1.0 Objectives

1.1 To set out a disciplinary framework for handling residents’ disciplinary issues within NUHS. A proper disciplinary framework serves these important objectives:
   a) to accord fair treatment to all residents;
   b) to facilitate professional psychological/medical help for residents;
   c) to discourage and manage errant resident behaviour;
   d) to promote desired resident behaviour by guiding/enforcing residents to take corrective actions;
   e) to maintain orderliness and sustain productivity at the workplace.

2.0 Scope

2.1 The policy applies to all NUHS residents, including residents at participating sites, but excluding residents on extended military leave.

3.0 Policy

3.1 Discipline is intended to discourage and manage an incorrect behaviour that has infringed any oral, expressed or implied conditions of service. It is meant to be corrective, rather than punitive. Whenever possible, the resident is put through a progressive system of disciplinary feedback to give the resident an opportunity to take corrective action and make improvement to achieve the desired standard of behaviour. Discipline management serves to maintain resident morale, create an atmosphere of orderliness and sustain productivity in the workplace.
3.2 The NUHS Residency Program will mete disciplinary action that corresponds with the severity and circumstances of the offence.

3.3 The NUHS Residency Program disciplinary framework is entirely an internal proceeding. As such, it is not subjected to the provisions of the Evidence Act under Singapore law (which imposes a certain standard on the burden of proof).

3.4 To give the resident an opportunity to take corrective action, progressive disciplinary action shall be administered. A resident who commits any of the offences will be disciplined according to the following steps:
   a. Counseling;
   b. Written Warning;
   c. Performance Improvement Plan;
   d. Suspension with Notice;
   e. Termination with Notice.

3.5 **Step 1: Counseling**
   The Supervisor/Program Director (PD) will be responsible to counsel and give constructive feedback for the resident to improve his/her minor undesired behaviour.

   Complete documentation is required to support that the resident is being treated fairly and is given the opportunity and guidance to improve. The program is responsible for the discipline documentation. If an errant resident shows no improvement after counseling, the Supervisor/PD will proceed to report the discipline matter to the DIO.

   DIO together with the panel consisting of a GMEC member and a clinical psychologist will meet up with the resident to provide the necessary counselling.

   If the resident is observed to be experiencing psychological distress, the Supervisor/PD can facilitate residents’ access to confidential counseling, medical, and/or psychological support services within NUHS.

   Residents can also choose to seek medical help from his/her choice of physician/psychologist/psychiatrist/certified counsellor either in private practice or other restructured hospitals.

   The physician/psychologist/psychiatrist/ certified counsellor will decide if information can be released to the SI during this period for the purpose of support and intervention by the relevant personnel in the SI.

3.6 **Step 2: Written Warning**
   The PD conducts a face-to-face meeting with the resident to hand over the Written Warning with a specified warning period, through the Head of Department (HOD). The PD files a copy of the letter into the resident portfolio for record. The PD also proceeds to submit all relevant supporting documents and a case summary through the HOD to the Designated Institutional Official (DIO). Copies of case summary shall have to be forwarded to the respective person/s as well if the resident falls in the following categories:
### Categories

<table>
<thead>
<tr>
<th>Categories</th>
<th>Notify</th>
</tr>
</thead>
<tbody>
<tr>
<td>TY (categorical)</td>
<td>Categorical PD</td>
</tr>
<tr>
<td>PGY1</td>
<td>Performance Review Subcommittee (PRS)</td>
</tr>
</tbody>
</table>

#### 3.7 Step 3: Performance Improvement Plan

If the conduct improves, the disciplinary process shall be terminated. If the conduct does not improve, the PD and Supervisor together conduct the Performance Improvement Plan with the Resident. The Performance Improvement Plan is warranted as the resident repeats an offence despite having already been issued a Written Warning on the same offence earlier. The PD monitors the corrective action plan of the employee accordingly.

#### 3.8 At any of the above steps, the resident may invoke the Employee Grievance Procedure if he/she feels that the disciplinary action served is unjustified.

Upon receipt of the resident's appeal, DIO shall obtain and forward to the Remediation sub-committee the full documentation of the disciplinary case:

- Resident's appeal letter;
- Investigation notes taken by department;
- Signed written statements obtained from Resident and witnesses(s);
- Any other pertinent documents

#### 3.9 Step 4: Suspension or Termination

If the employee still does not take corrective action or cease the continuance of the current offence within the stated deadline, the PD proceeds to report the discipline matter, through his/her HOD, to the DIO. The DIO forms the 5-member Review Committee (comprising 3 PDs/faculty of whom one is from the Remediation sub-committee and 2 senior/chief residents from independent programs), and appoints one Chair from the members, to conduct further investigation where required, and where a disciplinary charge is to be determined (suspension or termination). A representative from the GME office sits in as an observer. The DIO shall notify the Remediation sub-committee to carry out full investigation before the Review session.

#### 3.10 The GME office informs MOHH if the case escalates to the stage of suspension or termination, and gives updates on the progress of disciplinary action(s) taken against the resident thus far. A representative from MOHH may sit in as an observer.

#### 3.11 Because suspension or termination have a material impact on the resident's employment status and terms & conditions of service, therefore, before any of these penalties may be imposed on the employee, due inquiry must be held by the Review Committee.

#### 3.12 The Review committee will be supported by the Remediation sub-committee administrative staff. All documents pertaining to the case shall be classified as ‘confidential’ and be made available in hardcopy only to members of the Review Committee during the meeting. At the end of the meeting, these documents will be shredded.

#### 3.13 If the resident has issues to present, the resident may request to appear before the members of the Review Committee. The Review Committee can request for his/her PD to present the information relating to the academic, educational and clinical performance issues that have been raised. Information pertaining to the academic evaluation and clinical issues relating to the case will be forwarded to the resident in hardcopy.

#### 3.14 The findings and report enclosing recommended course of action will be sent in hardcopy to the PD, and to GME office. In the case of suspension or termination, this report will be sent to
the Vice Chairman – Medical Board (VCMB) (Education) and Chairman – Medical Board (CMB). Their approval is required before effecting the suspension or termination: The decision by the VCMB (Education) and CMB will be considered final.

3.15 The decision shall be documented in the Review Report and copies distributed to the PD, HOD and DIO. Upon approval, the program issues a letter which is hand-delivered to the resident to inform of the disciplinary outcome and the disciplinary penalty imposed upon him/her. The resident’s acknowledgement of the receipt of the letter must be obtained.

3.16 For suspension from work, it can be without salary for up to 1 calendar year. For some major offences, due to the gravity of the offence, a single occurrence already constitutes a just cause for dismissal. Where necessary, NUHS may specify major offences as just cause for dismissal, based on operational requirements unique to the entity.

4.0 Guidelines

4.1 Not all cases warrant suspension. Suspension from work should only be necessary under these circumstances:
- If on account of the alleged offence, the resident is rendered temporarily unsuitable to continue in his/her present job function or exercise responsibility in his/her present position;
- If the resident’s presence at the work place may be potentially detrimental to discipline or may hamper operations;
- If there is perceived risk of damage/sabotage to the NUHS (e.g., damage to property, damage to entity’s reputation, etc);
- If there is perceived risk that the entity’s case in the Review Committee may be jeopardized (e.g., by destruction of documents, evidence, etc).

4.2 During the period of suspension, the PD may also at his/her discretion impose additional injunctions on the resident. For example, the resident may be prohibited to enter the premises of the entity.

4.3 When an employee is not suspended from work pending disciplinary inquiry, where circumstances warrant, the program may at its discretion, impose some form of “injunction” on the employee’s performance of duty. An injunction shall be conveyed to the resident in writing, with a copy to the HOD and DIO.

4.4 The NUHS Residency Program may consider dismissal of the resident if the offence is of a nature that has a material impact on the resident’s suitability to continue employment with NUHS. For example:
- the resident has lost credibility or the resident's integrity has become questionable;
- the resident's continued employment will cause disrepute to NUHS;
- the resident will pose a hazard to the well-being of patients/fellow colleagues or to the interest of NUHS.
5.0 Workflow

Flowchart for Remediation, Suspension and Dismissal from NUHS Residency Program

Step 1: Supervisor/PD counsels Resident, and summarizes in a letter to Resident:
- contents of counseling
- follow-up action required
- any future steps if problem recurs
A copy of the letter is also filed by Program in the Resident’s Portfolio.

Step 2: If the situation does not improve, PD issues Written Warning (with specified warning period) through HOD, and if PD proceeds to submit a summary of case through HOD to DIO
- if the Resident is in TY (categorical), also sends summary of case to categorical PD
- if the Resident is PGY1, Supervisor/PD will notify AD’s office

Show Improvement?

Yes

Warning ends

No

Step 3: PD shall conduct face-to-face review meeting with Resident together with supervisor, to discuss corrective action, using the Performance Improvement Plan.

Show Improvement?

Yes

PIP concludes

No

PD recommends to DIO: Suspension or Dismissal. Review and approval by HOD and DIO are required.

Should the Resident wish to raise a Grievance/Complaint?

Yes

Resident submits written request to DIO, cc to PD/APO Supervisor, using Appeal Procedure Form, within 10 working days of receiving written notice of Disciplinary Action.

DIO reviews the case and makes decision/resolution.

Yes

Resident agrees?

No

During the hearing, the Resident may have the opportunity to appear before the Members of the Review Committee. This will be on a case to case basis, if the resident has issues to present. The Review Committee shall request the resident’s Program Director to present the information relating to the academic, educational and clinical performance issues that have been raised.

Review Committee reviews case and submit findings and report enclosing recommended course of action to VCMB (Edo) and CMR. A copy of the report is also sent to DIO office.

VCMB (Edo) and CMR make the final decision. The final decision is communicated to HOD and DIO.

A letter authorizing the disciplinary action is sent to Resident by the Program, hand-delivered or by certified mail.

If the resident is dismissed from NUHS Residency Program, s/he returns to MOH.

Legend

Case ends with notice copied to
- Resident
- Program
- DIO OFFICE
- MOH

DIO: Designated Institutional Official
PD: Program Director
HOD: Head of Department
AD: Associate Dean
CMR: Chairman, Medical Board
VCMB: Vice Chairman, Medical Board

Page 5 of 8
6.0 Forms

NUHS APPEAL PROCEDURE FORM

Appeal Procedure Form
(Completed Form is to be submitted to DIO office.)

Resident Name: ____________________________ Employee No.____________________
Residency Year:____________________________ Program:________________________

Grievance Details

Nature of grievance brought up on __________________ to __________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Action(s) taken
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

OUTCOME:
[ ] Grievance settled on ____________________________
[ ] Grievance unresolved on __________________________ due to __________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
[ ] Resident asked to appeal to ____________________________
[ ] Resident does not wish to proceed further from here.

__________________________   _______________________________    _____________________________
Name and Designation       Signature                        Date
Supervisor / PD / DIO
(pls circle accordingly)
NUHS PERFORMANCE IMPROVEMENT PLAN FORM

PERFORMANCE IMPROVEMENT PLAN (PIP) for NUHS RESIDENCY

<table>
<thead>
<tr>
<th>Name</th>
<th>Employee No</th>
</tr>
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<tbody>
<tr>
<td>Designation</td>
<td>Date Joined</td>
</tr>
<tr>
<td>Program</td>
<td>Residency Year</td>
</tr>
<tr>
<td>Period of PIP</td>
<td>_____ months (for period of 1 to 3 months) From ____________ to ____________</td>
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Section A - Beginning of Review Period

<table>
<thead>
<tr>
<th>S/N</th>
<th>Specific KPI/Performance or Behaviour Deficiency (Specify with examples)</th>
<th>Expected Performance or Behaviour Standard (Specify with examples)</th>
<th>Target Date of Achievement</th>
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<tbody>
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The above was discussed, communicated to staff and staff understood the above PIP requirements:

<table>
<thead>
<tr>
<th>Name of Resident</th>
<th>Signature &amp; Date</th>
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<tbody>
<tr>
<td>Name &amp; Designation of Supervisor (if applicable)</td>
<td>Signature &amp; Date</td>
</tr>
<tr>
<td>Name &amp; Designation of PD</td>
<td>Signature &amp; Date</td>
</tr>
<tr>
<td>Name &amp; Designation of DIO</td>
<td>Signature &amp; Date</td>
</tr>
<tr>
<td>Name &amp; Designation of HOD</td>
<td>Signature &amp; Date</td>
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For DIO Office Use

Comments:

<table>
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<tr>
<th>Name</th>
<th>Signature &amp; Date</th>
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</table>
### Section B - Result of PIP at End of Review Period

<table>
<thead>
<tr>
<th>Review Date</th>
<th>Expected Performance or Behaviour Standard</th>
<th>Above Target</th>
<th>On Target</th>
<th>Below Target</th>
<th>Comments by Supervisor/PD</th>
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</table>

### Section C - Recommendation Based on Section B (Please tick as appropriate)

<table>
<thead>
<tr>
<th>No</th>
<th>Recommendation</th>
<th>Tick</th>
<th>Supporting Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Resident has met the performance standards</td>
<td></td>
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<tr>
<td>2</td>
<td>Resident has not met the performance standards</td>
<td></td>
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<tr>
<td></td>
<td>(a) To extend PIP period for another ______ months</td>
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<tr>
<td></td>
<td>From _____________ to _____________</td>
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<td></td>
<td>Previous periods of extension (prior to this PIP):</td>
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<tr>
<td></td>
<td>From _____________ to _____________</td>
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<td></td>
<td>(b) To suspend training (Resident's performance is below expectation)</td>
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<td>Effective date: _________________</td>
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<td>Others (please specify):</td>
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</tbody>
</table>

Any Remarks:

The above was discussed, communicated to resident and resident understood the outcome:

<table>
<thead>
<tr>
<th>Name of Resident</th>
<th>Signature &amp; Date</th>
</tr>
</thead>
<tbody>
<tr>
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