MANAGEMENT OF FELLOWSHIPS

POSTGRADUATE MEDICAL EDUCATION
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Introduction

Residency training leads to certification by the Royal College of Physicians and Surgeons of Canada for specialty Residency Programs and by the College of Family Physicians of Canada for Family Medicine. The training is highly structured through standards mandated by the respective Colleges. The principles and processes of employment of residents are established in the WRHA-PARIM Collective Agreement.

Fellowships, on the other hand, are post-residency educational experiences designed to meet the learner’s more specialized needs in clinical care, research or other areas of training. At the present time, there are no national standards for fellowship training and fellows do not have an employer-employee collective agreement. Although, the establishment and maintenance of fellowships rest with the Clinical Departments, it is incumbent upon the Postgraduate Medical Education Office at the University of Manitoba to develop and maintain common standards across departments for managing fellowships. These standards must recognize the needs and interests of both departments and fellows. The goals of these standards are to ensure that learners in fellowships have access to the following:

- Educational resources that are distributed equitably and fairly
- Educational experiences to enable attainment of competencies appropriate to advanced specialists
- A positive learning environment in which fellows are treated fairly and with respect, consistent with the University of Manitoba standards for professional behavior

The guiding principles for fellowships include the following:

- Excellence in Education
- Mutual Benefit: Fellowships provide important and valuable learning opportunities and help learners to advance their careers. By the same token, fellows play a key role in teaching their junior colleagues and provide specialized clinical services that contribute to the well-being of the people of Manitoba
- Equity: Fellows must be treated equitably and fairly in the clinical learning environment

In this document, Management of Fellowships, the common standards and processes for management of fellowships are outlined in detail in order to provide guidance to Fellowship Directors, Fellowship Program Administrators, Department Heads and fellows.
Definitions

The spectrum of postgraduate medical education includes the following categories of training:

Residency Programs: consists of training accredited by the College of Family Physicians of Canada (CFPC)/Royal College of Physicians and Surgeons of Canada (RCPSC) and is designed to lead to certification for practice in Canada. Residency training may be subdivided into the following categories:

- **Fundamentals Programs**: is training consisting of a primary core curriculum of fundamental competencies that is foundational for several related disciplines to build upon. Training is typically 1-3 years in length. Examples: Surgical Foundations; Core Internal medicine
- **Family Medicine/Specialty Programs**: consists of training in an area of medicine with a broad-based body of knowledge and competencies that are relevant in both community and tertiary settings and is foundational for additional competencies such as enhanced-skills in Family Medicine or RCPSC subspecialty training. The length of training is typically 2-6 years. Examples: Family Medicine; Psychiatry; General Surgery
- **Enhanced-Skills/Subspecialty Programs**: consists of training in an area of medicine with a more focused or advanced scope that builds upon the broad-based competencies defined in Family Medicine or in a parent specialty. Learners may enter these programs from a fundamentals program or a primary specialty. The length of training is typically 1-2 years. Example: Adult Cardiology

Area of Focused Competence (AFC) or Diploma Programs: consists of training in a highly focused discipline of specialty medicine that represents supplemental competencies that enhance the practice of physicians. The length of training is typically 1-2 years. Training is competency-based. Example: Cardiac Electrophysiology. Sometimes the AFC represents a highly specific scope of practice that does not meet the criteria of a subspecialty. There are four types of AFC programs, including the following:

- Entry from a specialty
- Entry from a subspecialty
- Conjoint programs (CFPC/RCPSC): entry with primary certification from either College
- Non-clinical (entry from any M.D.)

Fellowship Programs: consists of training designed to give learners who have completed residency training in Canada or similar training abroad, additional expertise but this training does not lead to additional credentials for practice in light of the fact that fellowship training is not recognized as leading to certification by the CFPC/RCPSC. Furthermore, fellowship training does not lead to examinations for certification by the respective Colleges.

Fellowship training may be subdivided into the following categories:

- **Clinical Fellowship**: A Clinical Fellow is an individual who has completed sufficient training for specialty qualification in Canada or in a foreign country. The fellowship is intended to permit the learner to acquire additional experience over and above his/her basic specialty requirement. Often the fellowship provides the learner the opportunity to acquire specific or more specialized expertise that will not normally be acquired during residency training.
Clinical Fellows differ from residents with respect to the goals of their training. Furthermore, while the training for Clinical Fellows is designed to promote additional expertise, their training does not lead to additional credentials for practice.

Clinical Fellows fulfill many of the same roles as residents within the PGME system. In addition to pursuing their own learning and research goals, many Clinical Fellows provide valuable clinical service, providing direct patient care. In some cases, they may work at a level similar to residents but in many cases, fellows function at a more senior level consistent with their higher level of training. Also, Clinical Fellows provide valuable teaching to residents and students and sometimes assist faculty with research.

**Research Fellowship:** A research Fellow is an individual who has completed sufficient training for specialty qualification in Canada or in a foreign country. The fellowship is intended to permit the learner additional experience and expertise in defined clinical or bench research consistent with the CIHR's mandate and commitment to support excellence across all four health research pillars: biomedical; clinical; health systems and services; and social cultural, environmental factors that affect the health of populations. Such activity may include laboratory work, attendance at departmental rounds, data gathering and attendance at special courses in epidemiology, biostatistics and research methodology.

### Goals and Guiding Principles

Clinical Departments may vary in their approach to the multitude of fellowships that they provide. Therefore, it is important for the PGME Program in the Max Rady College of Medicine at the University of Manitoba to strive for consistency in managing this important segment of postgraduate medical education. There is an opportunity for Clinical Departments to adopt common standards, while recognizing that there are differences between individual fellowship experiences.

The goals of the PGME standards for fellowships are to ensure that fellows have access to the following:

- Education, resources and supports that meet the University of Manitoba standard
- Educational experiences to assist fellows in attaining the competencies appropriate to advanced specialists
- A positive learning environment in which fellows are treated fairly and with respect, consistent with the University of Manitoba standards for professional behavior

The guiding principles for fellowships include the following:

- Excellence in Education
- Mutual Benefit: Fellowships provide important and valuable learning opportunities and help learners to advance their careers. By the same token, fellows play a key role in teaching their junior colleagues and provide specialized clinical services that contribute to the well-being of the people of Manitoba
- Equity: Fellows must be treated equitably and fairly in the clinical learning environment
**Fellowship Advisory Committee**

Although the Clinical Departments at the University of Manitoba are responsible for developing and maintaining their individual Clinical Fellowships and Research Fellowships, the overall responsibility for fellowship training resides with the Associate Dean, PGME and the PGME Executive Committee. Moreover, the **PGME Fellowship Advisory Committee**, a subcommittee of the PGME Executive Committee serves as an advisory body regarding the oversight of PGME fellowship training and the management of PGME fellowship issues.

Appendix 1 - Terms of Reference CPGME Fellowship Advisory Committee

The Fellowship Advisory Committee is responsible for overseeing PGME fellowships and for providing advice, identifying best practices, developing guidelines and recommendations related to the management of Clinical and Research fellowships regarding but not limited to the following:

- Appointment of fellows
- Educational goals and objectives of fellowships
- Remuneration of fellows
- Orientation support for new fellows
- Assessment and management of educational challenges/deficiencies, including termination of fellows and appeals
- Other related programs such as RCPSC Areas of Focused Competence (Diploma) Programs

**Applying for New Fellowship Programs**

The Max Rady College of Medicine Postgraduate Medical Education (PGME or CPGME) Office coordinates the application process for faculty interested in developing new Fellowship Programs. The fellowship application process involves the following steps:

1. Written approval must be obtained from the Program Director of the Residency Programs whose residents may be impacted by the fellowship

2. Written approval must be obtained from the appropriate Clinical Department Head prior to submission of the Fellowship Application (obtained from the CPGME Office)

3. The Fellowship Application must be completed and returned to the CPGME Office for approval. The Fellowship Application contains the following information:

   - Fellowship Program contact information, including Program Director
   - Administrative structure of the Fellowship Program
   - Applicant prerequisites
   - Interaction of fellowship with existing approved Residency Program(s) within the Clinical Department or affiliated specialties
   - Effect of the fellowship on strengthening/enhancing existing Residency Program(s) within the Clinical Department or affiliated specialties
   - Funding model
   - Fellowship goals and objectives/competencies
   - Fellowship structure and curriculum, including research, teaching and on-call
Management of Fellows

- Number of candidates allocated to the Fellowship Program per year
- Duration of Training
- Resources
- Assessment of performance of fellows
- Assessment of Fellowship Program and teaching faculty by fellows

4. The completed application is presented and reviewed by the Max Rady College of Medicine Postgraduate Medical Education (PGME) Executive Committee. Any changes to the approved fellowship require approval from the Associate Dean, PGME

5. The CPGME office will then apply for a new University of Manitoba Course Code and set up the new Fellowship training program in the VENTIS Curriculum Management System

6. Candidates may be accepted into the Fellowship Program once approved by the PGME Executive Committee and a University of Manitoba course code has been set up

Appendix 2 – Fellowship Application Process

Annual Allocation of Fellows

The number of candidates accepted into a Fellowship Program may vary from year-to-year. The proposed allocation of fellowship positions for the next academic year will be discussed on or before the first of December of the previous Academic Year at the Fellowship Advisory Committee. The Associate Dean, PGME must give final approval of the allocation of fellowship positions. Factors that are taken into consideration with respect to allocation of fellowship positions include, but are not limited to the following:

- Available funding
- Available clinical, technical and educational resources
- Potential impact on affiliated Residency Program(s)
- Potential Impact on education of other fellows

Assessment of Performance of Fellows

All Fellowship Programs should incorporate an in-training assessment system based on the established goals, and objectives of the fellowship. This system allows a mechanism whereby fellows’ progress will be considered and decisions regarding promotion, fellowship completion, remediation, discipline, restructuring of the fellowship or dismissal can be made.

The following principles should be considered:

- The assessment system must provide useful feedback to fellows at regular intervals during the Fellowship Program
- The assessment system must enable the Fellowship Program to detect fellow performance that falls below expectations
- Fellows must be informed in writing of any deficiencies that may result in unsatisfactory completion of the Fellowship program
Management of Fellows

- Assessment of Fellows is documented and tracked in the VENTIS Curriculum Management System, which must be sufficiently robust to support a summative decision regarding successful completion of the Fellowship Program

**Educational Goals, Objectives and Competencies for Fellowship Programs**

Each Fellowship Program must have a defined educational curriculum with goals, objectives and competencies customized to the educational needs of the fellow. The goals and objectives must be made available to the fellow prior to the start of training and used to guide assessment of performance.

Templates for educational goals and objectives for fellows are available from the PGME office.

Appendix 4 - Template for Fellowship Educational Goals and Objectives

**Fellowship Funding**

It is the responsibility of Clinical Departments to secure funding for individual fellowships. In contrast to Residency Program funding, Manitoba Health does not provide funding directly for Fellowship Programs. The funding of fellowships may be derived from a variety of possible sources, as follows:

- Fee-for-service payments to the fellow in exchange for clinical activities related to the fellowship
- Funds derived from various donor sources, including the following:
  - Foundations
  - Grants
  - Academic funds such as Dean’s Fellowship Fund
- Funds from Clinical Departments in anticipation of future recruitment of the fellow to the Department
- Funds from Regional Health Authorities in exchange for return of service
- Visa sponsored fellowship trainee funding

**Fellows and the Learning Environment: Intimidation and Harassment**

The University of Manitoba, Max Rady College of Medicine strives to maintain an environment free of intimidation and harassment in our postgraduate programs, including fellowships. The University of Manitoba, Max Rady College of Medicine, Rady Faculty of Health Sciences Guidelines for Conduct in Teacher-Learner Relationships and Diversity and Inclusion Policy apply to all Fellowship Programs. Fellows are encouraged to report instances of mistreatment or other major unprofessional behavior using the Incident Report Form - End of rotation assessment in VENTIS or with the ‘Speak Up’ online reporting tool.

Reference - Guidelines for Conduct in Teacher-Learner Relationships

Reference – Policy for Prevention of Learner Mistreatment
Resolution of Disputes

In recognition of the fact that disagreements/conflicts between learners and teaching faculty may occur, there is an expectation that a collegial, “no-fault” environment is in place. Regardless of the outcome of the immediate intervention and/or resolution, there shall be no repercussions to the fellow for lodging a complaint made in good faith.

Reference - Resolution of Resident/Fellow Disagreement with Attending Physician /Supervisor Policy

Moonlighting by Fellows

During the course of their training, fellows may wish to add extra clinical shifts to the training/work that they perform under the purview of the educational goals and objectives of their fellowship. Furthermore, it is understood that additional shifts provide fellows supplemental income. With respect to moonlighting by fellows, the following principles apply:

1. The status of medical licensure of the fellow must be considered, as follows:
   a. Fellows with full medical licensure may perform moonlighting activities independently in accordance with their specialty/Family Medicine credentials
   b. Fellows with limited educational licensure must work under the supervision of the faculty of the Max Rady College of Medicine

2. Professional liability protection for moonlighting activities is the responsibility of the fellow as he/she is considered an independent contractor

3. Moonlighting activities by fellows must not interfere with patient safety

4. Moonlighting activities by fellows must not interfere with their safety

5. Moonlighting by fellows must not interfere with the clinical/academic activities of their Fellowship Program

6. Fellows are required to advise Fellowship Program Directors when they are moonlighting

7. Fellows are required to apply for WRHA privileges independent of their fellowship contract

8. Visa Sponsored and IMG Fellows may have work permits that do not allow them to work outside the conditions of the permit

Fellowship Safety

The University of Manitoba is committed to promoting and supporting the safety and well-being of its learners in all areas of their working and learning environment.
Management of Fellows

The Max Rady College of Medicine Postgraduate Medical Education (CPGME) Office at the University of Manitoba recognizes that fellows have the right to a safe workplace and a safe learning environment. The responsibility for fellow safety jointly rests with the Faculty of Medicine at the University of Manitoba, the Winnipeg Regional Health Authority (WRHA), clinical teaching sites, individual clinical departments, their residency programs, and the fellows.

The concept of fellow safety includes physical, emotional and professional security. These will be outlined in detail in this document.

All residency and fellowship programs will adhere to the CPGME Fellow Safety Policy.

The WRHA, clinical teaching sites, clinical departments and all residency programs have their own fellow and workplace safety policy which will complement the CPGME Resident/Fellow Safety Policy (sample template for programs is provided in Appendix III). The Program Safety Policy will take precedence if more restrictive than this policy.

Reference - CPGME Fellow Safety Policy

Principles of On-call for Fellows

Although fellows are not subject to the rules and regulations of the WRHA-PARIM Collective Agreement, there is general agreement among Fellowship Program Directors that on-call frequency for fellows should parallel the WRHA-PARIM Collective Agreement (average of one-in-three nights from home). However, the other rules associated with post-call and call conversion do not apply for fellows (see WRHA-PARIM Collective Agreement). In some cases, especially where the fellow wishes to participate in certain rare procedures, special arrangements for on-call are acceptable as long as the safety and well-being of the fellow are respected and protected.

Remuneration of Fellows

Fellows are considered to be independent contractors. They are not subject to the rules and regulations negotiated and documented in the WRHA-PARIM Collective Agreement. Therefore, remuneration rates for fellows may be quite variable and are typically established by the Clinical Departments. However, as a guideline, fellows typically enter their Fellowship Programs after completion of PGY-5 of their Residency Programs. Therefore, establishing fellowship remuneration at a level commensurate with a PGY-6 (resident) level would be the minimum expected salary. The level of remuneration of fellows is at the discretion of the Clinical Department in which the Fellowship Program is located but must not be less than a PGY-6 (resident) level.

All Clinical Departments are required to utilize the CPGME/WRHA standard fellowship contract and letter of offer at the University of Manitoba.

Appendix 3 – Medical Clinical Fellowship Agreement
Management of Fellows

Standing List of Fellowship Programs at University of Manitoba

A current comprehensive list of standing Fellowship programs offered by the various Departments at the University of Manitoba and their Fellowship program Directors and pertinent contact information is maintained on the University of Manitoba PGME website - Fellowships. If a Fellowship Program does not have a website they are required to complete the Fellowship Website Information Form and submit it to the CPGME office.

Appendix 5 - TEMPLATE Fellowship Program Information

Recommended Standards for the Management of Fellowship Programs

Administrative Structure
The ultimate responsibility for Fellowship Programs rests with the Head of the sponsoring Department.

The fellow must have an Academic Advisor for the duration of their Fellowship Program. Furthermore, each Fellowship Program must have a Program Director and Program Administrator. In most cases, the supervisor and the Fellowship Program Director are the same person.

Academic Year
The Postgraduate Medical Education academic year begins July 1 and ends June 30.

Eligibility Requirements for Fellowship Training
There are standard minimum requirements for acceptance to Fellowship Programs as follows:

Applicants for fellowships must meet the College of Physicians and Surgeons of Manitoba (CPSM) eligibility criteria for obtaining an educational medical license in Manitoba. These criteria include the following:

Canadian and US Applicants or IMG applicants who have completed specialist training in Canada

- Applicants for fellowship must have successfully completed a Residency Program in Canada or in the United States on or before the start of their Fellowship Program. Canadian and United States graduates must be eligible to sit their certifying examinations prior to commencing their fellowship
- Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship
International Medical Graduates who have completed specialist training outside of Canada

- Applicants for fellowship from non-accredited medical schools outside Canada or the United States must be able to provide evidence that they are recognized as specialists in the jurisdiction where they are currently practicing medicine.
- There may be exceptions to the above allowed on a case by case basis.
- Language testing (TOEFL iBT® / IELTS) necessary for University of Manitoba admission.
- Medical Council of Canada Evaluating Examination (MCCEE)
  - Recommended but not mandatory, if applicant is able to provide evidence of specialist certification.
  - Mandatory, if applicant unable to provide evidence of specialist certification.
- Clinical Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship programs. Departments should clearly outline any additional requirements.

Visa sponsored fellowship candidates who have completed specialist training in Canada

- Applicants for fellowship must have successfully completed a Residency Program in Canada or in the United States on or before the start of their Fellowship Program. Canadian and United States graduates must be eligible to sit their certifying examinations prior to commencing their fellowship.
- Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship.

Visa sponsored fellowship candidates who have completed specialist training outside of Canada

- Applicants for fellowship must have successfully completed a Residency Program in Canada or in the United States on or before the start of their Fellowship Program. Canadian and United States graduates must be eligible to sit their certifying examinations prior to commencing their fellowship.
- Language testing (TOEFL iBT® / IELTS) necessary for University of Manitoba admission.
- Medical Council of Canada Evaluating Examination (MCCEE).
- Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship.

Program Accessibility
Every Department offering fellowships should maintain a centralized website dedicated to fellowships, providing the following information:

- A description of the minimum eligibility criteria for fellowships.
- A description of application requirements for commonly encountered situations.
- Fellowship Program description.

The Fellowship Program description should outline the experience that the learner would obtain from completing the program to help applicants determine whether the fellowship aligns with their career goals. The description may include the following:

- Types of procedures to be learned.
- Research or scientific paper publication requirement.
- Specific clinical or technical resources provided.
- Selection criteria.
- Important application dates.
Departments should post all important application dates, including the following:

- Application deadline
- Time frame for interviews
- Notification of decision date
- Expected start of the fellowship (July 1 or otherwise)
- Suggested duration of the Fellowship Program
- Contact information

The contact information should include the telephone number, address and e-mail of either the Fellowship Program Director or the Fellowship Program Administrator

**Selection of Fellows**

Each Fellowship Program must have defined selection criteria and a process for selecting fellows from a pool of eligible candidates. The following principles that should be taken into consideration in the selection process:

- Every reasonable effort should be made to ensure transparency by providing detailed information on the selection process
- Every reasonable effort should be made to ensure a fair and impartial process including selection committee where appropriate
- A list of important criteria that will inform selection decisions should be made available to applicants and administrative personnel
- All applicants must be informed in writing about the status of their application

**Accepting a Fellow**

Once a successful applicant is chosen by the fellowship program the following steps must be followed.

- Programs are required to submit the following to the attention of the Associate Dean PGME pgme@umanitoba.ca.
  
  - Fellowship Checklist (Appendix 10)
  - WRHA/CPGME Medical Clinical Fellowship Agreement (IC) (Appendix 3)
  - Three reference letters
  - Applicants curriculum vitae (CV)
  - Section 10 applications require a letter of support from the fellowship program director

**Note**- Any changes to the contract must be approved by all parties. Request for extension of training must be clearly outlined in detail and submitted for approval by the Associate Dean, PGME. Revised Schedule A, signed by all parties, must be included with the request for extension.

Programs are required to report any changes to the original IC agreement by submitting a revised schedule A form and a VENTIS Trainee Appointment eForm with the new anticipated end date. Extension of training may be granted if more time is required to complete the fellowship from an educational standpoint or an area of weakness has been identified requiring a remediation. Extension would be for special circumstances and would require approval.
Management of Fellows

Note: Minimum lead time for accepting International trainees is six months and three months for Canadian Citizenships or Permanent Residents.

University of Manitoba Registration Fees
All fellows are registered with the University of Manitoba, Faculty of Medicine, at the start of their training program and annually for each academic year they are appointed thereafter. An academic year begins July 1 and end June 30. Fellows are responsible for University of Manitoba registration fees which must be paid prior to commencement of training.
Reference - Registrar’s Office Fees

VENTIS registration
Fellows are registered in the VENTIS curriculum management system at the University of Manitoba.
Reference - PGME Trainee Registration Manual

Work Permit/Visa
Any postgraduate trainee who is NOT a Canadian or a Permanent Resident are required to have a valid Work Permit. It is the trainee’s responsibility to maintain a valid Work Permit and to provide the CPGME Office with a copy of the valid Work Permit(s). Fees incurred for processing required Canada Immigration documents by the University of Manitoba and Winnipeg Regional Health Authority will invoiced to the Departments (i.e. Labour Market Impact Assessment)
Reference - PGME Trainee Registration Manual

Accepting Visa Sponsored Trainees
The following link provides access to information and instructions on accepting sponsored trainees into a Fellowship Program.
Reference - CPGME Policy - Postgraduate Visa Sponsored Trainee Funding

Note: The CPGME office requires at least six-month lead time to process a sponsored trainee unless they are currently in training at the University of Manitoba. All Visa sponsored trainees are required to complete a one-month orientation in June prior to commencement of training.

Admission and Registration of Fellows
The PGME office will obtain the following documentation to admit and register a fellow

1. A signed letter of offer (Appendix 6)
2. A signed Medical Fellowship Independent Contract (Appendix 3)

The Medical Staff Administrative Services Office (MSAS) will obtain the following documentation to set up employment and remuneration for the fellow:

3. WRHA Direct Deposit Form (Appendix 9)
4. Criminal Record Check
5. Manitoba Child Abuse Check
6. Child Abuse Check
Management of Fellows

Appendix 8- PGME/WRHA Fellowship Contracting Flow Process
Reference - PGME Trainee Registration Manual

Annual Appointment of Trainees
In order for ‘new’ and renewing fellows to be registered, the Trainee Appointment eForm must be completed for each trainee in the VENTIS Curriculum Management System. Details on how to submit an Trainee eForm can be found in the following link: http://umanitoba.ca/faculties/medicine/education/pgme/ventis/9052.html

CPSM Medical Practice License in Manitoba for Clinical Fellows
The College of Physicians and Surgeons of Manitoba (CPSM) is the body that regulates the practice of medicine in the Province of Manitoba.

All postgraduate medical trainees must be registered with the CPSM prior to commencing the residency training. The CPSM Office will forward the registration application package directly to the trainees.

It is the trainee's responsibility to complete and return the application to the CPSM Office.

CPSM is required prior to the trainee's training start date. Failure to complete/submit the CPSM application by the posted deadline may result in a delayed start to the training.

The CPSM issues the certificate of registration authorizing postgraduate medical education on an annual basis.
For more information and a downloadable application, please visit the CPSM website: http://www.cpsm.mb.ca/

CPSM Section 10 Licensure

Section 10 (Manitoba Medical Act) was created by Manitoba legislation to allow short-term registration (less than 365 days) for individuals with exceptional skills and knowledge to visit the University of Manitoba. These individuals require registration with the College of Physicians and Surgeons of Manitoba (CPSM) in order for them to provide clinical and/or surgical services. Their registration with the College of Physicians and Surgeons of Manitoba also allow those physicians to bill Manitoba Health for their services. In recent years, Section 10 of the Manitoba Medical Act has been used for individuals who have full specialty certification in their country of origin but who wish to pursue fellowship training in Manitoba. As fellowships are not accredited by the RCPSC/CFPC, these fellows cannot be placed on the educational register of the College of Physicians and Surgeons of Manitoba. Furthermore, these fellows do not meet the criteria for full registration with the College of Physicians and Surgeons of Manitoba based on their qualifications. In order to accommodate these individuals for specialized post certification training in Manitoba, the University of Manitoba has approved the use of Section 10 by the Max Rady College of Medicine Postgraduate Medical Education (CPGME) Office and Academic Affairs. Thus, the two Deans associated with these offices and activities have co-signed this letter. The program director for the specialty is responsible for overseeing the training and limited clinical responsibilities of this individual.
Management of Fellows

With respect to the procedural aspects of the Section 10 process, the following applies:

1. The Fellowship Program generates a letter addressed to the Associate Dean, PGME requesting registration under Section 10. The letter should include the applicant’s CV, 3 reference letters, Fellowship IC contract and a letter of support from the Fellowship Program Director.
2. The CPGME office then generates an application for full registration under Section 10 which is signed by the Postgraduate Associate Dean and the Assistant Dean of Faculty Development.
3. CPSM reviews the applications and forwards a package to the candidate indicating the process and documentation required for registration.

It is important to note that the Section 10 process as it applies to Fellowship Programs merely allows the fellow to obtain a license from CPSM. In order to be accepted into a Fellowship Program, the prospective fellow must fulfill the eligibility requirements for fellowship training. Refer to Eligibility Requirements for Fellowship Training section of the manual.

CMPPA Medical Malpractice Coverage Information
All postgraduate medical trainees whose work involves patient contact must obtain CMPPA membership/its equivalent for the duration of their registration with CPGME at the University of Manitoba. The CPGME Office has provided the CMPPA with a listing of all trainees accepted to the University of Manitoba for postgraduate medical education training.

Mailing address
Canadian Medical Protective Association
PO Box 8225
Station "T"
Ottawa, Ontario
K1G 3H7

Telephone
1 800 267-6522 (in Ottawa area: 613 725-2000)

Telephone service hours:
Monday to Friday: 8:30 a.m. to 4:30 p.m. EST

Conduct in Teacher-Learner Relationships
All individuals at the University of Manitoba Max Rady College of Medicine are committed to fostering an environment that promotes academic and professional success in learners and teachers at all levels. The achievement of such success is dependent on an environment free of behaviors which can undermine the important missions not only of our College but also those of our affiliated institutions. An atmosphere of mutual respect, collegiality, fairness, and trust is essential; both teachers and learners bear significant responsibility in creating and maintaining this atmosphere. Additionally, teachers bear particular responsibility not only for the evaluation of learners but also for the modeling of appropriate professional behaviors. Teachers must be ever mindful of these responsibilities in their interactions with their inter- and intra-professional colleagues, their patients and families, and those whose education has been entrusted to them.
Management of Fellows

Reference University of Manitoba Faculty of Medicine Guidelines for Conduct in Teacher-Learner Relationships

Immunization
It is the trainee’s responsibility to complete the WRHA Immunization and Communicable Disease Record Form and Confidential Personal, Work and Health Questionnaire.

- WRHA PGME Immunization Pre-Employment Letter
- WRHA Immunization and Communicable Disease Record Form
- WRHA PGME Confidential Health Questionnaire

Reference – PGME Trainee Registration Manual

Fellows are required to contact one of the Occupational Health Units and schedule an appointment prior to commencement of training.

Leaves of Absence (LOA)
A leave of absence (LOA) is an approved interruption of training for greater than fourteen consecutive days for any reason, including medical illness.

For fellowship LOA, the following principles apply:

1. The decision to grant an LOA is at the discretion of the Fellowship Program Director
2. An LOA approved for medical reasons is accompanied by the expectation that the fellow must receive appropriate care and support
3. The fellow should not return from LOA until they are ready
4. An LOA is an unpaid approved interruption of training and pay and must be approved by the Fellowship Program Director

Whenever a fellow is placed on LOA, the following processes apply:

1. The Fellowship Program Director must inform the CPGME Office of all approved leaves prior to the commencement
2. The Associate Dean, PGME will notify the College of Physicians and Surgeons of Manitoba (CPSM) with respect to suspension of the licensure for the duration of the leave
3. The Associate Dean, PGME will notify the WRHA with respect to the Leave of Absence
4. The fellow’s status/documentation in VENTIS curriculum management system will be modified accordingly
Management of Fellows

5. The fellowship contract will be amended and must be verified and signed by all parties

For return from Leave of Absence, the following processes apply:

1. The Fellowship Program Director will advise the CPGME Office at least one week prior to the date of return of the fellow

2. The Associate Dean, PGME will notify the CPSM with respect to licensure and registration

3. The Associate Dean, PGME will notify WRHA with respect to the return of the fellow from the leave of absence

4. The fellow’s status/documentation in VENTIS curriculum management system will be modified accordingly

Vacation
Fellows are allowed four weeks of unpaid vacation.

Orientation of Fellows
Visa-sponsored fellows must attend the one month Orientation Program and the PGME Orientation day prior to starting their Fellowship Programs. All Fellows are welcome to attend the PGME Orientation Day, which is held annually at the end of June of the academic year.

Reference - PGME Orientation Day

The Personal Health Information Act (PHIA)
The Personal Health Information Act (PHIA) ensures that trustees protect personal health information including demographic information so that individuals are not afraid to seek health care or to disclose sensitive information to health professional.

The Winnipeg Regional Health Authority (WRHA) and the University’s Postgraduate Medical Education (PGME) program requires that all residents complete their Personal Health Information Act (PHIA) training prior to entering a WRHA facility.

The training is offered through our learning management system, Desire2Learn (D2L), so trainees can log into the course from any computer and complete the training, which consists of videos and a quiz. They must get 100% on the quiz to successfully pass the course.

Remediation and Appeals Process for Fellows
Fellows identified as having educational challenges should be provided with an opportunity and resources to rectify the situation either through adjusted goals and objectives, revised fellowship structure or a formal remediation period.
Supervision of Fellows

Postgraduate trainees must be given opportunities to observe and actively participate in clinical interactions to acquire the knowledge, skills, behaviors, attitudes and judgment required for future practice. This occurs through a process of graduated responsibility, whereby learners are expected to assume increased responsibility as they acquire greater competence. For this to occur safely, supervisors must assess the competencies of the students and postgraduate trainees they are supervising on an ongoing basis.

The following general principles apply to all medical education within the Max Rady College of Medicine, as follows:

- Safe, quality patient care must always take priority over the educational endeavor
- Proper education optimizes patient care, as well as the educational experience
- The autonomy and personal dignity of students and patients must be respected
- Professionalism, which includes demonstration of compassion, service, altruism, and trustworthiness, is essential in all interactions in the educational environment in order to provide the best quality care to patients

Reference - College of Medicine – Supervision of Learners Policy

Completion of Training and Issuing of Fellowship Program Certificates

All fellows, upon successful completion of the Fellowship Program, will be eligible to receive a certificate of successful completion of the fellowship signed by the Fellowship Program Director, Dean of the Max Rady College of Medicine and the Associate Dean, PGME.

Fellows are deemed eligible to receive a certificate if they have completed all requirements of the fellowship, have dedicated the agreed-upon amount of time to the fellowship and have achieved assessments at or above expectations in all aspects of the fellowship. If the trainee withdraws or has an early exit from training programs are required to report if the trainee has achieved all aspects of the training program and if the trainee’s performance was satisfactory up until the end date.

Instructions on how to submit a Completion of Training request can be found in the link below. http://umanitoba.ca/faculties/medicine/education/pgme/ventis/9052.html

All fellows are required to follow the PGME Completion of Training Process.

Research Fellowships

Research Fellowship Programs are offered to Postgraduate trainees who may be interested in gaining experience and expertise in defined clinical or bench/basic research outside of the formal
Management of Fellows

Max Rady College of Medicine undergraduate or postgraduate programs such as the Clinician Investigator Program (PGME) or MD-PhD Program (UGME).

Some Research Fellowships are offered as Interdisciplinary Medical Programs (Medical Microbiology) in conjunction with the Faculty of Graduate Studies (http://umanitoba.ca/faculties/graduate_studies/admissions/programs/interdisciplinaryhtml).

Clinical Departments should provide and post on their fellowship website a list of Research Fellowships that they offer.

Eligibility requirements and the application process for Research Fellowships are identical to those for Clinical Fellowships, in light of the fact that clinical research activities involve patient interaction. If the trainees have any interaction with patients, they are required to be licensed with CPSM. If the trainee does not have any interaction with patients the CPSM licensure requirement may be waived accordingly.

Approval- PGME Executive- January 12, 2016
Revised- February 8, 2016 Dean’s Council- Minimum Salary PGY 6 Required
Revised- November 8, 2016 FAC approved changes
Max Rady College of Medicine

Postgraduate Medical Education
Fellowship Advisory Committee (FAC)
Terms of Reference

1. PURPOSE

To serve as an advisory body regarding the oversight of PGME fellowship training and the management of PGME fellowship issues

2. REPORTING STRUCTURE

2.1 The Fellowship Advisory Committee (FAC) reports to the Max Rady College of Medicine PGME Executive Committee.

3. CHAIRPERSON AND MEMBERSHIP

3.1 The Chair of the Fellowship Advisory Committee shall be the Associate Dean, PGME or Delegate.

3.2 The membership of the Fellowship Advisory Committee shall consist of the following:
- The Associate Dean, PGME
- The Chairpersons of the PGME Committees of Surgery, Internal Medicine, Anesthesia and Pediatrics
- The Directors of Fellowships of the Departments of Medicine, Surgery, Anesthesia and Pediatrics
- Five (5) Fellowship Program Directors appointed by the Associate Dean, PGME
- Five (5) Residency Program Directors appointed by the Associate Dean, PGME
- Two (2) University of Manitoba clinical and/or research fellows appointed annually by the Associate Dean, PGME; alternates will be chosen if fellows are from the same program being reviewed
- Two (2) residents, appointed by the Professional Association of Residents and Interns of Manitoba (PARIM)
- CPGME Program Team Lead
- CPGME Administrator, Fellowship and Awards
- Other ex officio members, as necessary, invited by the Associate Dean, PGME

3.3 The College strives to achieve diverse membership on its committees in accordance with the Fax Rady College of Medicine Diversity Policy, and this should therefore be considered when appointing committee members that are not ex-officio members.

4. FUNCTIONS OF COMMITTEE

4.1 The Fellowship Advisory Committee is responsible for overseeing PGME fellowships and for providing advice, identifying best practices, developing guidelines and recommendations
related to the management of clinical and research fellowships regarding but not limited to the following issues:

- Appointment of clinical and research fellows
- Educational goals and objectives of clinical and research fellowships
- Remuneration of clinical fellows
- Orientation support for new fellows
- Assessment and management of educational challenges/deficiencies in clinical fellowships, including termination and appeals
- Royal College of Physicians and Surgeons of Canada (RCPSC) Areas of Focused Competence (Diploma) Programs

4.2 Fellowship Advisory Committee members shall serve as liaison persons with others in the areas from which they represent.

4.3 Fellowship Advisory Committee members, individually and collectively, shall deal with matters before the Committee in such a way that the interests of the Faculty of Medicine take precedence over the interests of any of its constituent parts, should those interests conflict or appear to conflict.

Members of the Committee who experience conflict of interest with regard to a particular matter may remain on the Committee so long as they declare the conflict and recluse themselves from any vote related to the matter.

5. **TERM OF OFFICE**

The term of office of each member shall be for the term the individual is in the position noted in 3.2, or in the case of the appointed Residency Program Directors and Fellowship Program Directors, for a two-year term with one two-year term optional renewal. The resident and fellow appointments shall be for one-year terms.

6. **QUORUM**

Fifty per-cent of total membership plus one shall constitute a quorum of the Fellowship Advisory Committee.

7. **NUMBER OF MEETINGS**

The Committee shall meet quarterly, or otherwise as subject to the call of the Chair.

8. **NOTICE OF MEETINGS**

The agenda shall be prepared and distributed to the members of the Fellowship Advisory Committee at least 48 hours prior to the meeting.
University of Manitoba
Fellowship Application Process
Guidelines

These guidelines are in place by the University of Manitoba, Max Rady College of Medicine
Postgraduate Medical Education Office designed to provide guidance when applying for a new
Fellowship Program in your department.

Approval must be obtained by your Department Head prior to submitting the Fellowship Application
to the Postgraduate Medical Education Office for approval. The approval must be received before
accepting candidates into the program.

The completed application will be presented and reviewed by the Faculty of Medicine Postgraduate
Medical Education Executive Committee.

Forward the original copy of the Fellowship Application and (2) copies to:

    Wendi Charette
    260 Brodie Centre
    University of Manitoba
    Postgraduate Medical Education
Application for Proposed Fellowship Training Program  
University of Manitoba - Part 1

Program Name __________________________________________________________

Name of Director for Fellowship Program ______________________________________

Contact Information of Director: ______________________________________________

Address __________________________________________________________________

Phone Number ______________________________________________________________

Email Address __________________________________________________________________

University Appointment of Director ___________________________________________

Specialties involved in Fellowship Program ______________________________________

1. OVERVIEW

   A. Define the evidence of need for a fellowship position in the proposed specialty.

   B. Outline the benefits of fellowship training in this specialty area as it relates to:

      I. Your Department
      II. University of Manitoba
      III. Practice Community

2. STRUCTURE

   A. Number of Fellows training per year:

   B. Duration of training: ✔ Six months    ✔ One Year    ☐ Two Years

   C. List principal training location and all affiliated sites:

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<th>Principal</th>
<th>Affiliated</th>
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D. Source(s) of funding: (check all that are being considered)

☐ Billing (eligible for Section 10 status through the College of Physicians & Surgeons of Manitoba regulations)

☐ Name of Guarantor: ________________________________

☐ Sponsored Visa – Name of Sponsor: ________________________________

☐ Other – Specify: ________________________________

E. Describe the structure of training as it relates to:

i. Clinical Activities

ii. Research

iii. Teaching

3. RESOURCES

A. Provide the following patient statistical information:

<table>
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<tr>
<th>Training Location</th>
<th>Estimated Number of Teaching Patients per year</th>
<th>Estimated Number of</th>
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<td>List All</td>
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B. Describe the teaching responsibilities of the Fellow:

C. Will the fellow rotate through other Departments in the University of Manitoba?

☐ YES ☐ NO

If YES, list departments (attach relevant letters of support)

D. Will this Fellowship program have any formal arrangements to send Fellows to another fellowship program in other universities for components of the program not available on-site?

☐ YES ☐ NO

If YES, what University?
4. **IMPACT ON EXISTING SPECIALITY SYSTEM**

   A. List Approved residency and fellowship programs in specialty or affiliated specialty:

   1. 
   2. 
   3. 
   4. 
   5. 

   B. How will the Fellow(s) interact with the existing specialty postgraduate program(s) as it relates to their fellowship specialty?

   C. Describe any competencies that may overlap with the Objectives of Training of an existing specialty postgraduate training program(s).

   D. Is (are) the existing specialty postgraduate training program(s) committee aware of this proposal for fellowship training?

      □ YES □ NO

      If YES, which programs?

   E. Describe how this program will enhance and strengthen existing specialty training programs in the University.
Application for a Fellowship Training Program - Part 2

Contact Information

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<th>Program Name</th>
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<th>Name of Fellowship Program Director</th>
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<tr>
<th>Address of Director</th>
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<th>Number of Fellows Requested per year</th>
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Duration of Training

- Six Months [ ]
- One Year [ ]
- Two Years [ ]

Preamble

Describe the specialty, the serving population and defined scope of practice.

Administrative Structure

I. Describe the anticipated level of support to administer the fellowship program.

II. Indicate the frequency in which the program will review it overall content, experience, evaluation process, and overall fellowship training program.

Applicant Prerequisites

I. Define the entry requirements and qualifications for candidates and list the documentation that will be required for the selection process (CV, Letters of Reference, personal letter)

II. Describe the body responsible for selecting a candidate (Program Director, Selection Committee)

Objectives of Program

Outline the objective(s) of the program and evidence of need for resident to be trained with advanced skills or defined area of focus in this specialty.
Management of Fellows

Outline the benefits of the fellowship training that will be provided in this specialty area as it relates to:

I. The Department
II. University of Manitoba
III. Practice Community

Describe the interaction of the fellowship program with the existing approved residency programs within the Department or affiliated specialty.

Describe how this program will enhance and strengthen existing residency programs within the Department or affiliated specialty.

Funding Model

Describe the funding model being proposed for the program.

I. Purpose of the Fund
II. Source of Funding
III. Funding Level
IV. Minimum PGY 6
V. Impact on Department and management of fund

Rotation Specific Goals and Objectives

Define the key competencies to be acquired in each competency role:

I. How will the fellow and faculty be provided with the objectives?
II. How will the objectives guide the fellow experiences and evaluation process?

The Royal College of Physicians and Surgeons of Canada training program objectives require the following competencies for insert program name.

Medical Expert

As Medical Experts, physicians integrate all the CanMEDS Roles, applying medical knowledge, clinical skills and professional attitudes in their provision of patient-centered care. Medical Expert is the central physician Role in the CanMEDS framework.

General Requirements:
Specific Requirements:

Communicator

As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur, during, and after the medical encounter.

General Requirements:
Specific Requirements:
Management of Fellows

Collaborator
As Collaborators, physicians effectively work within a healthcare team to achieve optimal patient care.

General Requirements:
Specific Requirements:

Leader
As Leaders, physicians engage with others to contribute to a vision of a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars, or teachers.

General Requirements:
Specific Requirements:

Health Advocate
As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities and populations.

General Requirements:
Specific Requirements:

Scholar
As Scholars, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of medical knowledge.

General Requirements:
Specific Requirements:

Professional
As Professionals, physicians are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour.

General Requirements:
Specific Requirements:

Program Structure

Provide a summary of the clinical responsibilities during the fellowship and what experience/knowledge the fellow is expected to have

I. Provide a complete description of the rotations in which the fellow would/will be involved
   • Academic Activities
   • Mandatory Training
   • Elective Training
   • Resident Rounds
   • Grand Rounds

II. Number and variety of patients

III. Call Rotation

IV. Teaching Responsibilities
IV. Research papers

- Describe the responsibilities of the fellow
- What duration of time will be allocated to complete this component of training
- Will the fellow be expected to

V. Administrative

Resources

List the main teaching site and any affiliated hospitals the fellow(s) will be trained

Evaluation of Performance

Describe the methods of evaluation and who will perform the evaluation(s).
Attach a sample rotation evaluation (ITERs) in CanMEDS format.

How does the program ensure the evaluations are received and discussed with the fellow?

What opportunity will the fellow be given to evaluate the program and faculty?

How often will the Fellowship Program Director meet with the fellow to formally discuss his/her progress?

What procedures will be adopted if a fellow is considered not meeting the required levels of knowledge and/or ability?

Signature Page

_________________________________________  Date
Fellowship Program Director

_________________________________________  Date
Fellowship Department Head

Submitted By: ________________________________  Date: ________________________________

Approval By: ________________________________  Date: ________________________________
MEDICAL CLINICAL FELLOWSHIP AGREEMENT

AMONG:

WINNIPEG REGIONAL HEALTH AUTHORITY
(the “Authority”)

...and...

THE UNIVERSITY OF MANITOBA
Faculty of Health Sciences:
College of Medicine
(the “University”)

...and...

INSERT FULL PHYSICIAN NAME (in CAPS)
(the “Physician”)

WHEREAS:

A. The Authority provides for the delivery of medical services in accordance with The Regional Health Authorities Act (Manitoba);

B. The University, through its College of Medicine, Faculty of Health Sciences (“College”), and through its affiliation with the Authority, provides professional medical education services, including certain medical clinical fellowship training (“Fellowship Training”);

C. Fellowship Training includes a component whereby the physician undergoing such training provides certain medical services (“Services”) to the Authority;

D. The Physician has applied for Fellowship Training and warrants that he/she has the necessary knowledge, skills, experience and licensure required for such training;

E. The University, Authority and Physician (together, the “Parties” and any one individually, a “Party”) desire to enter into this agreement (“Agreement”) in order to document their relationship with respect to the Fellowship Training and the associated terms and conditions;

NOW THEREFORE, the Parties agree as follows:

1. TERM OF AGREEMENT

1.1 This Agreement shall be deemed to commence on the date that it is signed by all Parties. If signed on different dates, then the date that the last Party signs and dates this Agreement shall be considered the commencement date.

1.2 Once signed and dated by all Parties, this Agreement shall continue until the Physician completes his Fellowship Training unless earlier terminated in accordance with the provisions of this Agreement.
2. FELLOWSHIP TRAINING AND SERVICES

2.1 Schedule “A”: The Parties agree that the Physician’s Fellowship Training shall be as set out in this Agreement and as further detailed in Schedule “A” attached hereto (which includes certain Services) and which sets out the department (“Department”) of the College where the Fellowship Training is to primarily be carried out.

2.2 On-Call Coverage: In addition to the Services, the Physician shall provide certain after-hours on-call coverage at the discretion of the Authority or Department (the general principle is 1-in-3 call from home where the Physician works the next day; however, other guiding principles may apply as specific to the applicable Program where the Fellowship Training is carried out).

2.3 Medical Coverage: In order to accommodate occasions where the Physician is unavailable to provide the Services, the Physician shall cooperate with the Authority and Department to arrange adequate provision of medical coverage.

2.4 Research: The Physician agrees that the only research to be conducted as part of the Fellowship Training will be limited to research having received appropriate ethical approvals and/or research impact committee approvals.

3. PHYSICIAN REQUIREMENTS AND CONDITIONS

3.1 In order to participate in Fellowship Training (which includes the provision of Services), the Physician agrees to comply with the following requirements and conditions:

(a) Registration Fees: The Physician is responsible for the payment of all registration fees associated with the Fellowship Training as determined by the University;

(b) CPSM Licensing: The Physician shall have and maintain a valid licence from the College of Physicians and Surgeons of Manitoba (“CPSM”) to practice medicine in the Province of Manitoba;

(c) Authority Appointment: The Physician shall maintain an appropriate appointment pursuant to the Authority’s Medical Staff By-law (“By-law”);

(d) CMIA Coverage: The Physician shall obtain and maintain liability/practitioner coverage with the Canadian Medical Protective Association (“CMIA”) or equivalent coverage with an insurance carrier satisfactory to the Authority and University;

(e) Orientation Sessions: The Physician shall attend any orientation sessions required by the Authority and/or the University;

(f) Other Acts and Assurances: The Physician shall do all such further acts and enter into all such additional agreements and undertakings as may be reasonably required by the Authority and/or University to facilitate the Fellowship Training, including:

(i) PHIA Pledge: Signing a pledge of confidentiality regarding the Personal Health and Information Act (Manitoba) (“PHIA”);

(ii) Check Results: Providing current check results relating to criminal record, child abuse registry and the adult abuse registry (and providing updated check results from time to time);
(iii) Learner Placement Affiliation Agreements: Signing any agreements that may be reasonably required pursuant to learner placement affiliation that may exist between the Authority and the University, from time to time.

Compliance with Laws and Policies: The Physician shall comply with all laws, policies and procedures and all other reasonable requirements of the University and Authority applicable to the Fellowship Training, including:

Mandatory Courses: The requirement to take all mandatory courses associated with the Fellowship Training by the University, and

Immunization and Health Records: The requirement to submit all necessary immunization and health record forms in accordance with the Authority’s and/or University’s immunization and Tuberculosis Testing policies.

CONFIDENTIAL INFORMATION

4.1 Authority and University Information Sharing: The Physician acknowledges and agrees that his/her personal information, including personal health information, may be shared between the Authority and University for the purposes of the Fellowship Training, including but not limited to training, personnel matters, departmental or program activities, or disciplinary review matters.

4.2 Inquiries of and Disclosures to CPSM: The Physician acknowledges and agrees that the University or the Authority may make periodic inquiries of and disclosures to CPSM with respect to the Physician’s registration status with CPSM and the Physician will authorize CPSM to provide any information related to his or her registration in response to such inquiries.

4.3 Physician Obligations: The Physician acknowledges and agrees that he/she is aware of his/her obligations pursuant to PHLA and The Freedom of Information and Protection of Privacy Act (Manitoba) (“FIPPA”) and regulations thereunder and agrees to comply with the provisions thereof. The Physician further acknowledges that he/she may come into possession of information and documents belonging to the Authority and/or University or concerning their activities that are confidential (“Confidential Information”). The Physician shall keep all such Confidential Information and documents strictly confidential, both during the term of this Agreement and after its expiry or termination, and shall return any documents which contain Confidential Information to the Authority or University upon the expiry or termination of the Agreement, as required (or earlier, if requested).

4.4 Confidential Information shall not include information that:

(a) Is or becomes part of the public domain with the authorization of the Authority and/or University;
(b) Is disclosed by the Physician with the written consent and authorization of the Party about whom the confidential information relates;
(c) Is independently developed by the Physician outside the performance of this Agreement, except to the extent that such information includes personal health information or personal information as defined in PHLA and FIPPA respectively;
(d) Was in the possession of the Physician prior to the date of disclosure to the Physician by the protected Party;

Dr. - (Fellowship)  
*term of contract*
Management of Fellows

(c) It is required by law to be disclosed pursuant to an order of a court or other authority of competent jurisdiction, provided that before making such disclosure, the Physician shall promptly provide the affected Party with written notice of the requirement to disclose and shall reasonably cooperate with the affected Party if it chooses to challenge, narrow or restrict such order;

(f) The Physician provides to the Physician’s legal counsel; or

(g) The Physician, in circumstances where the Physician is a member of Doctors Manitoba, provides same to Doctors Manitoba as the Physician’s bargaining agent, which information shall be limited to the Physician’s duties, hours of work, remuneration, conditions of work, and/or terms of service.

In no event shall these exceptions be deemed to include the disclosure of information prohibited from disclosure pursuant to PHIA or PIPPA.

5. **PHYSICIAN ACCOUNTABILITY AND REPORTING**

5.1 During the term of this Agreement, the Physician shall be accountable to both the Authority and to the University and shall report to their delegated representatives noted in Schedule “A”, or their replacements, as they may change from time to time.

6. **CONFLICTS IN PROVISION OF SERVICES**

6.1 Subject to the obligations of the Physician under this Agreement, the Physician shall be free to offer services to any other person, except where there may be a conflict of interest with the Authority and/or University. If there are reasonable grounds to believe that there may be a conflict of interest, the Physician shall disclose such potential conflict to the delegated representatives of the Authority and University noted in Schedule “A” prior to the signing of an agreement and/or prior to accepting the engagement to provide such other services. The Authority and/or University, in their sole discretion, shall determine whether there may be a conflict, or potential conflict, and what action, if any, is required to be taken by the Physician.

7. **REVIEWS**

7.1 By the Authority: In accordance with the Authority’s By-Law, as amended or replaced from time to time, reviews relating to the Physician’s performance of clinical functions and provision of Services will be conducted at least bi-annually or more frequently, as determined by the Authority’s delegated representative.

7.2 By the University: The Physician is also subject to performance reviews and evaluations by the University as are applicable to physician learners undergoing Fellowship Training.

7.3 Communication of Review Results: Review results conducted pursuant to this Agreement, including associated documentation, shall be shared among all Parties.

7.4 Continuation of Fellowship Training: The Physician’s continuation in Fellowship Training (including the provision of Services) is contingent upon satisfactory performance as determined by the Authority and/or University and in accordance with applicable laws and policies.
8. PHYSICIAN’S STATUS

8.1 The Physician’s status with regard to the Fellowship Training is as follows:

(a) PGME Registered Learner: The Physician is considered a registered learner of the College’s Postgraduate Medical Education ("PGME") Program. Furthermore, as a fellowship trainee, the Physician is not a member of PARIM nor is the Physician a legal beneficiary of any applicable PARIM agreement.

(b) Independent Contractor: With regard to the Services component of the Fellowship Training, performed by the Physician for the Authority, the Physician shall provide such Services as a medical professional acting as an independent contractor and on a contract for services basis.

(c) Confirmations: For the purposes of certainty, it is understood and agreed that, as the Physician is a University PGME registered learner and an independent contractor of the Authority:

(i) No direction or control: The Physician is not subject to the control or direction of the Authority or University, as to the means and methods of performing the Services, unless he/she fails to comply with applicable professional standards.

(ii) Provision of services to others: The Physician may provide services to other companies or organizations when he/she is not providing the Services to the Authority so long as the provision of these additional services does not place the Physician in a conflict of interest.

(iii) Not an employee: The Physician shall not, for any purpose, be deemed to be an employee of the Authority or University, nor be entitled to or receive any rights or benefits of employees of the Authority or University;

(iv) No insurance provided: The Authority and University shall carry no workers’ compensation insurance nor any health or accident insurance to cover the Physician.

(v) No contributions or benefits: The Authority and University shall not make any contributions to the Canada Pension Plan or any other pension plan, Employment Insurance, the Physician’s annual CMPA fees (or any other liability insurance), Doctors Manitoba, CPSM, continuing medical education or other professional expenses/fees or withhold any income taxes, nor provide any additional compensation for medical services delivered on statutory holidays, nor provide any other contributions or benefits, including but not being limited to paid vacation, statutory holidays, sick or continuing medical education leave;

(vi) Physician liability: The Physician shall bear sole responsibility for the discharge of any professional liability, income tax liability and remittances including but not limited to remittances to Canada Revenue Agency, and any other liability imposed by law arising from the Physician’s professional work and any other business expenses arising from such professional work;

(vii) Medical Corporation: The Physician may, if he/she operates through a medical corporation, assign his/her Services duties under this Agreement to such corporation, provided he/she has the prior written consent of the Authority and University;

Dr. * (Fellowship)  
*term of contract
9. **PAYMENT**

9.1 **Amount:** The Authority and/or University (through the applicable Department of the College) shall pay the Physician a total annual amount in relation to Fellowship Training (including Services) as specified in Schedule "A".

9.2 **Timing of Payments:** Payments will be made to the Physician on a monthly prorated basis on the third Thursday of each month or as close thereto as is reasonably possible.

9.3 **Travel and Expenses:** Unless otherwise stated in this Agreement, the Physician shall be responsible for any and all travel and accommodation costs associated with the Fellowship Training (including the provision of Services) and related expenses pursuant to this Agreement.

9.4 **Billing:** If applicable and upon request by the Authority and/or Department, the Physician will be responsible for submitting accurate and timely billings to the appropriate payer for clinical services rendered. If the Physician should receive any fee for service billings for the provision of clinical services rendered in accordance with the terms of this Agreement, the Physician agrees to direct and pay the entirety of such fees to the Department during the term of this Agreement.

9.5 **Proration:** This Agreement will be prorated for actual service rendered based on the percentage of full-time equivalent as agreed upon by the Parties, including part-year appointment or extended leave of absence during which the Physician is not available to provide Services.

9.6 **No Further Compensation:** The Parties agree that no additional remuneration or compensation (including but not limited to any benefits, payment in the nature of a signing bonus, retention bonus, incentive, relocation assistance, travel assistance and/or any "in kind" compensation) shall be paid for the Services, other than as specifically provided for in this Agreement.

10. **AUTHORITY AND UNIVERSITY PROPERTY**

10.1 The Physician acknowledges that all items of any and every kind created or used by the Physician pursuant to this Agreement and furnished by the Authority or the University to the Physician in the performance of this Agreement shall be considered and shall remain the exclusive property of the Authority or University, as applicable, at all times. All such property shall be surrendered to the Authority or the University by the Physician promptly on the termination of this Agreement, irrespective of the time, manner or cause of the termination.

11. **PHYSICIAN INDEMNIFICATION**

11.1 The Physician shall use due care in the performance of his/her obligations under this Agreement to ensure that no person is injured, no property is damaged and no rights are infringed.

11.2 The Physician shall be solely responsible for any omission or negligent act of the Physician and shall save harmless and indemnify the Authority and University from and against all claims, liabilities, demands, actions, losses, expenses, costs, or damages which the Authority
and/or University may suffer as a result of the negligence of the Physician in the performance or non-performance of the Fellowship Training (including Services) or the breach by the Physician of any material representation or condition of this Agreement.

11.3 In addition to the indemnity noted above, the Physician shall save harmless and indemnify the Authority and University from any and all liability, loss, damage, costs and expenses or tax liability of any nature which may be incurred by the Authority and/or University to Canada Revenue Agency resulting from the payments to the Physician pursuant to this Agreement.

12. TERMINATION

12.1 Either party may terminate this Agreement at any time by giving ninety (90) days notice in writing to the other party.

12.2 In addition to the above termination rights, the Authority and the University may, acting together, immediately terminate this Agreement, in writing, without prior notice, if any of the following are met:

(a) the Physician is paid the equivalent payment he/she would receive for a three (3) month period calculated pursuant to the terms of this Agreement;
(b) in the joint opinion of the Authority and University, the Fellowship Training carried out and/or Services provided by the Physician are negligently or recklessly performed;
(c) in the joint opinion of the Authority and University, the Physician commits a substantive and fundamental breach of this Agreement;
(d) the Physician becomes incapable of providing the Services or continuing with Fellowship Training, for any reason;
(e) in the joint opinion of the Authority and University, the Physician commits an act of dishonesty, recklessness or is grossly negligent in the performance of the Physician’s duties and obligations under this Agreement;
(f) the Physician is convicted of any criminal offence prosecuted by indictment, involving moral turpitude, which might adversely affect the reputation of the Authority and/or University in the eyes of those they serve or the public in general;
(g) the Physician fails to hold a valid license from CPSM to practice medicine in Manitoba;
(h) the Physician fails to maintain an appropriate appointment to the WRHA Medical Staff; or
(i) the Physician fails to maintain liability/practice coverage with the Canadian Medical Protective Association or equivalent coverage with an insurance carrier satisfactory to the Authority and University.

Failure of the Authority and/or University to rely on the provisions of this section in any given instance or instances shall not constitute a precedent or be deemed a waiver.

12.3 The termination of this Agreement shall not affect any rights of any Party, which have accrued prior to the date of such termination, nor shall it relieve any Party of any of its obligations or liabilities, which have arisen prior to the termination. In particular, rights and
13. NOTICES

13.1 Any notice or other communication pursuant to this Agreement shall be in writing and shall be delivered or sent by pre-paid mail, by e-mail communication, or by facsimile transmission, to the Parties at their contact information as noted in Schedule “A”.

13.2 Any such notice or communication delivered by e-mail communication or by facsimile transmission shall be deemed to have been received by the addressee on the date of delivery or facsimile transmission (provided that verification of successful delivery/transmission is obtained by the sender), and if sent by regular mail, then on the fifth business day following the date on which it was mailed.

14. GENERAL PROVISIONS:

14.1 Assignment of Rights: The rights that accrue to the Authority and the University under this Agreement shall pass to their successors or assigns. The rights of the Physician under this Agreement are not assignable or transferable in any manner unless otherwise noted herein.

14.2 Binding on Physician’s Executors, et cetera: This Agreement shall be binding upon the assigns, administrators, heirs, and successors of the Physician.

14.3 Counterparts, Execution & Delivery: This Agreement may be executed in one or more counterparts, each of which shall constitute an original, and all of which when taken together shall constitute one and the same Agreement. The Parties agree that a facsimile signature or an electronic signature of this Agreement shall be deemed a valid and binding execution of this Agreement.

14.4 Preamble and Schedule “A”: The Preamble and Schedule “A” attached hereto are integral parts of this Agreement and shall be used in its interpretation.

14.5 Survival: The provisions of this Agreement relating to confidentiality, the property of the University and Authority, and indemnification by the Physician shall survive the termination or expiration of this Agreement.

14.6 Entire Agreement: This document contains the entire agreement between the parties pertaining to the Services. There are no undertakings, representations or promises, express or implied, other than those contained in this Agreement (unless amended in accordance with this Agreement).

14.7 Amendments: No amendment or change to this Agreement shall be valid unless it is in writing and signed by all Parties.

14.8 Severability: In the event that any provision of this Agreement shall be deemed void or invalid by a court of competent jurisdiction, the remaining provisions or parts shall be and remain in full force and effect.
14.9 **Governing Law:** This Agreement shall be governed by and construed in accordance with the applicable policies and procedures of the Authority and University, the laws of the Province of Manitoba and the laws of Canada applicable therein.

14.10 **Gender and Numerosity:** For the purposes of this Agreement, the masculine and singular shall be construed to include the feminine and the plural, where appropriate.

14.11 **Further Acts:** Each party shall do such further acts and deliver all such further documents as may be reasonably required to perform and carry out the provisions of this Agreement.

This Agreement has been executed by the Parties on the dates noted below.

### FOR THE AUTHORITY:

__________________________
(authorized signature)

Brock Wright, MD
Senior Vice President, Clinical Services & Chief Medical Officer
Winnipeg Regional Health Authority

DATE: _______________________

### FOR THE UNIVERSITY:

__________________________
(authorized signature)

Dr. Cliff Yaffe
Associate Dean, PGME
College of Medicine, Faculty of Health Sciences
University of Manitoba

DATE: _______________________

### FOR THE PHYSICIAN

__________________________

DATE: _______________________

INSERT Physician Name

---

Dr. * (Fellowship)  
*term of contract
SCHEDULE “A”

This Schedule “A” forms part of that medical clinical fellowship agreement made among the Winnipeg Regional Health Authority (“Authority”), the University of Manitoba, College of Medicine, Faculty of Health Science; (“University”) and the Physician (“Physician”) noted below.

1. Name of Physician: INSERT Physician Name
2. Fellowship Training Speciality: INSERT
3. Training Start Date: INSERT Start Date
4. Anticipated Training End Date: INSERT End Date
5. Total Payment Amount to Physician: INSERT $
6. University Department Where Fellowship Training to be Carried Out:

INSERT Department Name & Address


8. Details of Medical Services to be carried out by Physician for Authority during Fellowship Training:

INSERT Details

9. Other agreed upon terms relating to Fellowship Training, if applicable (e.g., Any return of service commitment required of the Physician, any work permit details that need to be documented in advance (for non-Canadians), or, any plans for work that may be carried out at a non-WRHA site):

INSERT Terms

10. Reporting: For the purposes of Physician reporting, per Section 5 of the Agreement, the delegated representatives of the University and Authority shall be as follows:

For the Authority: Program Medical Director
For the University: Fellowship Program Director
Rotation Specific Goals and Objectives

Define the key competencies to be acquired in each competency role:

I. How will the fellow and faculty be provided with the objectives?
II. How will the objectives guide the fellow experiences and evaluation process?

The Royal College of Physicians and Surgeons of Canada training program objectives require the following competencies for [insert program name].

Medical Expert
As Medical Experts, physicians integrate all the CanMEDS Roles, applying medical knowledge, clinical skills and professional attitudes in their provision of patient-centered care. Medical Expert is the central physician Role in the CanMEDS framework.

General Requirements:
Specific Requirements:

Communicator
As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur, during, and after the medical encounter.

General Requirements:
Specific Requirements:

Collaborator
As Collaborators, physicians effectively work within a healthcare team to achieve optimal patient care.

General Requirements:
Specific Requirements:

Leader
As Leaders, physicians engage with others to contribute to a vision of a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars, or teachers.

General Requirements:
Specific Requirements:

Health Advocate
As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities and populations.

General Requirements:
Specific Requirements:
Scholar
As Scholars, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of medical knowledge.

General Requirements:
Specific Requirements:

Professional
As Professionals, physicians are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour.

General Requirements:
Specific Requirements:
### Fellowship Program Information

**Program Name**

<table>
<thead>
<tr>
<th>Duration of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Positions Available</td>
</tr>
<tr>
<td>Description/Overview of Program <em>(maximum 250 words)</em></td>
</tr>
<tr>
<td>Training Location(s)</td>
</tr>
</tbody>
</table>

**Match Program**

- [ ] Yes
- [ ] No

**If Yes, Indicate Application Process**

**Application Deadline**

**Program Inquiries**

- Program Director Name
- Program Address
- Telephone
- Fax
- Email

**Application Process**

Candidates must apply to:
Appendix 6 – Letter of Offer

INSERT Date

Dr. INSERT Name

INSERT Hospital or Site or Section Name

INSERT Room & Street Address

INSERT City, Province INSERT Postal Code

Dear Dr. INSERT Name:

RE: Letter of Offer for Medical Clinical Fellowship

Congratulations on your successful application for a fellowship in the INSERT Name of Fellowship Program.

In collaboration and agreement with the Winnipeg Regional Health Authority, we are pleased to offer you a fellowship in the Section of INSERT Section Name, Department of INSERT Department Name. This offer is contingent upon your ability to successfully acquire and maintain licensure through the College of Physicians and Surgeons of Manitoba.

In accordance with the terms and conditions set out in the attached Medical Clinical Fellowship Agreement “Agreement” your anticipated start and end date, as well as the compensation for your fellowship are summarized as follows:

Anticipated Start Date: INSERT Start Date
Anticipated End Date: INSERT End Date
Total Fellowship Payment: $INSERT $

Please note that payment for your fellowship cannot commence until our office confirms receipt of the necessary documentation as outlined in the attached Agreement, including receipt of the applicable registration fees. Any significant delay in the completion of your documentation and the University’s receipt of your registration fees may result in the fellowship being cancelled.

During the term of your fellowship you will retain the status of a learner with the Post Graduate Medical Education (PGME) Office and as an independent contractor with the Winnipeg Regional Health Authority (WRHA) for the medical services that you will be providing in accordance with the Agreement.

.../2
Appendix 7 - Guidelines for Accepting Visa Sponsored Trainees

Sponsored Trainees Guidelines

POSTGRADUATE TRAINING AGREEMENTS

Postgraduate Medical Education currently holds eight legally contracted training agreements in place between the University of Manitoba, Faculty of Medicine and sponsoring agencies from the following countries:

- Saudi Arabian Cultural Bureau
- Kuwait Embassy
- Saudi Aramco
- Oman
- Canadian Bureau of International Education
- United Arab Emirates
- State of Qatar

ELIGIBILITY OF TRAINEES

In order to be eligible to enroll in the Training Program, Trainees must provide evidence that they:

- are eligible and registered with the College of Physicians and Surgeons of Manitoba for the purposes of the Training Program;
- have obtained appropriate immigration status;
- are sponsored by the Bureau/Agency;
- meet all other qualifications and requirements of the Training Program established by the University;
- meet all the qualifications and requirements of the specific program of study;
- meet all the qualifications and requirements of the health authority, hospital, clinic or placement site(s) in which clinical training will occur (the “Placement Site”);
- consent to the sharing of his/her personal information related to his/her participation in the Training Program with and between the University, the Placement Site and the Bureau;
- execute an undertaking to return to their Home Country upon completion of the Training Program and subsequent certification by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada;
- agree and acknowledge that his/her participation in the Training Program is subject to the terms of the Agreement with the University of Manitoba Max Rady College of Medicine.

RIGHTS & OBLIGATIONS OF TRAINEES

The Trainees shall be considered students of the University, and have all the same rights, privileges and obligations as any other student enrolled in postgraduate medical education (residency) at the University,
subject to the qualifications set out in the agreement with the University of Manitoba, Max Rady College of Medicine.

The University represents that its Training Program is accredited by the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada. Upon successful completion of the Training Program, Trainees will be eligible to apply for certification by the appropriate body.

Trainees will be entitled to all the rights, privileges and obligations of members of the Professional Association of Residents and Interns of Manitoba (“PARIM”), with respect to their relationship with the University. They will not necessarily be entitled to such rights and obligations with respect to the Placement Site, except to the extent that the Placement Site is willing or obligated to treat them as such. In no circumstance will Trainees be entitled to the salary and benefit provisions of the PARIM collective agreement.

**REPORTING**

Each Trainee and the Bureau shall receive, at least twice each year, a report on the status and performance of the Trainee. The reports shall be in a form similar to that used by the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada.

The University shall notify the Bureau, in a timely manner, if it becomes aware of any matters of serious concern, including academic, professional or personal issues, which may impact the success of a Trainee in the Training Program. Where appropriate, the University will use reasonable efforts to work with the Trainee and the Bureau to resolve any difficulties.

**SPONSORSHIP**

The Bureau, during the period of the Trainee’s enrollment in the Training Program, and for a period of six (6) months thereafter, will provide financial support (the “Financial Support”) directly to the Trainee adequate to cover:

a. reasonable living expenses, including accommodation, food allowance, and personal expenses;
b. medical insurance (external plan);
c. reasonable ancillary educational expenses, such as textbooks, conference fees
d. professional fees; and
e. professional liability insurance.

The Financial Support is provided to trainees, in part, through a stipend as follows:

a. The Bureau will pay each trainee a monthly stipend directly from the embassy for all sponsored trainees with the exception of the Saudi Arabian trainees who pay the University the annual amount of $18,000 for each Saudi Arabian Trainee participating in the Training Program.

For clarity, the sponsorship of the Bureau is intended to cover the direct and indirect costs of the Trainee’s participation in the Training Program. Trainees will not be eligible for employment as residents by the University or Placement Sites, under the PARIM collective agreement or otherwise.

**DISBURSEMENT OF FUNDS WITH PROGRAM**
Once overhead is recovered by the University and the Visa Trainee salary budget (foreign trustee payment) is established, the remaining funds are split 50/50 with the departments who have Visa Trainees.

Estimated sponsored trainee invoicing and allocation will be provided to the Max Rady College of Medicine Finance Department and the Programs accepting trainee by August 1st annually.

The PGME office will complete sponsored trainee invoicing and arrange for allocation to Departments by September 30th annually.

Funding must be used to support resident education and resident research. Such expenses could include but not limited to resident travel, in-training examinations, special equipment, for teaching and learning purposes, education sessions such as visiting professors, Rounds, electronic equipment.

- If the resident is on a LOA, probation or requires an extension of training the FPGME will contact the sponsor to ensure the financial support is in place.
- Residents/fellows abide by the by-laws, rules, regulations, policies, procedures, and practices of the University of Manitoba and the Winnipeg Regional Health Authority.

**APPLICATION AND SELECTION**

Programs are required to notify the PGME office of their interest in accepting residency and fellowship applications by *March 31st*, including opening and closing dates for applications. Commencing around June of every year, application packages start arriving in the PGME office from the sponsoring agencies for consideration of training spots for the following academic year. Applications are then collated and distributed to the programs by the first week of September. Any application received after this distribution date is not guaranteed to be forwarded to the program unless specifically requested. Consideration of acceptance of VISA residents must be approved by the PGME Associate Dean & ARETS Committee (*Resident Trainees Only*). Programs should not consider applications that have not routed through the PGME Dean’s Office, or outside of this process, as candidate credibility and/or sponsorship cannot be guaranteed.

**Application packages sent by the sponsoring agency to the PGME Office include the following:**

1. A letter from the sponsoring agency which confirms full financial support for the duration of the fellowship program
2. An up-to-date curriculum vitae which includes the applicant’s date of birth, citizenship and e-mail address
3. A copy of the medical degree (with English translation, where applicable)
4. A copy of the specialty certification (with English translation, where applicable)
5. Three letters of reference on letterhead, signed and dated within two years of the date of application
6. Medical Council of Canada Evaluation Examination
7. English is the language of study at the Faculty of Medicine, University of Manitoba. All applicants whose first language is not English must submit proof of proficiency. You must have achieved the required proficiency in one of the following English language tests:
• TOEFL iBT®, with a total score of 96 and a score of 24 on each of the speaking and listening components. TOEFL iBT® score will be considered valid for 2 years from the date taken; or,

• Academic Version of International English Language Testing System (IELTS): an overall score of 7 with no individual score less than 7. IELTS score will be considered valid for 2 years from the date taken.

Notarized/certified documents must be submitted; photocopies are acceptable. Language Proficiency Attestations will not be accepted from the candidate or a third party.

Interview Process

After the program has reviewed the applications and selected suitable candidates for interview programs are responsible for contacting the embassy (with copy to sponsoredpgme@umanitoba.ca) in writing two letters (copies of example letters attached).

1. Advising the Embassy of the selected applicants for interviews and;

2. Advising the Embassy of the residents not selected for interviews.

Selection criteria for interview at the program level should involve the program director, selected faculty (which should include members of the Resident Training Committee), senior/chief resident/s, and section head/department head. A formal evaluative ranking system should be used in the screening process, and ultimately reviewed at a Residency Training Committee meeting prior to making a final selection.

Post-Interview Process

After the interviews, the Residency Program Director may elect to offer a position(s) to the suitable candidate(s). The Residency Program is responsible for sending a letter offering the position to the selected candidate(s) and Sponsor. (Example attached).

Once the candidate has accepted the offer, the Residency Program is responsible for notifying the PGME Office (sponsoredpgme@umanitoba.ca) with the name, copies of the Acceptance Letter, and any updated application materials for final review and approval by the ARETS Committee and Associate Dean, PGME.

Please note that Visa Sponsored Trainee’s require approximately 6 months to obtain appropriate Work Permit documentation, therefore please notify the PGME Office with the above information no later than December 1 for timely processing of documents.

Successful Candidate

The PGME Office will proceed with:

- Confirming sponsorship coverage with the Embassy/Bureau.
Once confirmation of sponsorship coverage has been received from the Embassy/Bureau, the PGME Office will:

- Extend a formal Letter of Offer to the successful candidate and the sponsor.
- Provide successful applicants with immigration documentation to enable them to apply for the appropriate work permit from Citizenship and Immigration Canada. **Please note:** Any written documentation to Canada Immigration or other Governing Bodies requesting changes to this information must be corresponded by the Postgraduate Medical Education Office.
- Alert the College of Physicians and Surgeons of Manitoba, who will mail out the appropriate international licensure application to the trainee. It is imperative to note that the trainee should complete the licensure application and return it as quickly as possible to CPSM so that they can confirm eligibility for licensure and forward the release letter for immigration purposes.
- Send the resident registration documentation and track the resident process until they arrive for the mandatory orientation which typical starts the beginning of June.

**Sponsored Trainees:**

- **Must** participate in the mandatory month-long IMG Orientation for New Residents, which runs in June. This must be cited in the letter of acceptance so that both the resident and the sponsor are aware of this expectation of attendance prior to the commencement of residency training. BLS and ACLS will be run as part of the orientation month.
  
  **IMPORTANT NOTE:** All sessions in the orientation are mandatory; there are specific protected times allotted in the schedule (as well as evenings and weekends) for individuals to take care of personal affairs (i.e. visits to your financial institution, furniture delivery, etc.)

- Foreign residents are responsible for obtaining and paying for their own CMPA membership fees in full. The PGME Dean’s Office confirms resident training status directly with CMPA so that their names are included in our University of Manitoba resident listing, but does not authorize supplemental payment by the WRHA for any portion of membership fees for foreign sponsored residents.

- It is the responsibility of the resident to ensure his/her work permit is current and the FPGME office is provided with renewed work permits.

Programs are required to follow the annual renewal of trainees and completion of training.

Please refer to [http://umanitoba.ca/faculties/medicine/education/pgme/adminprocesses.html](http://umanitoba.ca/faculties/medicine/education/pgme/adminprocesses.html)

Office of the Dean | Faculty of Medicine | Postgraduate Medical Education Office

University of Manitoba | 260 Brodie Centre | 727 McDermot Avenue |

Email: sponsoredpgme@umanitoba.ca
FELLOWSHIP CONTRACTING FLOW PROCESS (June 2015)

Date
Completed

- Department prepare Independent Contract (IC)
- Send electronically to PGME <pgme@umanitoba.ca> [must include CV and three reference letters]
- PGME prepare Letter of Offer (LOO) as initiated by IC
- PGME send electronically LOO & IC to MSAS (Val) <vinriexen@wrha.mb.ca>
- MSAS (Val) to review/revise/print LOO & IC. Obtain Regional CMO signatures. Send to PGME [Inform MSAS Credentialing]
- PGME to obtain Associate Dean’s signature
- PGME to send LOO & IC to Fellow with instructions
  - Fellow to submit to PGME:
    - Signed LOO & IC
    - Completed Deposit Deposit Form
    - Banking Information (as specified on form)
    - Recoverable information (as specified by Deed)
- PGME to forward to MSAS (Val) <vinriexen@wrha.mb.ca>
- MSAS submit package to MRO
Appendix 9 - WRHA – Medical Remuneration Direct Deposit Form

WRHA – MEDICAL REMUNERATION

DIRECT DEPOSIT FORM (for non-Medical Corporations)

Physician Last Name: ________________________________________________

Physician First Name: ______________________________________________

Home Address: ______________________________________________________

Postal Code: ________________________________________________________

Social Insurance #: _________________________________________________

E-Mail Address: _____________________________________________________

Phone #: __________________________________________________________

A void cheque with name imprinted, or bank memo IS REQUIRED

Medical Staff Administrative Services
4th Floor, 550 Main Street
Winnipeg, Manitoba R3B 1E2
Fax: 204-943-1792
E-mail: dnpaitche@wrha.mb.ca  Phone: 204-926-7156
E-mail: mbutler@wrha.mb.ca  Phone: 204-926-7142

_________________________  ____________________________
Physician Signature  Date

Confidential

1
# Appendix 10 – PGME Fellowship Checklist

**Fellowship Application Checklist for Programs**

(Excluding VISA Sponsored Fellow – Please refer to this PGME VISA Sponsored Trainee Process.)

Fellowship Programs are required to complete this Fellowship Checklist, check ☐ for each item and submit this Checklist with the application documents to the PGME Office at pgme@umanitoba.ca. If any of the required documents or information indicated in the checklist is missing, the application will be returned.

Please also refer to the Management of Fellowship for more details.

## Fellow Basic Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>First Name</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Middle Name (if applicable)</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Fellowship Program Name</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Start Date of Fellowship</td>
<td>Click here to enter a date.</td>
</tr>
<tr>
<td>End Date of Fellowship</td>
<td>Click here to enter a date.</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>Click here to enter a date.</td>
</tr>
<tr>
<td>Gender</td>
<td>Choose an item</td>
</tr>
<tr>
<td>Citizenship</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Phone Number</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Is this Fellow a Section 10?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Medical School of Graduation</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Year Graduated</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Residency Training Completed</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Year Completed</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Residency School</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

## Documentation Requirements

- [ ] CV
  - Three Reference Letters. Please list the References Full Name, Title and Organization/University/Hospital
    1. Click here to enter text.
    2. Click here to enter text.
    3. Click here to enter text.

- [ ] WBHA/PGME Independent Contract (K)

- [ ] A Letter of Support from the Fellowship Program Director (required for Section 10 Only)

- [ ] Copy of valid Permanent Resident Card (if applicable)

- [ ] Language Testing (TOEFL / IELTS) Result (required only for Fellow who has completed specialist training outside of Canada or the United States)

- [ ] Pass Result of the Medical Council of Canada Evaluating Examination (MCCEE) or the United States medical licensure Examination (USMLE) Steps 1 and 2 (required only for Fellow who has completed specialist training outside of Canada or the United States)

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Fellowship Checklist for Programs – Updated January 27, 2017