

<b>Policy Name:</b>	Period of Concern		
<b>Section #:</b>	2.1	<b>Section Title:</b>	Performance Management
<b>Approval Authority:</b>	GMEC	<b>GMEC Approved:</b>	7/18/2025
<b>Responsible Executive:</b>	DIO	<b>Revised:</b>	4/2/2025
<b>Responsible Office:</b>	Office of Clinical and Health Affairs, Rutgers Health	<b>Contact:</b>	Institutional Coordinator

### 1. Reason for Policy

To establish compliance that meets Rutgers, state, federal, and accreditation regulations

### 2. Applicable ACGME Institutional Requirements

Section 4: Institutional GME Policies and Procedures

### 3. Resources

- i. Accreditation Council for Graduate Medical Education Institutional Requirements
- ii. Accreditation Council for Graduate Medical Education Common Program Requirements
- iii. Committee of Interns and Residents (CIR) Collective Bargaining Agreement
- iv. Rutgers University Policies
- v. New Jersey Board of Medical Examiners
- vi. American Board of Medical Specialties

### 4. Scope

The scope of this policy applies to all residents and fellows in training at Rutgers Health.

### 5. Terms

- i. Period of Concern: a period of focused improvement implemented when the housestaff is not demonstrating anticipated progress in one or more of the core competencies (also known as “remediation”)
- ii. Probation: a time limited disciplinary period implemented when the housestaff has not demonstrated anticipated progress after a period of concern or when the housestaff demonstrates severe deficiencies in one or more of the core competencies

### 6. Policy

- I. Purpose: To establish the process for addressing academic deficiencies within individual housestaff that are in a Rutgers Health GME training program.
- II. Procedure:
  - a. Academic deficiencies should be identified as early as possible and conveyed to the housestaff. This is done through timely evaluations, communications with the program director, CCC meetings, and meetings with the housestaff.
  - b. When a program director and/or the CCC is concerned that the housestaff is not demonstrating anticipated progress, a period of concern should be initiated.
  - c. The period of concern is meant to provide the housestaff with structured guidance that will allow them to demonstrate anticipated progress that is expected for their level of training.
    - i. When a period of concern is initiated, it must be done so at a meeting with the resident and documented in a letter to the resident that is entered into

All policies are subject to amendment. Please refer to the Rutgers Health Graduate Medical Education department for the official, most recent version.



their file. The meeting/letter documents:

1. The area[s] of concern, ideally associated with relevant competencies and/or milestones.
  2. Examples of the housestaff's performance that demonstrate the area[s] of concern.
  3. An outline of actions to be taken by the housestaff and the program to correct the identified deficiencies.
  4. Anticipated length of the period of concern or the anticipated date of the housestaff's next evaluation by the CCC.
- ii. The Chief Academic Officer (CAO)/Associate Dean for GME and the DIO must be notified that a housestaff member has been entered into a period of concern and a copy of the letter shall be sent to them.
  - iii. Program Directors are strongly encouraged to contact the respective CAO/Associate Dean before placing a housestaff into a period of concern.
  - iv. The decision to place a housestaff into a period of concern is not appealable. It is not considered an adverse academic action and shall not be reported as such to the extent permissible by state law or credentialing requests by state/federal agencies.
  - v. At the end of the defined period or after the next evaluation by the CCC, the program director may:
    1. Remove the housestaff from the period of concern due to demonstration of anticipated progress,
    2. Continue the period of concern and provide the housestaff with an updated letter,
    3. Issue a notice of non-renewal or non-promotion [see Promotions policy],
    4. Place the housestaff on probation [see Probation, Suspension, and Dismissal policy].
    5. This decision must be communicated to the housestaff in person and documented in a letter to the housestaff with copies to the CAO/Associate Dean and the DIO.
    6. The appeal process for a non-renewal is discussed in the Promotions policy. The appeal process for non-promotion and probation are discussed in the Probation, Suspension, and Dismissal policy.
  - vi. When a housestaff has been in a period of concern without demonstrating anticipated progress or has severe deficiencies in one or more core competencies, they may be placed on probation [see Probation, Suspension, and Dismissal policy].
    1. Examples of severe deficiencies include, but are not limited to, egregious breaches of professionalism or failure to meet basic standards of patient care or performance that are so deficient that the housestaff is not anticipated to reach the point where they are determined to be able to practice independently and without supervision.