**Policy Name:** CPGME Resident Leave of Absence/Waiver of Training

<table>
<thead>
<tr>
<th>Application/Scope:</th>
<th>All Postgraduate Medical Education Residents</th>
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</thead>
<tbody>
<tr>
<td>Approved (Date):</td>
<td>CPGME Executive July 30, 2013, CPGME Executive June 13, 2017,</td>
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<tr>
<td>Review Date:</td>
<td>PDC: November 15, 2016</td>
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<tr>
<td>Revised (Date):</td>
<td>June, 2017</td>
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<tr>
<td>Approved By:</td>
<td>Faculty Executive Council, Sept. 10, 2013, Dean’s Council Sept 26, 2017</td>
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**BACKGROUND**

The training requirements of Residency Programs define specific competencies attained by residents over specified periods of time. With the advent of competency-based medical education, there is less emphasis on time spent by residents on rotations as opposed to their attainment of competencies. However, in the hybrid model of competency-based medical education, time-based rotations continue to be an organizing structure for residency training. In essence, competence may be achieved before a resident satisfactorily completes their contract to provide service-related commitments.

It is recognized that a resident may need to interrupt training for a number of reasons, including medical illness. Depending on the circumstance, a leave of absence might not impact the total duration of training if the necessary competencies have been achieved.

A waiver of training should be considered an uncommon request. It may be requested for an exceptional resident following an approved leave of absence. Furthermore, it is not a mechanism by which a resident may be excused from rotations in order to avoid service-related commitments of residency training.

In competency-based medical education, the completion of training is based on demonstrated achievement rather than time spent in training. The demonstration of competence will be the criterion for certification and completion of training and will apply to all residents regardless of whether a leave has been taken. As such, time-based waivers will become less relevant in the competency-based medical education environment.

**DEFINITIONS**

**Academic/Faculty Advisor/Primary Preceptor/Coach/Mentor** – is a faculty member who establishes a longitudinal relationship with a resident for the purpose of monitoring and advising with regards to educational progress.

**Competence** – is the array of abilities across multiple domains or aspects of physician performance.

**Competence Committee** – is the committee responsible for assessing the progress of trainees in achieving the specialty-specific requirements of a program.
**Competence Continuum** – is the series of integrated stages in competency-based medical education curriculum, including: 1. Transition to Discipline; 2. Foundation of Discipline; 3. Core of Discipline; 4. Transition to Practice

**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 at a particular stage of medical education or practice

**CFPC** – College of Family Physicians of Canada

**CPGME** – (Max Rady) College (of Medicine) Postgraduate Medical Education

**CPSM** – College of Physicians and Surgeons of Manitoba

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

**Illness Days** – means a periodic (less than fourteen consecutive calendar days) planned or unplanned time away from training due to medical illness

**Leave of Absence (LOA)** – is an approved planned or unplanned interruption of training (greater than fourteen consecutive calendar days) for any of a variety of reasons, including medical illness, bereavement, maternity, paternity, partner leave and educational leave. Vacation, Religious Observances, statutory holidays, examination days and unplanned sick days are not leave of absence

**PARIM** – Professional Association of Residents and Interns of Manitoba

**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

**Probation Plan** – is a formal document approved by the PGME Education Advisory Committee and the Associate Dean, PGME detailing the terms, possible outcomes and specific conditions of the Probation Period

**RCPSC** – Royal College of Physicians and Surgeons of Canada

**Remediation** – is an interval of training consisting of a formal program of individualized educational support, assessment and monitoring which is designed to assist a trainee 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

**Remediation Plan/Focused Learning Plan** – is a formal document outlining the details pertaining to the competencies on which the trainee will focus, the resources required and the Remediation Supervisor during the Remediation

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

**Rotation** – is an interval of time, usually consisting of a portion (two weeks) of a block to multiple blocks to which trainees are assigned for training. Rotations may consist of consecutive blocks or may be fractionated over longer periods of time as in the case of longitudinal rotations. Learning experiences are organized to allow the trainee to acquire competencies and to demonstrate entrustment within a hybrid model of competency-based, timed rotations

**RPC/RTC/PEC** - Residency Program Committee/Residency Training Committee/Postgraduate Education Committee

**Site (Stream) Lead** – refers to that faculty member in Family Medicine most accountable for and knowledgeable of the progress of residents within their respective Educational Site (Stream)

**Vacation** – is the entitled time (four weeks) away from resident training during the academic year (July 1-June 30)

**VENTIS** – is the PGME curriculum management system

**Waiver of Training** – is the granted reduction of time in residency training following an approved leave of absence

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

**WRHA** – Winnipeg Regional Health Authority is the employer for the majority of residents

1. **PURPOSE**

   1.1 Provide guidance on a range of issues relating to approved leaves of absence during residency training

   1.2 Provide guidance on the granting of waiver of training following return from leaves of absence

2. **POLICY STATEMENTS – LOA**

   2.1 The decision to grant a leave of absence (LOA) is at the discretion of the Residency Program Director in consultation with the Residency Program Committee (RPC)
2.2 The training status of the resident on LOA will be designated “inactive” for the duration of the LOA.

2.3 Resident payment during LOA is determined by the PARIM – WRHA Collective Agreement or other employment agencies, if applicable.

2.4 A paid LOA will not be granted if the purpose of the leave is to generate supplemental income.

2.5 An LOA for medical reasons is accompanied by the expectation that the resident must seek and receive appropriate care and support.

2.5.1 The resident must obtain a medical certificate in order to verify that they are receiving medical care. The medical certificate should establish the anticipated duration of the LOA.

2.5.1.1 The Program Director and/or the Associate Dean, PGME and/or the Associate Dean, PGME Student Affairs may request an additional independent medical opinion and certificate verify the resident’s medical illness.

2.5.1.2 If the duration of the LOA is uncertain, monthly documentation by the trainee’s health care provider is required and must be submitted to the Associate Dean, PGME and/or Associate Dean, PGME Student Affairs.

2.5.2 The resident must obtain a written medical certificate or declaration of readiness to return as a condition of returning from a medical LOA.

2.5.2.1 The Program Director and/or the Associate Dean, PGME and/or the Associate Dean, PGME Student Affairs may request an additional independent medical opinion in order to ensure the resident’s medical fitness to return from the LOA.

2.5.3 With respect to salary classification, the following principles apply:

2.5.3.1 A resident who has taken an LOA of greater than one month will advance to the next salary level only at the discretion of the Program Director.

2.5.3.2 The Program Director may decide to promote the resident to the next pay level at the beginning of an academic year to allow them to remain with their cohort, requiring them to make up the leave in their final year of training.

2.6 Except in extraordinary circumstances, a resident on Remediation shall not be permitted to take a leave of absence (LOA).

2.6.1 In the event that the Residency Program Director determines that a Leave of Absence (LOA) is necessary for a trainee during the Remediation, then the Remediation Program is considered in abeyance.

2.6.1.1 The Remediation Plan/Focused Learning Plan will be redesigned upon the trainee’s return from the LOA.
2.7 Except in extraordinary circumstances, a resident on Probation shall not be permitted to take a leave of absence (LOA)

2.7.1 In the event that the Residency Program Director determines that a Leave of Absence (LOA) is necessary for a trainee during the Probation, then the Probation Program is considered in abeyance

2.7.1.1 The Probation Plan will be redesigned upon the trainee’s return from the LOA

2.8 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

2.9 The trainee returning from a prolonged LOA may require a focused Learning Plan as determined by the RPC/Competence Committee/Resident Progress Subcommittee

2.10 With respect to the trainee whose status is “inactive” as a result of an extended LOA, if the Residency Program Committee/Competence Committee/Resident Progress Subcommittee has determined that their successful return to or completion of the Residency Program is unlikely, they may be considered for Dismissal from the Residency Program

3. PROCEDURES – LOA

3.1 With respect to initiating an LOA, the following procedures apply:

3.1.1 The trainee requesting an LOA will submit a request to the Residency Program Director as outlined in the CPGME Request for Leave of Absence Process in VENTIS

3.1.1.1 The trainee is responsible for completion of any documentation required for WRHA, or other employment agencies, if applicable

3.1.2 The Program Director, will review the request for approval of the LOA

3.1.2.1 If the LOA is for medical illness, the Residency Program Director will request the relevant supporting documents

3.1.3 The Program Director, or designate must document the approved LOA electronically in VENTIS for review and approval by the Associate Dean, PGME. The following details pertaining to the LOA must be included:

- Reason(s) for the LOA
- Starting date of the LOA
- Anticipated date of return from the LOA
3.1.3.1 If the LOA is declined by the Residency Program Director, the trainee can discuss other options with the Residency Program Director and/or other individuals, as appropriate.

3.1.4 Once approved by the Residency Program Director, the LOA will be elevated to the Associate Dean, PGME for review and approval.

3.1.4.1 If the LOA is declined by the Associate Dean, PGME, the trainee can discuss other options with the Residency Program Director and/or other individuals, as appropriate.

3.1.5 Once the LOA is approved, the following procedures apply:

3.1.5.1 The Program Director should notify other individuals, as appropriate such as the Chief Administrative Resident and the Associate Dean, PGME Student Affairs of the approved LOA.

3.1.5.2 The Program Director or designate will extend the date of completion of training (end date) by a period of time equal to the duration of the LOA for trainees in time-based Residency Program cohorts.

3.1.5.3 The Associate Dean, PGME or CPGME designate will notify the following of the LOA:

- Notification of the CPSM by formal documentation regarding licensure and registration, if applicable.
- Notification of WRHA regarding payment and medical malpractice coverage (CMPA), if applicable.

3.2 During the LOA, the following procedures apply:

3.2.1 If indicated, the Program Director will communicate with the resident at least monthly during the first year of the LOA and quarterly subsequent to that.

3.2.2 Any changes to the status of the LOA will require consultation with the RPC for approval.

3.2.3 Any changes with respect to the status of the LOA will require notification of and approval by the Associate Dean, PGME electronically via VENTIS with appropriate follow-up action.

3.2.4 The trainee may be required to meet with the Associate Dean, PGME Student Affairs on a monthly basis for guidance and counselling.

3.2.5 If the LOA extends beyond one year, then the Residency Program Director, the Associate Dean, PGME and the Associate Dean, PGME Student Affairs will meet to discuss appropriate action such as modification of the trainee’s Individual...
Learning Plan or Dismissal/Withdrawal from the Residency Program

3.2.5.1 Any such action will be determined in consultation with the resident’s Academic Advisor and the Residency Program Committee/Competence Committee/Resident Progress Subcommittee

3.3 With respect to return from an LOA, the following procedures apply:

3.3.1 The Program Director, in consultation with the resident’s Academic Advisor, RPC/Competence Committee/Resident Progress Subcommittee and the Associate Dean, PGME will review the trainee’s status with regard to stage of training to determine if any adjustments to the training program/Learning Plan are required on return of the resident from the LOA

3.3.2 The Program Director will meet with the returning resident to discuss the following:

- The stage of training/level to which the resident will be returning following the LOA
- The Learning Plan required for the resident
- Expected date of return from LOA
- Revised completion date for the resident’s current academic year and the time-based service aspects of promotion to the next salary level

3.3.3 The Program Director will follow the CPGME Leave of Absence Process in VENTIS for notification of and approval by the Associate Dean, PGME at least five working days prior to the official date of return from the LOA

3.3.4 The Program Director should notify other individuals, as appropriate such as the Chief Administrative Resident and the Associate Dean, PGME Student Affairs of the approved LOA

3.3.5 The Associate Dean, PGME or CPGME designate will notify the following of the LOA:

- Notification of the CPSM by formal documentation regarding licensure and registration, if applicable
- Notification of WRHA regarding payment and medical malpractice coverage (CMPA), if applicable

(See Appendix 1: PGME Processes: Leave of Absence (LOA), Extension of LOA, Return from LOA and Waiver of Training)

4. POLICY STATEMENTS – WAIVER OF TRAINING

4.1 Only the Associate Dean, PGME may approve a waiver of training
4.2 With respect to waiver of training, the following apply:

4.2.1 A decision to grant a waiver of training may occur only following an approved LOA

4.2.2 The decision to grant a waiver of training may occur only in the resident's final year of training

4.2.2.1 This decision must not be granted after the trainee has taken the certifying examinations

4.2.3 All waivers of training must comply with the policies of the CFPC, RCPSC or equivalent for non-medical programs

4.2.4 A waiver of training will be considered if the resident has met the following conditions:

4.2.4.1 The resident has successfully completed all mandatory components of training

4.2.4.2 The resident's performance has consistently exceeded expectations on assessment of competencies

4.3 The RCPSC maximum allowable times for waiver of training are as follows:

- One-year program – no waiver allowed
- Two-year program – six weeks’ waiver allowed
- Three-year program – six weeks’ waiver allowed
- Four-year program – three months’ waiver allowed
- Five-year program – three months’ waiver allowed
- Six-year program – three months’ waiver allowed

4.3.1 Internal Medicine and Pediatrics involve three years of core training under the guidance of the Internal Medicine and Pediatric Residency Program Directors followed by two years of subspecialty training under the guidance of different Residency Program Directors. The waivers of training are treated separately for each of the two phases of training, as follows:

4.3.1.1 A waiver of training must be recommended by the Internal Medicine or Pediatrics Program Director and approved by the Associate Dean, PGME on the core assessment. A decision to grant a waiver of training is made in the PGY-3 for a maximum duration of six weeks

4.3.1.2 In the subspecialty years, a decision to grant a waiver of training is
recommended in final year of training by the Subspecialty Program Director and approved by the Associate Dean, PGME. A maximum six-week waiver of training may be taken only in the final year of training.

4.3.1.3 If the resident undertakes three years of Internal Medicine or Pediatrics training at one university and transfers to a different university for subspecialty training, then it is the responsibility of the Associate Dean, PGME at the corresponding institution to approve the waiver of training.

4.3.2 In Family Medicine, eligibility for the certification examination and for being granted Certification in the College of Family Physicians (CCFP), the maximum length of a waiver of training for residents is four weeks.

4.3.3 Family Medicine residents enrolled in enhanced skills programs of one year or less must complete the entire duration of training to be eligible for CFPC examinations leading to Certification of Special Competence and/or attestations of completion of training.

5. PROCEDURES – WAIVER OF TRAINING

5.1 A resident may request a waiver of training, as follows:

5.1.1 Residents must follow the CPGME Waiver of Training Process in VENTIS. The request must include the following:

- The reason(s) for the waiver of training
- The LOA to which the waiver of training is being applied
- The revised proposed date for completion of training

5.1.2 The request for waiver of training will be reviewed by the Residency Program Director and the RPC submitted through VENTIS in order to make recommendations to the Associate Dean, PGME, including the following:

- Approval of the resident’s original request for waiver of training submitted through VENTIS
- A detailed description of the circumstances pertaining to the request and justification for support of the request for waiver of training
- Verification that the resident has successfully completed all of the competencies for certification

5.1.3 The Associate Dean will provide written a decision regarding waiver of training to the resident, the Residency Program Director and the Credential Committee of the CFPC/RCPSC.
POLICY CONTACT: Associate Dean, PGME

REFERENCES

Royal College Policies and Procedures for Certification and Fellowship, January 2016
4.3.2 Waiver of Training after a Leave of Absence from Residency

PARIM - WRHA Collective Agreement, 2014 - 2018

Schulich Western School of Medicine and Dentistry, Waiver of Training – Residents form
https://www.schulich.uwo.ca/medicine/postgraduate/future_learners/docs/Forms/WaiverofTraining.pdf

Schulich Western School of Medicine and Dentistry, Waiver of Training policy

McMaster School of Medicine, Waiver of Training Policy

University of Toronto Faculty of Medicine - Residency Leaves and Waivers Guidelines, February 2015

University of Manitoba CPGME Resident Assessment, Promotion, Remediation, Probation, Suspension, Dismissal Policy
Appendix 1 – PGME Processes: Leave of Absence (LOA), Extension of LOA, Return from LOA and Waiver of Training

PGME Processes:
Leave of Absence (LOA), Extension of a LOA, Return from a LOA, and Waiver of Training

This process must follow CPGME LOA and Waiver of Training Policy and the PARIM-WRHA Collective Agreement.

Notes:
Applicable:
- LOA [eg medical leave supported with a doctor’s note], LOA-B ( Bereavement), LOA-EDU (Educational),
- LOA-M (Maternity), LOA-P (Paternity), LOA-Partner.

Not Applicable:
- For Conferences, Holy Day, Statutory (Lieu Day), Vacation please see “Request for Time-Off”
- Exam days and Illness (unplanned Sick Day) - Adjust Daily Assignment for these occurrences
- Academic Sessions – will populate in Daily Assignment per the Departmental/Educational Event Set up

References:
CPGME LOA and Waiver of Training Policy
PARIM-WRHA Collective Agreement
WRHA Request for LOA

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<th>Process</th>
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<th>Approved by</th>
<th>Date</th>
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<td>Leave of Absence</td>
<td>PGME Office</td>
<td>PGME Office</td>
<td>Jan 2017</td>
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PGME Process: How to Process Leave of Absence (LOA)

This process must follow PGME LOA and Waiver of Training Policy and the PARM-WRHA Collective Agreement.

Not Applicable:
- LOA (e.g. medical leave supported with a doctor’s note), LOA-B (Bereavement), LOA-EDU (Educational), LOA-M (Maternity), LOA-P (Paternity), LOA-PAR (Partner).

Process: LOA

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<th>LOA - Compensated and Benefits</th>
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<td>Trainee</td>
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<td>Program Administrator</td>
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<td>Program Director</td>
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<tr>
<td>PGME</td>
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<tr>
<td>Associate Dean, PGME</td>
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<tr>
<td>MSAS</td>
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Review and sign the WRHA Request for LOA

In required, the PA or PD may submit the Request for and LOA on behalf of the Trainee to VENTS

Review and submit the LOA Request for LOA to MSAS

Receive and verifies the LOA Request information

Receive, & approves or declines the LOA Request Medical leaves: Doctor’s note is required & needs to be submitted by either the Program or the Resident to the PGME Office. Associate Dean, PGME or Student Affairs may need additional information prior to approval

PGME will return the Request if a revision is necessary

Notification in VENTS of Approval or Denial

During LOA Program Director will communicate & update the PGME Associate Dean for the LOA

Notification in VENTS of Approval or Denial

During LOA Program Director will communicate & update the PGME Associate Dean for the LOA

Misadjust the trainee's and date in VENTS as received approval filled in VENTS. RA will notify CRNA, WRHA/WRAG, EMBASSY, PARM & DOCTORS MANITOBA about the LOA

References:
- PGME LOA and Waiver of Training Policy
- PARM-WRHA Collective Agreement

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<th>Approved By: PGME Office</th>
<th>Date: Jan 2017</th>
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PGME Process: How to Process a Return from Leave of Absence (LOA)

This process must follow PGME LOA and Waiver of Training Policy and the PARIM-WRHA Collective Agreement.

**Notes:**
- LOA (eg medical leave supported with a doctor’s note), LOA-B (Bereavement), LOA-EDU (Educational), LOA-M (Maternity), LOA-P (Paternity), LOA-Partner.
- Not Applicable: - For Conferences, Holiday, Statutory Leave, Vacation please see “Request for Time-Off” - Exam days and wellness (unplanned sick days) - Adjust Daily Assignment for these occurrences - Academic Sessions – will pre-populate in Daily Assignment per the Departments/Educational Event Setup

**Process: Return from a LOA**

<table>
<thead>
<tr>
<th>Trainee</th>
<th>Program Administrator</th>
<th>Program Director</th>
<th>PGME</th>
<th>Associate Dean, PGME</th>
<th>External Partners</th>
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<tr>
<td>Trainee / PROGRAM DIRECTOR / ASSOCIATE DEAN, PGME / ASSOCIATE DEAN, STUDENT AFFAIRS / Designated PGME RESIDENT ADMINISTRATOR – ensure that Trainee is ready to return from LOA. For medical LOA, a physician written medical certificate is submitted upon request.</td>
<td>Obtain any required supporting documentation to support a return from the LOA per PGME policy</td>
<td>Notification in VENTS of Trainee’s pending Return from LOA</td>
<td>Notification in VENTS of Trainee’s pending Return from LOA</td>
<td>Notification in VENTS of Trainee’s pending Return from LOA</td>
<td>CPRA, CMRA verifies the trainee’s licensing and eligibility for return from LOA</td>
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<td>Complete &amp; submit the Return from LOA Request in VENTS at least 3 weeks (maximum 60 days) prior to the Return from LOA Request</td>
<td>Receipts &amp; verifies the Return from LOA Request information</td>
<td>Review (with supporting documentation) &amp; complete the initial appraisal of the Return from LOA Request</td>
<td>Receipts &amp; verifies the Return from LOA Request information</td>
<td>Receipts &amp; verifies the Return from LOA Request information</td>
<td>PGME will return the request if a reason is required</td>
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<td>Notification in VENTS of Approval or Denial</td>
<td>Notification in VENTS of Approval or Denial</td>
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<td>Approval</td>
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<td>PA to submit Trainee Appointment Form</td>
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<td>Check Trainee Appointment Form/Co-Scheduling</td>
<td>School is trained in Rotation / Call Schedule as required</td>
<td>Return to Training</td>
<td>Return to Training</td>
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</tbody>
</table>

**References:**
- PGME LOA and Waiver of Training Policy
- PARIM-WRHA Collective Agreement

**Process:**
- Return from Leave of Absence

**Prepared By:** PGME Office
**Approved By:** PGME Office
**Date:** Jan 2017
PGME Process: How to Process a Waiver of Training

This process must follow OP/PGME LOA and Waiver of Training Policy and the PARIM-WRHA Collective Agreement.

Notes:
- A Waiver in Training is the granting of a reduction of time in residency training following an approved leave of absence.
- The RCpsc and CCP restrict the time allowed for Waivers of Training. Please see References under PGME Policy.
- Waiver of Training will not appear in VENTIS until the trainee is in final year of training and has had an LOA during their training.

### Process: Waiver of Training

**Trainee**
- Traineer submits the Waiver of Training Request in VENTIS with all required information. See CPME Policy.
- Notification in VENTIS of Approval or Denial
- Notification on Waiver of Training decision and on new training level if applicable
- PA to Submit Trainee Appointment Change
- See Trainee Appointment Form/Flowchart

**Program Administrator**
- Receives Notification of the Waiver of Training Request
- Receives Notification of the Waiver of Training Request
- Receives Notification of the Waiver of Training Request
- receives Notification of the Waiver of Training Request

**Stream or Program Director**
- Receives (with supporting documentation) with the RCpsc and makes recommendations to the Associate Dean PGME. Approval Denied/review
- Receives Notification of the Waiver of Training Request

**PGME**
- Receives Notification of the Waiver of Training Request

**Associate Dean, PGME**
- Receives Notification of the Waiver of Training Request

**Royal College (RCpsc)**
- Receives & verifies the Waiver of Training Request per RCpsc and OPSC Waiver of Training guidelines.
- Notification on Waiver of Training decision and an new training level if applicable

### References:
- CPME LOA and Waiver of Training Policy
- PARIM-WRHA Collective Agreement

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