

# Independence of Student Health/Psychological Care from Assessment and Promotion

<b>Policy sponsor:</b> Associate Deans, UGME	<b>Approval date:</b> November 24, 2016
Responsible unit: Undergraduate Medical Education Office (UGME)	Amendments: September 28, 2023 – UMECC December 5, 2023 –

**Faculty Council** 

# A. Background & Purpose

Students are not to be evaluated or have their promotion affected by a faculty member or resident who have been or are actively involved with the student as one of their significant health care providers. Application of the policy document includes clear, timely education for students, faculty and staff on the policy including readily accessible information on policy and how to apply the policy to any relevant situation, including how to navigate potential breach of policy and potential repercussions for student, staff, faculty.

# B. Application

This policy applies to all faculty and residents who directly teach and assess a student and faculty who participate in Progress Committee deliberations or in any academic appeals brought forward by a student. Progress Committee members including faculty and students are provided an opportunity ahead of any review of assessment content to declare a conflict of interest. Faculty and residents assuming assessment roles are provided opportunities to a declare conflict of interest ahead of performing any assessment of a student.

Application of the policy requires direction from leadership that may include Component and Unit Heads, Clerkship Directors, Associate/Assistant Deans, Directors, Student Affairs, UGME, PGME and coordinators to address any issues and reassign students.

## C. Definitions

- <u>Academic Assessment</u>: as related to assessment of Tutorial, Skilled Clinician, Elective experiences, ITERs in Clerkship
- <u>Faculty member</u>: member holding an academic appointment in good standing with the Faculty of Medicine
- Student: undergraduate student Resident: postgraduate trainee
- <u>Provider of significant care</u>: Significant care may be defined as an ongoing care relationship for primary or consultant care, or prior care provided during a major health event(s) that may potentially bias the faculty member's evaluation of a learner

- RHA: Regional Health Authority
- <u>UGME</u>: Undergraduate Medical Education

# D. Policy

Providers or supervisors of significant general medical, psychiatric, or psychological care of undergraduate medical students will not have any current or future role in the student's academic assessment, including influence or oversight of decisions about academic evaluation, and no current or future role in promotion or progress of that student.

Providers or supervisors of significant general medical, psychiatric, or psychological care of undergraduate medical students shall not participate in evaluation or recommendation of that student for residency application and will not participate in any CaRMS related interview or review processes.

The Student Affairs Assistant Dean role precludes having any assessment role with medical students. Copies of any communications or documentation from treating professionals submitted by students to Student Affairs are maintained in confidential, secure files within Student Affairs' locked offices or via password protected communications. Such information is used only for the purpose of supporting and/or advocating for the student's progress.

The Faculty of Medicine will inform students of this policy by direct presentations by staff during Orientation sessions and at transition times such as commencement of year 3 and year 4. Residents and faculty are directed to relevant UGME policies at onboarding sessions.

Should providers or supervisors of past or current significant care find themselves indirectly in any evaluative or promotion role, such as with being a preceptor on any clinical or research experience and being responsible for the evaluation, either or both student and provider should notify the appropriate leadership for that context – e.g., Unit Head, Clerkship Supervisor, Postgraduate Site or Program Director, and the campus specific Assistant Dean Student Affairs, of the conflicting role. This is in the interest of both student confidentiality and to limit bias in the evaluative process. Alternates should be found by UGME for the required academic roles while the provider's primary care role and privacy norms within that role are maintained. This includes when active care or treatment is in the past or could be reasonably anticipated in the future.

Where emergency care is necessary it should take precedence and subsequently efforts will be taken through the offices of Student Affairs and UGME to find an alternate learning context and supervisor.

### E. Administrative Structure

- 1. Authority: This policy is sponsored by and falls under the Associate Deans, UGME.
- Undergraduate Medical Education is the unit responsible for administration of this policy including faculty and residents at Dalhousie will be informed of the policy by UGME through written communication to:
  - Faculty Council
  - Senior Associate Dean DMNB

- Associate Dean, Postgraduate Medical Education
- Departments/Divisions and their Heads
- Residency Program Directors
- Unit Heads
- Clerkship Directors and Coordinators
- RHA Medical Education Directors
- Web-based and electronic communications to Faculty in general.
- Residents
- 3. Resident orientation provides mandatory e-modules on teaching medical students including highlighting the link to the UGME Policies posted on the UGME website.
- 4. Confidential student records related to management and disposition of such conflicts of interest will be kept by Student Affairs and UGME.
- 5. Policy Review: This Policy will be reviewed in accordance with Dalhousie's Policy on Policies or earlier if deemed necessary by the Dean of the Faculty of Medicine.

# F. Procedures

Additional procedures for implementation of this Policy may be developed as necessary.