

PGME Resident Probation Checklist

This checklist is designed to help ensure that process is followed when a resident is placed on a probation program. Refer to the <u>Resident Assessment and Appeals Policy</u> for complete information.

Probation

<u>Definition</u> – probation is similar to remediation, but with the requirement that the resident demonstrate sufficient achievement and progression in order to continue in the residency program.

<u>Note</u>: The Residency Program Committee (RPC) may delegate decisions about learning plans, promotion to the next stage of training, eligibility for certification, probation, or probation etc. to the Competence Committee (CC). If the CC is in the decision-making role the CC should provide a report to the RPC so that the RPC is aware.

Criteria to determine if resident is likely to require a probation program:

- □ Remediation program has been unsuccessful.
- □ Remediation is required for a second time within a 12-month period.
- □ Other serious concerns about professional conduct, academic performance, or unsatisfactory clinical skills.

□ Step 1:

- □ The RPC (or CC) will decide regarding requirement for probation.
- □ If the RPC (or CC) decides on recommending probation, the program director/designate* on behalf of the RPC or CC will advise the resident in writing, providing reasons for the decision.

□ Step 2:

- □ Resident is provided an opportunity to meet with the Residency Program Committee (RPC) or Competence Committee (CC) and may be accompanied by a support person to the meeting.
- □ Resident is provided a copy of the PGME <u>Resident Assessment and Appeals Policy.</u>
- □ Resident is provided an opportunity to respond to the decision.

□ Step 3:

- □ PGME is advised of the decision for recommending a probation period.
 - PGME will provide advice and redacted examples of probation plans. Probation plan template can be found <u>here</u>.
- □ A probation plan is developed by the program director/designate (in consultation with RPC and/or CC).
 - A copy of the draft plan may be provided to the resident prior to implementation.
 - Once completed, the plan can be sent to <u>Patricia Morris</u> at the PGME office.

□ Step 4:

- □ Upon submission of the probation plan to PGME:
 - The probation plan is brought up for discussion at the PGE Advisory Board meeting. (Advisory Board meeting dates can be found <u>here</u>).
 - PGME, on behalf of the Advisory Board, will provide a written summary of the recommendations to strengthen the probation plan (including proposed revisions) to the program director.



□ **Step 5**:

- The program director/designate (in consultation with the RPC and /or CC) will review the recommendations from the PGE Advisory Board, make appropriate changes to the probation plan, and re-submit the same to the PGME office for review and approval.
- □ Step 6:
 - □ Upon approval of the PGE Advisory Board:
 - A copy of the probation plan is provided to the resident.
 - The program director/designate reviews the plan with the resident.
 - The plan is signed by the program director/designate and the resident.
 - A copy of the signed plan is provided to <u>PGME</u>.
 - The PGME office will provide the resident will provide the resident with a revised Letter of Appointment indicating the probation period. This Letter of Appointment will be submitted to the CPSO as part of the mandatory reporting requirement.
 - The PGME office will advise Medical Affairs of the probation period.
- **Final step** (after probation is complete):
 - Prior to completion of the probation, <u>PGME</u> will contact the program director for a summary of the performance.
 - This summary should include whether or not:
 - the probation period was successful/unsuccessful, and
 - if the probation period will count/not count towards residency training.

*Designate: Competence Committee Chair, Academic Advisor, CBME Lead