GUIDELINES FOR REMOVAL AND REINSTATEMENT OF RESIDENTS FROM/TO FACULTY MEMBER CLINICAL TEACHING SERVICE
Approved PGME Committee: 11 Jan 2018
Approved Faculty Council: 6 Feb 2018

A. Background & Purpose:

Clinical teaching faculty members in the Faculty of Medicine normally participate in the education of residents as part of the University’s educational mandate. It must be recognized, however, having residents assigned to one’s clinical service is a privilege, not a right. Occasionally, that privilege may be modified or removed from a faculty member or a group of faculty members in the interest of ensuring a safe, professional, respectful, inclusive and harassment-free environment. Usually, faculty members who have residents removed from their clinical service will have the opportunity to remediate. Upon successful remediation, faculty members will have the opportunity to supervise residents again.

The purpose of this Guideline is to ensure a safe and positive learning environment for residents and a fair process for Faculty Members. It confirms the circumstances and process by which residents may be removed from and reinstated to a particular clinical service and/or faculty member.

B. Application:

This Guideline applies to all postgraduate training programs within the Faculty of Medicine and to non-Dalhousie residents undertaking electives within the framework of those programs.

C. Definitions:

In this Guideline:

1. “Associate Dean” means the Associate Dean of Postgraduate Medical Education.
2. “Committee” means an ad hoc committee of Faculty Council, established in accordance with section E.2.
3. “Day” means calendar day.
4. “Department Head” means the Head of the University Department in which the faculty member has his or her primary academic appointment.
5. “Faculty Member” means an individual who holds an academic appointment to Dalhousie’s Faculty of Medicine, or more than one such individual, as applicable.

D. Guideline:

1. Any removal of and/or reinstatement of residents from the clinical service of a Faculty Member must be addressed under this Guideline.
2. The Associate Dean or Department Head may remove residents from the clinical service of a Faculty Member when he or she has reasonable grounds to believe that the conduct of the Faculty Member places residents at physical or emotional risk, in accordance with the Procedures. For Faculty at New Brunswick sites, this decision will be made in consultation with the Medical Education Site Director for the relevant site and the Associate Dean, Dalhousie Medicine New Brunswick.
3. A Committee will be established to address all issues in connection with the removal and/or reinstatement of residents, in accordance with section E.2.
4. Committee decisions will be binding on the Faculty Member, applicable residency training programs and affected residents.
5. Committee decisions to remove residents and not to reinstate residents may be appealed by a Faculty Member to the Vice-President Academic and Provost or designate in accordance with the Procedures. For greater certainty, the terms of a remediation plan and a decision to reinstate cannot be appealed.
6. All information and material disclosed under this Guideline will be held in confidence except to the extent that disclosure is necessary:
   a) to effectively implement the Committee’s remediation and/or reinstatement plans; or
   b) to address risks to health and safety.
7. Nothing in this Guideline is intended to interfere with a Department or Division Head's ability to manage a Faculty Member's performance.
8. There will be no retaliation against any person for participating in or complying with any aspect of this Guideline.

E. Administrative Structure:

1. Authority: This Guideline is administered by the Faculty of Medicine, through the Associate Dean.
2. The Committee:
   a. The Committee is responsible for:
      i) assessing whether the decision to remove residents was reasonable;
      ii) establishing the terms of a Faculty Member’s remediation, if applicable;
      iii) assessing whether a Faculty Member has been successful in complying with the terms of remediation, if applicable; and
      iv) determining whether and on what terms residents may be reinstated.
   b. Members of the Committee, appointed by Faculty Council on the recommendation of the Associate Dean, will comprise:
      i) One program director who does not normally interact with residents from the program in question;
      ii) One faculty member from a different Department or Division than the Faculty Member in question; and
      iii) One resident from a substantively comparable residency training program.
3. Conflict of Interest: Where the Associate Dean is unable to discharge his or her responsibilities under this Guideline due to a potential conflict of interest, as defined by the University Guideline on Conflict of Interest, his or her responsibilities under this Guideline may be assigned to the Senior Associate Dean or designate.
4. Record-keeping: Records of processes undertaken and decisions made under this Guideline will be kept separate from other university records and will be maintained and stored securely and confidentially under the care and control of the Dean's Office. Documents evidencing the final resolution of the matter will be provided to the Associate Dean.

F. Procedures:

1. Removal of residents
   a. The associate dean or department head may remove residents from the clinical service of a faculty member where there are reasonable grounds to believe that the conduct of the faculty member places residents at physical, or emotional,
risk. Residents may be removed upon consideration of the following:
i) the particulars why residents should be removed;
ii) alternate solutions that have been attempted, if any;
iii) the past record of the faculty member in educational activities, including resident
evaluation forms and letters of complaint (anonymous or not); and
iv) any other relevant facts or supporting documentation.
b. Before removing residents, the associate dean and department head will consult with
each other as soon as possible to ensure appropriate measures are in place to address
impacts on patient care.
c. The associate dean will then notify the relevant faculty member in writing of the
removal of residents, including the basis for doing so. The associate dean will also
inform the relevant program director, the associate dean undergraduate medical
education, the VP Medicine of the relevant health authority and the dean of the Faculty
of Medicine. The program director will inform the residents of their removal and make
any necessary arrangements for alternate service assignments.
d. Where removal is required urgently for immediate resident safety reasons, the
associate dean or department head will inform the faculty member verbally with written
notification consistent with section F.1.c. to follow within two days.
2. Appointment of the Committee
a. Within seven days of the residents' removal, the associate dean will ask Faculty
Council to appoint a committee in accordance with section E.2. The associate dean will
provide the committee and faculty member with materials that support his or her decision
to remove the residents.
b. The committee will make best efforts to ensure that it meets with the faculty member
within 30 days of being appointed.
c. The committee may invite any person to the meeting who they believe has pertinent
information and request they provide relevant documentation.
d. All written submissions and documentation, except for that of the Faculty Member,
must be provided to the Committee at least 20 Days before the meeting. The Committee
will provide the Faculty Member with copies of all materials that will be considered at the
meeting and will advise the Faculty Member of the names of those individuals who will
be attending the meeting as soon as possible thereafter.
e. The Faculty Member may make written and/or verbal submissions to the
Committee. The Faculty Member’s written submissions must be provided to the
Committee at least 7 days prior to the meeting.
f. At least 5 days prior to the meeting, the Committee will:
i) Provide the Program Director and Department Head with copies of all materials that
will be considered at the meeting; and
ii) Provide other persons attending the meeting with all or part of the materials that will
be considered at the meeting which the Committee deems is relevant to their
participation in the meeting.
g. Following the meeting, the Committee will deliberate in camera. In extraordinary
circumstances, the Committee may find the Faculty Member is not capable of being
remediated and may decide not to reinstate residents on any terms. In all other
circumstances, the Committee will prepare a remediation plan that includes at least the
following:
i) identified areas to remediate;
ii) specific remediation activities;
iii) expected outcomes of remediation;
iv) the time frame for elements of the remediation, including the expected time for
completion of the remediation (which is not to exceed 12 months);
v) an outline of methods of evaluation to be used and indicators of success; 
vi) confirmation of who will be responsible for evaluation of specific remediation 
activities; 

vii) a monitoring system to support success; and 
viii) possible consequences if the Faculty Members fails to satisfactorily complete the 
remediation. 

ix) The Committee must provide written reasons for their decision, including the 
remediation plan, if any, to the Faculty Member, his or her Department Head or 
designate and the Associate Dean. The Program Director and Division Head may also 
be provided the written decision at the discretion of the committee chair. 

3. The remediation period 
a. The implementation of a remediation plan may be supported by the Office of 
Continuing Medical Education and Faculty Development if requested by the Faculty 
Member or his or her Department Head or designate. Any associated costs will be 
borne by the Faculty Member. 
b. The Associate Dean and Department Head will be provided with copies of all 
evaluations carried out during the remediation period. 

4. Consideration of reinstatement of residents 
a. No later than 30 Days after the expiry of the remediation period, the Associate Dean 
will provide the Committee with a written assessment of the Faculty Member's 
compliance with, and success in, the remediation plan. 
b. The Committee will then follow steps F.2.b. – F.2.f. of the Procedures, with necessary 
changes in points of detail. 
c. Following the meeting, the Committee will deliberate in camera. They will prepare a 
written decision with reasons which includes at least the following: 
i) A summary of the facts and arguments; 
ii) The extent to which the Faculty Member complied with, and was successful in, the 
remediation plan; 
iii) Whether an extension of the remediation period is required; 
iv) Whether residents should be reinstated to the Faculty Member’s clinical service; and 
v) If residents are to be reinstated, the terms of such reinstatement, if any. 
d. The Committee must provide their written decision to the Faculty Member, his or her 
Department Head or designate and the Associate Dean. 

5. Appeals 
a. Decisions to remove residents and not to reinstate residents may be appealed by a 
Faculty Member in writing to the Vice-President, Academic and Provost within 30 Days 
of delivery of the Committee’s decision. 
b. The Vice-President, Academic and Provost or designate will consider the appeal and 
provide a written decision with reason within 60 Days of receiving the appeal. 
c. The decision of the Vice-President, Academic and Provost or designate is final.