

University of Missouri Family Medicine Residency Program	
Policy: <i>Selection, Promotion, and Dismissal Policy</i>	Revised: 4/25

Selection

The University of Missouri Family Medicine Residency Program participates in the National Residency Matching Program (NRMP) match. Applications will be accepted through the Electronic Residency Application Service (ERAS) September 1 through January 1 of each academic year. Candidates are selected for interviews based on a combination of academic performance, national examination scores, letters of recommendation, research, service, leadership, and personal statements. Family Medicine faculty and residents will interview candidates and complete an evaluation to be reviewed by the selection committee consisting of residency administration and chief residents. Applicants will be ranked based on strength of academics, commitment to Family Medicine, professionalism, interpersonal communication skills, and fit with the program. We also take into consideration leadership, community involvement, and evidence of resilience. Faculty and residents involved in the selection process will approve the final order of the rank list.

The University of Missouri is an equal opportunity employer. No candidate for the Residency Program will be denied consideration for the program because of age, sexual orientation, race, color, religion, sex, national origin, marital status, physical or mental handicap or veteran status unless same is a bona fide occupational qualification.

Candidate Criteria

Applicants must have:

- Graduated from medical school within 2 years of the program start date
- Currently be in a residency program OR have been in a full-time clinical practice within the last 6 months
- No USMLE Step 2 score is necessary to apply or interview, but is required before ranking
- You must have a strong commitment to, and evidence of, experience in Family Medicine
- Must be eligible for a Missouri license
- No minimum USMLE scores
- You must be able to speak fluent English
- If applicable we ask that you have your visa or can obtain one before the program start date
- We sponsor J1 visas only

Promotion

Residents are discussed and evaluated in the monthly Clinical Competency Committee. Residents meeting the following criteria will be promoted to the next level. Failure to meet any of these will result in remediation and extension of the current training year with possible dismissal from the program.

PGY1 – PGY2

- Successfully complete USMLE III or COMLEX III
- Hospital & Clinic Medical Records documentation up to date
- Passed all rotations (all remediation completed)
- Completed 150 clinic visits and demonstrating adequate progress towards 1000 hours in clinic over 3 years
- Procedure log up to date
- ITE - > 50%ile class national average equivalent or remediation plan completed
- Met conference attendance requirements
- ALSO, PALS, ACLS, BLS, NRP certification up to date
- Evaluations in New Innovations completed
- Portfolio up to date
- Satisfactory Semi-annual Evaluations by Advisor and CCC
- Completion of ACGME Resident Survey
- Completion of Annual Program Review Survey
- Case Conference in portfolio

PGY2-PGY3

- Hospital & Clinic Medical Records documentation up to date
- Passed all rotations (all remediation completed)
- Journal Club presentation in portfolio
- Procedure log up to date
- ITE - > 50%ile class national average equivalent score or remediation plan completed
- Conference attendance requirements met
- ALSO, PALS, ACLS, BLS, NRP certification up to date
- Evaluations in New Innovations completed
- Portfolio up to date
- Satisfactory semi-annual Evaluation by Advisor and CCC
- Completion of ACGME Resident Survey
- Completion of Annual Program Review Survey

PGY3-Graduation

- Hospital & Clinic Medical Records documentation up to date
- Successfully completed rotations
- Grand Rounds presentation in portfolio

- A minimum of 20 deliveries logged in New Innovations
- 2 Home visits documented in portfolio
- Completed 1000 hours in continuity clinics, including 40 weeks each year
- Procedure log up to date
- 5 transfer of care notes completed for complicated patients
- ITE - >50%ile class national average equivalent score or remediation plan completed
- Conference attendance requirements met
- QI project in portfolio
- Evaluations in New Innovations completed
- Portfolio up to date
- Satisfactory semi-annual & Final Evaluation by Advisor and CCC
- Completion of ACGME Resident Survey
- Completion of Annual Program Review Survey

Academic Deficiency Policy & Procedures for Remediation, Probation and Dismissal

The Clinical Competency Committee (CCC), along with the Program Director, may place a resident on remediation if the resident:

- 1) Does not pass Step 3 by June 1 of his/her first year
- 2) Is not providing adequate patient care
- 3) Is behaving inappropriately towards colleagues, staff, patients
- 4) Is not meeting the professional standards set forth by the residency, department, institution and/or the ACGME.

If a resident is placed on remediation, he/she will meet with the program director to discuss the reasons for his/her remediation. A plan for remediation and expectations for improvement will be outlined. The resident will then sign a letter which states why they are on remediation and that they understand the stipulations of remediation. The resident is made aware that an evaluation will take place at the end of the remediation period based on evaluations from his/her inpatient and outpatient work. The length of the resident's remediation period will be determined by the Clinical Competency Committee.

If the resident has shown adequate improvement during his/her remediation period, he/she will be released from remediation. If the resident has not satisfactorily improved in the areas discussed when put on remediation, the resident will be placed on probation. The resident is notified that this could extend his/her residency which is also determined by the CCC once the resident's probation is lifted.

If the resident has shown improvement during his/her probationary period, he/she will be released from probation and extension of residency (if necessary) will be determined as mentioned. If the resident has not satisfactorily improved in the areas discussed when put on probation, the resident will be notified of his/her termination.

Non-Renewal of a Resident Contract

The Program Director must provide a written notice to the resident indicating their contract for the following year will not be renewed. Justification for non-renewal of the contract must be adequately outlined. This written intent should be given to the resident no later than four months prior to the end of the current appointment.

If the primary reason for non-renewal of the contract occurs less than four months prior to the end of the current appointment, the Program Director must provide written notice as early as circumstances will allow, prior to the end of the appointment.

The resident must be allowed to implement the institution's grievance procedures, including those outlined in the Health Sciences Center's *"Policy to Address Resident Concerns"*.