Medicine and Medical Center furnish a financially secure and educationally enriched environment for organized GME programs in which resident physicians develop personal, ethical, clinical and professional competence under careful guidance and supervision. Programs will assure the safe and appropriate care of patients, and the progression of resident physician responsibility consistent with each physician's clinical experience, knowledge and skill.

The graduate medical education program is designed to provide residents with the knowledge, skills and attitudes that serve as the basis for competent and compassionate clinical practice, scholarly research and public service. Residents are encouraged to develop the capacity for self-evaluation and moral reflection to sustain a lifetime of responsible and committed practice of medicine. The educational program prepares residents to continue their own education and to teach their patients and colleagues throughout their working years. UCSD's GME Programs are committed to ensuring that trainees understand the scientific foundation of medicine, apply that knowledge to clinical practice, and extend that knowledge through scholarly research. In addition, GME Programs provide the experience necessary for residents to master the clinical skills needed to evaluate and care for their patients.

UCSD School of Medicine offers opportunities for collaboration with colleagues throughout the School of Medicine and its basic sciences departments. Such an environment offers a broad array of educational opportunities in graduate medical education. This includes great diversity in patient populations, specialty services, technological resources and educational programs.

While each residency program is designed to meet the unique requirements of the specialty, including the achievement of the ACGME-defined general competencies, and development milestones, UCSD is responsible for ensuring a safe and supportive learning environment for all residents. The Graduate Medical Education Committee (GMEC) establishes educational policy, monitors the clinical learning environment for residents, reviews affiliation agreements, facilitates annual performance improvement activities of each program, develops cross-residency educational programs and serves as an advocate for residents. The Associate Dean for Graduate Medical Education-DIO, directs the Office of Graduate Medical Education and, together with GMEC ensures that each of the graduate medical education programs meets or exceeds all Institutional, Common, and Program Specific Requirements promulgated by the Accreditation Council for Graduate Medical Education (ACGME) and its individual Residency Review Committees (RRC's).

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## PURPOSE OF HOUSE OFFICER POLICY AND PROCEDURE DOCUMENT

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The purpose of this document is to provide a statement of UCSD policy applicable to all House Officers (House Officer) at UCSD who have received the degree Doctor of Medicine, Osteopathic Medicine or an equivalent degree and have been accepted into an organized program of the University for the purpose of obtaining (a) the advanced education or training leading to eligibility for licensure or recognition in a specialty or subspecialty field in one of the health professions; or (b) post-doctoral preparation for an academic career in a clinical field. To the extent possible, the University shall uniformly and equitably apply the published policies and standards affecting the House Officer.

For purposes of these policies and procedures, House Officers shall include interns, residents, and clinical fellows.

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## ACGME ACCREDITED GRADUATE MEDICAL EDUCATION TRAINING PROGRAMS SPONSORED BY UCSD

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### **Anesthesiology**

- Adult Cardiothoracic Anesthesiology
- Critical Care Medicine
- Pain Medicine

### **Emergency Medicine**

- Medical Toxicology
- Pediatric Emergency Medicine
- Undersea and Hyperbaric Medicine

### **Family Medicine**

- General Preventive Medicine
- Sports Medicine

### **Internal Medicine**

- Medicine – Allergy and Immunology
- Medicine – Cardiovascular Disease
  - ^ Clinical Cardio Electrophysiology
  - ^ Interventional Cardiology
- Medicine – Dermatology
  - ^ Procedural Dermatology
- Medicine – Endocrinology, Diabetes and Metabolism
- Medicine – Gastroenterology
- Medicine – Geriatrics
- Medicine – Hematology and Oncology
- Medicine – Infectious Diseases
- Medicine – Nephrology
- Medicine – Pulmonary Disease and Critical Care
- Medicine – Rheumatology

### **Neurology**

- Child Neurology
- Clinical Neurophysiology
- Vascular Neurology

### **Ophthalmology**

### **Orthopedic Surgery**

- Orthopedics – Hand Surgery

### **Pathology – Anatomic and Clinical**

- Hematopathology
- Neuropathology

### **Pediatrics**

- Pediatrics – Behavioral and Developmental
- Pediatrics – Cardiology
- Pediatrics – Critical Care
- Pediatrics – Endocrinology
- Pediatrics – Gastroenterology
- Pediatrics – Hematology/Oncology
- Pediatrics – Infectious Diseases
- Pediatrics – Medical Genetics
- Pediatrics – Neonatal–Perinatal Medicine
- Pediatrics – Nephrology
- Pediatrics – Pulmonology

### **Psychiatry**

- Child and Adolescent Psychiatry
- Geriatric Psychiatry

### **Radiation Oncology**

### **Diagnostic Radiology**

- Neuroradiology
- Nuclear Medicine
- Vascular and Interventional Radiology

### **Reproductive Medicine**

- Female Pelvic Medicine/Reconstructive Surgery

### **Surgery**

- Cardiothoracic Surgery
- Neurological Surgery
- Otolaryngology
  - ^ Neurotology
  - ^ Pediatric Otolaryngology
- Plastic Surgery
- Surgical Critical Care
- Urology
  - ^ Pediatric Urology
- Vascular Surgery

### **Combined Programs:**

- Family Medicine/Psychiatry
- Internal Medicine/Pediatrics

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## HOUSE OFFICER RESPONSIBILITIES - POSITION DESCRIPTION

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The goal of a graduate medical education training program is to (a) provide trainees (interns, residents, and fellows) with an extensive experience in the art and science of medicine in order to achieve excellence in the diagnosis, care and treatment of patients and (b) when applicable, to establish trainee's eligibility to participate in the relevant ABMS Specialty Board examination. To achieve this goal, the trainee agrees to do the following:

1. Develop and participate in a personal program of self - study and professional growth with guidance from the Medical School's teaching staff.
2. Under the supervision of the Medical School's teaching staff, participate in safe, effective and compassionate patient care, consistent with the trainee's level of education and experience.
3. Participate fully in the educational activities of the residency/fellowship program and assume responsibility for participation in the teaching of more junior physicians, of medical students and of students in allied health professions.
4. Participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures and policies of the institution.
5. Participate in the standing committees of the Medical Staff and institutional committees, as assigned by the Program Director, especially those that relate to patient care review activities.
6. Develop an understanding of ethical, socioeconomic and medical/legal issues that affect graduate medical education and the practice of medicine. Learn cost containment measures in the provision of patient care.
7. Perform all duties in accordance with the established practices, procedures and policies of the institution, its programs, clinical departments and other institutions to which the resident/fellow is assigned.
8. Adhere to the moonlighting policies of UCSD and to the program in which the resident/fellow is appointed.
9. Comply with the duty hour and working condition policies of UCSD and the program in which the resident/fellow is appointed. This includes, in part, participation in monitoring processes and completion of surveys or data entry into GME database management systems as required by the training program, the Medical Center and the ACGME.
10. Adhere to the program's call schedule and schedule of assignment.
11. Document patient care in the medical record in a timely fashion as per Medical Staff policy.
12. Adhere to the ACGME Institutional Requirements and to the ACGME - RRC Program Requirements for the specialty in which the resident/fellow is in training.
13. Participate in the evaluation of the training program and its faculty.
14. Comply with the licensure requirements of the State of California, and the laws of the State and Federal Governments.
15. Comply with UCSD House Officer eligibility criteria as well as specific/special requirements of Affiliated Institutions to which trainee may rotate as part of his/her training. These requirements may include, but are not limited to, criminal background checks, substance abuse testing, health screenings, providing additional paperwork/information, etc.
16. Adhere to the policies defined in the UCSDMC document entitled, Guidelines for Managing Impaired Residents and the UCSD House Officer Policy and Procedure Document.
17. Adhere to UCSD Office of Graduate Medical Education Resident Use of Email Policy, and the UCSD Electronic Communications Policy and Procedures.



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# HOUSE OFFICER APPOINTMENT AND REAPPOINTMENT

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## **ELIGIBILITY – SELECTION – NONDISCRIMINATION**

### ***Eligibility Criteria***

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Applicants for appointment to the graduate medical education training programs sponsored by UCSD must meet the following criteria:

- Graduate of a medical school located in the United States or Canada, accredited by the Liaison Committee on Medical Education (LCME); or
- Graduate of a college of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA); or
- Graduate of an international medical school located outside of the United States and Canada who meets the following qualifications:
  - Holds a current, valid certificate issued by the Educational Commission for Foreign Medical Graduates; and
  - Holds a full and unrestricted license in the State of California to practice medicine or has received written notification from the Medical Board of California of approval to commence training in an accredited program in this State; or
- Graduate of a medical school located outside of the United States who has completed a Fifth Pathway program provided by an LCME - accredited medical school, and who provides evidence of compliance with the licensure laws of the State of California or holds a full and unrestricted license from the State of California.
- All applicants hired by UCSD will be required to provide and undergo the following procedures:
  - Provide proof of United States citizenship or eligibility/authorization to work in the United States;
  - Complete a full verification and criminal background screen.

### ***Selection***

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Programs should select from among eligible applicants on the basis of their preparedness and ability to benefit from the program in which they are appointed. Aptitude, academic credentials, personal characteristics and ability to communicate should be considered in the selection.

### ***Non - Discrimination***

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The University of California prohibits discrimination against or harassment of any person employed by or seeking employment with the University on the basis of race, color, national origin, religion, sex, gender, gender identity, gender expression, pregnancy, physical or mental disability, medical condition (cancer - related or genetic characteristics), genetic information (including family medical history), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services (as defined by the Uniformed Service Employment and Reemployment Rights Act of 1994).

University policy also prohibits retaliation against any employee or person seeking employment for bringing a complaint of discrimination or harassment pursuant to this policy, or against a person who assists someone with a complaint of discrimination or harassment, or who participates in any manner in an investigation or resolution of a complaint of discrimination or harassment. The University of California is an affirmative action/equal opportunity employer. The University undertakes affirmative action to assure equal employment opportunity to minorities and women, for persons with disabilities, and for covered veterans.

## **Sexual Harassment Policy**

The University of California is committed to creating and maintaining a community in which all persons who participate in University programs and activities can work together in an atmosphere free of all forms of harassment, exploitation or intimidation, including sexual. Specifically, every member of the University community should be aware that the University is strongly opposed to sexual harassment and that such behavior is prohibited both by law and by University policy. It is the intention of the University to take whatever action may be needed to prevent, correct and, if necessary, discipline behavior which violates this policy. This statement is abstracted from the UCSD Sexual Harassment and Complaint Policy PPM Section 200 - 10. The policy may be obtained from the Office of Sexual Harassment Prevention and Policy or from the Office of Graduate Medical Education.

## **TITLES AND LEVELS**

### **Initial appointment**

Each House Officer is appointed to a Resident Physician title with a duration period of not more than one (1) year. Titles for House Officer Appointments are Resident Physician I through IX and Chief Resident Physician.

Appointments to the Resident Physician Series are made by the Associate Dean for Graduate Medical Education upon nomination by the Program Director based on the number of years of training accepted by the board in the particular specialty or subspecialty. House Officers must be graduates in medicine or osteopathic medicine or hold an equivalent degree, and must be licensed to practice medicine in the State of California by the end of their first 24 months of postdoctoral training, or as otherwise prescribed by law. Individual appointments are made on an annual basis.

Typically, a first - year resident enters at level one and progresses a step on each anniversary of appointment until the conclusion of the training program. Credit for previous training (i.e., advanced standing) is a matter for discussion between the House Officer, the Program Director and the Specialty Board. A stipend for service as Chief Resident is afforded in addition to the salary when so indicated by the Program Director.

### **Reappointment/Promotion**

Reappointment to a Resident Physician position for subsequent year is not automatic and is subject to annual review and contingent upon mutual agreement, funding availability, and satisfactory performance. Reappointment shall be recommended by the Training Program Director and approved by the Associate Dean of Graduate Medical Education.

Reappointment to a subsequent year shall be for one - year term.

### **Chief Residents**

Appointments are made for not more than one year by the Associate Dean for Graduate Medical Education after nomination by the Program Director. Chief residents must be graduates in medicine, osteopathic medicine or hold an equivalent degree with service of one or more years in the graduate medical education program in an approved hospital or equivalent training, and must hold a medical license in the State of California. This does not apply to Chiefs in Internal Medicine or Pediatrics.

### **Salary - Rates**

The basic salary scales for House Officers are established by the University Office of the President. At UCSD Medical Center salaries for represented House Officer are collectively bargained by UCSD and the San Diego House Officer Association.

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# UCSD HOUSE OFFICER DUTY HOURS AND WORKING ENVIRONMENT POLICY

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## **DUTY HOURS**

Duty hours are defined as all clinical and academic activities related to the training program, i.e., patient care, administrative duties related to patient care, the provision for transfer of patient care, time spent in - House during call activities and scheduled academic activities such as conferences, journal clubs, etc. Duty hours do not include reading and preparation time spent away from the duty site. Each program shall adopt the duty hour policies for their specialty as defined in the ACGME Institutional and Program Requirements. In the absence of more stringent ACGME - RRC requirements, the following specific duty hours for House Officers in ACGME programs shall be maintained unless exceptions have been granted in accordance with established.

UCSD assures an educational environment in which House Officers may raise and resolve issues without fear of intimidation or retaliation by administration, faculty or staff. (Refer to Section in the HOPPD entitled, Educational Environment Conducive to Open Exchange of Issues.)

### ***Duty Hours***

Duty hours shall be limited to 80 hours per week, averaged over a four - week period, inclusive of all in - House call activities. When a House Officer on - call from home or off - site must return to the hospital, such time in the hospital shall be included in the 80 hour limit. All moonlighting hours (both internal and external) are included in the 80 hour limit.

Each House Officer shall be scheduled for a minimum of one day free of all duty every week when averaged over four weeks. One day free of all duty is defined as one continuous 24 - hour period free from all clinical, educational, and administrative activities. Particular attention should be paid to individual Residency Review Committee program requirements in the event the “one day in seven” is to be averaged over a shorter period, such as 1 week.

#### **A. Maximum Duty Period Length**

1. Duty periods for PGY1 residents (interns) must not exceed 16 hours in duration.
2. Duty periods of PGY2 residents and above may be scheduled to a maximum of 24 hours of continuous duty in the hospital. Programs must encourage residents to use alertness management strategies in the context of patient care responsibilities. Strategic napping, especially after 16 hours of continuous duty and between the hours of 10:00 p.m. and 8:00 a.m., is strongly suggested.
  - a. Residents may be allowed to remain on - site in order to accomplish transitions in care and to participate in didactic activities; however, this period of time must be no longer than an additional four hours.
  - b. Residents must not be assigned any additional clinical responsibilities after 24 hours of continuous in - house duty.
  - c. Each program must consult with their individual RRC because further limitations may be imposed.
  - d. In unusual circumstances, residents, on their own initiative, may remain beyond their scheduled period of duty to continue to provide care to a single patient. Justifications for such extensions of duty are limited to reasons of required continuity for a severely ill or unstable patient, academic importance of the events transpiring, or humanistic attention to the needs of a patient or family. Under those circumstances, the resident must:
    - (1) Appropriately hand over the care of all other patients to the team responsible for their continuing care; and,
    - (2) Document the reasons for remaining to care for the patient in question and submit that documentation in every circumstance to the program director. The program director must review each submission of additional service, and track both individual resident and program - wide episodes of additional duty.

## **B. Minimum Time Off Between Scheduled Duty Periods**

1. Each House Officer shall have an adequate time for rest and personal activities.
2. PGY1 residents should have 10 hours, and must have eight hours, free of duty between scheduled duty periods.
3. Intermediate - level residents [as defined by the Review Committee] should have 10 hours free of duty, and must have eight hours between scheduled duty periods. They must have at least 14 hours free of duty after 24 hours of in - house duty.
4. Residents in the final years of education [as defined by the Review Committee] must be prepared to enter the unsupervised practice of medicine and care for patients over irregular or extended periods. While it is desirable that residents in their final years of education have eight hours free of duty between scheduled duty periods, there may be circumstances [as defined by the Review Committee] when these residents must stay on duty to care for their patients or return to the hospital with fewer than eight hours free of duty.
  - a. Circumstances of return - to - hospital activities with fewer than eight hours away from the hospital by residents in their final years of education must be monitored by the program director.

## **C. Maximum Frequency of In - House Call/Night Float/At Home Call**

1. Residents must not be scheduled for more than six consecutive nights of night float.
2. PGY2 residents and above must be scheduled for in - house call no more frequently than every third night, when averaged over a four - week period.
3. At - home call (pager call) is defined as call taken from outside the assigned institution.
  - a. The frequency of at - home call is not subject to the every third night limitation. However, at - home call must not be so frequent as to preclude rest and reasonable personal time for each resident. House Officers taking at - home call must be provided with 1 day in 7 completely free from all educational and clinical responsibilities averaged over 4 - weeks.
  - b. When House Officers are called into the hospital from home, these hours must be counted toward the 80 - hour limit.
  - c. Residents are permitted to return to the hospital while on at - home call to care for new or established patients. Each episode of this type of care, while it must be included in the 80 - hour weekly maximum, will not initiate a new "off - duty period".
  - d. The training program director must monitor the demands of at - home call and make scheduling adjustments as necessary to mitigate excessive service demands or fatigue.

## **D. Extra Work for Extra Pay/Moonlighting**

1. As identified by the ACGME, residency education is a full - time endeavor. As such, each program director must ensure that moonlighting does not interfere with the ability of the resident to achieve the goals and objectives of the educational program. Please refer to GME 005 policy on Extra Work for Extra Pay.
2. Residents and Fellows may be given the opportunity to provide extra service for additional compensation at UCSD. This service that occurs within the training program sponsoring institution, termed, "Extra Work for Extra Pay," or Internal Moonlighting, shall be counted toward the 80 hour weekly limit on duty hours averaged over 4 weeks. In addition, any external moonlighting hours shall also be counted toward the 80 hour weekly limit.
3. PGY1 residents (interns) are not permitted to moonlight.

## **E. Supervisory Back - up**

Appropriate faculty or supervisory resident backup will be provided for every House Officer for consultation, education and supervision. Please refer to GME 001 Supervision Policy.

## **F. House Officer Alertness Management/Fatigue Mitigation**

1. The program must educate all faculty members and residents to recognize the signs of fatigue and sleep deprivation.
2. Faculty members and residents must be educated in alertness management and fatigue mitigation processes; and,
3. Adopt fatigue mitigation processes to manage the potential negative effects of fatigue on patient care and learning, such as naps or back - up call schedules.
4. Each program must have a process to ensure continuity of patient care in the event that a resident may be unable to perform his/her patient care duties.
5. The sponsoring institution must provide adequate sleep facilities or safe transportation options for residents who may be too fatigued to safely return home.

## **GRIEVANCE**

- A. Each program's policies and procedures shall include grievance procedures in relation to duty hours within the program.
- B. Overall, House Officers may bring forward issues regarding duty hours to their training program director, chief resident, department chair, the Associate Dean for Graduate Medical Education and the Chair of Graduate Medical Education Committee.
- C. Additionally, any trainee may bring his/her concerns regarding duty hour implementation directly to the Campus Ombudsperson, UCSD Office of the Ombuds, who can be reached at (858) 534 - 0777. Such interaction is held in strict confidence. The Campus Ombudsperson will report to the Chair, GMEC who will investigate the circumstances and initiate an appropriate resolution.
- D. Represented House Officers may refer to the Resident Duty Hours section of the SDHSA Memorandum of Understanding.

## **WORKING ENVIRONMENT**

- A. In - House sleep and rest space and bathroom facilities shall provide security and privacy. The Office of Graduate Medical Education will work closely with the House Officer to identify and address, as appropriate, personal service issues.
- B. Continuing efforts shall be made to upgrade ancillary support services and, in particular, to minimize the provision of services by House Officers that could be provided with no diminution in quality by other personnel.
- C. Representative House Officers may refer to the Working Environment section of the SDHSA Memorandum of Understanding.

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## **HOLIDAYS**

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The University holidays are as follows:

- New Year's Day
- Third Monday in January
- Third Monday in February
- Last Monday in May
- Independence Day
- Labor Day
- November 11 (Veteran's Day)
- Thanksgiving Day
- Friday following Thanksgiving Day
- December 24 (or announced equivalent)
- December 25
- December 31 (or announced equivalent)

Unless an alternate date is designated by the President, a holiday that falls on a Saturday is observed on the preceding Friday and a holiday that falls on a Sunday is observed on the following Monday.

- A House Officer may observe a special or religious holiday, provided that the work schedule permits and provided that the time off is charged to vacation or is without pay.
- Holiday call shall be distributed by the Training Program Director, or designee, equitably among House Officers at the same postgraduate level. The Program Director or designee may consider the following factors when scheduling holiday call: continuity of patient care, opportunity for unique educational experience, supervision or education of others or other special requirements of the House Officer's particular level of training.
- House Officers receive holiday pay pursuant to University policies.
- Represented House Officers may refer to the Holidays section of the SDHSA Memorandum of Understanding.

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## LEAVE POLICY

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### **VACATION**

House Officers accrue vacation at the official rate of 13.33 hours per month. This provides a total of 20 vacation "working days" per year. Due to the complexities of rotation schedules for House Officers in various training programs, 28 calendar days or one calendar month will be given as leave depending upon the mode of scheduling of a given service. A part - time House Officer receives the proportionate amount, based on the percent and duration of the appointment.

- Vacation leave shall be requested by the House Officer in writing and scheduled with the agreement of the Program Director or his/her designee.
- Vacation may be scheduled in full or may be split depending upon the requirements of the training program and the written requests of the House Officer.
- To the extent allowed by the training requirements of the program, vacation leave will be granted in accordance with House Officers requests.
- Changes in the leave schedule may be initiated by the Program Director when required by department activities. The Program Director shall endeavor to give advance notice of any change.
- House Officers wishing to make a change in the posted leave schedule must submit a written request. Approval of such requests is subject to the staffing requirements of the training program and the discretion of the Program Director or his/her designee.
- Leave must be taken during the period of appointment unless an exemption is granted to the department by the Associate Dean for Graduate Medical Education.

### **PROFESSIONAL LEAVE**

With the approval of the Training Program Director, House Officers may be granted up to five work days of leave with pay, per academic year, to pursue scholarly activities pursuant to their educational curriculum.

- Time not taken may not be carried over from one academic year to the next and will be forfeited.

### **SICK LEAVE**

House Officers shall accrue sick leave at the rate of 8 hours (one working day) per month, which is the equivalent of 12 working days per year. A part - time House Officer receives the proportionate amount, based on the percent and duration of the appointment.

- Each House Officer shall immediately notify his/her Training Program Director of any illness and, if requested by the Program Director, shall provide physician records to document illnesses lasting three or more days.

- Sick leave is not to be used as additional vacation.
- Sick leave that remains unused at the end of an appointment year will carry over to the following appointment year if the House Officer is reappointed. In the event the House Officer is not reappointed, unused sick leave will be forfeited.
- Sick leave not used beyond the predetermined date for separation is forfeited.

## **SICK LEAVE - FAMILY ILLNESS AND BEREAVEMENT**

### ***Family Illness***

A House Officer shall be permitted to use not more than 30 days of sick leave in any calendar year when required to be in attendance or to provide care because of the illness of the House Officer's spouse, parent, child, sibling, grandparent or grandchild. In - laws and step - relatives in the relationships listed also are covered. This provision also covers other related persons residing in the House Officer's Household.

### ***Family Bereavement***

A House Officer shall be permitted to use not more than 5 days of sick leave when the House Officer's absence is required due to death of the House Officer's spouse, parent, child, sibling, grandparent or grandchild. In - laws and step - relatives in the relationships listed also are covered. This provision also covers other related persons residing in the House Officer's Household. In addition the House Officer shall be permitted to use not more than 5 days of sick leave in any calendar year for bereavement or funeral attendance due to the death of any other person. The House Officer shall provide prior notice to the Training Program Director as to the need for and likely length of any such absence.

## **PERSONAL LEAVE OF ABSENCE**

A House Officer may be granted a personal leave without pay when other leave balances have been exhausted, for the House Officer's convenience, but in granting the leave, the best interests of the training program shall be considered.

- Personal leaves may be granted for personal needs not otherwise specifically provided for by this policy.
- The Training Program Director may approve a personal leave for a period not in excess of six months. The Associate Dean for Graduate Medical Education may grant individual exceptions to the six - month limit.

## **PREGNANCY/CHILDBEARING DISABILITY LEAVE**

A House Officer disabled due to pregnancy, childbirth or related medical conditions shall be granted a medical leave of absence of up to four months, but not to exceed the period of verified disability.

- Pregnancy disability leave may consist of leave without pay or paid leave such as accrued sick leave and accrued or advanced vacation leave.
- If a House Officer on an approved pregnancy disability leave is also eligible for family and medical leave, (noted below under Family and Medical Leave), up to 12 workweeks of pregnancy disability leave shall run concurrently with family and medical leave under Federal law.
- Upon termination of a pregnancy disability leave that runs concurrently with Federal family and medical leave, an eligible House Officer is also entitled to up to 12 workweeks of State family and medical leave.
- A pregnant House Officer enrolled in the House Officer disability plan should contact the House Officer disability plan coordinator to discuss eligibility for coverage and the procedure to follow to obtain the disability benefit.
- For House Officers disabled by pregnancy, childbearing or other related medical conditions who meet the eligibility requirements of the Family and Medical Leave Act, the University shall continue its contribution for the House Officer's health insurance benefits for the length of such disability, up to four months.
- As an alternative to or in addition to Pregnancy Disability Leave, the University will temporarily modify the job duties of a pregnant House Officer or transfer the House Officer to a less strenuous or hazardous position, if requested by the House Officer and medically advisable according to the House Officer's health care

provider, provided that the temporary transfer or modification of duties can be reasonably accommodated by the University. Such a temporary modification of duties or transfer will not be counted by the University toward a House Officer's entitlement to up to four (4) months of Pregnancy Disability Leave. At the conclusion of the Pregnancy Disability Leave (or earlier upon the House Officer's request if that request is consistent with the advice of the House Officer's health care provider), the House Officer will be returned to her original position or duties.

### **PARENTAL LEAVE**

Parental Leave is a form of Family Care/Medical Leave to care for the House Officer's newborn or a child placed with the House Officer for adoption or foster care. Such leave must be initiated and concluded within one year of the birth or placement of the child. The University shall grant a Parental leave subject to the provisions of Family and Medical Leave Act (FMLA) or the California Family Rights Act (CFRA), as applicable. If requested and taken immediately following a Pregnancy Disability Leave, a House Officer eligible for FMLA/CFRA at the beginning of her Pregnancy Disability leave shall be granted the unused portion of FMLA/CFRA leave for Parental Leave purposes, up to a maximum of 12 workweeks. The amount available for use is determined by the amount which the House Officer has previously used under FMLA/CFRA in the leave year.

- Parental Leave must be initiated and concluded within one year of the birth or placement of the child.
- Parental Leave alone shall not exceed 12 workweeks within the calendar year. However, when Parental Leave is combined with a leave for pregnancy - related or childbearing disability only, the total Family Care/Parental Leave shall not exceed seven months in the calendar year.
- Leave granted for bonding purposes shall be concluded within 12 months following the child's birth or placement for adoption or foster care.

### **FAMILY AND MEDICAL LEAVE**

Family and Medical Leave is provided for an eligible House Officer's serious health condition, or the serious health condition of the House Officer's child, spouse or parent in accordance with applicable federal or state law, including the FMLA and the CFRA.

- A House Officer is entitled to up to 12 workweeks of Family and Medical Leave during the calendar year, provided that:
  - The House Officer has at least 12 cumulative months of University service (all prior University service shall be used to calculate the 12 - month service requirement); and
  - The House Officer has worked at least 1,250 actual hours during the 12 months immediately preceding the commencement date of the leave.
  - Family and Medical Leave is unpaid leave, except under the following circumstances:
    - Accrued/advanced vacation (for the specific academic year) may be used at the House Officer's option before taking leave without pay.
    - In addition, up to 30 days of accrued sick leave per year may be used as salary replacement for family illness leave.
    - All paid time off used for Family and Medical Leave shall be deducted from the 12 workweek Family and Medical Leave maximum.

### **Advance Notice and Certification**

- Whenever possible, the House Officer shall provide at least 30 days advance notice. If 30 days notice is not practicable because of a medical emergency, for example, notice shall be given as soon as practicable. Failure to comply with these notice requirements may result in postponement of family and medical leave.
- A House Officer who requests Family and Medical Leave shall be required to present medical certification prior to taking the leave and prior to returning to the training program.



### **Leave Related to a Family Member's Military Service**

Eligible employees are entitled to leave in accordance with the FMLA for purposes related to a covered family member's military service. An unpaid FMLA leave may be taken for any one, or for a combination, of the following reasons:

- A "qualifying exigency" arising out of the fact that the employee's spouse, son, daughter, or parent is on active duty or call to active duty status as a member of the National Guard or Reserves in support of a contingency operation; or,
- To care for a covered family member (including a spouse, son, daughter, parent, or next of kin) who is a current member of the Armed Forces or veteran and has serious injury or illness incurred or aggravated in the line of duty and who is currently getting medical treatment.

When a requested leave is due to a "qualified exigency", an eligible employee may take up to 12 workweeks of leave during any 12 - month period.

When requested leave is taken to care for an injured or ill service member or veteran, an eligible employee may take up to 26 workweeks of leave during a single 12 month period to care for the service member. Leave care for an injured or ill service member or veteran, when combined with other FMLA - qualifying leave, may not exceed 26 weeks in a single 12 month period.

### **Effect on Benefits**

A House Officer on family and medical leave shall be entitled to continue participation in health plan coverage (medical, dental and optical) as if on pay status for a period of up to 12 workweeks in a 12 - month period. Contribution toward premium cost shall remain as it was prior to the onset of family and medical leave for a period of up to 12 workweeks in a calendar year.

### **LEAVE FOR WORK-INCURRED DISABILITY**

A House Officer who is off pay status and receiving temporary disability payments under the Workers' Compensation Act shall be granted a leave without pay for all or part of the period during which temporary disability payments are received, except that any leave without pay that is granted shall not extend beyond a predetermined date of separation.

- Periods of leave for work-incurred disability run concurrently with Family and Medical Leave for a House Officer who is eligible for Family and Medical Leave.

### **MILITARY LEAVE**

A House Officer granted temporary military leave for active - duty training or extended military leave is entitled to receive the House Officer's regular University pay for the first 30 calendar days of such leave in any one fiscal year, provided that the House Officer has completed 12 months of continuous University service immediately prior to the granting of the leave (all prior full - time military service shall be included in calculating this University service requirement) and provided that the aggregate of payments for temporary military leave, extended military leave and military leave for physical examination do not exceed 30 calendar days' pay in any one fiscal year.

A House Officer granted military leave with pay shall receive all benefits related to employment that are granted when a House Officer is on pay status.

### **JURY DUTY**

A House Officer who is summoned and serves on jury duty shall be granted leave with pay for the time spent on jury service and in related travel.

- Deferment or excused absence from jury service can only be granted by the court pursuant to the procedure outlined in the Jury Summons Notice.
- Make - up time may be required to meet the educational objectives and certification requirements of the training program or the American Specialty Board.

## **POLICY ON EFFECT OF LEAVE ON COMPLETION OF THE TRAINING PROGRAM**

Make - up time may be required to meet the educational objectives and certification requirements of the training program or the American Specialty Board when a House Officer is required to utilize leave time as described herein.

- The House Officer should discuss this issue with his/her Training program Director, if possible, prior to taking extended leave.
- If extended leave results in the requirement for additional training in order to satisfy the program or American Specialty Board requirements, the pay status for the additional training time will be determined by the Training Program Director and the Associate Dean for Graduate Medical Education, if possible, prior to the approval of the leave.

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## **BENEFITS AND DEDUCTIONS**

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### **INSURANCE PACKAGE**

House Officers are eligible for enrollment in the UCSD House Officer health, dental, vision, life and disability insurance plans. The House Officer's spouse, dependent children or domestic same or opposite sex partner are also eligible for enrollment in the health, dental and visions plans.

There is no premium charge to the house officer for the cost of enrollment in health, dental and vision plans either for him/herself, for a spouse, dependent children or domestic same or opposite sex partner. There is no premium charge to the house officer for enrollment in either the life or disability plans.

Benefit coverage is not automatic. An enrollment process must be followed within the timeframes established by the carriers. Following the enrollment process, coverage is effective the date of the House Officer's appointment to UCSDMC. Subsequently, new dependents may be enrolled provided enrollment occurs within 30 days after a qualifying event such as marriage, birth, or adoption.

Open enrollment for the House Officer health plans (health, dental, vision and life) occurs on an annual basis during the month of June. At that time the House Officer will have the opportunity to change their medical plan coverage from one carrier to another or to enroll with a plan for the first time.

### **Health Coverage**

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Two plans are available:

#### **A. Fee for Service - PPO Plan**

- 3 - tier fee - for - service indemnity plan
- Insured may seek treatment anywhere from provider of choice
- Services at UCSDMC and CHHC (tier 1), are generally covered 100% with no deductible and no co - insurance
- Services obtained away from UCSDMC, within the PPO Network (tier 2), are generally covered at 80%, after satisfaction of a deductible amount
- Services obtained outside of the PPO Network (tier 3), are generally covered at 60%, after satisfaction of a deductible amount
- Co - pays are required at all participating providers including UCSDMC for Routine Exam, Emergency Room (unless admitted) and for Prescription Drugs.
- Maximum annual out - of - pocket cost \$1,000/PPO provider and \$2,000/non - PPO provider (individual) and \$2,000/PPO provider and \$4,000/non - PPO (family)

#### **B. Managed Care - HMO Plan**

- Insured must select a primary care provider who will manage the care.
- No deductibles
- Co - pays are required for Routine Exam, Outpatient Psychiatric Care, Prescription Drugs, Home Health Care, Emergency Room (unless admitted)

### **Dental Coverage**

The dental plan provides comprehensive coverage for preventive, basic, major and orthodontic services. The insured may utilize the services of either a dentist participating in the plan - PPO or a dentist who does not participate in the plan - PPO. The greatest benefit will be paid when the insured utilizes the services within the PPO network.

### **Vision Coverage**

The vision plan provides coverage for eye exams, lenses, frames, medically necessary contacts and cosmetic contacts. There is a deductible amount for services rendered. The plan requires that the insured uses specific participating providers in order to receive full benefits.

### **Cobra Health Continuation Coverage**

House Officers' and their insured dependents have the option of continuing medical, dental and vision plan benefits, at their own expense, upon termination of their plan coverage for any of the following reasons:

#### **House Officer**

- Reduction in hours of appointment
- Termination of appointment (for reasons other than gross misconduct)
- The plan terminated

#### **Spouse/Domestic Partner**

- Death of a spouse/domestic partner
- Termination of a spouse/domestic partner's appointment (for reasons other than gross misconduct) or reduction in hours of appointment
- Divorce or legal separation

#### **Dependent Child of an Appointee Covered by UCSDMC Health Plan**

- Death of a parent
- Termination of a parent's appointment (for reasons other than gross misconduct) or reduction in hours of appointment
- Parent's divorce or legal separation
- Dependent ceases to be a "dependent child" under the UCSDMC sponsored health plans
- COBRA coverage is not automatic. An enrollment process must be followed within the timeframes established by Federal law.

### **Life Insurance Plan, D - AD&D**

In the event of the death of the covered House Officer, the plan will pay \$50,000. If the death is accidental, the plan will pay \$100,000. The proceeds will be placed in an interest bearing checking account for the beneficiary.

### **Disability Insurance**

Group long term disability insurance is provided to members of the House Officer at no cost to the House Officer.

### **Worker's Compensation Insurance**

If a House Officer sustains a work - related injury or illness, he/she is eligible to receive benefits under the Workers' Compensation Laws. This program is designed to guarantee complete medical attention for the injury or illness and to insure regular monetary benefits as a means of financial support while the House Officer is medically unable to return to work. The premiums for this program are paid entirely by the University. There is no cost to the House Officer for the coverage nor is there a cost for necessary medical care for diagnosis and treatment.

When the injury occurs, the House Officer must immediately notify his/her supervisor of the incident to ensure that proper procedures are followed. If the supervisor is not immediately available, the House Officer must contact the Injury Prevention Disability Management Program (858) 534-3660 and leave information, as instructed, identifying the injury/exposure. If immediate attention is required, the House Officer should go to either the UCSD Hillcrest or Thornton Emergency Department.

For occupational exposures to blood or body fluids, the House Officer should immediately contact the Center for Occupational and Environmental Medicine. If urgent screening is required following a needle stick or blood exposure, the House Officer should immediately go to the UCSD Hillcrest or Thornton Emergency Department.

### **PROFFESINAL LIABILITY COVERAGE**

#### **TYPE OF COVERAGE:**

UC Self - insured Retention (Fully Funded)

Tail Coverage is produced by virtue of the fact that the coverage is "per occurrence"

#### **LIMITS:**

\$1,000,000 each occurrence

\$3,000,000 aggregate

Additional excess insurance available if needed

The UC Self Insurance Program will defend and indemnify house officers and medical students against professional or general liability or malpractice claim arising out of the house officer's or medical student's acts or omissions that are within the course and scope of his/her University duties, for work completed during the training period. The UC Self Insurance Program does not cover: (1) acts/omissions that are not within the course and scope of the house officer's University duties, (2) acts or omissions resulting from fraud, corruption, malice or criminal negligence.

UC Self Insurance Program coverage for house officers and part - time, volunteer clinical faculty is limited to specific assignments in specific locations. Work at affiliated or associated hospitals or elsewhere is covered when it falls within the course or scope of the house officer's University appointment. However, "moonlighting" is not part of the residency program and is not covered under the UC Self Insurance Program.

Questions regarding legal issues, including subpoenas should be addressed to the UCSDMC Office of Risk Management.

### **DEDUCTIONS**

Deductions for State and Federal taxes as well as Medicare will automatically be made from House Officer earnings. Social Security (FICA) withholding will not be made, but in lieu of this, 7.5% of the House Officer's pre - tax pay is directed to the Safe Harbor University of California Defined Contribution Plan. These non - voluntary contributions may be directed to one of the several University of California managed funds or to any one of over 100 Fidelity Investments funds.

House Officers may make voluntary contributions to the University of California 403 (b) Plan and 457 plans. Contributions come from pre - tax pay and may be made within certain limits.

When a House Officer leaves the University, monies from the Safe Harbor Defined Contribution Plan and the voluntary 403 (b) and 457 (b) plans may be handled as follows:

- May either be rolled over into a new employer's retirement fund, or into an IRA; or
- May be left on deposit if the account has a minimum of \$2,000 in the Plans; or
- Contributions and earnings may be paid to the House Officer, although the distribution is subject to penalties if the recipient is under the age of 59 ½, and the distribution is subject to taxation.

House Officers who are paid from funding sources that mandate a stipend payment in lieu of salary may not be eligible for one or more of the previously described features.

#### **Check Disposition**

In most cases, the House Officer's paycheck will be issued by the University of California at San Diego Payroll Office. House Officers are paid on a monthly basis in arrears (e.g., the August 1 paycheck represents July earnings). Checks may be directed to Surepay direct bank deposit, or the House Officer's campus or home address.

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### **ON CALL QUARTERS**

On call sleeping space is assigned to the clinical services. The sleeping space is clean, quiet and safe. On call quarters shall be serviced by the Housekeeping department on a daily basis. The Office of Graduate Medical Education will work closely with House Officers to address personal service issues.

Represented House Officers may refer to the Working Environment section of the SDHSA Memorandum of Understanding.

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## UNIFORM AND UNIFORM LAUNDERING

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Three sets of uniforms (lab coats) are provided to the House Officers at the time of initial appointment. The lab coats will be laundered by UCSDMC at no charge to the House Officer. Uniforms that deteriorate through normal wear and tear shall be replaced by the Medical Center.

Represented House Officers may refer to the Uniform section of the SDHSA Memorandum of Understanding.

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## RESIDENT USE OF EMAIL

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The special nature of residency programs requires ongoing communication between the residents, the training programs, administrators and others at UCSD Medical Center and affiliated institutions.

The policy of the Office of Graduate Medical Education requires that House Officers be available by email. House Officers are required to have and use a UCSD Medical Center email account that is provided at no cost. House Officers are expected to check their email at reasonably frequent intervals unless they are on approved leave. House Officers must comply with UCSD policies and state and federal laws that apply to email.

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## RECORDS POLICY

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The University maintains as confidential the records of each House Officer, and the consent of the individual is required before access to records is allowed except where permitted or required by law, or where directly or routinely required in the administration of the training program. A House Officer may inspect his/her records in accordance with current privacy legislation and University policy.

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## GRADUATE MEDICAL EDUCATION ACADEMIC DUE PROCESS & LEAVE GUIDELINES

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### I. INTRODUCTION

#### A. DEFINITIONS

**Academic Deficiency:** The terms “Academic Deficiency” or “Deficiencies” mean unacceptable conduct or performance in the professional or academic judgment of the Program Director, Chair, or Associate Dean for GME including failure to achieve, progress or maintain good standing in the Training Program, or achieve or maintain professional standards of conduct as stated below.

**Associate Dean:** The term “Associate Dean” means the Associate Dean for Graduate Medical Education.

**Chair:** The term “Chair” means the Chair of the Trainee’s specialty or subspecialty department, or his/her designee.

**Clinical Competence Committee:** The term “Clinical Competence Committee” means a committee of a School of Medicine department or division, or a committee specially selected by the Associate Dean for Graduate Medical Education in conjunction with the Chair, Graduate Medical Education Committee, that reviews the academic performance of Trainees.

**Days:** The term “days” means calendar days.

**OGME Training Program:** The terms “graduate medical education training program” or “GME training program” refer to the second stage of medical education during which medical school graduates are prepared for independent practice in a medical specialty. The foremost responsibility of the GME training program is to provide an organized education program with guidance and supervision of the Trainee, facilitating the Trainee’s professional and personal development while ensuring safe and appropriate care

for patients. Graduate medical education involves the development of clinical skills and professional competencies, including the Accreditation Council for Graduate Medical Education (ACGME) Core Competencies, developmental milestones, and the acquisition of detailed factual knowledge in a medical specialty. These professional standards of conduct include, but are not limited to, professionalism, honesty, punctuality, attendance, timeliness, proper hygiene, compliance with all applicable ethical standards and UCSD policies and procedures (including but not limited to the UCSD Medical Center Medical Staff Code of Conduct Policy), an ability to work cooperatively and collegially with staff and other health care professionals, and appropriate and professional interactions with patients and their families.

A Trainee, as part of his or her GME Training Program, may be in a hospital, other clinical setting or research area. All such appointments, either initial or continuing, are dependent upon the Trainee maintaining good standing in a GME training program. Dismissal from a GME training program will result in the Trainee's automatic dismissal from any and all related appointments such as medical staff membership.

**Medical Disciplinary Cause or Reason:** The term "medical disciplinary cause or reason" applies to a GME Trainee who holds a license from the State Medical Board of California, or the Osteopathic Board of California, and means that aspect of a licentiate's competence or professional conduct that is reasonably likely to be detrimental to patient safety or to the delivery of patient care in accordance with Business and Professions Code section 805.

**Program Director:** The term "Program Director" means the Training Program Director for the Trainee's specialty or subspecialty, or designee.

**Trainee:** The term "Trainee" includes all individuals appointed by UCSD's School of Medicine to the titles of Resident Physician I - IX (title codes 2709, 2723, 2708, 2724), Chief Resident Physician (title code 2725, 2738), Resident Physician/Subspecialist IV - IX (title code 2726), Other Post M.D. Trainee II - IX (title code 2732), where specified by UCSD guidelines, or any other GME title assigned by UCSD.

**Vice Chancellor:** The term "Vice Chancellor" means UCSD Vice Chancellor Health Sciences or his/her Designee.

## **B. PREAMBLE**

The procedures set forth below are designed to provide the University of California San Diego ("UCSD"), UCSD resident physicians and other post - M.D. trainees (collectively referred to as "Trainees") an orderly means of resolving differences. These Guidelines apply to UCSD sponsored programs of Graduate Medical Education ("Training Programs"). These Guidelines shall be the exclusive remedy for appealing reviewable academic actions. Deviation from these procedures that does not result in material prejudice to the Trainee will not be grounds for invalidating the action taken.

Additional time for remediation, either within the Training Program appointment or beyond the expiration of the Trainee's current appointment, may be required to meet the educational objectives and certification requirements of the department or specialty. The Trainee will be notified in writing of any requirements for additional time. Funding for additional time extending beyond the original period of appointment will be permitted only at the discretion of the Associate Dean and upon written confirmation by the Associate Dean and the Program Director or Chair. Academic credit will be given only for full participation in the regular program unless otherwise approved by the Program Director or Chair.

At UCSD, the primary responsibility for remedial academic actions relating to Trainees and Training Programs resides within the departments and the individual training programs. Therefore, academic and performance standards and methods of training and evaluation are to be determined by each department or program at UCSD School of Medicine and UCSD Medical Center. There may be variances in these standards among the various departments and Training Programs.

Trainees and their supervisors are encouraged to discuss their concerns with one another and, if there are any disagreements or disputes, Trainees and their supervisors should make efforts to resolve them. The action(s) taken should be those that in the professional or academic judgment of the Program

Director or Chair best address the deficiencies and needs of the Trainee or the Training Program. These actions are at the discretion of UCSD and need not be progressive. UCSD may select those action(s) described below that it deems appropriate.

A Trainee may request a correction or deletion of his/her academic file under this policy by submitting a written request to the Program Director. Within thirty (30) days of receipt of a written request to amend or delete a record, the Program Director will either make the amendment or deletion or inform the individual in writing that the request has been denied. If the Program Director refuses to amend or delete the record, the Trainee may enter into the record a statement setting forth the reasons for the Trainee's disagreement with the record. Removal of documentation of action(s) from the Trainee's file does not preclude the University from relying on the removed documentation should any subsequent academic action be taken or from communicating the information as required by law, upon receipt of a release from the Trainee, or to any appropriate third party such as a hospital, hospital medical staff or professional licensing board when such communication is intended to aid in the evaluation of the qualifications, fitness, character or insurability of the Trainee.

## ***II. ACADEMIC ACTIONS – NON-DISMISSAL***

### **A. ADMINISTRATIVE ACTIONS**

#### ***1. Non Appealable Suspension***

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The Trainee may be suspended from the Training Program for any of the following reasons:

- a. failure to complete and maintain medical records as required by the medical center or site in accordance with the center's/site's medical staff bylaws or rules and regulations;
- b. failure to comply with state licensing requirements of the California State Medical Board, or Osteopathic Board;
- c. failure to obtain or maintain proper visa status;
- d. unexcused absence from Training Program for three or more days;
- e. the inability to complete a rotation at an Affiliate Institution that is deemed essential to meeting the requirements of the Training Program; or
- f. immediately prior to initiation of dismissal procedures under section III.B if it is determined in the sole discretion of the Chair, Program Director, or Associate Dean for GME that it would be in the best interests of patients, the program or the Trainee.
- g. The period of suspension should not exceed fourteen (14) days; however, other forms of academic action may follow the period of suspension.

The Chair or Program Director will promptly notify the Trainee of his/her suspension. In addition, for subsections b, c, d and e above, the Trainee will be provided the documentation upon which the suspension is based and a written notice of the intent to consider the Trainee to have automatically resigned at the end of the suspension period (see Part II.A.2. below). The Trainee may utilize the suspension period to rectify (a) or to respond to the notice of intent under (b), (c), (d) or (e) which can include correcting the problem identified in (b), (c) or (e). If the Trainee is suspended under (a) and does not complete the medical records as required within the 14 day suspension period, other academic action may be instituted.

The Trainee will not receive any academic credit during the period of suspension. Unless prohibited by law, the Trainee's stipend will continue to be paid while on this non - appealable suspension status.

#### ***2. Automatic Resignation***

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Automatic resignation from the Training Program will not entitle the Trainee to the Due Process procedures contained in Part III.B. of these Guidelines. Reasons for automatic resignation include:

- a. Failure to Provide Visa or License Verification***

Absent a written extension granted by a governmental or licensing organization, failure of the Trainee to provide verification of an appropriate and currently valid visa or verification of current compliance with state medical licensing requirements during the 14 day suspension period will result in the Trainee's automatic resignation from the Training Program.

**b. Loss of Rotation Privileges to an Affiliate Institution**

Failure of trainee to achieve reversal of Affiliate's decision to revoke the Trainee's privilege to rotate to the Affiliate Institution during the 14 day suspension period may result in the Trainee's automatic resignation or dismissal from the Training Program if the rotation at the Affiliate is deemed essential by the Program to meeting the requirements of the Training Program.

**c. Absence without Granted Leave**

Trainees are expected to communicate directly with the Program Director in the event he or she is unable to participate in the Training Program. The Program Director may grant a leave in times of exceptional circumstances. If a Trainee is absent without leave for three (3) days or more, he or she may be considered to have resigned voluntarily from the program unless he or she submits a written explanation of any absence taken without granted leave. This explanation must be received by the Program Director within five (5) days of the first day of absence without leave.

The Program Director and Chair will review the explanation and any supporting documentation submitted by the Trainee regarding the absence without leave and notifies the Trainee of their decision within five (5) days. Failure to adequately explain or document the unexcused absence to the satisfaction of the Program Director and Chair will result in the Trainee's automatic resignation from the Training Program.

**3. Leaves**

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Administrative leave and conditional leave of absence are not intended to replace any leaves that a Trainee may otherwise be entitled to under state or federal law or University policy.

**a. Administrative Leave**

A Chair or Program Director may place a Trainee on administrative leave in order to review or investigate allegations involving the Trainee. These may include deficiencies or circumstances where the Trainee may pose a threat to the health or safety of the public, patients or staff, situations where the Trainee's own health or safety may be compromised, or other circumstances that may represent a breach in professionalism by the Trainee. The leave will be confirmed in writing, stating the reason(s) for and the expected duration of the leave. The circumstances should be of a nature that might warrant removing the Trainee from the Training Program. The Chair or Program Director should, as soon as practicable, conclude the review and either return the Trainee to the program or initiate action under these Guidelines. The Trainee will be paid for the period of administrative leave.

**b. Conditional Leave**

A conditional leave of absence from the Training Program may be provided only under exceptional circumstances, at the Chair's discretion and upon the Trainee's request. At the end of the conditional leave, the Chair will determine whether to re - admit the Trainee conditionally, unconditionally, on probation or to seek the Trainee's dismissal pursuant to the procedures contained in these Guidelines. The Trainee will not be paid a stipend for the period of the conditional leave.

**B. NON - REVIEWABLE ACADEMIC ACTIONS**

The following actions are non - reviewable and may or may not be used sequentially or in tandem with one another:

- Counseling Letter
- Notice of Concern
- Probation



### ***1. Counseling Letter***

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A counseling letter may be issued by the Program Director or Chair to a Trainee to address an academic or professional deficiency that needs to be remedied or improved. The purpose of a counseling letter is to describe a single instance of problematic behavior and to recommend actions to rectify the behavior. The Program Director will review the counseling letter with the Trainee. Failure to achieve immediate or sustained improvement or a repetition of the conduct may lead to other disciplinary actions. These actions are determined by the professional and academic judgment of the Program Director or the Chair and need not be sequential. For the purposes of this policy and for responses to any inquiries, a counseling letter does not constitute a disciplinary action.

### ***2. Notice of Concern***

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A notice of concern may be issued by the Program Director or Chair to a Trainee who is not performing satisfactorily. Notices of concern should be in writing and should describe the nature of the deficiency(ies) and any remedial actions required on the part of the Trainee. A Letter of Concern is typically used when a pattern of problems emerges. The Program Director or Chair will review the notice with the Trainee. Failure to achieve immediate or sustained improvement, failure to meet any requirement(s) set forth in the letter, or repetition of the conduct may lead to additional actions. This action need not follow a counseling letter nor precede other academic actions described later in these guidelines. A notice of concern does not constitute disciplinary action for purposes of these guidelines or for responses to inquiries.

### ***3. Probation***

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Trainees who are in jeopardy of not successfully completing the requirements of the Training Program or who are not performing satisfactorily may be placed on probation by the Chair or Program Director. Probation will be communicated to the Trainee in writing and should include: a description of the reasons for the probation, any required remedial activity, and the expected time frame for the required remedial activity. Failure to correct the deficiency(ies) within the specified period of time may lead to an extension of the probationary period or to other actions. Probation need not follow a counseling letter or Notice of Concern, nor precede other academic actions described later in these guidelines.

## **C. ACADEMIC ACTIONS APPEALABLE TO THE CLINICAL COMPETENCE COMMITTEE**

Trainees may appeal the following actions to the Clinical Competence Committee:

- Suspension
- Adverse Annual Evaluation
- Non - renewal of appointment before four months prior to the end of the Trainee's current appointment
- Repetition of an academic year
- Denial of a UCSD Certificate of Completion of Training

### ***1. Suspension***

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The Chair or Program Director may suspend the Trainee from part or all of the Trainee's usual and regular assignments in the Training Program, including clinical or didactic duties, for unprofessional or ethical behavior, for failing to comply with state law, federal law, or UC policies and procedures, or when the removal of the Trainee from the clinical service is required for the best interests of the Trainee, patients, staff or the Training Program. The suspension will be confirmed in writing, stating the reason(s) for the suspension and its expected duration. Suspension generally should not exceed sixty (60) days. Suspension may be coupled with or followed by other academic actions and will continue unless and until overturned by the Clinical Competency Committee after an appeal. A suspension under this section may be paid or unpaid.

### ***2. Adverse Annual Evaluation***

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Trainees will only be entitled to a review by the Clinical Competence Committee for annual evaluations that are adverse (overall unsatisfactory or marginal) ("Adverse Annual Evaluation"). Trainees will be notified by the Program Director of any Adverse Annual Evaluation.

### **3. Non - Renewal of Appointment Before Four Months Prior to End of Appointment**

The Trainee's appointment is for a one - year duration, which is normally renewed annually. Due to the increasing level of responsibilities and increasing complexity of clinical care over the course of the Trainee's training, satisfactory completion of prior academic year(s) or rotation(s) does not ensure satisfactory proficiency in subsequent years or rotations. A Trainee may have his/her appointment not renewed at any time there is a demonstrated failure to meet programmatic standards.

The Program Director should provide each Trainee with a written evaluation at least twice per year. The first evaluation should occur no later than sixth months following the beginning of the appointment term. If the Program Director with the approval of the Chair concludes that the Trainee's appointment should not be renewed for the following year, the Program Director will notify the Trainee of such. The Trainee will be permitted to conclude the remainder of the current academic year unless further academic action is taken.

A Trainee who is notified of the non - renewal of his/her appointment for the following year, before the four months prior to the end of his/her current appointment, will be entitled only to the procedures contained in this Part II.D. of these Guidelines. (A Trainee who is notified of the non - renewal of his/her appointment for the following year after this time will be entitled to the procedures contained in Part III.B. of these Guidelines. See Part III.B.2.)

### **4. Requirement that Trainee Must Repeat an Academic Year**

A Trainee may be required to repeat an academic year in lieu of dismissal from the Training Program due to unsatisfactory progress or other deficiencies at the discretion of the Program Director and Department Chair provided there are sufficient funds. Funds for the additional year must be identified with written confirmation by the Program Director or Chair to the Associate Dean.

### **5. Denial of University Certificate of Completion**

If the Program Director, in consultation with the Chair, decides not to award the Trainee a University Certificate, the Program Director will notify the Trainee as soon as reasonably practicable of this intent.

## **D. CLINICAL COMPETENCE COMMITTEE APPEAL PROCEDURES**

The Trainee will be notified as soon as reasonably possible that he/she has been suspended, received an Adverse Annual Evaluation, that his/her appointment will not be renewed (notice given more than four months before the end of his/her appointment), that he/she will be required to repeat the current academic year, or that s/he will not be granted a UCSD Certificate of Completion of Training.

In order to appeal, the Trainee must, within ten (10) calendar days from the date of the notification, provide the Associate Dean with a written statement detailing the reasons he/she believes he/she should not have been suspended, should not have received an Adverse Annual Evaluation, should have had his/her appointment renewed (for the Trainee notified of non - renewal before four months prior to the end of his/her appointment), not be required to repeat the academic year, or should not be granted a UCSD Certificate of Completion of Training. As soon as practical, the Associate Dean will appoint a Clinical Competence Committee (CCC) to review the appeal. The CCC will meet to review the Trainee's statement within twenty (20) calendar days of the committee's formation unless within 20 days the Chair of the CCC determines that an extension of this time period is necessary. If this occurs, the Chair of the CCC will inform the involved parties of the extension in writing. The committee will review the decision to impose the academic action being appealed to determine whether it was arbitrary and capricious. The CCC, at its discretion, may permit or request the personal attendance of the Trainee. While the Trainee has no right to representation by an attorney at the CCC meeting, another person of his/her choice may accompany the Trainee. There may be circumstances that require further information or review by the Committee. If the Committee cannot reach a decision within 20 calendar days, the Trainee will be notified in writing and be provided a new timetable.

The CCC will orally notify the Trainee of its decision within five (5) calendar days of reaching a final decision, and provide the Trainee a written decision within ten (10) calendar days of the oral notification.

The decision of the CCC will be final. Failure by the Trainee to timely request a review before the CCC will be deemed an acceptance by the Trainee of the academic action.

### **III. ACADEMIC ACTIONS ~ NON-RENEWAL OF APPOINTMENT WITHIN FOUR MONTHS OF END OF CURRENT APPOINTMENT OR DISMISSAL**

#### **A. GROUNDS FOR ACTION**

The following actions, if appealed, are reviewable by the Vice Chancellor:

- Dismissal from the Training Program;
- Non - renewal of appointment within four months of the end of the current appointment

##### **1. Dismissal from Training Program**

Based on the Program Director's discretion as approved by the Chair, a Trainee may be dismissed from the Training Program for academic deficiencies, including any of the following reasons:

- a. Failure to achieve or maintain programmatic standards in the Training Program;
- b. Serious or repeated act or omission compromising acceptable standards of patient care, including an act which constitutes a medical disciplinary cause or reason;
- c. Unprofessional, unethical or other behavior that is otherwise considered unacceptable by the Training Program;
- d. Material omission or falsification of Training Program application, medical record or other University document, including billing records;
- e. Confirmations of findings from a criminal background check, law enforcement agency, regulatory body, or UC San Diego Agency (including the Physician Well Being Committee), that could be considered a potential risk to patients or other individuals or considered unprofessional or unethical.

##### **2. Non-Renewal of Appointment Within Four Months of End of Current Appointment**

See Section II, C.3 of these guidelines for discussion of non - renewal of appointment.

#### **B. PROCEDURES**

The Ad Hoc Formal Review Committee, see below, will handle all procedural matters during the actual hearing. At all other times, before and after the actual hearing, including up to the Vice Chancellor's final decision (if appealed to that level), the Associate Dean will make all such decisions.

##### **1. Level One - Informal Review**

When the Program Director, with the approval of the Chair, determines that grounds exist to dismiss a Trainee or to not renew his/her appointment (notice given within four months of the end of the appointment date), the Program Director will provide the Trainee with written notice of the intent to dismiss or not reappoint. This notice will include a statement of the reason(s) for the intended dismissal or non reappointment, a copy of the materials upon which the intended dismissal or non - renewal is based, and a statement that the Trainee has a right to respond in writing to the Chair within ten (10) calendar days of receipt of the notice. If the Trainee does not respond, the intended action shall become final eleven (11) calendar days after receipt of the notice or as otherwise noted by the Program Director. If the Trainee submits a written response within the ten - day period, the Chair will review it. The Chair will decide whether non reappointment or dismissal is appropriate. Within 15 calendar days thereafter or as soon as reasonably possible, with the agreement of both parties, the Chair will notify the Trainee of the Chair's decision by letter, which shall also be copied to the Program Director and Associate Dean. If the decision is to uphold the intended non - renewal or dismissal, the letter should include the reasons for upholding the proposed action, provide the effective date of the dismissal and include a copy of, or a link to, these guidelines. Attempts at informal resolution do not extend the time limits for filing a formal appeal unless the Trainee and the Program Director so agree in writing, or upon the written approval of the Associate Dean. The Trainee will continue to receive regular stipends until the effective date of the dismissal or appointment end date.

## **2. Level Two - Formal Review**

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If the Trainee wishes to appeal the Chair's decision to dismiss or not reappoint, the Trainee must send a written appeal to the Associate Dean no later than thirty (30) calendar days after the Trainee receives the Chair's decision. The written appeal should concisely explain why the Trainee believes the Chair's decision was arbitrary and capricious and should address the specific reasons for the dismissal or non - reappointment set forth in the Program Director's notice of intent to dismiss or to not reappoint.

The Trainee may be assisted or represented by another person at his or her own expense. UCSD may also be represented. If the Trainee is represented by an attorney, he/she shall notify the Associate Dean within fifteen (15) calendar days of initiating the appeal. The University will not be represented by an attorney if the Trainee is not so represented. The Trainee must appear in person at the hearing, even when represented. The failure of the Trainee to appear in person for the full duration of the hearing will be deemed a voluntary dismissal of his/her appeal.

Within fifteen (15) calendar days of receipt of the appeal, or as soon thereafter as is practicable, the Associate Dean will appoint an Ad Hoc Formal Review Committee to hear the appeal. The Committee will consist of three members, at least one of which shall be a member of the full - time faculty, one senior trainee (PGYIII or higher), and one faculty member of the Graduate Medical Education Committee. The Associate Dean will designate one of the Committee members to be the Committee Chair. The Chair is empowered to impose reasonable limits on all proceedings of the Ad Hoc Committee. If possible, one of the Committee members should be from the same department as the Trainee; however, individuals who were substantially involved in any earlier review of the issues raised in the appeal, or who were substantially involved in any incident underlying the appeal generally should not sit as a member of the Committee. The Associate Dean may, at its discretion, request that an attorney from the Office of the General Counsel be appointed to provide independent legal counsel to the Committee. This attorney shall not vote in the Committee's deliberation process. Until the appointment of a Committee Chair, the Associate Dean will resolve all issues related to these procedures.

The Hearing will ordinarily be held within sixty (60) calendar days of receipt of the appeal by the Associate Dean. Unless otherwise agreed by the Parties and the Chair, the Trainee and his/her advocate, if any, will meet at least fifteen (15) days prior to the Hearing at a pre - hearing conference with the Committee Chair, the University representative and the University advocate (if any) to agree upon the specific issues to be decided by the Committee. If the parties are unable to reach an agreement on the issues to be decided, the Committee Chair will determine the issues to be reviewed. Issues that were not raised in the notice of intent to dismiss or to not reappoint, the Trainee's written and timely response thereto, or the notice of the Chair's decision, may not be raised in the Hearing absent a showing of good cause. At this conference, the parties may raise other procedural and substantive issues for decision by the Chair.

At least ten (10) calendar days prior to the Hearing, or at another date agreed to by the Parties and the Chair, all documents to be introduced as evidence at the hearing and names of all witnesses shall be exchanged. With the exception of rebuttal witnesses and documents used in rebuttal, any witnesses not named and documents not exchanged ten (10) calendar days before the hearing may, at the Committee Chair's discretion, be excluded from the Hearing.

The Hearing will provide an opportunity for each party to present evidence and question witnesses. The Committee Chair has broad discretion regarding the admissibility and weight of evidence and is not bound by federal or state rules of evidence. If requested by either party, the Committee will take judicial notice of (i.e., recognize as a fact the existence of) any University policies. The Committee Chair will rule on all questions of procedure and evidence. The hearing will be recorded on audio tape by the University unless both parties agree to share the cost of a court reporter, or one party elects to pay the entire cost for the reporter in order to have a transcript for its own use, in which case the other

side may purchase a copy of the transcript for half the cost of the court reporter and transcription plus any copy costs. The Trainee may listen to any audio tape and may purchase a copy of the audio tape. The Associate Dean will be the custodian of the audio tape and any written record, and will retain the recording for five (5) years from the time the Ad Hoc Committee's or Vice Chancellor's decision becomes final.

Unless both the Trainee and the University agree to an open hearing, the hearing will be closed. All materials, reports and other evidence introduced and recorded during the course of a closed proceeding may not be disclosed until the final resolution of the appeal under these procedures except as may be required by applicable law. At the request of either party or the Committee Chair, only the witness testifying may be present and other potential witnesses will be excluded. However, the Trainee, his/her advocate and the University's representative and its advocate will at all times have the right to attend the hearing.

The Trainee has the responsibility of establishing that the dismissal or non - renewal was arbitrary and capricious. The University will initially come forward with evidence in support of the Chair's decision. Thereafter, the Trainee will present his/her evidence. The parties shall have the opportunity to present rebuttal evidence. The Committee Chair has the right to limit rebuttal evidence at his/her discretion. Following the presentation of the evidence at the Hearing, the Committee Chair will determine whether each party will be given an opportunity to present a closing statement. The Committee Chair will also determine the applicable time limits for any such closing statements.

At the discretion of the Committee Chair, each party may submit a brief following the Hearing. The maximum length of such a brief, if any are allowed, will be determined by the Committee Chair. The Committee Chair will also determine the appropriate briefing schedule. Following the close of the Hearing, the Committee will present its written recommendation(s) to the Trainee, the Chair, Program Director and Associate Dean. This recommendation(s) should occur, absent unusual circumstances, within fifteen (15) calendar days of the Hearing's conclusion.

The Committee will evaluate the evidence presented and prepare a recommended decision that shall contain written findings of fact and conclusions. The decision of the Chair will be upheld if the Committee finds that the Trainee has not met his/her burden to establish by a preponderance of the evidence that the Chair's decision was arbitrary and capricious. The recommended decision shall become final after fifteen (15) calendar days unless an appeal is filed pursuant to III.C.

### **C. DECISION BY VICE CHANCELLOR**

Within fifteen (15) calendar days of receipt of the Committee's recommendation(s), the non-prevailing party may submit, to the Vice Chancellor, a final written appeal to the Committee's recommendation(s). A copy of any such appeal must also be provided to the other party. Any appeal submitted to the Vice Chancellor must be limited to:

- (a) Whether the record presented to the Committee contained sufficient evidence to support the Committee's recommendation(s); or
- (b) Whether there is new evidence that could not reasonably have been introduced at the Hearing and would be likely to change the result.

In the event that a party submits a timely appeal to the Vice Chancellor, the other party shall have fifteen (15) calendar days following its receipt of the appeal to submit its own response, if any.

After receipt of the Committee's recommendation, the parties' written responses (if any), and the record, the Vice Chancellor within sixty (60) calendar days, or as soon as reasonable thereafter, will take any action deemed appropriate, including upholding the Committee's Recommended Decision, rejecting the Committee's recommendation or remanding the matter back to the Committee with instruction for further review and recommendation. The Vice Chancellor's ultimate decision will be final and will be in writing and sent to the Program Director, the Chair, the Trainee, the Associate Dean and the Ad Hoc Formal Review Hearing Committee Chair.

#### **D. REMEDY**

If the Trainee successfully appeals his/her non-renewal or dismissal and the Committee's decision is upheld under III.C or becomes final pursuant to the last paragraph of III.B, the remedy will not exceed restoring the Trainee's stipend payment from the date of dismissal or non-renewal, benefits or any rights lost as a result of the action, less any mitigating income earned from other sources.

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## **SPECIAL REQUIREMENTS FOR HOUSE OFFICERS**

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### **CALIFORNIA MEDICAL LICENSE**

UCSD Medical Center encourages House Officers to apply for their medical license in California within 60 days of reaching eligibility for licensure. Once licensed, House Officers must maintain a full and unrestricted license in order to continue their appointment. Initial appointments will not be made for any House Officer who is on probation from the Medical Board or Osteopathic Board. Should a UCSD House Officer's license be placed on probation during training, the Program Director may request, and be granted, an exception to policy from the Associate Dean for Graduate Medical Education in order for the House Officer to continue in the training program. The Associate Dean for Graduate Medical Education will convene an Ad Hoc License Evaluation Committee and follow the established probationary license guidelines for existing UCSD House Officers.

The California Medical Practice Act permits medical and osteopathic school graduates to practice medicine within the scope of their ACGME approved training program without a license in this State while they are fully registered with the Medical Board of California as follows:

### **GRADUATES OF MEDICAL SCHOOLS IN THE US, PUERTO RICO AND CANADA**

- May train for the first year following graduation from medical school at the intern/PGY1 level for a period not to exceed 12 months from the commencement of the PGY1 year of training; and
- May continue for a second year of training in this State at the PGY2 level for a period not to exceed 12 months from the commencement of the PGY2 year of training. At the conclusion of the PGY2 year, the House Officer must be licensed in order to continue in training in this State; or
- US, Puerto Rican and Canadian medical school graduates must hold a full and unrestricted license to practice medicine in this State upon completion of 24 months of approved postgraduate medical education.

### **GRADUATES OF INTERNATIONAL MEDICAL SCHOOLS**

- An international medical school graduate must be registered with the Medical Board of California prior to commencement of training in an ACGME approved training program in this State.
- To qualify for licensure the physician must meet one of the following requirements:
  - Completion of a minimum of two years of ACGME postgraduate training; or
  - Completion of 12 months of ACGME postgraduate training and current certification by a member board of the American Board of Medical Specialties or a specialty board approved by the MBC - Division of Licensing; or
  - Completion of 12 months of ACGME postgraduate training and successful completion of the computerized clinical competency exam (SPEX) in the State of California.
- The international medical school graduate must hold a full and unrestricted license to practice medicine in this State upon completion of 36 months of ACGME approved postgraduate medical education in the United States.
- House Officers who have not obtained a license within the prescribed time frames will not be allowed further patient contact and may be terminated from their training program. For the duration of training, a full and unrestricted California medical license must be continually maintained as a prerequisite for continued appointment.

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## CRIMINAL BACKGROUND CHECK

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### **CRIMINAL BACKGROUND CHECK (CBC) POLICY: HOUSE OFFICER**

Completion of a satisfactory CBC will be a requirement for all newly appointed physicians in training sponsored by UCSD School of Medicine/UCSD Healthcare, effective 6/23/08. During training, once licensure is required, the ability to obtain and maintain licensure will serve as evidence of an ongoing satisfactory CBC.

#### **Procedures**

1. Contracts sent by the Office of Graduate Medical Education will include a statement about the requirement of a satisfactory CBC and completion of an attestation questionnaire as a condition of employment.
2. CBC's will be performed by reputable company through the usual business contracting arrangements.
3. Matched physicians - in - training and current House Officer will be asked to provide appropriate authorization, with the pertinent identifying information necessary to initiate the check.
4. Those undergoing the CBC will have an opportunity before any information is released to UCSD to review the data for accuracy.
5. The following databases would be searched:
  - a. Social Security Number Validation
  - b. Analyzed Social Security Number Search
  - c. County Criminal Records Search
  - d. National Criminal File Search
  - e. National Sexual Offender Database Search
  - f. Sanctions Base Search
  - g. Motor Vehicle Records/Driving Records Search
6. CBC reports for new physicians - in - training will be reviewed by the DIO/Associate Dean for Graduate Medical Education, the Chair of the Graduate Medical Education Committee and the physician - in - training's Program Director, in consultation with the Department's Education Committee, who will make a decision about entry into the program. There is no appeal to this decision.
7. CBC reports for current physicians in training will be reviewed by the DIO/Associate Dean for Graduate Medical Education, the Chair of the Graduate Medical Education Committee and the physician - in - training's Program Director, in consultation with the Department's Education Committee, who will make a decision about continuation in the program. Should a decision of termination be made, the appeal mechanism specified in UCSD's House Officer Policy and Procedure Document will apply.

### **NARCOTIC REGISTRATION**

A House Officer who is licensed in the State of California may apply for a Drug Enforcement Administration number by completing DEA Form #224 online. This form can be found on the DEA's website, <http://www.deadiversion.ucdoj.gov>

There is no charge for the DEA registration (the fee will be exempt) if the House Officer uses the UCSD business address on the application, and identifies the Director, Office of Graduate Medical Education, as the certifying official.

House Officers can use the UCSDMC Institution DEA number (by very clearly noting their 5 digit UCSDMC provider number) when they write inpatient prescriptions that are to be filled at UCSDMC, Hillcrest and Thornton sites. House Officers may not write prescriptions for controlled substances for discharged patients or outpatients without a personal DEA number even if the prescription is to be filled at UCSD Medical Center.

### **TRAINING AT AFFILIATED GME TRAINING SITES**

Additional screening and procedural requirements may be mandated by affiliated institutions while trainees are rotating through those sites as a part of their GME training program at UCSD.

## TRAINING IN ACLS AND PALS

House Officers who are in training programs involved with responding to code blue are required to be certified in a training program approved by UCSD Medical Center. Trainees in other programs are encouraged as well to become certified.

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## EDUCATIONAL ENVIRONMENT CONDUCIVE TO OPEN EXCHANGE OF IDEAS

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UCSD assures an educational environment in which House Officers may raise and resolve issues without fear of intimidation or retaliation by administration, faculty or staff through the following organizational system:

Members of the House Officer may bring forward issues regarding their working environment and their educational programs in a confidential and protected manner at any time to the Associate Dean for Graduate Medical Education, to the Chair of the Graduate Medical Education Committee who represents the GMEC and to the Director, Office of Graduate Medical Education. House Officers may also bring issues to the attention of the Graduate Medical Education Committee through their membership on that committee.

House Officers are also encouraged to discuss issues that require attention or resolution regarding their educational experience with their Chief Residents, Training Program Directors and with their Department Chair/Division Chief.

The approved UCSD Graduate Medical Education Academic Due Process and Leave Guidelines document ensures the house officer fair policy and procedure for academic or other disciplinary actions which may be taken against house officer.

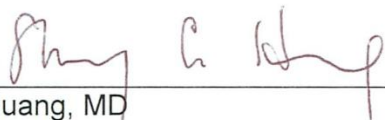
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## HOPPD REVIEW/APPROVAL

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The House Officer Policy and Procedure Document will be reviewed on an annual basis, or as otherwise needed, by the Graduate Medical Education committee and by the Associate Dean for Graduate Medical Education, the Director, UCSD Medical Center and by the Dean, School of Medicine. Revised documentation will be forwarded to all House Officers.

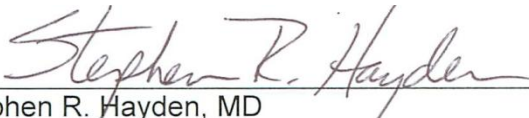
Approved:



Sherry Huang, MD  
Chair, Graduate Medical Education Committee

9/17/2012

Date



Stephen R. Hayden, MD  
Associate Dean for Graduate Medical Education and DIO

9/17/12

Date



Paul S. Viviano  
CEO UC San Diego Health System

10/1/12

Date



Maria C. Savoia, MD  
Dean for Medical Education

9/25/12

Date