DALHOUSIE UNIVERSITY Postgraduate Medical Education	*Policy* Sponsor: Faculty of Medicine	*Approval Date:* *PGME Committee - June 4, 2026* *Faculty council –* *October 6 , 2026*
Removal of Teaching Privileges	*Responsible Unit:* Postgraduate Medical Education	*Amendments:*

A. Background & Purpose:

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

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

B. Application:

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

C. Guidelines:

1. Any removal of and/or reinstatement of Learners to a Faculty Member must be addressed under this Guideline unless it arises based on a process outlined in a university-wide policy, such as the Sexualized Violence Policy, the Discrimination Policy, or the Harassment Policy.
2. An Associate Dean or Department Head may remove Learners from a Faculty Member in accordance with the Procedures when they have reasonable grounds to believe that the conduct of the Faculty Member places Learners at physical or psychological risk, including by:
    a. engaging in unprofessional, disrespectful or abusive behaviour towards learners resulting in a hostile learning environment; or
    b. failing to provide appropriate supervision, risking patient or learner safety.

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 relevant postgraduate Program Director or Associate Dean for UGME, Dalhousie Medicine New Brunswick, as applicable.

3. In exceptional circumstances where an Associate Dean or Department Head determines that it is necessary to remove Learners from more than one Faculty Member in a clinical service, the process outlined below will be adapted to fit those circumstances. In any such event, the process to be followed will be outlined for the Faculty Members involved at the outset.
4. Committee decisions will be binding on the Faculty Member, applicable training programs and affected Learners.
5. Committee decisions to remove Learners and not to reinstate Learners may be appealed by a Faculty Member to the Provost and Vice-President Academic or designate in accordance with the Procedures. For greater certainty, the terms of remediation and/or reinstatement 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.
    b. to address risks to health and safety; or
    c. to meet obligations under an affiliation agreement with any applicable health authority.
7. Nothing in this Guideline is intended to interfere with a Department 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.

D. Administrative Structure:

1. Authority: This Guideline is administered by the Faculty of Medicine, through the appropriate Associate Dean.
2. The Committee:
    a. The Committee is responsible for:
        i. assessing whether the decision to remove Learners was reasonable;
        ii. establishing the terms of remediation, if applicable;
        iii. determining whether and on what conditions Learners may be reinstated; and
        iv. adjudicating a request from the Faculty Member for reconsideration of a decision that remediation has not successfully been completed.
    b. Members of the Committee, appointed by Faculty Council on the recommendation of the Associate Dean, will comprise:
        i. One program director OR clerkship director (as applicable) from a different Department or Division than the Faculty Member in question;
        ii. One faculty member from a different Department or Division than the Faculty Member in question; and
        iii. One trainee from a substantively comparable postgraduate training program; OR

iv. One medical student representative. OR
v. One graduate student.

3. Conflicts of Interest: Where the Associate Dean is unable to discharge their responsibilities under this Guideline due to a potential conflict of interest, as defined by the University's Conflict of Interest Policy, their 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.
5. In circumstances where the procedures described below cannot apply because of the identities of the individual(s) involved (i.e. learners are being removed from a Department Head or Associate Dean), their responsibilities under this Guideline will be assumed by their direct supervisor.

E. Procedures:

1. Removal of Learners

a. An Associate Dean or Department Head may remove Learners from the clinical service of a Faculty Member where there are reasonable grounds to believe that the conduct of the Faculty Member places Learners at physical or psychological risk.

Learners may be removed upon consideration of the following:

i. the particulars of why Learners should be removed;
ii. alternate solutions that have been attempted, if any;
iii. the past record of the Faculty Member in educational activities, including Learner evaluation forms and letters of complaint (anonymous or not); and
iv. any other relevant facts or supporting documentation.

b. Before removing Learners, 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. Before removing Learners, the Associate Dean will also consult with the applicable health authority to determine if it is possible and appropriate to develop a plan to address the concerns with the Faculty Member without removing Learners and if the concerns affect both the learning and working environment.
d. If it is determined that Learners must be removed, the Associate Dean will communicate this decision in writing, outlining the reasons for removal. The Associate Dean will notify all relevant parties and support Learners in arranging alternative service assignments, as required.

The Associate Dean will notify:

- The relevant Faculty Member (in writing, including the rationale for removal)

- The Dean of the Faculty of Medicine
- The applicable health authority
- The affected Learners (with support to arrange alternative service assignments)

e. Where removal is required urgently for immediate Learner safety reasons, the Associate Dean or Department Head will inform the Faculty Member verbally with written notification consistent with section F.1.d. to follow within 2 Days.

f. A Faculty Member who has had postgraduate trainees removed from their service will automatically be precluded from supervising undergraduate or graduate Learners at any level, and vice versa. The Associate Deans will notify one another of any withdrawal of Learners from the service of a Faculty Member.

2. Informal Resolution

a. In circumstances where a Faculty Member acknowledges the concerns leading to the removal of Learners and agrees that the removal was reasonable, and the Associate Dean and Department Head agree that the Faculty Member is capable of being remediated, the Faculty Member may be offered an informal resolution, which will include a remediation plan. An Informal Resolution offers the Faculty Member an opportunity to voluntarily engage in a remediation process without requiring the matter to be reviewed by a Committee in accordance with the process outlined in Section F.3.

b. The informal resolution will be prepared by the Associate Dean in consultation with the Department Head and, where appropriate, the Office of Continuing Professional Development and Medical Education, and will include the components listed in Section F.3 (g).

c. A Faculty Member must confirm in writing to the Associate Dean their agreement with the informal resolution.

d. If the terms of the informal resolution are met by the Faculty Member, the Associate Dean and Department Head will reinstate the Faculty Member's teaching privileges and return Learners to the Faculty Member's clinical service. If the terms of the informal resolution are not met, the Associate Dean and Department Head may refer the matter to a Committee and the process under sections F.3-6 will apply.

3. Appointment of the Committee

a. Within 7 Days of the Learners' removal, the Associate Dean will ask Faculty Council to appoint a Committee in accordance with section E.2. The appropriate Associate Dean will provide the Committee and Faculty Member with materials that support their decision to remove the Learners and a proposed remediation plan.

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 advise the Faculty Member 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 OR Clerkship Director OR Assistant Dean MPAS and Department Head with copies of all materials that will be considered at the meeting; and
    ii. Provide other people 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. The Committee will decide if the decision to remove Learners was reasonable and if so, if the Faculty Member is capable of being remediated. In extraordinary circumstances, the Committee may find the Faculty Member is not capable of being remediated and may decide not to reinstate Learners on any terms. In all other circumstances, the Committee will specify 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 completion (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 Member fails to satisfactorily complete the remediation.
h. The Committee must provide written reasons for their decision, including the remediation plan, if any, to the Faculty Member, their Department Head or designate, their Division Head, and the Associate or Assistant Dean(s).

4. The Remediation Period

a. The implementation of a remediation plan may be supported by the Office of Continuing Professional Development and Medical Education if requested by the Faculty Member or their 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.

5. Reinstatement of Learners

a. No later than 30 Days after the completion of the remediation plan, the Associate Dean and Department Head will review the Faculty Member's compliance with, and success in, the remediation plan and will determine whether the objectives have been met and Learners can be reinstated to the Faculty Member's clinical/teaching service. This decision, with accompanying reasons, will be communicated to the Faculty Member in writing.

b. If it is determined that the remediation plan has been successfully completed, the Associate Dean and Department Head will reinstate the Faculty Member's teaching privileges and return Learners to the Faculty Member's clinical service.

c. If it is determined that the remediation plan has not been successfully completed, the Associate Dean and Department Head will request that a committee be appointed to review the matter and determine the appropriate consequences. The Committee will then follow steps F.3.b. – F.3.f. of the Procedures, with necessary changes in points of detail. Note that the Committee struck at this stage is not necessarily composed of the same individuals as those making the decision under F.3.g. above).

d. If the Faculty Member wishes to have the matter considered by a Committee, the Associate Dean will ask Faculty Council to appoint a Committee in accordance with section E.2. Following the meeting, the Committee will deliberate in camera. They will prepare a written decision with reasons which include 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 Learners should be reinstated to the Faculty Member's clinical/teaching service; and
   v. If Learners are to be reinstated, the terms of such reinstatement, if any.

e. The Committee must provide their written decision to the Faculty Member, their Department Head, and the Associate Dean. The Department Head may share with Faculty Member's Division Head to implement as necessary. The Associate Dean may share the written decision or details contained therein with any applicable health authority necessary to meet obligations under an affiliation agreement.

6. Review and Appeals

a. A Faculty Member may request that a decision made by the Associate Dean and Department Head that the terms of an informal resolution have not been satisfied or that a remediation plan has not been successfully completed be reviewed by a committee by submitting a written request to the Associate Dean within 10 days of receiving the decision at issue. Upon receipt of that request, the Associate Dean will ask Faculty Council to appoint a Committee in accordance with section E.2. The Committee will then follow steps F.3.b. – F.3.f. of the Procedures, with necessary changes in points of

detail. Note that the Committee struck at this stage is not necessarily composed of the same individuals as that previously involved.

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

F. Definitions:

In this Guideline:

1. ***"Associate Dean"*** means the Associate Dean of Postgraduate Medical Education (PGME) OR Undergraduate Medical Education (UGME) OR Senior Associate Dean, Medical Education (for MPAS program students).
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 their primary academic appointment.
5. ***"Faculty Member"*** means an individual who holds an academic appointment to Dalhousie's Faculty of Medicine.
6. ***"Learner"*** refers to a student registered in a postgraduate OR undergraduate medical program, regardless of university. Depending on the circumstances, Learners may also include graduate students.