



Policy Name:	Resident Appeals
Application/Scope:	All Postgraduate Medical Education Residents
Approved (Date):	PGME Executive Committee: May 14, 2019; Dean's Council: August 27, 2019
Review Date:	Five years from the approved date
Revised (Date):	November 2018; Sections 2.3-2.4 revised to accord with updated PGME Assessment <i>etc.</i> Policies: January 28, 2022
Approved By:	College Executive Council, Sept. 17, 2019, College Executive Council: April 27, 2021

Background

The CanERA Standards of Accreditation for Institutions with Residency Programs require that the central policies and processes that address resident appeals are regularly reviewed, transparent and effectively applied. Furthermore, the CanERA Standards of Accreditation for Residency Programs stipulate that the process for resident appeals is aligned with applicable central policies.

There are several levels at which postgraduate trainees have the opportunity to appeal assessment decisions which might have a major impact on their progression and promotion in their Residency Program, particularly those involving Remediation, Probation and Dismissal. The levels of academic appeal include the following:

- Residency Program/Departmental Appeals
- Max Rady College of Medicine Academic Appeals
- University of Manitoba Senate Appeals

These guidelines do not apply to appeals of non-academic related matters addressed by separate policies and procedures, including but not limited to the following:

- Appeals regarding matters of accommodation and/or other human rights-related issues
- Appeals regarding disciplinary matters
- Appeals regarding awards matters

DEFINITIONS

Assessment – is a process of gathering and analyzing information on competencies from multiple and diverse sources in order to measure a resident's competence or performance and compare it to defined criteria. Components of the assessment process might include the following:

- **Formative assessment** – assessment for the purposes of providing feedback to guide further learning. Furthermore, it may provide diagnostic information regarding the need for Remediation
- **Summative assessment** – assessment for the purposes of advancement, credentialing or completion (also referred to as a summary review report)
- **Criterion-referencing** – comparing trainee performance to defined criteria. This is required for summative assessment
- **Norm-referencing** – comparing trainee performance to a defined reference group. This is not sufficient for summative assessment, but may be useful as an adjunct to criterion referencing in formative assessment

CanERA – means Canadian Excellence in Residency Accreditation and refers to the system of residency education accreditation developed by CanRAC

CanRAC – is the Canadian Residency Accreditation Consortium, comprised of the three medical residency education accrediting colleges in Canada: Royal College of Physicians and Surgeons of Canada (RCPSC), College of Family Physicians of Canada (CFPC) and Collège des médecins du Québec (CMQ)

Competence – the array of abilities across multiple domains of competence or aspects of physician performance in a certain context. Statements about competence require descriptive qualifiers to define the relevant abilities, context and stage of training or practice. Competence is multi-dimensional and dynamic; it changes with time, experience and settings

Competence Committee – is the committee responsible for assessing the progress of trainees in achieving the specialty-specific requirements of a program

Competence Continuum – an observable ability of a health professional related to a specific activity that integrates knowledge, skills, values, and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition. Competencies can be assembled like building blocks to facilitate progressive development

Competency – is an observable ability of a health care professional that develops through stages of expertise from novice to master

Competency-Based Medical Education – is an outcomes-based approach to the design, implementation, assessment and evaluation of a medical education program using an organizing framework of competencies

Competent – possessing the required abilities in all domains of competence in a certain context at a defined stage of medical education or practice

Dismissal – is the termination of the trainee's enrollment in the training program due to academic, professionalism and/or other reasons

ITAR/ITER – In-training Assessment Report/In-training Evaluation Report is a tool for assessment at the end of each rotation/clinical learning experience for trainees

PARIM – Professional Association of Residents and Interns of Manitoba

PGME – means Postgraduate Medical Education and refers to the Office of Postgraduate Medical Education, which operates within the Max Rady College of Medicine. It represents postgraduate medical education at the University of Manitoba through residency, fellowship,

Areas of Focused Competence, post-doctoral and other training programs. The programs which PGME oversees are those accredited by the Royal College of Physicians and Surgeons of Canada (RCPSC), the College of Family Physicians of Canada (CFPC), the Canadian Psychological Association (CPA), the Canadian Academy of Clinical Biochemistry (CACB), the Canadian College of Microbiology (CCM) and the Canadian College of Medical Geneticists (CCMG). Applicable to all of its training programs, PGME develops and administers policies and governs through the PGME committees. The PGME Office is overseen by the Associate Dean, PGME, Max Rady College of Medicine

PGME Committee for Education Support and Remediation (PGME-CESaR) – is responsible for reviewing and approving all major decisions related to resident progression and promotion by the Residency Program Committee, Resident Progress Committee and by Program Directors, especially those related to possible Remediation, Probation, Suspension and Dismissal/Withdrawal from the Residency Program. The PGME-CESaR deals with issues of a clinical, academic or professional nature

Probation – is an interval/period of training during which the trainee is expected to correct areas of serious clinical or academic challenges or concerns about professional conduct that are felt to jeopardize successful completion of the Residency Program. Probation implies the possibility of Dismissal from the Residency Program if sufficient improvement in performance is not identified at the end of the Probation Period. It is comprised of a formal program/plan of individualized educational support, assessment and monitoring designed to assist the trainee in correcting identified serious performance deficiencies

Remediation – is an interval of training consisting of a formal program of individualized educational support, assessment and monitoring which is designed to assist a resident in correcting identified areas of performance deficiencies. The goal of Remediation is to maximize the chance that the trainee will successfully complete the Residency Program

Representative – a student advocate, a representative from PARIM, a member of the University community not receiving payment for appearing, a member of the student's family or other support person as may be appropriate

Residency Program Committee (RPC) – the committee and subcommittees, as applicable, chaired by the Program Director that supports the Program Director in the administration and coordination of the Residency Program. The Program Director is Chair of the RPC

Resident – an individual enrolled in one (1) of the accredited Residency Programs under the authority of the Associate Dean, PGME. The following is a listing of Resident categories within PGME at the Max Rady College of Medicine:

- A postgraduate learner who has obtained a Doctorate of Medicine (MD) or Doctorate of Osteopathic Medicine (DO) and has an educational or a general license from the College of Physicians and Surgeons of Manitoba (CPSM)
- A learner enrolled in the Clinical Health Psychology Program
- A learner enrolled in one of the Post-Doctoral Residency Programs:
 - Clinical Biochemistry
 - Genetic and Genomic Diagnostics
 - Clinical Microbiology
- A learner enrolled in one of the College of Dentistry Programs

- Oral and Maxillofacial Surgery
- Pediatric Dentistry

Resident Progress Committee – is the committee responsible for coordinating resident assessment in Family Medicine. The Resident Assessment and Evaluation Lead is Chair of this committee

Summary Review Report – is a summative narrative report documenting resident assessment and progress in the Residency Program. The summary review report is sometimes referred to as the summative assessment report

Suspension – is the temporary removal of a resident from clinical and academic activities

Trainee – in the case of PGME, is any PGME Program learner who is appropriately registered with and licensed by CPSM or other applicable licensing authority and who is fulfilling the certification requirements for a primary discipline, subspecialty, certification of special competence or enrolled in a program designated as “Accreditation without Certification” or enrolled in a program to gain an educational experience beyond certification requirements

Working Days – include Monday through Friday and exclude weekend days, statutory holidays and acknowledged University of Manitoba closure days

1. PURPOSE

1.1 To provide guidance on the consideration of academic appeals pursued by postgraduate trainees enrolled in Residency Programs

1.1.1 These guidelines do not apply to appeals of non-academic related matters addressed by separate policies and procedures, including but not limited to the following:

- Appeals regarding matters of accommodation and/or other human rights-related issues
- Appeals regarding disciplinary matters
- Appeals regarding awards matters

2. POLICY STATEMENTS

2.1 With respect to appeals of resident academic assessment, the following apply:

2.1.1 The resident may appeal an academic assessment based on one or more of the following grounds:

- The resident believes that the process of their assessment was biased or unfair
- The resident believes that procedural errors in the application of regulations regarding their academic assessment might have occurred
- The resident believes that there is an inaccuracy in the assessment rating (substantive claim)

- 2.1.2 The trainee may not appeal individual formative assessments which provide data on performance but are aggregated for use in progress decisions
- 2.1.3 The trainee may appeal summative assessments which aggregate data from multiple sources
- 2.2 With respect to appeals of Progression/Promotion decisions, the trainee may appeal progress decisions of the Competence Committee/Resident Progress Committee/Residency Program Committee
- 2.3 With respect to appeals of Remediation decisions, the resident may appeal the outcome decision only at the conclusion of the Remediation
- 2.4 With respect to appeals of Probation decisions, the trainee may appeal the outcome decision only at the conclusion of the Probation
- 2.5 The trainee may appeal the decision for Suspension from the Residency Program
- 2.6 The trainee may appeal the decision for Dismissal from the Residency Program
- 2.7 The trainee may appeal decisions of the PGME-CESaR with respect to the following:
 - Final Probation decisions
 - Suspension
 - Dismissal from the Residency Program
- 2.8 With respect to levels of appeal, the following apply:
 - 2.8.1 **Pre-appeal resolution** is an informal stage where the resident and the Rotation Supervisor or Faculty Advisor meet to attempt to resolve the issue(s)
 - 2.8.2 **Residency Program/Departmental level appeals** involve the following:
 - 2.8.2.1 The **Residency Program Committee (RPC)** or a delegated subcommittee hears appeals unless this committee made the decision under appeal
 - 2.8.2.1.1 If the issue under appeal occurred outside the resident's Home Residency Program, the appeal will be conducted by the resident's Home Residency Program and RPC
 - 2.8.2.1.2 Each RPC may develop written guidelines, based on the guidelines for ad hoc appeals in this policy, describing the procedure for handling appeals.
 - 2.8.2.1.3 In the event that a procedure for the ad hoc RPC appeals is not in place, the RPC will use the guidelines in this policy except that the membership and Chair of the ad hoc RPC appeals committee are members of the resident's Home RPC or delegated subcommittee
 - 2.8.2.2 An **ad hoc Departmental Appeals Committee** hears appeals not appropriate for hearing by the RPC, such as decisions of the RPC and appeals of the RPC appeals committee decisions, or any other appeal that is felt by the Residency Program to be beyond the jurisdiction of the RPC, but within the jurisdiction of the Department
 - The Chair of the Committee is the Department Head or their designate

- The Committee must have five (5) members, including the Chair, as follows:
 - Representation should be similar to that of the RPC and should include faculty with experience in postgraduate medical education
 - One (1) resident representative appointed by PARIM
 - The Program Director must not be a member of the Department Appeals Committee if they were involved in the decision under appeal

2.8.3 **Max Rady College of Medicine Academic Appeals Committee** hears appeals pursued by residents as follows:

- Appeals of Departmental Appeals Committee Decisions
- Appeals beyond those processes that exist within the Residency Programs or Departments
- Appeal of decisions made by the PGME-CESaR with respect to the following:
 - Final Probation decisions
 - Suspension
 - Dismissal from the Residency Program

2.8.4 **University of Manitoba Senate Appeal Process**

2.9 Pending the disposition of an appeal, the RPC shall determine if a resident may continue with regularly scheduled rotations or whether alternative arrangements such as leave of absence (LOA) are necessary

3. PROCEDURES

3.1 With respect to initiating a Residency Program/Department level appeal, the following apply:

3.1.1 The resident must submit a written request (email or hard copy) for appeal to their Home Program Director within ten (10) working days of the date of the first notification of results of any of the items: 2.1 – 2.6

3.1.1.1 The request for appeal must include the following:

- An explanation of why the resident disagrees with the assessment
- The grounds for the appeal
- Any evidence or documents that the resident believes are relevant to the appeal

3.1.2 Where appropriate, after an appeal has been filed by the resident, the Home Program Director, Rotation Supervisor (if applicable), Preceptor or Faculty/Academic Advisor are encouraged to meet with the resident to attempt a pre-appeal resolution of the issues

3.1.2.1 The resolution meeting should be completed no later than ten (10) working

- days after the filing of an appeal by the resident
- 3.1.2.2 The outcome of the resolution meeting should be documented clearly and recorded in the resident's file/electronic portfolio
 - 3.1.2.3 If a mutually satisfactory resolution to the resident's appeal is not possible at a pre-appeal resolution hearing, then the appeal must be heard formally by the RPC within thirty (30) days of the pre-appeal resolution meeting
- 3.1.3 If no initial meeting is requested or held, the Department level appeal should proceed, as follows:
- 3.1.3.1 The resident must be given at least five (5) working days' notice of the time and place of the hearing, as well as the membership of the Committee
 - 3.1.3.2 The resident has the right to be heard and to be accompanied by a representative
 - 3.1.3.2.1 The Chair will have the right to determine the level of participation of the representative and this will be communicated prior to the hearing
 - 3.1.3.2.2 The accompanying representative may present the resident's case if requested to do so by the resident and if granted authorization by the Committee
 - 3.1.3.3 If new documents are introduced at the time of the hearing, the resident, the Residency Program and the Appeal Committee have the right to request a postponement in order to consider their response
 - 3.1.3.3.1 The Committee shall grant whatever postponement of the hearing that it determines to be appropriate to allow all parties to fully understand the evidence that will be used at the hearing
 - 3.1.3.3.2 New information may not be introduced after all parties have presented evidence and have left the hearing prior to deliberation
 - 3.1.3.4 Following all presentations, all parties except Appeal Committee members and support resources for the Committee will be asked to leave the hearing and will be advised that the decision will be communicated as soon as possible once it is available
 - 3.1.3.5 The Committee shall consider all relevant evidence that was presented by the parties
 - 3.1.3.6 Deliberations will be held in strict confidence
 - 3.1.3.7 Voting will be conducted by closed ballot
 - 3.1.3.7.1 The Chair will count ballots in conjunction with one (1) other Committee member
 - 3.1.3.7.2 Decisions will be made by simple majority vote
 - 3.1.3.7.3 Vote counts will not be announced or recorded in the minutes of the hearing nor in the written decision of the Committee
 - 3.1.3.7.4 Pending the release of full reasons, the Chair will announce only that the appeal has been upheld or denied

- 3.1.3.8 Minutes for the deliberation of the Committee shall include motions made, the final decision and a brief rationale only
- 3.1.3.9 The Chair is responsible for writing a decision letter including a summary of reasons for the RPC or ad hoc Departmental Appeal Committee decision
 - 3.1.3.9.1 The decision letter will be sent within twenty (20) working days to the following:
 - Resident
 - Home Program Director
 - Associate Dean, PGME
- 3.1.4 Appeal decisions made by the RPC and/or an ad hoc Departmental Appeal Committee may be further appealed to the Max Rady College of Medicine Academic Appeals Committee or to the University of Manitoba Senate Appeal Process
- 3.2 With respect to initiating a Max Rady College of Medicine Academic Appeals Committee appeal, residents are advised to refer to the **Max Rady College of Medicine Policy and Procedures on Academic Appeals** (Appendix 1)
- 3.3 With respect to initiating a University of Manitoba Senate appeal, residents are advised to refer to the **University of Manitoba, Senate Committee on Appeals Policy and Procedures** (Appendix 2)

POLICY CONTACT: Associate Dean, PGME

REFERENCES

Office of Fair Practices and Legal Affairs, http://umanitoba.ca/fair_practices/

University of Manitoba Student Affairs, Behavioral Policies and letter templates
<http://umanitoba.ca/student/behavioural-policies.html>

APPENDICES

Appendix 1: [Max Rady College of Medicine Policy and Procedures on Academic Appeals](#)

Appendix 2: [University of Manitoba Senate Committee on Appeals Policy and Procedures](#)