# DME-COFM

# Ontario Medical School Clinical Rotation Principles and Practices for Faculty Appointment and Dispute Resolution

## Preamble

The delivery of distributed medical education (DME) in Ontario is enabled by the collaborative placement of medical learners from the Ontario medical schools to clinical rotations in communities outside of the Academic Health Sciences Centres (AHSC). The Distributed Medical Education Committee of the Council of Ontario Faculties of Medicine (DME-COFM) document, *Collaboration in Ontario Distributed Medical Education*, outlines the principles for collaborative distributed medical education across Ontario.

Further to this document, development of principles and practices unique to DME have been identified regarding faculty appointments of community preceptors as well as a process for dispute resolution for both learners and preceptors.

## Principles for Ontario DME Faculty Appointments and Dispute Resolution

According to Element 9.2 of the Committee on the Accreditation of Canadian Medical Schools (CACMS) Standards and Elements (2022-23), all physicians who supervise, teach and assess medical students in a required clinical learning experience at all instructional sites are required to have a faculty appointment in at least one Ontario medical school. It is possible, therefore, that a clinical preceptor in a distributed site may choose to maintain multiple faculty appointments at multiple medical schools.

A review of the faculty appointment requirements for community preceptors are very similar across the Ontario medical schools with only minor variations (refer to Appendix 1: Faculty Appointment Requirements for Community Preceptors of Ontario Medical Schools). To summarize, all Ontario medical schools require a completed application form, curriculum vitae and that the physician is in good standing with the College of Physicians and Surgeons of Ontario (CPSO), while the faculty appointment classification varies across schools using terms such as Assistant Professor, Adjunct and Lecturer. Although reappointment intervals are variable, all Ontario medical schools require satisfactory evaluations from learners and good standing with the CPSO for reappointment.

*Principle 1: The Ontario medical schools reciprocally agree to recognize faculty appointments from any Ontario medical school. Therefore, an Ontario medical learner can be supervised by a preceptor with a faculty appointment from any Ontario medical school for core or elective rotations, if the processes outlined below are followed.*

Given the similarity of the requirements of faculty appointments and respecting the integrity of each school’s appointment process, it is felt that faculty appointments at any of the Ontario medical schools should be valued and mutually recognized. Therefore the Deans of the medical schools in Ontario are in agreement to reciprocally honour faculty appointments from other Ontario medical schools for assessment and grading of learners (both Undergraduate Medical Students and Postgraduate Residents) for any school’s core or elective rotations. Hence, an Ontario medical learner may be supervised by a preceptor with a faculty appointment at any Ontario medical school for core or elective rotations. This principle will alleviate the need for multiple faculty appointments.

Community preceptors, in accordance with the Collaboration in Ontario Distributed Medical Education document, may seek a faculty appointment from the medical school of their choice but are encouraged to hold an appointment with the medical school that is most closely affiliated with the community and/ or community placement program having primary placement responsibility for their community. Affiliation with the medical school and community placement program responsible for their community of practice will ease communication with respect to recruitment, retention, faculty appointment, faculty development and placement activities related to that preceptor

The medical school where the community preceptor holds a faculty appointment is responsible for the faculty development of the preceptor. The faculty member is further required to provide a teaching environment that complies with the policies of the medical school, the CPSO, the affiliation agreements of the teaching community hospitals and the laws of Ontario.

If the preceptor is supervising a learner from another medical school, the preceptor must be appropriately prepared to teach by knowing the objectives, curriculum and evaluation requirements of the learner’s home medical school. The preceptor is obligated to provide a teaching environment that complies with the policies of the learner’s home medical school. The preceptor must also be evaluated with an appropriate feedback loop in place.

*Principle 2: Feedback (positive or negative commentary) initiated by a learner regarding the teaching and/or conduct of the preceptor shall be directed to the medical school where the faculty appointment is held. Negative feedback received by either the preceptor’s medical school or the learner’s medical school will be communicated to the other in an appropriate manner.*

Feedback (including problems and/or disputes) provided by a learner regarding the teaching or professional conduct of the preceptor will be managed by the policies and procedures of the medical school(s) from which the preceptor holds a faculty appointment. The learner is encouraged, if comfortable and appropriate, to address feedback directly with the preceptor as soon as possible following the event. The learner is expected to address the concern with their (the learner’s) medical school program (i.e. student affairs or program lead) at the earliest possible time.

After assessing the learner’s feedback, the learner’s school will contact the ‘host’ medical school who will triage the feedback to the appropriate party according to the host school’s policies and procedures.

Refer to Appendix 2: Communication Flowchart for more information.

*Principle 3: Policies and procedures of the host medical school, including adherence to the Ontario Human Rights Code and the Occupational Health and Safety Act, will be recognized for all clinical rotations.*

When a learner or preceptor identifies concerns of harassment or intimidation, the learner or preceptor may, in addition to the above process, elect to bring the concern to the host hospital or medical school in accordance with the respective Sexual Harassment and Anti-Discrimination Policies. Appropriate action will be taken in conjunction with the medical schools of both the learner and preceptor.

*Principle 4: Preceptor feedback regarding a learner’s performance (e.g. CanMEDS framework) will be directed, in writing, to the learner’s medical school.*

Analogously, a preceptor may have feedback regarding a learner’s performance. Faculty is encouraged to address the feedback directly and verbally with the learner as soon as possible thereafter and provide constructive feedback. Faculty may choose to include these suggestions on the learner evaluation.

If the performance issue is egregious, the concern should be directed to the learner’s medical school as soon as possible.

*Principle 5: General Dispute Resolution: Communication between medical schools is essential and sharing of relevant information and documentation is necessary to assist resolution of any disputes. Complaints must be managed and resolution provided by both the medical school responsible for addressing the conduct, behavior and academic performance of the learner and the medical school in which the preceptor holds their appointment.*

Approved by the Council of Ontario Faculties of Medicine (COFM) Deans:

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## Appendix 1: Faculty Appointment Requirements for Community Preceptors of Ontario Medical Schools

| **Term Used to Describe Preceptor** | **Pre-appointment Requirements** | **School Name** | **Forms to be Filled Out** | **Requirements for Re-appointment** |
| --- | --- | --- | --- | --- |
| Assistant Clinical Professor (Adjunct)Non-adjuncts - begins with Assistant Clinical Professor, but could be Associate Clinical Professor or Clinical Professor – the appropriate academic rank shall be determined by the Department Chair at the time of initial appointment and shall take into account the appointee’s qualifications, experience and achievements | In good standing with CPSONon-adjuncts - 3 letters of referenceMeetings with Departmental representatives | McMaster University | Curriculum vitaeAdjuncts: Application for appointmentNon-adjuncts: Mutually Agreed Responsibilities (R4) form | Reviewed every 3 yearsCompletion of renewal form In good standing with CPSOSatisfactory student evaluationsAdjunct: 150 hours of teaching/3 yearsNon-adjunct: Minimum of 100 hours of teaching annually |
| Adjunct at the rank of Assistant Professor | In good standing with CPSO | Queen’s University | Curriculum vitae Date of BirthSocial Insurance numberName of their Professional Corporation | On confirmation that the regional community preceptor is still taking studentsSatisfactory student evaluations Reviewed every 1 to 3 years |
| Clinical teacher at the rank of Lecturer | In good standing with CPSO3 letters of reference from either current colleagues or prior colleagues. | University of Ottawa | Curriculum vitae Memorandum of AgreementShort Form CV | Reviewed every 5 years |
| Begins with Lecturer but could be Assistant Professor, Associate Professor or Professor – the appropriate academic rank shall be determined by the division head at the time of initial appointment and shall take into account the appointee’s qualifications, experience and achievements.NOSM U faculty will have academic appointments at Lakehead University and/or Laurentian University at the same academic rank as their NOSM U appointment. | In good standing with CPSO | Northern Ontario School of Medicine University | Application FormCurriculum vitaeFaculty appointment referencesStatement of clinical/teaching intent | Reviewed every 3 years |
| Appointment category - Clinical Academic Faculty (Clinical full- time, part-time and adjunct appointments)Rank – commensurate with experience and qualifications. Rank could be Lecturer, Associate Professor, etc. | In good standing with CPSORecommendation Letter | University of Toronto | Appointment application formCPSO certificate of professional conductCurriculum vitaeRecommendation letter from Hospital Chief or University or Hospital Education Director | Subject to probation and reviewClinical part-time renewal varies according to department (i.e. 1- 3 years).Clinical adjunct – Department Chair decides term and renewal |
| Limited Duties Appointment – rank Adjunct Professor\*Some Clinical Full time academics who would progress through ranks of Assistant Professor, Associate Professor and Professor\*current Conditions of Appointments document is being revised | Curriculum vitaeLetter of support from the discipline leader | Western University | Faculty Appointment online application formCurriculum vitae3 Letters of support from one of the following:* Academic Director from own discipline
* Academic Director from other discipline
* Assistant Dean, Rural & Regional Medicine
* Associate Dean, Windsor Program
* Assistant Dean, Faculty & Governmental Affairs – Windsor campus
* Schulich Faculty member
* Chief of Staff
* Former Chief of Staff or Program Director
 | Initial 3-year term recommendedReappointment application package is required (faculty reappointment application form, updated CV and statement of expectations and responsibilities)5 year term recommended |

## Appendix 2: Communication Flowchart

### Scenario 1: Complaint received by learner’s medical school

* Step 1: Learner’s medical school assesses the complaint
* Step 2: Learner’s medical school informs preceptor’s known medical school(s) (Faculty Affairs/Department Chair), if a different school
* Step 3: Preceptor’s known medical school(s) confirms receipt of the complaint and takes appropriate action according to that school’s policies and procedures.
* Step 4: School(s) informs placement agency of any decisions/actions.

### Scenario 2: Complaint received by preceptor’s medical school or placing agency

* Step 1: If the learner is identifiable and with their permission, the preceptor’s medical school or placement agency informs learner’s medical school.
* Step 2: Preceptor’s medical school(s) confirms receipt of the complaint and takes appropriate action according to that school’s policies and procedures.
* Step 3: School(s) informs placement agency of any decisions/actions.