Department of Family Medicine

Residency Training Program

Sheldon M. Chumir Centre

8th floor, 1213 4th St. SW

Calgary, AB T2R 0X7

Current date

Dr. resident name

PGY-Level Resident, Family Medicine

University of Calgary

**REMEDIATION LETTER**

Dear Dr. name,

As you have been made aware, significant concerns about your performance and progress in residency training have recently been identified and documented. The Department of Family Medicine, Resident Progress Sub-Committee (RPS) has decided, after careful consideration, that you require a period of formal remediation to assist you in correcting the identified performance deficiencies.

The details of this period of remediation are outlined in the accompanying Remediation Plan.

Please note that as per the Cumming School of Medicine Postgraduate Medical Education (PGME) *Resident Remediation, Probation & Dismissal Policy*, remediation is defined as:

*“… a formal program of individualized educational support, assessment and monitoring designed to assist a Resident in correcting identified performance deficiencies. (Section 4)*

Your signature on this letter acknowledges receipt of this notice and the accompanying Remediation Plan.

Sincerely,

Dr. name, Program Director/Division Director

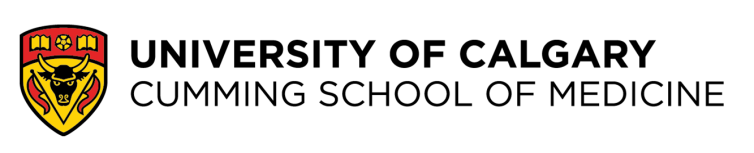
Family Medicine Residency Training Program

cc: Dr. Melinda Davis

Associate Dean, Postgraduate Medical Education

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Resident Signature Date



Postgraduate Medical Education

Family Medicine Residency Program

Dr. Name of Resident

PGY level Resident, Family Medicine

Date

**REMEDIATION PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| **Start Date** |  | **Program Director/Division Director** |  |
| **End Date** |  | **Remediation Supervisor** |  |
| **Duration** |  | **CanMEDs Coach (if applicable)** |  |
|  |  | **PGME Learning & Education Resource Specialist** | Erin Weir |

By signing this document (last page), you indicate that you understand the nature and structure of the Remediation Plan.

**BACKGROUND**

On date, the Resident Progress Subcommittee (RPS) reviewed documented deficiencies in your performance and decided to place you on a formal period of remediation.

**PERFORMANCE DEFICIENCIES IDENTIFIED (based on CFPC Evaluation Objectives);**

describe performance deficiencies also in narrative form if desired

delete any that don’t apply below

**THE PATIENT-CENTRED APPROACH**

* specify

**COMMUNICATION SKILLS**

* specify

**CLINICAL REASONING SKILLS**

* specify

**SELECTIVITY**

* specify

**PROFESSIONALISM**

* specify

**PROCEDURAL SKILLS**

* specify

**OTHER** (e.g. any deficiencies relating to CanMEDS-FM roles not covered above)

* specify

**STRUCTURE OF THE REMEDIATION PLAN**

**Schedule:**

Remediation will be for a total duration of specify number weeks.

The following experiences have been arranged to provide you an opportunity achieve a satisfactory level of competency in the areas identified above: insert rotations or weekly activity – tailor to situation

|  |  |
| --- | --- |
| **Weeks,** e.g. 1-2 | dates |
| **Rotation** |  |
| **Site** |  |
| **Rotation Preceptor** |  |
|  |  |
| **Weeks** |  |
| **Rotation** |  |
| **Site** |  |
| **Rotation Preceptor** |  |
|  |  |
| **Weeks** |  |
| **Rotation** |  |
| **Site** |  |
| **Rotation Preceptor** |  |

As a future Family Physician, you are expected to conduct yourself in a manner consistent with the expectations of the discipline. The following background documents outline these expectations:

CPSA Standards of Practice: <https://cpsa.ca/physicians/standards-of-practice/>

CMA Code of Ethics & Professionalism: <https://www.cma.ca/cma-code-ethics-and-professionalism>

CFPC Evaluation of Competence Objectives: <https://www.cfpc.ca/EvaluationObjectives/>

**Objectives**

In addressing the identified performance deficiencies, you are expected to meet the following objectives for a PGY- level resident by the end of the remediation period.

Some examples of methods for learning strategies and assessment and feedback to assist you in meeting these objectives are also provided; delete any that don’t apply

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| **The Patient-Centred Approach** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| **Communication Skills** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| --- | --- | --- |
| **Clinical reasoning** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| **Selectivity** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| **Professionalism** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| --- | --- | --- |
| **Procedural Skills** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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| --- | --- | --- |
| **Other (specify)** | | |
| **Specific Learning Objectives** | **Learning Strategies** | **Feedback and Assessment** |
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**Responsibilities of the Resident**

You are expected to be in full attendance during the remediation period. Any absence due to extenuating circumstances must be discussed with the Program Director/Division Director in advance or as soon as possible. You will be excused from regular resident activities including mandatory program events, academics, and call back clinics, in order to attend to the requirements outlined in this Remediation Plan.

During the remediation period, you are expected to participate in the following activities: see examples below – tailor as required

1. Assessments and targeted activities:
   1. Keep at least one (1) field note per day that records feedback you have received on areas of deficiency as described in this Remediation Plan.
   2. Acquire at least one (1) field note per half-day experience or shift.
   3. Review feedback and field notes that are provided for issues related to communication and non-clinical interactions with your preceptors, colleagues, program staff and faculty.
   4. Review feedback received from preceptors, staff, patients, and others, including your CanMEDs Coach (if assigned). This may include shift encounter cards, IPFNs, or other usual assessment tools used in the training program, as well as informal feedback, e.g. an email to the program.
   5. Review MRITERS and the ORITER completed by your remediation preceptor(s).
2. Meet with Dr. name, Remediation Supervisor, specify frequency to review feedback from assessments and discuss progress.
3. Meet with Dr. name, Division Director/Program Director, specify frequency to discuss progress and ongoing objectives.
4. Meet with a CanMEDS coach for up to \_\_\_ sessions. The coach will be organized through the PGME Learning and Education Resource Specialist [pdassist@ucalgary.ca](mailto:pdassist@ucalgary.ca) Feedback will be solicited and reviewed regarding your engagement and professional conduct. Optional, delete if not required
5. Keep notes of all feedback and suggestions provided by preceptors and during meetings. Regularly review and reflect on your notes & assessments and set ongoing personal learning goals.
6. Meet with Erin Weir, Learning & Education Support Specialist in the PGME office to review and build learning strategies [pdassist@ucalgary.ca](mailto:pdassist@ucalgary.ca) 403-210-7670. Optional, delete if not required

**Note**: It is your responsibility to arrange these meetings.

**Responsibilities of the Remediation Supervisor:**

During the remediation period, Dr. name agrees to: these are examples-modify as required

1. Provide overall supervision and learning experiences during the remediation period.
2. Meet with you specify frequency to discuss and review progress, in attaining the objectives of remediation; and keep records of these meetings.

1. Help you in achieving the objectives of remediation by: see examples below – tailor as required
2. Clarifying expectations around identified difficulties you are having within the following FM Skill Dimensions: delete those that don’t apply
   1. The Patient-Centred Approach
   2. Communication Skills
   3. Clinical Reasoning Skills
   4. Selectivity
   5. Professionalism
   6. Procedure Skills
   7. Other (Specify)
3. Directing you to other recommended specific sources of information when requested by you.

**Responsibilities of the Program Director/Division Director**

During the remediation period, Dr. name agrees to: these are examples – modify as required

1. Meet with you specify frequency to discuss and review progress, in attaining the objectives of your remediation and to keep records of these meetings.
2. Develop a comprehensive assessment schedule for you, including the use of midterm remediation (MRITERs) and the overall remediation in-training evaluation report (ORITER) to be completed by your rotation preceptor(s).
3. Consult with the RPS on the outcome of remediation and communicate the decision to you.
4. Approve time to access coaching, counselling, medical appointments, or advising services as required.

Concerns that are outside the scope of these roles should be directed to appropriate resources such as the **AMA Physician Family Support Program (PFSP)** **- Phone 1-877-767-4637** [**https://www.albertadoctors.org/services/physicians/pfsp**](https://www.albertadoctors.org/services/physicians/pfsp)

**OUTCOME OF REMEDIATION**

Please note that the decision about whether or not you pass this remediation period is made by RPS and NOT by any individual preceptor or group of preceptors. The RPS will consider all of the relevant assessment forms and data and feedback provided through the course of the remediation period in order to determine the outcome.

The decision of the RPS will be one of the following:

**Successful** – Requirements of the Remediation Plan have been met. RPS will usually decide that a resident has been successful if all the stated objectives have been met.

Successful completion of remediation will result in reinstatement in regular training in the program. An extension of training will be necessary unless remediation has been completed in a longitudinal manner.

**Unsuccessful** – Requirements of the Remediation Plan have not been fully met. RPS will usually decide that a resident has been unsuccessful when there is documented failure to meet the specific objectives listed above or insufficient improvement in one or more objectives identified as a requirement in the Remediation Plan.

RPS will also determine the remediation has been unsuccessful where there has been any occurrence of a serious patient safety incident.

An unsuccessful outcome will result in RPS considering placing you on probation or implementing a further period of remediation.

**The program will notify the PGME Office of the outcome of remediation and will submit for approval, the number of weeks required to extend training as a result of remediation.**

**ACKNOWLEDGEMENTS**

I resident, understand the following about the Remediation Plan:

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| --- | --- |
|  | Resident  Initials |
| * The identified areas requiring performance improvement |  |
| * The expected level of performance on remediation objectives/competencies |  |
| * The nature of the Remediation Plan, including the reasons for remediation |  |
| * The time frame of the remediation period |  |
| * The assessment modalities to be used |  |
| * The consequences of successful/unsuccessful remediation |  |
| * I have been given the chance to clarify all components of the Remediation Plan |  |

You are welcome to contact the Associate Dean Postgraduate Medical Education, Dr. Melinda Davis, to discuss the implications of remediation.  She can be reached via email at [mjdavi@ucalgary.ca](mailto:mjdavi@ucalgary.ca) or by contacting her administrative assistant, Crystal Boisselle, at [crystal.boisselle@ucalgary.ca](mailto:crystal.boisselle@ucalgary.ca).

The Family Medicine policy documents regarding [*Resident Assessment*](https://cumming.ucalgary.ca/sites/default/files/teams/128/Education/Assessment%20Operating%20Standard_2022.pdf), [*Resident Remediation, Probation, & Dismissal*](https://cumming.ucalgary.ca/sites/default/files/teams/128/Education/Remediation-probation-dismissal-policy-2018-09-06.pdf)are on the Family Medicine Departmental website, and those regarding[*Resident Appeals*](https://cumming.ucalgary.ca/sites/default/files/teams/6/policies/pgme-resident-appeal-policy-final-jul2018.pdf) are on the University of Calgary Postgraduate Medical Education (PGME) website <https://cumming.ucalgary.ca/pgme/current-trainees/residency-training-policies>

Please refer to these regarding any questions you might have. Please note that if implementation of the Remediation Plan has to be deferred pending the outcome of an appeal, this will result in a mandatory unpaid leave from the program. It is in the learner’s best interest to continue their program in a timely manner with the learning supports provided. Should the appeal be upheld, the remediation decision and plan will be reviewed by the RPS.

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| --- | --- |
|  | Resident  Initials |
| * I have been made aware of these policy agreements |  |

**SIGNATURES**:

By signing this document, I confirm that I understand the nature and structure of the Remediation Plan. This does not preclude me from pursuing appeals as allowed under the University of Calgary PGME’s Policies.

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| *Signature of Resident* |  | *Date* |
| *Signature of Remediation Supervisor* |  | *Date* |
| *Signature of Program/Division Director* |  | *Date* |
|  |  |  |
| *Signature of Associate Dean, Post Graduate Medical Education, University of Calgary* |  | *Date* |