



McGill

**Office of Postgraduate Medical Education
Faculty of Medicine
McGill University**

Evaluation and Promotion in Postgraduate Training Programs

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PREAMBLE

This document "Evaluation and Promotion in Postgraduate Training Programs" contains the rules and regulations governing the evaluation and promotion of all Residents and Fellows in postgraduate training programs at McGill University. It is the personal responsibility of each Resident and Fellow to read this document and to be familiar with its content. The Faculty of Medicine at McGill University uses the Medical Rotation Evaluation System (MRES – one45 software), an on-line web-based evaluation system, to provide residents and faculty with formal evaluations of clinical rotations.

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1. **TERMINOLOGY:** This section defines the terms used throughout the present document.
 - 1.1 **Academic Year:** The academic year commences July 1 and finishes on June 30. On occasion a resident will be out of phase, e.g. have a starting date other than July 1.
 - 1.2 **Period (or Block):** A period or block is of 4-weeks duration. There are 13 periods in each academic year.
 - 1.3 **Rotation:** A rotation refers to the "content" of the experience, and may be of any duration (e.g. 2 weeks to 3 months). In some programs, a rotation may be a "longitudinal" experience, e.g. half-day a week for 6 months.
 - 1.4 **REPEAT (rotation):** This refers to a rotation that is being repeated because of a BORDERLINE or UNSATISFACTORY assessment. A Resident undertaking a REPEAT rotation is evaluated by the usual methods.
 - 1.5 **REMEDIAL (rotation):** This term refers to a rotation that has been designed to address specific weaknesses of a Resident who has performed poorly. A REMEDIAL rotation will only occur during a Probationary Period and the Resident is not formally evaluated during a REMEDIAL rotation.
 - 1.6 **FACULTY POSTGRADUATE PROMOTIONS COMMITTEE:** This Committee is a standing Committee which reports to the Associate Dean for Postgraduate Medical Education, and has the primary responsibility of monitoring the evaluation and promotion of Residents.
 - 1.7 **RESIDENTS:** Residents refers to all Residents and Fellows registered as students at McGill University in Postgraduate training programs.
 - 1.8 **ADVISOR:** An advisor is an individual chosen by a resident or a Faculty member. The advisor must be a member of the University Community, but is not a member of the legal profession and is not paid for his or her services. In all hearings under these guidelines, the resident and the Faculty member are entitled to have an advisor present. The Advisor's role is to provide support to the resident or Faculty member; he/she is not a witness or participant in the proceedings.

2. GENERAL PRINCIPLES

The Royal College of Physicians and Surgeons of Canada, the College of Family Physicians of Canada and the Collège des médecins du Québec, all require satisfactory final evaluations before a resident is admitted to the certification examinations:

- 2.1 Each training program will have written learning objectives, and the Residents will be provided with these objectives upon entering the program.
- 2.2 The evaluation process is based on these training objectives.
- 2.3 The Program Director ensures that Residents are familiar with the rules and regulations governing evaluation and promotion.
- 2.4 All Residents will receive a copy of the document: "Evaluation and Promotion in Postgraduate Training Programs".
- 2.5 The evaluations are confidential documents. Access should be restricted to the Program Director (or delegate), any individual or Committee responsible for making Promotion decisions, external certification and licensing bodies, and the Resident him/herself. Evaluation information on a Resident should not be transmitted from one supervisor to another. Under exceptional circumstances, such as those which might relate to issues of patient safety, information might be transmitted by the Program Director, but then only with the utmost discretion.
- 2.6 **Improper Conduct:** In addition to being students of the University, the Residents and Fellows are physicians, and therefore must be governed by the policies of the professional bodies, such as the Collège des médecins du Québec, the Canadian Medical Association (Code of Ethics) and others, and by policies of the Faculty of Medicine, including the Faculty of Medicine Code of Appropriate Conduct and Disciplinary Procedures as outlined in the McGill University Student and Responsibilities Handbook. Violation of any of these standards or policies may constitute improper conduct.

3. THE EVALUATION PROCESS

- 3.1 A Resident will receive a written evaluation at the end of each rotation, usually after a 4-week period.
- 3.2 In some programs a rotation may be longer than 4 weeks (2, 4 or even 6 blocks). If a resident is doing a 4 block rotation, the Resident will receive 2 formal evaluations, each bearing a Global Evaluation. Each evaluation will cover an 8 week period, and each is considered separate for promotion rules. As an exception, if a resident is doing a 3 block rotation, the Resident will receive 1 (one) formal evaluation.
- 3.3 If at any point a Resident gets into difficulty (i.e. obtains a Borderline or Unsatisfactory evaluation), it is advisable that evaluations then be done after each 4 week period. The Resident must be informed that he/she will be evaluated at these more frequent intervals.

- 3.4 The evaluation at the end of each rotation is written by the Faculty Supervisor responsible for the Resident during that rotation. If more than one faculty member is involved in the supervision of a Resident during a rotation, information from all faculty may be written on the evaluation form, or the information may be summarized by one of the supervisors, but in all cases the **global evaluation** should represent a consensus opinion.
- 3.5 If a rotation evaluation is submitted to a Program Director or to the Dean's office without the global evaluation being filled in, it will be returned to the supervisor for completion even if the Resident has already signed the evaluation.
- 3.6 Ongoing verbal feedback is important for all residents, and is of particular importance to residents experiencing difficulty. Supervisors will make every effort to provide such feedback.
- 3.7 At the completion of each rotation, the Resident should be given feedback and must sign the evaluation. The Resident may indicate that he/she disagrees with the evaluation.
- 3.8 The Resident bears some personal responsibility for ensuring that the evaluations are completed in a timely fashion, and that he/she has received feedback and has signed the evaluation.
- 3.9 Successful completion of a rotation is defined as obtaining a SATISFACTORY global evaluation.
- 3.10 A BORDERLINE evaluation anywhere on the evaluation form indicates that weaknesses have been identified.
- 3.11 A BORDERLINE **global evaluation** on any evaluation is not considered a passing grade.
- 3.12 A Resident with an UNSATISFACTORY or BORDERLINE global evaluation for any rotation, must be notified immediately.
- 3.13 In order to meet pedagogical requirements, a Resident should not miss more than 1/4 of a rotation due to illness, conference leave, vacation, etc. A rotation which includes less than 3/4 of the expected time commitment, may be considered INCOMPLETE.
- 3.14 An INCOMPLETE rotation should be completed, the duration of which is determined by the nature of the experience and the need for continuity: eg. a 2-week illness during an Emergency rotation could be made up by 2 weeks in the Emergency room, whereas a 2-week illness during an ICU rotation might require a 4-week ICU rotation to be considered complete.

- 3.15 For any clinical interaction, it is the Faculty Supervisor who determines whether or not the contact with the resident was sufficient for meaningful evaluation.
- 3.16 At least twice during the ACADEMIC YEAR, the Program Director (or designate) will meet with each Resident in the Program, and review all the evaluations and the Resident's progress in the program.

4. PROMOTION

4.1 Specific Promotion Regulations:

- 4.1.a Promotion of a Resident to the next academic level occurs if all rotation periods during the year have been completed with SATISFACTORY or higher global evaluations.
- 4.1.b When it is recognized that a Resident is in academic difficulty, the Program Director (or delegate) will identify the areas of weakness, and will attempt to support and assist the Resident in addressing those weaknesses.
- 4.1.c During the academic year, an UNSATISFACTORY in one rotation period, with SATISFACTORY completion of all others, requires the Resident to complete a REPEAT rotation of the same duration.
- 4.1.d During the academic year, a BORDERLINE evaluation in one rotation period with SATISFACTORY completion of all others may require a REPEAT rotation. This is left to the discretion of the Program Director, and the decision should be made towards the end of the academic year.
- 4.1.e A REPEAT rotation is not to be undertaken until completion of the academic year, and must be completed before promotion to the subsequent academic year.
- 4.1.f REPEAT rotations, whenever possible, should be undertaken in a different hospital/setting.
- 4.1.g An UNSATISFACTORY or BORDERLINE evaluation in a REPEAT rotation period will require that a Resident be placed on PROBATION.
- 4.1.h During the academic year, an UNSATISFACTORY and/or BORDERLINE Global Evaluation in two rotation periods, will require the Resident to be placed on PROBATION.
- 4.1.i In some programs, there is an additional requirement for promotion, often related to performance on standardized written exams or clinical exams, usually given

annually to all residents in training. These requirements must be identified to the resident at the beginning of the academic year. Failure to successfully comply with these requirements may require the resident to be placed on PROBATION.

4.2 Probation:

- 4.2.a A resident will be placed on PROBATION for any of the following reasons:
- i) UNSATISFACTORY or BORDERLINE in a REPEAT rotation period
 - ii) UNSATISFACTORY and/or BORDERLINE in two rotation periods in one academic year.
 - iii) Upon recommendation by the Program Promotions Committee (as per 4.3.g), and with appropriate supporting documentation.
 - iv) Upon recommendation by the Faculty Postgraduate Promotions Committee (as per 4.4.f), and with appropriate supporting documentation.
- 4.2.b The PROBATIONARY period should start immediately, once the conditions listed in 4.2.a have been met.
- 4.2.c If a resident is appealing an evaluation to an Ad Hoc Departmental Appeal Committee, this process must be completed within 4 weeks from the date of the written request.
- 4.2.d The duration of the probationary period will be from 6 to 10 blocks, as determined by the Program Director. Four blocks during the Probationary period will be 'evaluated' blocks.
- 4.2.e The **evaluated** blocks of the probationary period should not be interrupted by a leave of absence, vacation, conference or study leave.
- 4.2.f In the event a trainee requires a Sick Leave or a Vacation Leave during the REMEDIAL period, this will extend the PROBATION by an equivalent number of blocks.
- 4.2.g A trainee may choose to take an unpaid leave of absence prior to starting the probationary period. This request must be made in writing to the Associate Dean for Postgraduate Education and will delay the start of the probationary period. There may be a restriction placed on the duration of the requested leave.
- 4.2.h The terms of the Probationary Period must be outlined in writing to the Resident, with copies to the Associate Dean for Postgraduate Education.

- 4.2.i During the Probationary Period, efforts will be made to assist the Resident in addressing areas of weakness.
- 4.2.j Anywhere from 2 to 6 blocks of the probationary period may be considered REMEDIAL rotations, whereby a program is set up to address specific areas of weakness. The duration of REMEDIAL time will be determined by the Program Director at the outset. The Resident is given feedback and evaluated, but the evaluations are not used in a formal manner.
- 4.2.k Four periods of the Probationary Period will include clinical experiences that are appropriate for the resident's level of training. These constitute the evaluated component of the Probationary Period, and an evaluation will be provided at the end of each period.
- 4.2.l During the Probationary Period, the resident should complete any of the BORDERLINE or UNSATISFACTORY rotations that led to being placed on Probation.
- 4.2.m One UNSATISFACTORY or BORDERLINE global evaluation during the evaluated component of the Probationary Period will require the Resident to withdraw from the Program.
- 4.2.n A Resident will be placed on PROBATION on only one occasion during postgraduate training. If, at any time, a Resident meets the criteria for PROBATION a second time, the Resident must withdraw from the program. This regulation applies even when a Resident changes from one program to another.
- 4.2.o Successful completion of a Probationary Period requires SATISFACTORY global evaluations on all evaluated rotations. Under usual circumstances, the Resident will not receive academic credit for a successful Probationary Period but will continue in the program out of phase. Under exceptional circumstances, a Program Promotions Committee might recommend that credit be given for the Probationary Period but this must be approved by the Faculty Postgraduate Promotions Committee.
- 4.2.p After successful completion of a Probationary Period, for the purposes of promotion regulations, the remainder of that academic year and the subsequent academic year are considered as one.
- 4.2.q A resident may be placed on CONDUCT PROBATION by a Program Promotions Committee or by the Faculty Postgraduate Promotions Committee in cases where the trainee exhibited unprofessional or unethical behaviour. CONDUCT PROBATION may occur in conjunction with a standard Probationary Period, or

CONDUCT PROBATION may be applied to reflect unprofessional behaviour when the academic performance is otherwise satisfactory. In the first situation, residents who are placed on CONDUCT PROBATION must successfully complete an initial evaluated Probationary Period as per article 4.2.b, following which the status of CONDUCT PROBATION will be maintained until training is complete (i.e. at the end of a residency and/or fellowship). For a resident on CONDUCT PROBATION, any recurrence of unprofessional or unethical behaviour will result in dismissal from the Faculty of Medicine.

- 4.2.r A decision taken to place a resident on Probation must be approved by the Faculty Postgraduate Promotions Committee. The Associate Dean can approve a Probation decision pending approval by the Faculty Postgraduate Promotions Committee.

4.3 Program Promotions Committee:

- 4.3.a Within each training program, there must exist a Program Promotions Committee which monitors the evaluation and promotion of Residents in the program. This committee must be set-up separately from the Residency Training Committee, with promotion as its specific objective. There must not be a resident on the Program Promotions Committee.
- 4.3.b The membership of the Program Promotions Committee should include the Program Director [may chair the committee or designate a chair], the Chair of the department [or designate] and 1 or 2 Faculty involved in Resident education. There must not be a resident on this committee.
- 4.3.c The principle of confidentiality must be strictly respected. Discussions held and decisions taken with respect to the evaluation and promotion of residents are confidential and should never be shared with other faculty or residents.
- 4.3.d The Program Promotions Committee should meet at least twice yearly (December and June), to review the progress of the Residents in the Program.
- 4.3.e The entire record of a Resident who has received a BORDERLINE or UNSATISFACTORY global evaluation during any rotation must be reviewed by the Committee.
- 4.3.f The Associate Dean for Postgraduate Education must be informed in writing immediately of any Resident who is in academic or non-academic difficulty.
- 4.3.g The overall performance of any Resident can be reviewed by the Program Promotions Committee, at the discretion of the Program Director. This may

occur even in the absence of BORDERLINE or UNSATISFACTORY global evaluations.

- 4.3.h The Program Director can recommend the suspension or withdrawal of a resident from a training program for academic or non-academic reasons, pending subsequent approval by the Program Promotions Committee.
- 4.3.i The Program Promotions Committee can recommend the withdrawal of a resident from a training program for academic or non-academic reasons.

4.4 Faculty Postgraduate Promotions Committee:

- 4.4.a The Faculty Postgraduate Promotions Committee is a standing Committee which reports to the Associate Dean for Postgraduate Education and includes 1 resident representative from the ARM. The Associate Dean sits as a non-voting member. The Chair is appointed by the Dean.
- 4.4.b The Faculty Postgraduate Promotions Committee will monitor the overall process of evaluation and promotion to ensure that the standards are being maintained.
- 4.4.c The Faculty Postgraduate Promotions Committee ensures that the regulations and guidelines have been adhered to, and that the resident has been treated fairly.
- 4.4.d All promotion and probation decisions must be approved by the Faculty Postgraduate Promotions Committee.
- 4.4.e No promotion decision is considered final until it has been approved by the Faculty Postgraduate Promotions Committee.
- 4.4.f The Faculty Postgraduate Promotions Committee can review the entire record of any Resident who is in academic or non-academic difficulty. This Committee can place a resident on Probation.
- 4.4.g The Faculty Postgraduate Promotions Committee can require the withdrawal of a Resident from a training program for academic reasons including inappropriate physician/patient interactions, unethical behaviour, or unprofessional behaviour.
- 4.4.h The Faculty Postgraduate Promotions Committee can require the withdrawal of a Resident from a training Program for non-academic reasons, such as: drug or substance abuse, criminal activity.

- 4.4.i The Associate Dean of Postgraduate Medical Education can approve promotion and probation decisions, pending subsequent ratification by the Faculty Postgraduate Promotions Committee.
- 4.4.j The Associate Dean of Postgraduate Medical Education may require the suspension or withdrawal of a Resident from a training program for academic or non-academic reasons, pending subsequent review/approval by the Faculty Postgraduate Promotions Committee.
- 4.4.k A resident has the right to appear before the Faculty Postgraduate Promotions Committee if one of the options is to require withdrawal from the Program.
- 4.4.l A resident who appears before the Faculty Postgraduate Promotions Committee will have access to all relevant written evaluations/correspondence in his/her record. Medical Records and Patient Records are not admissible in these proceedings.
- 4.4.m All relevant and admissible written evaluations, correspondence and/or documentation must be made available to the Secretary of the Faculty Postgraduate Promotions Committee at least five (5) working days **prior** to the meeting, for distribution to all parties prior to the meeting.
- 4.4.n The Faculty Postgraduate Promotions Committee may request the presence of the Program Director.
- 4.4.o The Faculty member and the resident may be accompanied by an advisor (as per Article 1.8).
- 4.4.p Both parties will appear before the Committee and withdraw simultaneously. The meeting is informal and non-confrontational.
- 4.4.q The parties are informed verbally by the Associate Dean or delegate as soon as the decision has been made, and in writing, as soon as possible. If the decision requiring the resident to withdraw is upheld, the resident's registration and training are terminated effective that date, including the training card.

5. RECONSIDERATION OF A ROTATION EVALUATION

- 5.1 A resident who is not in agreement with a rotation evaluation should first discuss that evaluation with the Faculty Supervisor who wrote it. The resident might provide additional information or suggest other supervisors who could speak positively on his/her behalf. They are only to discuss the rotation in question and they must not discuss the promotion implications of the evaluation. The supervisor then has two options;

- i) The supervisor may revise the evaluation and the 'revised' evaluation becomes the official one, or
 - ii) The original evaluation is not revised
- 5.2 If a resident wishes to formally contest a rotation evaluation, this request must be submitted in writing to the Program Director within 28 days of receiving the evaluation, and an Ad Hoc Division or Departmental Appeal Committee will be set up. This Committee is usually set up in the Division or Department where the evaluation took place.
- 5.3 The Ad Hoc Departmental Appeal Committee;
- 5.3.a The Chair of the Department [or delegate] will appoint the Chair of the committee.
 - 5.3.b There will be 3 or 4 committee members who ideally should not have been involved in the evaluation of the resident in the past. The membership may include faculty members from another department and this is often helpful for small departments.
 - 5.3.c Whether or not to include a Resident as a member of this committee should be a decision made by the resident contesting the evaluation. He/she cannot choose a particular resident, but will decide whether or not to have a resident as a committee member. In small programs, the resident member should be from another training program. The Resident selected should have had no previous contact or link with the resident requesting the appeal.
 - 5.3.d The resident must have access to any written evaluations/correspondence on his/her performance during that rotation. Medical Records and Patient Records are not admissible in these proceedings.
 - 5.3.e The resident must ensure that any relevant and admissible correspondence or documentation they wish to present is made available to the Chair of the committee at least 5 working days **prior** to the meeting.
 - 5.3.f Both the faculty supervisor and the resident may be accompanied by an advisor [as per Article 1.8].
 - 5.3.g The Faculty supervisor may bring additional supervisors from that rotation who contributed to the resident's evaluation.
 - 5.3.h The faculty supervisor and the resident appear before the committee and

withdraw simultaneously. The meeting is informal and non-confrontational.

- 5.3.i The mandate of this committee is to review only the specific rotation being contested and the other evaluations in the resident's dossier should not be discussed. It is not the mandate of this committee to discuss the 'promotion implications' of the given evaluation. The future status of the resident in the training program as a result of the negative evaluation should not be discussed. Any attempt on the part of the resident to discuss promotion issues must be curtailed.
- 5.3.j The committee determines that the evaluation given was accurate and fair based on the following guidelines.
- A BORDERLINE Global Evaluation means that the supervisor[s] identified weaknesses in the resident's performance. In comparison to other residents at the same level of training, the supervisor believes that this resident is weak;
 - An UNSATISFACTORY global evaluation means that the overall performance of the resident or some aspect of that performance was below the minimal standard accepted for a resident at that level.
 - The supervisor was aware of the training level of the resident;
 - In the supervisor's opinion, there was adequate time and exposure to evaluate performance;
 - The evaluator had input from other sources if appropriate.
- 5.3.k The Ad Hoc Departmental Appeal Committee has several options:
- i) The evaluation can remain unchanged;
 - ii) An Unsatisfactory Global Evaluation can be changed to Borderline or to Satisfactory;
 - iii) A Borderline Global Evaluation can be changed to Satisfactory or Unsatisfactory.
- 5.3.l Minutes should be kept of the meeting. The minutes and all written communication should be sent to the Associate Dean for Postgraduate Medical Education.
- 5.3.m The parties are informed verbally by the Chair or delegate as soon as the decision has been made, and in writing, as soon as possible.

6. APPEAL OF A REQUIREMENT TO WITHDRAW

- 6.1 If a resident is required by the Faculty Postgraduate Promotions Committee to withdraw from a program and wishes to appeal that decision, he/she must make the request in

writing within 14 working days to the Dean of the Faculty who will then appoint an Ad Hoc Promotions Review Committee.

- 6.1.a The committee will consist of four (4) members of the Faculty's academic staff and one (1) senior trainee who is registered in a McGill University residency training program. All members will be knowledgeable about the postgraduate training process but must have had no previous knowledge of the Resident or the case under appeal. One member will be designated as Chair.
- 6.1.b One representative from the Collège des médecins du Québec may be substituted for an academic staff.
- 6.1.c In order to give the Resident time to prepare for the meeting, there will be a minimum two-week notice period. It may be scheduled earlier if the Resident requests it or agrees in advance to the shorter notice period.
- 6.1.d The Secretary will call for a dossier from each party which will be circulated to the Committee members and all parties prior to the meeting. The dossier must be made available to all parties at least five (5) working days prior to the meeting so they have time to become acquainted with the issues.
- 6.1.e The Ad Hoc Promotions Review Committee has the right to review the entire record of the Resident.
- 6.1.f The Chair of the Faculty Postgraduate Promotions Committee, or delegate, represents the Faculty Postgraduate Promotions Committee.
- 6.1.g Either party may be accompanied by an advisor (as per Article 1.8). Witnesses may be called if needed. The Secretary must be informed of the names of witnesses and advisors at least five (5) working days prior to the hearing.
- 6.1.h Both parties will appear before the Committee and withdraw simultaneously. The meeting is informal and non-confrontational.
- 6.1.i The Chair of the Faculty Postgraduate Promotions Committee will present the Faculty Postgraduate Promotions Committee position, and the Resident will then have the opportunity to present his/her position. The Committee members may ask questions of each party. The parties may also question each other in order to clarify points.
- 6.1.j The Secretary to the Faculty (or delegate) acts as a technical advisor and secretary to the Committee.

- 6.1.k All members of the Committee including the Chair, have a vote.
- 6.1.l The parties are informed verbally by the Secretary as soon as the decision has been made, and in writing, as soon as possible.
- 6.1.m Grounds for overturning the decision of the Faculty Postgraduate Promotions Committee should be limited to the following:
 - i) Faculty regulations and procedures were not followed or
 - ii) All relevant evidence was not taken into consideration when a decision affecting the resident was taken.
- 6.1.n The Ad Hoc Promotions Review Committee may refuse to give formal hearing to an appeal, after considering the written submissions of the resident, if by unanimous consent of the members present, there is no basis for the appeal.
- 6.1.o Within the Faculty of Medicine, decisions of the Ad Hoc Promotions Review Committee are final.