

**POSTGRADUATE MEDICAL EDUCATION  
Resident Remediation, Probation & Dismissal**

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Approval Authority PGME Committee	
Implementation Authority Associate Dean, PGME	
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Purpose 1 The purpose of this policy is to outline the principles governing Remediation, Probation, and Dismissal of Residents in Residency Training Programs in the Cumming School of Medicine at the University of Calgary.

Scope 2 This policy applies to all Residents in all Programs in the Cumming School of Medicine at the University of Calgary.

In this document, the word “**must**” is used to denote something that is required, and the word “**should**” is used to denote something highly recommended.

Definitions 3 In this policy,

- a) “Assessment” means a systematic collection and interpretation of performance feedback data for a Resident to support and document the progressive development of competencies. In some Programs “Evaluation” is used interchangeably with “Assessment.
- b) “Associate Dean” means the Associate Dean of Postgraduate Medical Education in the Cumming School of Medicine at the University of Calgary. The Associate Dean is the Faculty member responsible for the overall conduct and supervision of PGME within the faculty
- c) “CanMEDS and CanMEDS FM” refers to the CanMEDS Physician Competency Framework, and subsequent revisions, outlining the competencies physicians require to effectively meet the needs of the people they serve.
- d) “CBME” means Competency Based Medical Education that is a medical curriculum paradigm that focuses on outcomes (acquisition of skills, knowledge, competencies or Program elements) that may or may not be constrained by defined periods of time, such as Rotations, for their acquisition. In this Policy, CBME Program refers to both an entire Program or a stream within a Program that is based on CBME.
- e) “CFPC” means the College of Family Physicians of Canada.
- f) “CFPC Evaluation Objectives” refers to defining competence for the purposes of certification by the College of Family Physicians of Canada: the evaluation objectives in family medicine<sup>1</sup>
- g) “Competence Committee” means a sub-committee of the RPC in RCPSC CBME Programs that is tasked with monitoring Resident performance and making decisions with respect to Resident progress within the Program, specifically, readiness for increasing professional responsibility and Promotion through the Stages of Training as well recommending and monitoring

Focused Learning Plans, Remediation and Probation.

- h) “CPSA” means the College of Physicians and Surgeons of Alberta
  - i) “Dismissal” means the dismissal of a Resident from a Program as set out in Section 6.
  - j) “Educational Experience” means an experience in a particular environment or set of environments selected/selected to support the Resident’s achievement of competencies. This may or may not occur in a block, or Rotation.
  - k) “Home Program” means the Program the Resident is registered in.
  - l) “ITER” means In-Training Evaluation Report.
  - m) “Not Progressing as Expected” means a status in RCPSC CBME Programs that a Resident is not progressing along the competency continuum as expected and includes a designation of “Failing to Progress.
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- n) “Off-Service” means activities in clinical service areas which are not part of the Home Program
- o) “PGME” means Postgraduate Medical Education.
- p) “PGY level” means a 12-month period of residency at a specific training level. It may not be contiguous – for instance if there has been a leave of any sort.
- q) “Preceptor” means a physician directly responsible for a period or segment of the Resident’s professional medical training, teaching and instruction and who contributes to the evaluation process. This includes a consulting physician. In CMBE Programs, it means a physician who is responsible to teach, guide, observe, and assess the educational activities of a Resident. “Supervisor” may be used interchangeably with “Preceptor”.
- r) “Probation” has the meaning detailed in Section 6.
- s) “Program” means a RCPSC or CFPC accredited PGME Program in the Cumming School of Medicine at the University of Calgary.
- t) “Program Director” means the person responsible for the overall conduct of a PGME Program in a discipline and is responsible to the Associate Dean.
- u) “RCPSC” means the Royal College of Physicians and Surgeons of Canada, the body responsible for Program accreditation, examination and Resident certification for RCPSC disciplines.
- v) “Remediation” has the meaning detailed in Section 4.
- w) “Rotation” is defined by each Program as a required element of training and may consist of one of more four (4) week blocks. See also Educational Experience above.
- x) “RPC” means Residency Program Committee, and is the committee or delegated subcommittee that assists the Program Director in planning, organization, and supervision of the Program. “Residency Education Committee (REC)” or “Residency Training Program (RTC)” are equivalent terms used in some Programs. This also means the Family Medicine Postgraduate Education Committee and includes the Resident Performance Subcommittee in CFPC Programs.
- y) “Resident” means a physician registered in a PGME training Program that is administered by the Cumming School of

Medicine at the University of Calgary and leads to RCPSC or CFPC certification

- z) “Stages of Training” in RCPSC CBME Programs means four developmental stages: transition to discipline, foundations of discipline, core of discipline, and transition to practice; each stage having its own set of markers for learning and Assessment.

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### Policy Statement

#### Remediation

Remediation is a formal program of individualized educational support, assessment, and monitoring designed to assist a Resident in correcting performance deficiencies.

- 4.1 Remediation is required when ongoing informal feedback and support have not been fully effective in correcting a performance deficiency, or when a Resident has failed a Rotation, Program requirement, or Education Experience.
  - 4.1.1 Failed Rotation is indicated by an overall Rotation Assessment of “marginal”, “borderline”, “inconsistently”, or “partially meets expectations for level of training”, “unsatisfactory”, “does not meet expectations for level of training”, or an ITER score of “1/5” or “2/5”. Refer to Policy on Resident Assessment.
  - 4.1.2 Any serious professionalism or patient safety issue/concern may also be defined as a performance deficiency and lead to failing a Rotation or Educational Experience (at the discretion of the RPC).
- 4.2 In RCPSC CBME Programs the Competence Committee monitors a Resident’s progression through the Stages of Training on the basis of completed Milestones and EPAs during Educational Experiences and any other required Program elements. The Competence Committee reviews all data in a Resident’s file to determine if they are progressing as expected along this continuum and when they should be promoted to the next Stage of Training.
  - 4.2.1 The Competence Committee may recommend Remediation when it has determined that a Resident is Not Progressing as Expected.
  - 4.2.2 This could occur if there is a lack of Assessment data in support of competence.
  - 4.2.3 Remediation will only be required if this recommendation is ratified by the RPC.
- 4.3 Remediation consists of up to twelve (12) weeks, during which time the Resident will receive monitoring of performance as well as support to meet the objectives specified in the Remediation.

- 4.4 Remediation may be required in one or more of the CanMEDS or CanMEDS FM competencies and/or CFPC skill dimensions.
- 4.4.1 When Remediation is required in CanMEDS domains and/or CFPC skill dimensions this may be included within scheduled Rotations, if appropriate, at the discretion of the RPC or Competence Committee.
- 4.5 At the discretion of the RPC or Competence Committee, Remediation may include repeating or new Rotations, Educational Experiences or Program-specific requirements.
- 4.5.1 Rotations and Educational Experiences will be chosen for educational reasons.
- 4.5.2 In addition to remedial clinical Rotations or Educational Experiences, nonclinical remedial activities may be required of the Resident relating to CanMEDS competencies and/or in the CFPC Evaluation Objectives.
- 4.5.3 The RPC or Competence Committee will determine the location of Rotations/Educational Experiences during Remediation; they will usually be arranged at University of Calgary affiliated sites.
- 4.5.4 Rotations /Educational Experiences will normally be in the Home Program. A resident pursuing transfer to another program may be permitted to undertake a single block elective in that discipline. The resident must agree to disclosure of the remediation contract to the receiving program and approval will be required from the home Program Director, receiving Program Director, and the Associate Dean, PGME.
- 4.5.5 Rotations/Educational Experiences outside of University of Calgary affiliated sites will only be allowed in exceptional circumstances and must have prior approval from the Associate Dean.
- 4.5.6 When circumstances require an Off-Service Rotation or Educational Experience, the Off-Service Program Director must be informed of the Resident's status. They must be provided with a copy of the Remediation document and agree in writing to provide the Remediation Educational Experience.
- 4.6 A Resident with personal or medical factors that are causing or contributing to performance deficiencies **must** bring this to the attention of the Program Director.

- 4.6.1 A report from the caregiver about the Resident regarding compliance, engagement and progress with personal or medical issues must be submitted to the Program Director.
- 4.6.2 In instances where personal or medical issues which have been disclosed to the Program are present, but do not interfere with the Resident's ability to meet the objectives of Remediation, the Resident may be allowed to continue, at the discretion of the Program Director.
- 4.6.3 If the caregiver deems the Resident unable to continue in the Program the Resident must take a medical leave of absence until deemed fit to return to the Program by an appropriate caregiver.
- 4.6.4 A Resident on medical leave under 4.6.3 will be unable to participate in the Program's Educational Activities.
- 4.6.5 Documentation in support of a caregiver's determination that the Resident is deemed fit to return to the Program is required before a Resident may begin/resume Remediation and Educational Experiences.
- 4.7 Extension of training may be required following successful Remediation unless the Resident was permitted by the Program to use either elective time or scheduled Rotations or Educational Experiences for remedial activities and still fulfill the requirements of the current PGY level and/or Stage of Training.
  - 4.7.1 Any anticipated extension of training implies a change in promotion and/or Program completion date and therefore must be approved by the Associate Dean. Refer to Policy on Resident Promotion.
  - 4.7.2 Waivers of training do not apply to such extensions.
- 4.8 The Resident **must** comply with Remediation.
  - 4.8.1 A Resident who is on Remediation is expected to focus on the performance deficiencies that have been identified.
  - 4.8.2 Other Program requirements (such as research presentations, teaching etc.) may be suspended during Remediation at the discretion of the Program Director or Competence Committee.
  - 4.8.3 Failure of Remediation may result in Probation.
  - 4.8.4 **Failure to comply with Remediation constitutes grounds for Dismissal.**

## 5 Remediation Process

- 5.1 The Program Director, or delegate, **must** meet with the Resident to discuss Remediation.
- 5.2 Remediation **must** be approved by the RPC and the decision documented in the minutes.
- 5.3 Remediation must be documented in a letter that is sent to the Resident and a copy to the Associate Dean, which outlines the Remediation and **must** include:
  - 5.3.1 A statement of the Resident's performance deficiencies that have led to the need for Remediation.
  - 5.3.2 The learning experiences and other supports that will be provided to assist the Resident to address performance deficiencies.
  - 5.3.3 The objectives of Remediation.
  - 5.3.4 How the Resident will be assessed to determine that Remediation objectives have been accomplished.
  - 5.3.5 A tentative (non-binding) statement regarding the Resident's promotion date, whether unaltered or delayed due to a requirement for an extension of training. Refer to Policy on Resident Promotion.
  - 5.3.6 Any special reporting requirements.

## 6 Probation

Probation is a period of training during which a Resident is expected to correct serious performance weaknesses that are felt to jeopardize their successful completion of the Program. Probation implies the possibility of dismissal from the Program if sufficient improvement is not identified at the end of Probation. It is composed of a formal program of individualized educational support, assessment, and monitoring designed to assist a Resident in correcting the serious performance deficiencies identified.

- 6.1 The CPSA and Alberta Health Services **must** be notified when a Resident is placed on Probation.
- 6.2 A recommendation by a Competence Committee in a RCPSC CBME Program for Probation must be ratified by the RPC to be required.
- 6.3 The RPC or Competence Committee **must** consider Probation when:
  - 6.3.1 A Resident has failed a single Remediation, or



When a Resident 's performance deficiencies are such that successful completion of the Program is in jeopardy

- 6.3.2 A Resident has failed two Rotations within a 12-month period, or
  - 6.3.3 A Resident has exceeded a cumulative maximum of twelve (12) weeks of Remediation in the same CanMEDS or CanMEDS FM domain during the overall Program, or
  - 6.3.4 A Resident has failed Remediation of any Program requirements in a PG level, or
  - 6.3.5 In RCPSC CBME Programs, when a Competence Committee determines that a Resident is Not Progressing as Expected and the performance deficiencies are such that successful completion of the Program is in jeopardy.
- 6.4 Probation consists of a twelve (12) week period, during which the Resident must receive close monitoring of performance and progress and demonstrate sufficient improvement as outlined in the Probation document.
- 6.4.1 While the Program's assistance, educational support, and close monitoring will be in place during this time, the purpose of Probation is for the Resident to demonstrate his/her ability to improve performance to the level necessary to continue in the Program.
  - 6.4.2 The entire Probation **should** be completed without a break in order to monitor and maintain progress. It is recognized that in certain circumstances (such as contract mandated vacation) an interruption may occur which will not count towards the overall duration of Probation.
- 6.5 Probation will commence at the discretion of the RPC without undue delay, but is dependent on capacity for specific activities, availability of Preceptors and other required resources. At the discretion of the RPC, a Resident may continue with regularly scheduled Rotations/Educational Experiences or may be asked to take a leave of absence until Probation can commence.
- 6.6 A Resident with personal or medical issues that are causing or contributing to performance deficiencies must bring this to the attention of the Program Director.
- 6.6.1 A report from the caregiver about the Resident regarding compliance, engagement and progress with personal or medical issues must be submitted to the Program Director.

- 6.6.2 In instances where personal or medical issues which have been disclosed to the Program are present, but do not interfere with the Resident's ability to meet the objectives of Probation, the Resident may be allowed to continue, at the discretion of the Program Director.
  - 6.6.3 If the caregiver deems the Resident unable to continue in the Program the Resident must take a medical leave of absence until deemed fit to return to the Program by an appropriate caregiver.
  - 6.6.4 A Resident on medical leave under 6.6.3 will be unable to participate in the Program's Educational Activities.
  - 6.6.5 Documentation in support a caregiver's determination that the Resident is deemed fit to return to the Program is required before a Resident may begin/resume Probation and Educational Experiences.
- 6.7 Probation may include new or repeating Rotations, Educational Experiences or Program-specific requirements at the discretion of the RPC or Competence Committee.
- 6.7.1 Rotations/Educational Experiences will be chosen so that the Resident's ability to continue in the Program can be assessed.
  - 6.7.2 In addition to performance in Rotations or Educational Experiences, demonstration of adequate performance relating to CanMEDS or CanMEDS FM competencies and/or in the CFPC Evaluation Objectives may be required.
  - 6.7.3 The RPC or Competence Committee will determine the location of Rotations/Educational Experiences during Probation; they will usually be arranged at University of Calgary affiliated sites.
  - 6.7.4 Rotations/Educational Experiences will usually be in the Home Program and the Resident will normally not be allowed to do elective Rotations.
  - 6.7.5 Rotations/Educational Experiences outside of University of Calgary affiliated sites will only be allowed in exceptional circumstances and must have prior approval from the Associate Dean.
  - 6.7.6 When circumstances require an Off-Service Rotation or Educational Experience, the Off-Service Program Director must be informed of the Resident's status. They must be provided with a copy of the Probation document and agree in writing to provide the Educational Experience.

- 6.8 Extension of training may be required following successful Probation unless the Resident was permitted by the Program to use either elective time or scheduled Rotations for Probation and still fulfill the requirements of the current PGY level/Stage of Training. Refer to Policy on Resident Promotion.
  - 6.8.1 The approval of the Associate Dean is required for any extension of training in a Program.
  - 6.8.2 Waivers of training do not apply to such extension.
- 6.9 A Resident may not transfer to another program while on Probation.
- 6.10 Time taken for vacation or a leave of absence for personal or medical reasons will not be counted as part of Probation.
- 6.11 **Failure to comply with Probation constitutes grounds for Dismissal.**
- 6.12 **Failure of Probation may result in Dismissal.**

## 7 Probation Process

- 7.1 The Program Director **must** meet with the Resident to discuss the Probation.
- 7.2 Probation **must** be approved by the RPC and the decision documented in the minutes.
- 7.3 Probation **must** be documented in a letter that is sent to the Resident and a copy to the Associate Dean, which outlines the Remediation and **must** include:
  - 7.3.1 A statement of the Resident's performance deficiencies that have been documented.
  - 7.3.2 The learning experiences and other supports that will be provided to assist the Resident to address these performance deficiencies.
  - 7.3.3 The objectives of Probation.
  - 7.3.4 How the Resident will be assessed to determine that Probation objectives have been accomplished.
  - 7.3.5 A tentative (non-binding) statement regarding the Resident's promotion and/or completion date, whether unaltered or delayed due to a requirement for an extension of training.
  - 7.3.6 Any special reporting requirements.

## 8 Assessment during Probation

The Resident must be assessed, in writing, at the end of each Rotation/Educational Experience and must meet with the Program Director, or delegate, to review the Assessment of each Rotation/Educational Experience.

- 8.1 While up to a four-week delay is generally allowed, Programs should endeavor to provide Rotation/Educational Experience Assessments as soon as possible after the completion of each Rotation/Educational Experience.
- 8.2 Completion of Assessments may require the convening of groups of Preceptors, making a four-week delay unavoidable. If this occurs, the Resident should be informed of the date that he/she would receive the Assessment.
- 8.3 Appeals are not permitted regarding each Rotation/Educational Experience Assessment during Probation; **only the decision at the conclusion of Probation may be appealed.**
- 8.4 The RPC or Competence Committee must convene to determine the overall outcome of Probation within FOUR (4) WEEKS of completion of the final Rotation/Educational Experience.
- 8.5 The Resident will be provided with scheduled Rotations/ Educational Experiences while awaiting formal notification by the RPC.
- 8.6 If Probation is successful as outlined in the Probation document the Resident **must** be notified in writing and a copy sent to the Associate Dean. This notification **must** include:
  - 8.6.1 A statement that Probation has been successfully completed.
  - 8.6.2 The Resident's promotion and/or completion date, if this has changed. Refer to Policy on Resident Promotion.
- 8.7 If Probation is unsuccessful as outlined in the Probation Document, or the RPC must convene to made this decision,
  - 8.7.1 The Resident will NOT be provided any scheduled Rotations/ Educational Experiences while awaiting formal notification of the RPC's decision.
  - 8.7.2 The Resident must take an unpaid leave of absence until the RPC has delivered its decision.
  - 8.7.3 The RPC and/or Competence Committee will convene to discuss the formal Dismissal of the Resident.

## 9 Dismissal: Performance Deficiencies

- 9.1 If a Resident is not successful in meeting objectives for Probation OR there is insufficient improvement in one or more objectives identified as a requirement in Probation, the Resident will be Dismissed from the Program by the RPC.
  - 9.1.1 This decision is not made until the Resident has completed the full Probation.
- 9.2 Failure of a Resident to comply with Remediation or Probation constitutes grounds for Dismissal.
- 9.3 The Resident **must** be advised in writing by the Program Director of the decision for Dismissal and the reasons for the decision and a copy must be sent to the Associate Dean including the rationale for Dismissal.
- 9.4 The Resident should be advised of the right to appeal and be directed to the appeal policies. Refer to Policy on Resident Appeals.
- 9.5 When a Resident is Dismissed, he/she must immediately surrender all University of Calgary and Alberta Health Services property, such as ID badges, pagers, etc., and electronic access.
  - 9.5.1 The PGME office will notify Alberta Health Services, the Professional Association of Residents of Alberta, and the CPSA immediately when a Dismissal occurs.

## 10 Dismissal: Other Grounds

- 10.1 There may be other grounds, such as criminal, academic, or professional misconduct that warrant Dismissal or immediate suspension

## 11 Disclosure

- 11.1 It is essential that everyone associated with a Program maintain professionalism and confidentiality regarding any problems that Residents are experiencing. This requires the application of discretion, professionalism, compassion, and use of objective criteria for assessment
- 11.2 Tailoring the Resident's experience appropriately, addressing individual Resident's needs, ensuring patient safety, and meeting other goals of PGME may require carefully considered disclosure of a Resident's performance deficiencies.

Instructions

- 11.2.1 Therefore, with due cause, Program Directors may exercise their discretion in informing Preceptors and/or other appropriate educational leaders of a Resident's difficulties and individualized goals and plans.
- 11.2.2 Such disclosure does not and should not imply harmful interference or bias in the Assessment of the Resident, but rather, adherence to sound educational principles and the goal of enhancing the Resident's opportunity to succeed.
- 11.2.3 Preceptors who are not able to provide unbiased Assessments should excuse themselves from the formal Assessment process. The RPC or Competence Committee has the authority to determine whether an individual Preceptor should be involved in formal Assessments during Remediation or Probation recognizing that in certain circumstances (e.g. requirement for specific expertise) it may be difficult to conduct Remediation or Probation if an individual is excluded.

## **12 Special Situations**

- 12.1 Programs may have additional Program-specific policies for Resident Assessment and Promotion
- 12.2 Any responsibility of the Program Director found in this document may be delegated to an appropriate faculty member.

## **Responsibilities**

### **13 Approval and Implementation Authority**

- 13.1 PGME Committee ensures appropriate rigor and due diligence in the development and revision of this policy.
- 13.2 The Associate Dean has the following responsibilities:
  - 13.2.1 To ensure that University of Calgary staff is aware of and understands the implications of this policy and related procedures.
  - 13.2.2 To monitor compliance with this policy and related procedures.
  - 13.2.3 To regularly review this policy and related procedures to ensure consistency in practice.
  - 13.2.4 To sponsor the revision of this policy and related procedures when necessary.

Related  
Information

- 14** All Residents must be given a copy of, or access to, this document as well as any PGME and Program-specific documents relating to Assessment when they enter a Program at the Cumming School of Medicine at the University of Calgary.

The Student Ombuds Office, which is part of the Students Union at the University of Calgary, employs a Student Rights Advisor who can provide confidential advice, assistance preparing appeal documents, liaison with faculty and referral to other resources. The Students Union is located in the MacEwan Student Centre on main campus.  
P: 403.220.6420

E: [ombuds@ucalgary.ca](mailto:ombuds@ucalgary.ca)

W: <http://www.ucalgary.ca/provost/students/ombuds>

History

- 15** Approved: February 25, 2005  
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