



CUMMING SCHOOL OF MEDICINE Clinical Fellows Policy

Classification Clinical Fellowship Training	Table of Contents Purpose 1 Scope 2 Definitions 3 Policy Statement 4 Responsibilities 5 Instructions/Forms 6 Related Policies 7 History 8
Approval Authority Senior Associate Dean, Education	
Implementation Authority Postgraduate Medical Education	
Effective Date August 21, 2009	
Latest Revision June 23, 2020	

- Purpose** **1** The purpose of this policy is to outline the required processes and procedures for registration of Clinical Fellows at the University of Calgary's Cumming School of Medicine.
- Scope** **2** This policy applies to all Clinical Fellows who are engaged in Clinical Fellowship Training in a Department in the Cumming School of Medicine.
- **Learners registered in specialty or subspecialty Residency Training Programs leading to certification by the Royal College of Physicians and Surgeons of Canada and/or the College of Family Physicians of Canada in the Cumming School of Medicine at the University of Calgary are not considered to be Clinical Fellows**.*
- Definitions** **3** In this policy,
- a) "AH" means Alberta Ministry of Health.
- b) "AHS" means Alberta Health Services.

- c) “Associate Dean” means Associate Dean of Postgraduate Medical Education (PGME”) in the Cumming School of Medicine.
- d) “Areas of Focused Competence (Diploma)” or “AFC (Diploma)” as defined by the Royal College of Physicians and Surgeons of Canada, is a highly specialized discipline of medicine that does not meet the Royal College criteria for a specialty, foundation program or subspecialty. It represents either supplemental competencies that enhance the practice of physicians in an existing discipline, or a highly specific and narrow scope of practice that does not meet the criteria of a subspecialty. Physicians who have successfully completed all the requirements and who annually maintain their status as a Diplomate of the Royal College receive an added qualification known as a Diploma of the Royal College of Physicians and Surgeons of Canada, or DRCPSC.
- e) “CAPER” means the Canadian Post-MD Education Registry
- f) “Certificate” means Certificate of Clinical Fellowship Training, awarded by the Department or Division/Section Head and the Associate Dean, PGME on behalf of the Cumming School of Medicine and sealed by the University. The Certificate is verification that the Clinical Fellow has fulfilled all PGME training requirements of the Clinical Fellowship.
- g) “IRCC” means Immigration, Refugees and Citizenship Canada.
- h) “Clinical Fellow” as defined by CAPER is a post Residency trainee who is registered with the PGME Office of The Cumming School of Medicine and who, regardless of the source of funding, is pursuing training which will NOT be evaluated by supervising faculty for the purpose of Canadian licensure, or certification by the College of Family Physicians of Canada, le College des Médecins du Quebec, or the Royal College of Physicians and Surgeons of Canada (RCPSC). Individuals pursuing an AFC (Diploma) with the RCPSC are also considered to be Clinical Fellows.
- i) “Clinical Fellowship Committee” is a Committee made up of PGME subspecialists involved in Fellowship education. The Committee oversees the Clinical Fellowship program in any given subspecialty and reviews Clinical Fellows’ academic progress.
- j) “Clinical Fellowship Director” (also often referred to as Fellowship Director) means the physician and/or faculty member who has agreed to oversee the training and mentoring of the Clinical Fellow and Chair the Fellowship Program Committee.

- k) "Clinical Fellowship Training" means a defined period of mentored, advanced training for the purpose of enhancing the skills of a Clinical Fellow in pursuit of his/her chosen career path in accordance with PGME requirements.
- l) "APL" means Alberta Precision Laboratories
- m) "CMPA" means the Canadian Medical Protective Association
- n) "CPSA" means College of Physicians and Surgeons of Alberta.
- o) "Dean" means Dean of the Cumming School of Medicine.
- p) "Department" means a Department in the Cumming School of Medicine.
- q) "Department/Division/Section Head" means Head of a Department or Division/Section in the Cumming School of Medicine.
- r) "Division/Section" means a Division/Section in the Cumming School of Medicine.
- s) "Employer" means AHS or APL and represents the organization where workplace based clinical services are provided.
- t) "Funding Agency" means the organization that provides the salary and/or educational funding to support the Clinical Fellow during the Fellowship Training Period.
- u) "Identity Verification Check" means the documentation that non-Canadian Clinical Fellows must complete once in Alberta, and have certified by an Alberta Commissioner of Oaths.
- v) "IMG" means International Medical Graduate and refers to individuals who have an MD from outside Canada or the United States of America regardless of citizenship.
- w) "Letter of Application" means the initial written request from a prospective Clinical Fellow.
- x) "Letter of Offer" means the letter which stipulates the contractual terms and conditions of the engagement of a Clinical Fellow in Clinical Fellowship Training. It is issued jointly by PGME in the Cumming School of Medicine and AHS. The Letter of Offer includes details on specific work permit, registration, licensure, probationary requirements and funding provisions, and identifies the duration of contracted training.
- y) "MD" means medical doctor
- z) "MCC" means Medical Council of Canada
- aa) "Medical Services Agreement" means the written agreement between the Clinical Fellow and AHS which sets out the terms

and conditions under which the Clinical Fellow shall provide clinical services under the Fellowship.

- bb) "PARA" means Professional Association of Resident Physicians of Alberta.
- cc) "PGME" means Postgraduate Medical Education in the Cumming School of Medicine at the University of Calgary.
- dd) "Physiciansapply.ca" means the online portal of the MCC for credential verification in Canada
- ee) "Royal College" refers to the Royal College of Physicians and Surgeons of Canada.
- ff) "University" means University of Calgary.

Policy Statement 4

Office of Record for Clinical Fellows: **All Clinical Fellows must be registered with the Office of PGME**

Eligibility

- 4.1** Clinical Fellows must
 - Have been awarded a medical degree acceptable to the CPSA;
 - Have successfully completed a post MD residency training program or equivalent in Canada or elsewhere with training acceptable to the Department
 - Be pursuing advanced training beyond the requirements of residency certification.
- 4.2** Clinical Fellows must meet all CPSA requirements .
- 4.3** For Clinical Fellows trained outside of Canada, identity and credentials must be verified through physiciansapply.ca.
- 4.4** Clinical Fellows must show proof of current professional liability protection prior to engaging in the provision of any medical services as defined by the CPSA. This must be demonstrated through one or more of the following:
 - Membership in the CMPA
 - A policy of professional liability insurance that provides coverage of at least \$10 million issued by a company licensed to carry on business in the Province of Alberta
- 4.5** Clinical Fellows must comply with all appropriate University and AHS policies, procedures and other established requirements.

Clinical Fellows must sign any required AHS Medical Services.

- 4.6** Agreement and provide a copy to the PGME Office. If no agreement is required, AHS Medical Affairs must advise the PGME Office.
- 4.7** Failure to complete or comply with all requirements for eligibility may result in termination of the Fellowship.

Clinical Fellows who are not citizens or permanent residents of Canada

- 4.8** On entry into Canada, Clinical Fellows must hold a time-limited work permit issued by the IRCC that is valid for the entire period of Clinical Fellowship training at the Cumming School of Medicine.
 - 4.8.1** The work permit must identify the appropriate employing agency e.g. AHS or APL – NOT the University
- 4.9** Failure to obtain proper authorization before entry into Canada will automatically cancel the Clinical Fellowship.
- 4.10** Once in Alberta, Clinical Fellows must complete an Identity Verification Check that is certified in the presence of an Alberta Commissioner of Oaths
 - 4.10.1** The completed Identity Check must be kept on file with the Department and a copy provided to the Associate Dean PGME
- 4.11** Failure to provide proper identity verification will automatically cancel the Clinical Fellowship.
- 4.12** Failure to comply with all Canadian and provincial laws and directives, University policies, procedures and guidelines may result in immediate cancellation of the Clinical Fellowship.

5 Application

- 5.1** Candidates must submit a Letter of Application including:
 - Fellowship Framework
 - Full CV
 - Letters of Reference (minimum of 3)
 - Proposed area of study
 - Duration of Clinical Fellowship training
- 5.1.1** The application package will be forwarded to the appropriate Department for review

- 5.1.2** Applications received directly to Departments must be copied to the Office of PGME

6 Registration and Fees

- 6.1** Clinical Fellows must be registered through the Office of PGME and pay all required administrative fees.
- 6.2** Clinical Fellows must pay all tuition fees as assessed by the Registrar's Office of the University.
- 6.2.1** A University ONEcard will be issued allowing access to University resources (e.g. library) and email
- 6.3** Clinical Fellows must pay all registration and/or membership fees required by the CPSA, the CMPA and/or alternative professional liability provider

College of Physicians and Surgeons of Alberta

- 6.4** Clinical Fellows must be registered with the CPSA for the entire period of Clinical Fellowship
- 6.5** Clinical Fellows must pay all required fees to the CPSA and remain in good standing with the CPSA in order to continue Fellowship training.
- 6.6** IMG applicants for Clinical Fellowship must meet English language requirements as required by both the CPSA and by the Cumming School of Medicine.

7 Financial Support

- 7.1** Clinical Fellows provide clinical services during their educational registration, similar to individuals registered in a residency program, and must be appropriately compensated for this. Clinical Fellows must have financial support from a funding source approved by PGME. Fellows are not permitted to use personal financial resources to fully, or in part, support their training.
- 7.1.1** Stipend ranges for Clinical Fellows should fit within the guidelines of the Funding Agency from which the financial support derives and be in alignment with AHS policy.
- 7.1.2** It is recommended that stipend ranges reflect PARA levels of compensation for clinical services provided and, effective as of April 1, 2021, at minimum be equivalent to Post-Graduate Year 1 remuneration.

- 7.1.3** Clinical Fellows may be offered funding from their clinical supervisor's grant or research resources upon prior approval from the Associate Dean, PGME.
- 7.1.4** Benefits may be payable under some funding arrangements and if so should fit within the guidelines of the funding agency and of the Department
 - 7.1.4.1** Any compensation provided in lieu of health benefits should be equivalent to the amount provided under the PARA agreement.

Extender Shifts

- 7.2** Clinical Fellows may work fee for service extender shifts during their Clinical Fellowship as long as educational objectives are met and they are in good standing with the program.

- 7.2.1** Extender shifts must be approved in advance by the Fellowship Director.

- 7.2.2** Extender shifts cannot be used as a funding source for the Fellowship.

Fee For Service

- 7.2** Clinical Fellows may be invoiced by the sponsoring Department for recovery of educational fees and/or overhead including the University of Calgary Medical Group (UCMG) clinical practice levy where appropriate. This fee for service in extender shifts and through independent practice component billing in the Clinical Fellowship.

8 Clinical Fellowship Program

- 8.1** Each Department sponsoring Clinical Fellowships must have the following infrastructure in place:

- 8.1.1** A Fellowship Director

- 8.1.2** A Fellowship Committee which oversees Clinical Fellowships and is responsible for:

- Development of appropriate goals and objectives for each Fellowship
 - Development of appropriate evaluation procedures for each Fellowship
 - Review of and selection of Fellowship Candidates
 - Review of and decision-making authority for the probationary period

- Decisions regarding unsuccessful progress through or completion of the program, dismissal, and termination.
- Final approval of the award of a Fellowship Certificate

8.1.3 In addition to the above requirements, each AFC (Diploma) Program Fellowship Director and Fellowship Committee must:

- Adhere to the Royal College General Program “C” Standards for AFC Programs.
- Review the Fellow portfolios and advise PGME that all competencies for the Diploma have been achieved.

Clinical Fellowship Program Approval

8.2 Sponsoring Departments must submit documentation including the Fellowship Framework to the PGME Office for approval prior to offering Clinical Fellowship training

8.2.1 No funding support is available for Clinical Fellows or Departments through PGME

8.2.2 Upon approval of the propose Clinical Fellowship, the Associate Dean, PGME and AHS shall issue a joint Letter of Offer outlining the terms and conditions of the Clinical Fellowship.

Clinical Fellowship Training Program

8.3 Clinical Fellowship Training programs are time defined with a usual range in length from 6 months to 2 years

8.3.1 Extension to a training period must be approved by, and is in the sole discretion of, the Department Head, the Fellowship Committee and the Associate Dean, PGME and must be for valid educational purposes.

8.3.2 Extensions for Clinical Fellows who have a Work Permit are subject to approval by IRCC.

8.3.3 The maximum extension allowable is 1 year.

8.4 Clinical Fellows are expected to participate in all aspects of Fellowship training as outlined in the goals and objectives of training

8.5 An initial 2-month probationary period for 6-month fellowships, 4-month for 1-year fellowships and 6-month for 2-year fellowships is required for all Clinical Fellows; satisfactory

performance is required prior to the continuation of the Clinical Fellowship. The Fellowship Director and Clinical Fellowship Committee will make the determination of satisfactory performance no later than the probationary periods set out above

- 8.6 Clinical Fellowships must meet a minimum of 50% clinical requirements. The rest of the clinical time can be divided into research or other academic activities.

Clinical Service Provision

- 8.6 Clinical Fellows provide clinical services as part of their educational experience under the supervision of an identified Clinical Fellowship Supervisor at a recognized AHS facility or affiliated setting in the Province of Alberta.

- 8.6.1 AHS in consultation with CPSA may grant privileges for specific, unsupervised clinical practice activities.

- 8.7 Call requirements are negotiated with the Fellowship Director or are as outlined in the Letter of Offer.

Clinical Supervisors

- 8.8 Clinical supervisors are responsible for managing the nature and scope of the Clinical Fellow's clinical assignments, and supervising and providing feedback with respect to those activities.

Teachers and Learners

- 8.9 Clinical Fellows may be involved in instruction and training of medical students and/or residents and/or other health care professionals. Arrangements to participate in such activities must be made with the agreement of the Clinical Fellowship Director

- 8.9.1 Clinical Fellowship Directors should determine in advance if there are any Funding Agency restrictions to the amount of teaching that can be assigned to the Clinical Fellow.

- 8.9.2 As teachers and/or learners, Clinical Fellows are subject to the *Professional Standards for Faculty Members and Learners in the Cumming School of Medicine at the University of Calgary*.

Assessment

- 8.10** Clinical Fellows are subject to the assessment requirements established by the Clinical Fellowship Committee. Regular feedback as to progress should be provided.
- 8.10.1** Any unsatisfactory evaluation must be submitted to the Associate Dean, PGME or delegate for handling.
- 8.10.2** Funding agencies will be notified of an unsatisfactory final assessment by the Associate Dean, PGME as required by the Letter of Offer
- 8.10.3** Any remedial program or extension to training must be approved by the Department Head, the Fellowship Committee, the Associate Dean, PGME and, where needed, the Funding Agency. Any decision in this regard is solely within the discretion of the above noted parties, and is not subject to review or appeal.

Academic Appeals

- 8.11** Clinical Fellows do not have access to the PGME Appeals processes, either in respect of an unsatisfactory evaluation, dismissal from the program, or decisions regarding remediation or extension of training.

Termination

- 8.12** The Clinical Fellowship may be unilaterally terminated, at the conclusion of the Fellowship or at any time earlier, by the Fellowship Program, with the agreement of the Associate Dean, PGME and AHS, **or** by AHS alone in the case of 8.12.5 under the following circumstances, including:
- 8.12.1** Failure by the Clinical Fellow to progress as expected or meet educational program requirements
- 8.12.2** Failure by the Clinical Fellow to meet professional clinical standards.
- 8.12.2** Failure by the Clinical Fellow to adhere to applicable professional codes of conduct including those of the Cumming School of Medicine, AHS, and CPSA.
- 8.12.3** Behaviour or conduct that contravenes provisions of the form of registration held with the CPSA.
- 8.12.4** Failure by the Clinical Fellow to comply with any of the terms and conditions of the Letter of Offer
- 8.12.5** Violation of or failure to complete or comply with policy requirements of AHS.

8.12.6 Unsuccessful probation period will result in immediate dismissal from the program.

8.13 Termination Without Cause: Termination of the Clinical Fellowship may occur, for any reason, by written mutual agreement of both parties (Clinical Fellow and the Department), or if either party provides two (2) weeks' notice in writing to the other party, or in the case of the Department, if it provides a payment in lieu of notice equivalent to the stipend that would have been earned over the course of the notice period.

8.14 In all cases of termination, the PGME Office will notify AHS and CPSA

Disputes

8.16 Disputes involving Clinical Fellows and other members of the University or affiliated hospital shall be resolved in accordance with the policies of the academic or workplace jurisdictions in which the dispute arises.

8.16.2 Workplace disputes, including those in community-based clinics, shall be resolved in accordance with AHS policies and processes.

Certificate of Fellowship Training

8.17 Clinical Fellows must fulfill all requirements of the Clinical Fellowship as established by the Department before a Certificate can be issued

8.18 Certificates will **only** be issued for the Clinical Fellowship activity indicated on the Letter of Offer

8.19 Certificates must be first signed by the appropriate Department Head; then sent to the Associate Dean, PGME who will sign and affix the University seal accordingly.

Responsibilities 9

Responsibilities of the Fellowship Director

9.1 Verifies, prior to the start of the Clinical Fellowship, that all professional prerequisites have been met by the Clinical Fellow and that prior clinical training and experience is appropriate for acceptance into Clinical Fellowship training

- 9.2** Understands the rights, responsibilities and obligations of the Clinical Fellow for the training period in the Department including goals and objectives of training and evaluation processes
- 9.3** Advises the Clinical Fellow of appropriate University, AHS, CPSA and other policies, procedures and codes of conduct.
- 9.4** Advises the Clinical Fellow of probationary period criteria

Responsibilities of the Department Head

- 9.5** Notifies the Associate Dean of impending offers to Clinical Fellows, and liaises with the Associate Dean or delegate on issues relevant to Clinical Fellowship Training.
- 9.6** Advises Clinical Fellows of appropriate measures to resolve issues that may arise between a Clinical Fellow and his/her Clinical Fellowship Director.

Responsibilities of the Funding Agency

- 9.9** Approves the funding arrangements as identified in the Letter of Offer

Responsibilities of the Associate Dean

- 9.10** Ensures that all regulatory, licensure, legal and resource requirements are in place prior to issuing the Letter of Offer
- 9.11** Ensures adherence to the registration procedures of the University.
- 9.12** Provides general information and guidance to Departments/Divisions, Clinical Fellowship Supervisors, and to Clinical Fellows.
- 9.14** Issues a Certificate upon request at the end of Clinical Fellowship training identifying successful completion by the Clinical Fellow of the Clinical Fellowship as validated by the signature of the Department/Division Head

Approval Authority

- 9.15** Approval Authority is the Senior Associate Dean of Education, Cumming School of Medicine.
 - 9.15.1** Ensures appropriate rigour and due diligence in the development or revision of this policy.

Implementation Authority

9.16 Implementation Authority is the Associate Dean of PGME, Cumming School of Medicine, University of Calgary

9.16.1 Ensures that University staff are aware of and understand that implications of this policy.

9.16.2 Monitors compliance with the policy.

9.16.3 Regularly reviews the policy to ensure consistency in practice.

9.16.4 Sponsors the revision of this policy when necessary.

Instructions Forms 10

CPSA Registration for Post-Residency Fellowship Training
Request for Certificate of Clinical Fellowship Training
Template Letter of Offer

Related Policies 11

Professional Standards for Faculty Members and Learners in the Cumming School of Medicine at the University of Calgary.
AHS Medical Staff Bylaws and Rules.

History

Approved: Faculty Council
*Effective: **December 10, 2014***
*Revised: **June 23, 2020***