

Departmental Policy

Departmental Procedure
Instructions/Forms



UNIVERSITY OF CALGARY
CUMMING SCHOOL OF MEDICINE

CUMMING SCHOOL OF MEDICINE Clinical Fellows Policy

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1 Purpose

1.1 The purpose of this policy is to outline the required processes and procedures for registration, training and assessment for Clinical Fellows at the University of Calgary's Cumming School of Medicine.

2 Scope

2.1 This policy applies to all Clinical Fellows who are engaged in Clinical Fellowship Training in a Department in the Cumming School of Medicine.

3 Definitions

3.1 In this policy,

- a) "AH" means Alberta Ministry of Health.
- b) "AHS" means Alberta Health Services.
- c) "APL" means Alberta Precision Laboratories.

- d) “Associate Dean” means Associate Dean of Postgraduate Medical Education (PGME”) in the Cumming School of Medicine.
- e) “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.
- f) “Business Days” means days that the University is open for business, excluding weekends and holiday closures.
- g) “CAPER” means the Canadian Post-MD Education Registry
- h) “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 as outlined in the approved Fellowship Framework.
- i) “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.
- j) “Clinical Fellowship Committee” is a committee made up of PGME subspecialists involved in Fellowship education. This committee oversees the Clinical Fellowship program in any given subspecialty and reviews Clinical Fellows’ academic progress.
- k) “Clinical Fellowship Program Director means the physician and/or faculty member who oversees the training and mentoring of the Clinical Fellow and chairs the Clinical Fellowship Committee.
- l) “Clinical Fellowship Training” or “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, including the applicable Fellowship Framework.

- m) “Clinical Supervisor” means the faculty member who is responsible for day-to-day supervision and evaluation of Clinical Fellows. In small programs, the clinical supervisor can also be the Clinical Fellowship Program Director.
- n) “CMPA” means the Canadian Medical Protective Association.
- o) “CPSA” means College of Physicians and Surgeons of Alberta.
- 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) “Education Experience” means an experience in a particular environment or set of environments selected or designed to support the Clinical Fellow’s achievement of competencies. This may or may not occur in a “block” or “rotation”. Other terms used are “Training experience” or “Program Element”.
- t) “Fellowship Framework” means the document prepared by the Clinical Fellowship Program Director and approved by PGME that outlines the requirements, duration, funding source of each Clinical Fellowship
- u) “Funding Agency” means the organization that provides the salary and/or educational funding to support the Clinical Fellow during the Fellowship Training Period.
- v) “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 to ensure that the individual who was offered a Clinical Fellowship is the person approved in the Work Permit.
- w) “IMG” means International Medical Graduate and refers to individuals who have a medical degree from outside Canada or the United States of America regardless of citizenship.
- x) “IRCC” means Immigration, Refugees and Citizenship Canada, a department of the Canadian federal government.
- y) “Letter of Application” means the initial written request from a prospective Clinical Fellow.

- z) “Letter of Offer” means the letter which stipulates the contractual terms and conditions of the engagement of a Clinical Fellow in Clinical Fellowship Training. The Letter of Offer includes details on specific work permit, registration, licensure, probationary requirements and funding provisions, and identifies the duration of contracted training.
- aa) “MD” means medical doctor.
- bb) “MCC” means Medical Council of Canada.
- cc) “PARA” means Professional Association of Resident Physicians of Alberta.
- dd) “PGME” means Postgraduate Medical Education in the Cumming School of Medicine at the University of Calgary.
- ee) “Physiciansapply.ca” means the online portal of the MCC for credential verification in Canada.
- ff) “Resident Physician Agreement” describes the terms and conditions applicable to Resident Physicians related to the provision of health care services within a learning environment.
- gg) “Royal College” or “RCPSC” refers to the Royal College of Physicians and Surgeons of Canada.
- hh) “Senior Associate Dean” means the Senior Associate Dean of Education the Cumming School of Medicine.
- ii) “University” means University of Calgary.
- jj) “Work Permit” means the time-limited permit issued by Immigration, Refugees and Citizenship Canada authorizing an individual to work in Canada.

4 Eligibility

4.1 Clinical Fellows must:

- a) Have been awarded a medical degree acceptable to the CPSA;
- b) Have successfully completed a residency training program or equivalent in Canada or elsewhere with training acceptable to the Department that is supporting the Clinical Fellowship;
- c) Be pursuing advanced training beyond the requirements of residency certification; and
- d) Meet all CPSA requirements.

- 4.2** For Clinical Fellows trained outside of Canada, identity and credentials must be verified through Physiciansapply.ca.
- 4.3** 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 both of the following:
 - a) Membership in the CMPA; or
 - b) 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.
- 4.4** Clinical Fellows must agree to and comply with all appropriate University and AHS policies, procedures and other established requirements.
- 4.5** Clinical Fellows must sign any required AHS documentation or agreements and provide a copy to the PGME Office.
- 4.6** Failure to complete or comply with all requirements for eligibility may result in termination of the Clinical Fellowship in the sole discretion of the University.

Clinical Fellows who are not Citizens or Permanent Residents of CANADA

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

or dismissal from the Clinical Fellowship in the sole discretion of the University.

5 Application

- 5.1** Candidates must submit an Application Package, including:
- a) A Letter of Application;
 - b) Their Curriculum Vitae;
 - c) A minimum of 3 letters of reference;
 - d) The proposed area of study; and
 - e) The duration of Clinical Fellowship training.
- 5.2** The Application Package must be submitted to the appropriate Department for review.
- 5.3** The Clinical Fellowship Program Director must obtain PGME approval for the Fellowship Framework in advance of recruiting for the Clinical Fellowship.

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.
- 6.3** A University ONEcard will be issued allowing access to University resources (e.g., library and email.)
- 6.4** 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

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

7 Financial Support

- 7.1** Clinical Fellows provide clinical services during their educational Clinical Fellowship Training, 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. Clinical Fellows are not permitted to use personal financial resources to fully, or in part,

support their training. Fee for Service billing that is included in the approved Fellowship Framework is not considered to be use of personal financial resources.

- 7.2** No funding support is available for Clinical Fellows or Departments through PGME.
- 7.3** Stipend ranges for Clinical Fellows should fit within the guidelines of the Funding Agency from which the financial support derives.
- 7.4** Stipend ranges must reflect the Resident Physician Agreement levels of compensation for clinical services provided and shall at a minimum be equivalent to Post-Graduate Year 1 remuneration.
- 7.5** Benefits may be payable under some funding arrangements and if so, should fit within the guidelines of the Funding Agency and of the Department.
 - a) Any compensation provided in lieu of health benefits should be equivalent to the amount provided under the Resident Physician Agreement.

Extender Shifts and Locum Work

- 7.6** 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 Clinical Fellowship Program.
- 7.7** Extender shifts must be approved in advance by the Clinical Fellowship Program Director and meet CPSA requirements for extender licensing.
- 7.8** Extender shifts cannot be used as a funding source for the Clinical Fellowship.
- 7.9** Extender shifts are above and beyond the clinical requirements stated in the Fellowship Framework.
- 7.10** The requirement of the locum work must be consistent with the PGME Guiding Principles for Fee for Service Funding.

Fee for Service

- 7.11** Clinical Fellows who are eligible to bill fee for service or receive other remuneration from AH for provision of clinical services, through surgical assist or similar, may enter into an agreement with a Department to participate in Clinical Fellowship Training. 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.
- 7.12** Fee for service activities must be within scope of and have clear relevance to the Clinical Fellowship Training educational curriculum.

8 Clinical Fellowship Program

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

- a) A Clinical Fellowship Program Director;
- b) An ombudsperson; and
- c) A Fellowship Committee which oversees Clinical Fellowships and is responsible for:
 - i. Review of and selection of Clinical Fellowship candidates;
 - ii. Development of appropriate goals and objectives for each Clinical Fellowship;
 - iii. Development and submission to PGME for approval of each Fellowship Framework;
 - iv. Providing each Fellow with a copy of the final approved Fellowship Framework document;
 - v. Development and periodic review of appropriate evaluation procedures for each Clinical Fellowship;
 - vi. Review of and decision-making authority for the evaluation of the probationary period;
 - vii. Development of any necessary Remedial Plan;
 - viii. Decisions regarding unsuccessful progress through or completion of the program, dismissal, and termination;
 - ix. Final approval of the award of a Fellowship Certificate;
 - x. Ensure timely feedback is provided to Clinical Fellows; and
 - xi. Periodic review of the curriculum.

8.2 Each AFC (Diploma) Program Fellowship Director and Fellowship Committee must:

- a) Adhere to the Royal College General Standards of Accreditation for AFC Programs; and
- b) Review the Clinical Fellow portfolios and advise PGME whether all competencies for the Certificate have been achieved and recommend the award of a Fellowship Certificate.

Clinical Fellowship Program Approval

8.3 Departments must submit documentation including the Fellowship Framework to the PGME Office for approval.

8.4 Upon approval of the proposed Fellowship Framework, the Associate Dean, PGME, issues a Letter of Offer outlining the contractual terms and conditions of the Clinical Fellowship Training.

Clinical Fellowship Training Program

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

- 8.6** Extension to a training period must be approved by, and is in the sole discretion of, the Department Head, the Clinical Fellowship Committee, the Associate Dean, PGME and, where necessary, any affected Funding Agency. Extensions to training are only considered in situations where a Fellow is not achieving educational goals and objectives and there is a reasonable likelihood that these goals and objectives can be successfully achieved with an extension.
- a) Extensions to training will not be considered in situations where funding will not be available for the extension.
 - b) Extensions for Clinical Fellows who have a Work Permit are subject to approval by Immigration, Refugees and Citizenship Canada.
 - c) The total of all extensions cannot exceed 1 year.
- 8.7** Clinical Fellows are expected to participate in all aspects of Fellowship training as outlined in the goals and objectives of the Fellowship Framework.
- 8.8** All Clinical Fellowship Training programs will include, as an express term and condition in the Letter of Offer, a period of probation as follows: 2-month probationary period for 6-month Clinical Fellowships, 4-month for 1-year Clinical Fellowships and 6-month for 2-year Clinical Fellowships. The probationary period will allow the Clinical Fellowship Committee to determine whether there is a reasonable likelihood of the Clinical Fellow successfully completing the program. Satisfactory performance during probation is required to continue the Clinical Fellowship. The Clinical Fellowship Program Director and Clinical Fellowship Committee will make the determination of satisfactory performance no later than the last business day of the applicable probationary period, and their decision is final and not subject to review or appeal. It is the responsibility of the Program to ensure the probation outcome is submitted to PGME within the time parameter outline above. The form will be forwarded to AHS when it is appropriate.

Clinical Service Provision

- 8.9** Clinical Fellowships must meet a minimum of 50% clinical requirements. The rest of the training time can be divided into research or other academic activities. The exception to this is the Clinical Research Fellowship, which is outlined in the PGME Clinical Research Fellowship.
- 8.10** AHS, in consultation with the CPSA, may grant privileges for specific, unsupervised clinical practice activities.
- 8.11** Call requirements are negotiated with the Clinical Fellowship Program Director or are as outlined in either the Letter of Offer or Fellowship Framework and shall not be more than 7 in-house calls over a 28-day period, 9 home calls over 28 days, and no more than 2 weekends in 28 days.

Clinical Supervisors

- 8.12** 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.
- 8.13** 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

- 8.14** Clinical Fellows may be involved in instruction and training of medical students and/or residents and/or other healthcare professionals. Arrangements to participate in such activities must be made with the agreement of the Clinical Fellowship Program Director. Clinical Fellows who participate in undergraduate medical education teaching must complete FATTs (or equivalent) before being approved to teach.
- 8.15** Clinical Fellowship Program 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.
- 8.16** 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

- 8.17** PGME assessment policies are based on four underlying principles: fairness, transparency, open communication, and mutual accountability.
- 8.18** The Fellowship Committee of each Program determines, in consultation with the Associate Dean PGME, what criteria and evaluation procedures will be used to determine "Satisfactory" Performance, "Unsatisfactory" Performance or "Not Progressing as Expected"
- 8.19** Assessments must be fair, equitable, timely, and unbiased. Fellows must receive regular feedback, both written and verbal, on their performance and progress in relation to the Program objectives as outline in the Fellowship Framework. For AFC programs, the assessment strategies must be compliant with the Royal College requirements.
- 8.20** Programs may use various tools and should use specific criteria to assess Clinical Fellows at the Program's sole discretion.
- 8.21** Every Clinical Fellow must receive in-person feedback and advice on how to meet the objectives outlined in the Fellowship Framework from the Clinical Fellowship Program Director, or delegate, at least every six (6) months, or 3

months in the case of a 6-month Clinical Fellowship. A written summary of this meeting should be documented and kept in the Clinical Fellow's file.

- 8.22** Results of assessments are generally expected to be provided to the Clinical Fellow within twenty-eight (28) days of the completion of a required Educational Experience.
- 8.23** Feedback should be specific and include both strengths and areas for improvement, even for Clinical Fellows who are achieving expectations. This feedback should include specific advice and assistance for improvement.
- 8.24** Performance expectations and methods of assessment must be communicated to the Clinical Fellow in advance of or at the beginning of each Educational Experience.
- 8.25** The Clinical Fellow must be informed of performance deficiencies in a timely manner so that the Clinical Fellow has an adequate opportunity to remedy them before the end of the rotation or Educational Experience.
 - a) Clinical Supervisors should provide documentation of all feedback in the case of significant performance deficiencies and/or a repeated pattern of minor deficiencies.
 - b) Any significant performance deficiencies that may impact the Fellow's ability to successfully complete their training or unprofessional behavior identified must be submitted to the Associate Dean, PGME or delegate for handling.
- 8.26** Funding Agencies will be notified of an unsatisfactory final assessment by the Associate Dean, PGME as required by the Letter of Offer.
- 8.27** In consultation with the Associate Dean and AHS, the Department may require a Clinical Fellow to be put on a leave of absence if there are concerns that may impact patient safety. This leave of absence may be unpaid.

Remedial Plan

- 8.28** A Remedial Plan is an individualized educational support, assessment, and monitoring designed by the Fellowship Program to assist a Clinical Fellow in correcting performance deficiencies.
- 8.29** A Remedial Plan cannot be offered to a Clinical Fellow unless they have successfully completed the probationary period.
- 8.30** A Remedial Plan may be necessary and offered if ongoing feedback has not been fully effective in correcting a performance deficiency, or when a Fellow has failed a Rotation, Program Element, or Education Experience, or there has been a serious professionalism or patient safety concerns.
- 8.31** The Clinical Fellowship Committee has the sole discretion as to whether to offer a Remedial Plan to a Clinical Fellow. The Clinical Fellowship Committee will consider the following factors in determining whether to

offer a Remedial Plan: the degree of performance deficiency, the length of the Fellowship Training Period (including the ability to extend), the availability of funding, and any other such factors that are relevant to the decision. If the Clinical Fellowship Committee does not offer a Remediation Plan, the Fellow may be dismissed. A Clinical Fellow cannot appeal the decision to not offer a Remedial Plan.

- 8.32** A Remedial Plan must be approved by the Clinical Fellowship Committee.
- 8.33** A Remedial Plan may be up to 12 weeks in length during which time the Clinical Fellow will receive monitoring of performance as well as support to meet the objectives specified in the Remedial Plan.
- 8.34** Extension of training may be required following a successful Remedial Plan and must be approved pursuant to section 8.6 of this Policy.
- 8.35** The Clinical Fellowship Program Director must meet with the Clinical Fellow to discuss Remedial Plan.
- 8.36** The Remedial Plan must be documented in a letter that is sent to the Clinical Fellow and copied to the Associate Dean, which outlines the deficiencies and objectives of the Remedial Plan.
- 8.37** Failure to comply with or successfully complete a Remedial Plan may result in dismissal.

Academic Appeals

- 8.38** A Clinical Fellow may only appeal the decision that the Clinical Fellow, after successful completion of the initial probation, is being dismissed due to academic performance.
- 8.39** A Fellow may not appeal the following:
 - a) An unsatisfactory probationary period;
 - b) A decision of termination based on an unsatisfactory probationary period;
 - c) A decision that a Remedial Plan is required;
 - d) A decision to not offer a Remedial Plan;
 - e) A decision that a Clinical Fellow has been unsuccessful in a Remedial Plan;
 - f) The outcome of any evaluation or assessment;
 - g) The decision by the fellowship committee that a fellow is not progressing as expected or has unsatisfactory performance
 - h) Accommodation decisions made by the Accommodation Assessment Committee, the Associate Dean or the Senior Associate Dean, Education (or their delegate) pursuant to the PGME Postgraduate Medical Learner Accommodation Process;
 - i) Any program-specific formal evaluation decision, such as an ITER;
 - j) Admission decisions;
 - k) The decision not to approve a Clinical Fellowship;
 - l) The decision to not offer a Clinical Fellowship;

- m) Any of the reasons for termination of the Clinical Fellowship as outlined in section 8;
- n) Withdrawing or terminating an offer of a Clinical Fellowship for failing to meet eligibility requirements outlined in section 4; and
- o) The decision to not provide an extension to training pursuant to section 8.6.

8.40 An appeal must be submitted by email to the Senior Associate Dean of CSM [pgmeappeals@ucalgary.ca] no later than 11:59 PM (MT) on the 7th Business Day following receipt of the decision to be appealed. One reasonable extension may be approved by the Senior Associate Dean if the request is made by email in advance of the deadline to submit the appeal.

8.41 An appeal to the Senior Associate Dean must include the following:

- a) The Clinical Fellow's UCID number;
- b) A copy of the decision being appealed;
- c) The date the decision was received;
- d) A list and full explanation of the ground(s) of appeal;
- e) All relevant evidence or documentation in support of the appeal;
- f) A list of evidence or documentation that has been requested from third parties;
- g) The outcome the Clinical Fellow is requesting; and
- h) A statement that all evidence and documentation provided by the Clinical Fellow is true and accurate.

8.42 A Clinical Fellow may appeal a decision on only the following grounds:

- a) Relevant new information has arisen that could not have been presented earlier and that may have otherwise affected the decision being appealed;
- b) There was a reasonable apprehension of bias on the part of a person(s) who made the decision being appealed; or
- c) The decision is unreasonable.

8.43 The following are not reasons a Clinical Fellow can appeal and will result in the Clinical Fellow's appeal being denied:

- a) Ignorance of the University of Calgary, CSM or Program policies, regulations, procedures, or expectations;
- b) Mere dissatisfaction or disagreement with the decision, the assessment criteria, or performance expectations;
- c) Extenuating circumstances that could have been previously disclosed to the Department or the CSM.

8.44 The Senior Associate Dean will provide a copy of the documentation and evidence submitted by the Clinical Fellow to the Department and request that the Department provide a written response to the appeal no later than 7 Business Days after the appeal is provided the Department.

8.45 A copy of the Department's written response to the appeal will be provided to the Clinical Fellow with a request to provide a final written response no

later than 7 Business Days after the Department's response is provided to the Clinical Fellow.

8.46 Normally within 14 Business Days of receipt of the Clinical Fellow's final written response, the Senior Associate Dean will review the written submissions of the parties and provide a written decision.

- a) The decision of the Senior Associate Dean will be based on the written submissions of the Clinical Fellow and the Department.

8.47 Appeal decisions made by the Senior Associate Dean cannot be further appealed at the University of Calgary.

Termination

8.48 The Clinical Fellowship may be unilaterally terminated, at any time prior to the conclusion of the Clinical Fellowship with the agreement of the Associate Dean, PGME, under the following circumstances:

- a) Failure to maintain an active license with the CPSA, including but not limited to, cancellation, suspension or restricting of a fellow's license;
- b) Termination of employment;
- c) Significant acts of unprofessionalism or concerns impacting patient or workplace safety;
- d) Restriction or removal of privileges by AHS or APL;
- e) An unsuccessful probationary period;
- f) Failure to obtain proper authorization or a Work Permit pursuant to section 4.7 of this Policy.
- g) Loss of funding;
- h) Failure by the Clinical Fellow to commence the Clinical Fellowship on the date outlined in the Letter of Offer, whether this failure is the fault of the Clinical Fellow or not; and
- i) Failure to complete or comply with all requirements for eligibility pursuant to section 4 of this Policy.

8.49 In all cases of termination or dismissal, the PGME Office will notify AHS or APL and CPSA. Termination decisions made pursuant to section 8.48 cannot be appealed.

Disputes

8.50 Disputes involving Clinical Fellows and other members of the University, affiliated hospital or community-based clinics, shall be resolved in accordance with the policies of the academic or workplace jurisdictions in which the dispute arises.

Certificate of Fellowship Training

- 8.51** Clinical Fellows must fulfill all requirements of the Clinical Fellowship as established by the Department and confirmed by the Fellowship Committee before a Certificate can be issued.
- 8.52** Certificates will **only** be issued for the Clinical Fellowship activity indicated on the Letter of Offer.
- 8.53** Fellows with 20-30% clinical activities as enrolled in the Clinical Research Fellowships will not be issued a Certificate by PGME.
- 8.54** 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.

9 Instructions Forms

CPSA Registration for Post-Residency Fellowship Training
Request for Certificate of Clinical Fellowship Training Template
Letter of Offer
PGME Guiding Principles for FFS funding
PGME Clinical Research Fellowship

10 Related Policies

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

11 History

Approved: Faculty Council
Effective: December 10, 2014
Revised: August 12, 2022
Approved: PGME fellowship Committee
Effective: Aug 12, 2022