Undergraduate Medical Education Progress,
Promotion and Appeal Regulations
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1. Introduction
This document outlines the regulations and guidelines for promotion, assessment and appeals throughout the undergraduate medical curriculum. It is recommended that students familiarize themselves with these promotion, assessment and appeal regulations. It is advisable to review them at the beginning of each academic year. If clarification is required of any of the content of these regulations, please contact the Associate Dean, Undergraduate Medical Education (UGME) or the Associate Dean, Dalhousie Medicine New Brunswick (DMNB), as appropriate.

1.1. Progress Committee
The Terms of Reference of the Progress Committee can be found at:
http://medicine.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/faculty-council/FoM_Terms_of_Reference_June_2015.pdf

1.2. Assessment
A variety of assessment methods are used for the educational experiences throughout the undergraduate medical program including, but not limited to:

- Written examinations
- Laboratory examinations
- Clinical Skills Assessments including Objective Structured Clinical Examinations (OSCE)
- Tutorial Assessments
- Clinical logs
- Research in Medicine Assessments
- In-Training Evaluation Reports (ITERs)
- Participation in scheduled academic sessions

Professionalism and communications skills are assessed throughout the undergraduate medical program. In order to pass each year in the undergraduate program, all summative assessments must be successfully completed.

The standards for assessments are set and published by the Faculty of Medicine.

2. Professional Conduct
A student in the undergraduate medical education program must meet both academic and professionalism requirements in order to graduate. The Faculty of Medicine Professionalism Policy can be found at:
Without limiting what is contained in the Professionalism Policy, medical students are expected to adhere to the standards of ethical behaviour expected of the medical profession. Behaviour which violates these principles, and which affects the performance of professional activities, is viewed as a demonstration of lack of suitability to be a physician. In light of this, assessment of behavioural and ethical performance will be related to the following:

2.1 Communication
The medical student must display adequate skill at communicating and interacting appropriately with their patients, peers, families, clinical faculty and other medical staff, support staff and other health care professionals as described in section 2.2 below.

2.2. Required Professional Behaviours
Medical students must demonstrate:

- respect, empathy and compassion for patients and their families;
- concern for the needs of the patients and their families to understand the nature of the illness and the goals and possible complications of investigations and treatment;
- respect for, and ability to work harmoniously with their peers, clinical faculty, other health care professionals, support staff and medical staff;
- recognition of the importance of informed self-assessment and of lifelong learning for the maintenance of competent performance;
- awareness of the effects that differences in cultural and social background have on the maintenance of health and the development of, and reaction to, illness;
- respect for the patient as an informed participant in decisions regarding his/her care, wherever possible;
- respect for, and compliance with institutional policies, guidelines and bylaws;
- behaviour that is supportive and respectful in tutorials and all learning activities;
- openness to feedback and a willingness to make changes in response to feedback;
- compliance with academic attendance requirements of the undergraduate medical program.

2.3. Unacceptable Behaviours
Behaviour unacceptable to the professional study of medicine includes, but is not limited to:

- breach of any of the above principles of behaviour;
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- referring to oneself as, or holding oneself to be, more qualified than one is;
- behaviour or inappropriate judgement which adversely affects the medical education of self or others;
- commission of a criminal act;
- failure to be available while on call;
- failure to attend mandatory teaching sessions;
- failure to respect patients' rights;
- breach of confidentiality;
- failure to provide transfer of responsibility for patient care;
- failure to keep proper medical records;
- falsification of medical records;
- sexual impropriety or other unethical behaviour;
- being under the influence of alcohol or drugs while participating in patient care or on call; sexual or other harassment of peers or other members of the health care team;
- any conduct unbecoming of a medical student in training; and
- a pattern of tardiness or absenteeism

Other behaviours not listed may also be considered unacceptable. The above is not an exhaustive list. Proven and confirmed breaches of these ethical and behavioural standards are serious matters, represent a failure to meet accepted standards and may result in remedial training, removal from clinical rotations, or dismissal from the undergraduate medical program under these Regulations.

3. Remediation
Remediation is designed to assist the student in correcting his or her identified deficiencies in clinical, academic and professional performance so that the student has the opportunity to be successful in the program. All students with identified concerns or assessment failures are required to meet with the Associate Dean UGME or DMNB. The purpose of the meeting is to identify how best to address deficiencies and provide educational coaching.

3.1. Circumstances that may Require Remediation include but are not limited to:

3.1.1. Med 1 and Med 2

- A student who has a second component failure in one or more assessments within one academic year;
- A student receives a failure in one end of unit written assessment;
- A student receives a failure in one end of unit laboratory assessment;
- A student has concerns identified or fails a tutorial assessment;
- A student fails a summative assessment by tutor in the skilled clinician unit;
- A student fails an OSCE; and
• A student who demonstrates attitudes or behaviors that are unprofessional.

3.1.2. Clerkship
• A student with concerns identified on an ITER;
• A student who fails an ITER;
• A student who fails one summative clinical rotation assessment; and
• A student who demonstrates attitudes or behaviors that are unprofessional.

3.2. Remediation Design and Content
The Associate Dean UGME or DMNB will determine if remediation is required, and if so will design the remediation required, in consultation with the appropriate unit head and any other individual the Associate Dean determines is appropriate. At his or her discretion, the Associate Dean, UGME or DMNB, may request input from the Progress Committee for any remediation plan.

When remediation is required, the remediation plan shall be summarized in writing, and shall include the following elements:
• nature of the remedial program;
• identified areas to remediate;
• expected outcomes of remedial training;
• time frame for elements of the remedial program, including completion;
• outline of the methods of assessment to be used; and
• consequences of failure to satisfactorily complete the remediation program having regard to the status of the student at the time of remediation. This includes, but is not limited to, informing the student that failure of remediation may result in failing the year.

Prior to its commencement, the student must sign the remediation plan. If concerns are identified during remediation, the student may be asked to meet with the Progress Committee to discuss the remediation plan and would be told they are at risk for dismissal.

In Med 1 and Med 2, remediation typically occurs in the summer and students must be available to complete requirements prior to being promoted to the next academic year.

3.3. Remediation Plan Rating

Students will receive a “pass/fail” rating for the remediation.
3.4. Leaves of Absence During Remediation.

Except in exceptional circumstances, a student participating in a remediation plan shall not be permitted to take a leave of absence. The Associate Dean, UGME or DMNB, must approve any leave of absence in writing in advance of the leave. In the event that the Associate Dean UGME or DMNB determines that a leave of absence is appropriate in the circumstances, the remediation program will be considered incomplete. In such an event, the Associate Dean UGME or DMNB will redesign the remediation plan, with input from appropriate unit or rotations heads, and if requested, the Progress Committee. The redesigned remediation will take into account the nature of the deficiencies identified, the performance of the student to date, and the need for continuity of training.

4. Promotion Requirements

In order to be promoted to the next year, the student must:

- Pass all summative assessments of the year, including, but not limited to, electives, labs, ITERs, tutorials;
- Pass all required remediation;
- Pass all required supplemental assessments; the supplemental assessment(s) may be tailored to the failed component(s);
- Receive satisfactory assessments of their progress in the Skilled Clinician longitudinal unit;
- Receive satisfactory assessments of their progress in the Research in Medicine unit;
- Meet all standards for professional behavior as described in these Regulations and the Professionalism Policy.

A student who fails to meet requirements for promotion will either be eligible to apply to repeat the year or be considered for dismissal from the undergraduate medical program.

5. Deferral and Supplemental Assessments

a. Students, except those in a repeat year, may defer one summative assessment in each academic year. In exceptional circumstances, the Associate Dean UGME or DMNB may consider:
   i. allowing more than one deferral or
   ii. students in a repeat year to defer one summative assessment.

b. The following students are eligible to sit the supplemental assessments.
   i. A Med 1 or Med 2 student who fails any combination of no more than two
summative assessments, including written, lab and OSCE assessments.

ii. A Clerkship student who fails no more than two summative clinical rotation assessments.

iii. Notwithstanding sections i. and ii., above, students in repeat status may only sit one supplemental assessment. That supplemental can be for an assessment that had also been failed the previous year.

6. Repeating the Year

6.1. Eligibility

The following students are eligible to apply to repeat the year:

- A student who fails 1 end of unit or clinical rotation summative assessment plus the supplementary assessment in one academic year;
- A Med 1 or Med 2 Student who fails 3 summative assessments, including written, lab, and OSCE assessments;
- A Clerkship student who fails 3 clinical rotation summative assessments;
- A student who fails to remediate communication and professionalism concerns identified in case based tutorials are eligible to apply to repeat the year, but as noted in section 8, may be considered for dismissal;
- A student who has fails to receive satisfactory assessments of their progress for the skilled clinician unit;
- A student who fails to receive satisfactory assessments of their progress for the Research in Medicine unit
- A student who fails required remediation for any portion of the curriculum, but as noted in section 8, may be considered for dismissal;
- A student in good standing who is granted permission to restart the year on the basis that she or he withdrew voluntarily due to illness or other personal circumstances;
- A student who has met promotion requirements but who feels s/he would benefit from repeating a year.

Notwithstanding the eligibility criteria set out above, no student will be permitted more than one repeat year during the undergraduate program. A student in this situation may be dismissed from the program.

6.2. Request to Repeat the Year

A student who meets the eligibility criteria to repeat the year and wishes to repeat the year, must submit a request to repeat the year in writing to the Associate Dean,
UGME or DMNB, no later than 3 weeks prior to the start of the academic year. The Associate Dean, UGME or DMNB, will provide the request to the Progress Committee.

The student’s request must explain the circumstances giving rise to their request, why they wish to repeat the year, how they plan to be successful in the future, and confirm their readiness to return to the study of medicine. If the Progress Committee believes that this information is not sufficient to support the student’s success in a repeat year, the Progress Committee may identify additional requirements that the student must fulfill during the repeat year.

A student who is granted permission to restart the year on the basis that (a) she or he withdrew voluntarily due to illness or other personal circumstances or (b) she or he has met promotion requirements but feels she or he would benefit from repeating a year, will not be considered a student in a repeat year. A student who fails one or more assessments and withdraws due to illness must be reviewed by the Progress Committee prior to re-entering the undergraduate medical program. A decision regarding their status on returning to the program will be decided at that time. If the Associate Dean Dean UGME, or DMNB identify any concerns, the student must come before the Progress Committee in person.

7. Suspension from the Undergraduate Medical Program

The Associate Dean UGME or DMNB may suspend an undergraduate student from Med 1, Med 2, or Clerkship where, in their opinion, there is a reasonable basis to conclude that the student is jeopardizing patient care and safety, the safety of other students or the Dalhousie community, and/or the student is or has engaged in unprofessional conduct. The Associate Dean UGME or DMNB shall refer the matter to the Progress Committee as soon as reasonably possible to determine whether the student ought to be dismissed from the program. In the case of students in Clerkship, in the absence of the Associate Dean UGME or Associate Dean DMNB, the Assistant Dean of Clerkship or the Assistant Dean Clinical Education DMNB, may act on his or her behalf.

8. Dismissal from the Program

a. The Associate Dean UGME or DMNB may recommend that the Progress Committee dismiss a student from the undergraduate medical program in the following circumstances:

- the student has required remediation for professionalism issues a second time;
- a Med 1 or 2 student who has failed four or more summative assessments
(written, lab or OSCE)

- a Clerkship student who has failed 4 end of rotation summative assessments;
- a student who has failed a remediation plan;
- the time taken to complete the Undergraduate Medical Education Program will exceed 7 years;
- a student who has engaged in unprofessional conduct that, in the judgment of the Progress Committee cannot be remedied through a remediation plan;
- a student who is not eligible for promotion but who is eligible to repeat the year that has either not applied to repeat the year or his or her request to repeat the year has been denied;
- a student who has been suspended from the program and has failed to meet the terms imposed for returning to the program, within the timeframe prescribed.

b. Notwithstanding section 8(a), a student who otherwise meets the criteria for dismissal set out above, may instead be suspended from the program or permitted to repeat the year by the Progress Committee because of exceptional personal circumstances. In such event, the Associate Dean UGME or DMNB will set out the terms of the suspension in writing, including, but not limited to, the duration of the suspension as well as the conditions upon which he or she may re-enter the undergraduate medical education program. Prior to being permitted to re-enter the undergraduate medical education program, the student must meet with Progress Committee and demonstrate their readiness to return to the study of medicine.

c. The student must be given the opportunity to attend the Progress Committee meeting at which his or her dismissal is under consideration and to make representations to it. To this end, the Chair of the Progress Committee must provide the student with:

- written notice of the meeting at which the dismissal will be considered;
- the Associate Dean’s UGME or DMNB, written recommendation for dismissal and copies of all supporting documentation;
- copies of the documentation to be considered by the Progress Committee;
- the opportunity to make written submissions to the Progress Committee;
- the opportunity to make oral submissions to the Progress Committee; and
- notice of his or her right to have a support person or other representative present at the meeting.

d. The Associate Dean UGME or DMNB shall not participate in the Progress Committee’s deliberations or decision-making regarding dismissal.

e. The Progress Committee shall deliberate in camera. The Chair of Progress Committee shall forward a written decision, including reasons, on behalf of the Progress Committee to the student and the Associate Dean UGME and DMNB. The
decision will also confirm the student’s right to appeal the decision to a Faculty Appeals Committee as outlined in Section 10.

9. Leave of Absence

The leave of absence policies can be found at the links below.

**Illness-Related Leave**
Please see related policy document

[https://cdn.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/undergrad/General%20Absences%20due%20to%20illness.pdf](https://cdn.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/undergrad/General%20Absences%20due%20to%20illness.pdf)

**Non Illness-Related Leave**
Please see related policy document

Pre-Clerkship:


Clerkship:

[https://cdn.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/undergrad/Clerkship%20Short%20and%20Long-Term%20Leave%20of%20Absence%20Protocol.pdf](https://cdn.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/undergrad/Clerkship%20Short%20and%20Long-Term%20Leave%20of%20Absence%20Protocol.pdf)

Students on an illness related leave of absence must be reviewed by the Progress Committee prior to re-entering the undergraduate medical program. If concerns are identified by the Associated Dean UGME or DMNB, the student must appear before the Progress Committee in person. Students on a non illness-related leave must be reviewed or come before the Progress Committee if the Associate Dean, UGME or DMNB determines this is warranted. When coming before the Progress Committee, students must provide documentation of their readiness to return and the supports they have in place.

10. Right to Review and Appeal
10.1. **Review of Remediation**

A student may request that the Progress Committee review a decision of the Associate Dean, UGME or DMNB to require remediation, including the contents of the remediation plan, pursuant to section 3. A review by the Progress Committee may occur notwithstanding that the Associate Dean, UGME or DMNB may have consulted with the Progress Committee pursuant to section 3.2.

A request for review, including the reasons for the request and any supporting documentation, must be made in writing by the student to the Associate Dean, UGME or DMNB within 14 calendar days of delivery of the remediation plan to the student.

The Chair of the Progress Committee will set a date for the review meeting and notify the student and the Associate Dean, UGME or DMNB. The review meeting must occur within 28 calendar days of receipt of the written notice to the Associate Dean, UGME or DMNB. The Associate Dean, UGME or DMNB shall provide the Chair of the Progress Committee and the student with all documentation forming the basis for the remediation program, no later than fourteen calendar days prior to the meeting. The student shall provide the Associate Dean, UGME or DMNB with any additional materials he or she wishes the Progress Committee to consider no later than seven calendar days prior to the review meeting.

The student and the Associate Dean, UGME or DMNB shall attend the review meeting and be provided the opportunity to make submissions. The Progress Committee shall then deliberate *in camera*. The Associate Dean, UGME or DMNB shall not participate in the Progress Committee’s deliberations or decision making.

The Progress Committee may:

- reaffirm the Associate Dean, UGME or DMNB’s original decision, in whole or in part;
- reverse the Associate Dean, UGME or DMNB’s decision to require the student to complete remediation; or
- make specific modifications to the contents of the remediation plan.

The Progress Committee will prepare a written decision, including reasons and provide a copy to the student and the Associate Dean, UGME or DMNB for inclusion in the student’s file.

10.2. **Appeal of a Progress Committee decision**

A student may appeal a Progress Committee decision, to the Faculty
Undergraduate Appeal Committee ("Appeal Committee") on the basis that:

- Progress Committee had no jurisdiction to make the decision.
- Progress Committee denied the student natural justice (procedural fairness); or
- There is new information relevant to the reason for the Progress Committee’s decision that was unavailable at the time the decision was made.

An appeal must be commenced within 28 calendar days of notification of the decision of the Progress Committee by filing a written notice of appeal with the Associate Dean, UGME or DMNB.

The notice shall contain:

- the name and contact information for the student;
- a description of the matter under appeal, the grounds of appeal and supporting arguments;
- any supporting documents; and
- the requested outcome.

10.3. Appeal Committee

The Appeal Committee shall be struck by Faculty Council as soon as possible following receipt of the notice of appeal and shall comprise the following:

- Two faculty members, one of whom will act as Chair of the Appeal Committee;
- The President of the DMSS or, in the President’s absence, the DMSS Vice President for Medical Education, or if neither is available, the President of the DMSS may appoint a designate.

The Associate Dean, UGME or DMNB shall provide a copy of the student’s notice of appeal materials to the Chair of the Appeal Committee and will provide his or her written response, including supporting documentation, within 14 calendar days of the Appeal Committee being struck.

10.4. Appeal Hearing

The Appeal Committee shall make best efforts to ensure the appeal hearing is held within 42 calendar days of receipt of the student’s notice of appeal. All information to be considered during the appeal must be circulated to the Appeal Committee, the student, and the Associate Dean, UGME or DMNB.
Following the hearing, the Appeal Committee will deliberate in camera. The decision will be by simple majority.

The Appeal Committee may:

- Dismiss the appeal;
- Allow the appeal, in whole or in part, with recommendations to the Progress Committee for remediation; or
- Refer the matter back to the Progress Committee to:
  - Provide clearer written reasons where the Appeal Committee determines that the Progress Committee’s only deficiency is in relation to the adequacy of the written reasons provided to the student; or
  - Rehear all or part of the matter, providing such direction as the Appeal Committee deems appropriate.

The Appeal Committee Chair will prepare a written decision with reasons. The decision will also confirm the student’s right to appeal the decision to the Dalhousie Senate Appeals Committee or a Dalhousie Senate Ad Hoc Professional Unsuitability Appeals Committee, as appropriate.