Mission
To provide an outstanding education to our postgraduate healthcare learners in a culturally safe environment, ensuring they will serve the healthcare needs and improve the health of the people of Manitoba and beyond.

Vision
To educate and inspire a diverse group of postgraduate healthcare learners and scholars by cultivating social responsibility, lifelong learning and delivery of high-quality patient care.
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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 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, apart from Areas of Focused Competence (Diploma) Programs, there are no national standards for fellowship training and fellows do not have an employer-employee collective agreement. Although, the establishment and maintenance of clinical 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 (medical): consist 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

Fellowship Programs: training designed to give learners who have completed residency training in Canada or similar training abroad, additional expertise with respect to their specific discipline.

Fellowship training is subdivided into the following categories:

**Areas of Focused Competence (Diploma) Programs**: accredited 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: Interventional Cardiology. 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.)

**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 with respect to their specific discipline. However, such 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.

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 Canadian Institutes of Health Research'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. Currently, Research Fellows are under the management of the Clinical Department and the associated Principal Investigator.

For further information, please contact the appropriate Clinical Department.

**Activable Clinical Fellowship Programs:** A fellowship program that has at least one fellow enrolled in the program who is following the academic curriculum and specialty-specific standards set out by the discipline.

**Inactive Clinical Fellowship Programs:** If a Clinical Fellowship program does not have a registered trainee for two consecutive academic years, the program will be considered inactive. If a program wishes to reactivate a fellowship program, they will need to submit an abridged reapplication to the PGME Office for approval.

**Active Areas of Focused Competence (Diploma) Programs:** A fellowship program that has at least one fellow enrolled in the program who is following the academic curriculum and specialty-specific standards set out by the discipline. Current fellows include those on authorized leaves of absence from the program less than 6 months.

**Inactive Areas of Focused Competence (Diploma) Programs:** AFC (Diploma) programs will be invoiced for an annual registration fee for the current academic year, once they have been granted Accredited New Program status. The registration fee will cover the current academic year and will not depend on the date that the program was accredited. All accredited AFC (Diploma) programs, including those without trainees, will then be invoiced each April for the annual program registration fee, for the upcoming academic year (July 1 - June 30). If an AFC
Management of Fellows

(Diploma) program does not pay the annual program registration fee for a given year (i.e., if there is no trainee present in the program), it will be deemed to be no longer registered with the Royal College. The program will be re-registered at the time of its next payment of an annual registration fee. Please note that, should a program be unregistered for more than two academic years (i.e., three years or more) in a regular accreditation review cycle, the program will be required to submit an abridged reapplication for accreditation.

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

Fellowships Committee

Although the Clinical Departments at the University of Manitoba are responsible for developing and maintaining their individual Clinical Fellowships and AFC (Diploma) Programs, the overall responsibility for fellowship training resides with the Associate Dean, PGME and the PGME Executive Committee. Moreover, the PGME Fellowships 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.

Terms of Reference PGME Fellowships Committee

The Fellowships Committee is responsible for overseeing PGME fellowships and for providing advice, identifying best practices, developing guidelines and recommendations related to the management of clinical fellowships and Areas of Focused Competence (Diploma) Programs regarding but not limited to the following:
Management of Fellows

- Appointment of fellows
- Educational goals and objectives/competencies of fellowships
- Remuneration of fellows
- Orientation support for new fellows
- Assessment and management of educational challenges/deficiencies, including termination of fellows and appeals

Applying for New Fellowship Programs

The Max Rady College of Medicine Postgraduate Medical Education (PGME) Office coordinates the application process for faculty interested in developing new Fellowship Programs.

For Clinical Fellowships, the application process involves the following steps:

The PGME Office estimates that it would typically take 6 months to process an application for a new Clinical Fellowship Program.

1. Written approval must be obtained from the Program Director of the Residency Programs whose residents might 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 PGME Office)

3. The Fellowship Application (see Appendix 2) must be completed and returned to the PGME Office for approval. The Fellowship Application contains the following information:
   - Fellowship Program contact information, including Program Director
   - Proposed professional practice of the fellow during the fellowship
   - Supervision of Trainees
   - 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
   - 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) Fellowships Committee. Any changes to the approved fellowship must be submitted to the PGME Office for Associate Dean, PGME approval.
Management of Fellows

5. The PGME office will apply for a new University of Manitoba Course Code and set up the new Fellowship in the online 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 – Clinical Fellowship Application Process

*Application in fillable format is available on the PGME Program Resources Entrada Community

For AFC (Diploma) Programs, the application process involves the following steps:

The Royal College must recognize a discipline as an AFC (Diploma) program before individual College of Medicine fellowship programs can apply for accreditation. The Royal College estimates that it would typically take 12 months to process an application for recognition of a discipline as an AFC (Diploma) program. All applications to the Royal College must be vetted through the PGME Office.

1. Written approval must be obtained from the Program Director of the Residency Programs whose residents might 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 PGME Office)

3. The Associate Dean, PGME must receive the complete application package, including the completed Royal College application form and all of the required supporting documentation, at least 45 days prior to the Royal College deadline for submission of the application.

4. The Associate Dean, PGME will refer the application package to the PGME Fellowships Committee for discussion and approval.

5. Following review, the Associate Dean, PGME will indicate approval of the application by signing the application form and providing a supporting letter to the Royal College on behalf of the Max Rady College of Medicine.

Final approval of the AFC (Diploma) Program application is determined by the Royal College Accreditation Committee and will be communicated to the Associate Dean, PGME once approved.

Once approved, PGME office will proceed with the following:

6. The PGME office will apply for a new University of Manitoba Course Code and set up the new AFC (Diploma) program in the online curriculum management system

7. 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

Reference - Royal College application process for recognition of an AFC (Diploma) Program
Annual Allocation of Fellows

The number of candidates accepted into a Fellowship Program may vary from year-to-year. Any changes to the allocations in the approved fellowship application will need to be submitted to the PGME Office for Associate Dean, PGME approval. 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
- Assessment of Fellows is documented and tracked in the online 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
Management of Fellows

- 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
- Internationally (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 the online curriculum management system or with the ‘Speak Up’ online reporting tool.

Reference - Guidelines for Conduct in Teacher-Learner Relationships
Reference – Policy for Prevention of Learner Mistreatment

Moonlighting by Fellows

All moonlighting activities require prior approval from the Fellowship Program Director.

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.

With respect to moonlighting by fellows, the following principles apply:

1. The status of medical licensure of the fellow must be considered, as follows:
   - Fellows with full medical licensure may perform moonlighting activities independently in accordance with their specialty/Family Medicine credentials. Fellows are required to apply for Shared Health privileges independent of their fellowship
   - Fellows with Provisional (Academic- Post-Certification Trainee) class licensure must work within the scope of the proposed professional practice of their fellowship and must work under the supervision of the Max Rady College of Medicine. Furthermore, it is understood that additional shifts do not provide these fellows supplemental income directly but contribute to the Department funding.
   - Fellows with Regulated Associate Member – Educational - Resident Class licensure are required to follow section 3.4.1 of the PGME Resident Moonlighting Policy

2. Professional liability protection for moonlighting activities is the responsibility of the fellow

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

4. Moonlighting activities by fellows must not interfere with their own 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. Internationally (Visa) Sponsored Fellows are not permitted to moonlight due to work permit regulations

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.

The Max Rady College of Medicine Postgraduate Medical Education (PGME) 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, Shared Health, 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 fellowship programs are required to adhere to the PGME Fellow Safety Policy.

The Shared Health, clinical teaching sites, clinical departments and all fellowship programs have their own fellow and workplace safety policy which will complement the PGME 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 - PGME Fellow Safety Policy

Principles of On-call for Fellows

Although fellows are not subject to the rules and regulations of the Shared Health-PARIM Collective Agreement, there is general agreement among Fellowship Program Directors that on-call frequency for fellows should parallel the Shared Health-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 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 not subject to the rules and regulations negotiated and documented in the -PARIM Collective Agreement. Therefore, remuneration rates for fellows may be quite variable and are typically established by the Clinical Departments.

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 the minimum salary established by the Dean, Max Rady College of Medicine and Associate Dean, PGME.
All Clinical Departments are required to utilize the PGME/Shared Health standard fellowship contract and letter of offer at the University of Manitoba.

Appendix 3 – Medical Clinical Fellowship Agreement
Appendix 8 – PGME Fellowship Checklist

**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](http://www.medical.mb.ca) and [University of Manitoba PGME website – Areas of Focused Competence (AFC) Diploma Programs](http://www.medical.mb.ca). If a Fellowship Program does not have a website they are required to complete the Fellowship Website Information Form and submit it to the PGME office.

Appendix 5 - TEMPLATE Fellowship Program Information

**Recommended Standards for the Management of Fellowship Programs**

**Administrative Structure**

The ultimate responsibility for Fellowship and AFC (Diploma) Programs rests with the Head of the sponsoring Department.

The fellow must have a supervisor 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 a certificate of practice in Manitoba. These criteria include the following:

**Canadian and US Applicants or International Medical Graduates (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.
- Certification through one of the following:
  - College des Medecins du Quebec
  - Royal College of Physicians and Surgeons of Canada
- Licentiate of the Medical Council of Canada
  - Medical Council of Canada Qualifying Examination (MCCQE) Part I and Part II OR;
  - The United States medical licensure examination (USMLE) Steps 1, 2 and 3.
Management of Fellows

- Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship.

*Eligible for Full membership with the College of Physician Surgeons of Manitoba*

**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. If the letter is not in English, a notarized copy translated into English must be provided to the PGME office.
- Proof of English Language Proficiency
- 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.

*Eligible for Provisional (Academic- Post-certification trainee) membership with the College of Physician Surgeons of Manitoba*

**Internationally (Visa) Sponsored fellowship candidates**
- Applicants for fellowship must have successfully completed a Residency Program.
- Proof of English Language Proficiency
- Medical Council of Canada Qualifying Examination (MCCQE) – applicants must have successfully passed the MCCQE – Part I
- Please see [Internationally (Visa) Sponsored application process](#)
- Departments may have their own specialty and admission requirements in addition to the standard minimum eligibility requirements for individual fellowship.

*Eligible for Regulated Associate Member – Educational – Resident Class membership with the College of Physician Surgeons of Manitoba*

**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)
- Shared Health/PGME Medical Clinical Fellowship Agreement (IC) (Appendix 3)
- Three reference letters
- Applicants curriculum vitae (CV)
- Provisional (Academic – Post Certification Trainee) class 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. Schedule C, 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 Schedule C form 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.

**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, Max Rady College 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. **PGME encourages fellowship programs to have their fellows start on July 1st or January 1st of each academic year to avoid additional registration fees and costs for the fellows.**
Management of Fellows

Fellows are responsible for University of Manitoba registration fees which must be paid prior to commencement of the academic year. If the term of the fellowship spans over two academic years, registration fees will be assessed per academic year (July 1 – June 30).

Reference - Registrar’s Office Fees

Registration

Fellows are registered in the online 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 PGME 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 be invoiced to the Departments (i.e. Labour Market Impact Assessment (LMIA))

Reference - PGME Trainee Registration Manual

Accepting Internationally (Visa) Sponsored Trainees

The following link provides access to information and instructions on accepting sponsored trainees into a Fellowship Program.

Reference - PGME Policy - Postgraduate Internationally (Visa) Sponsored Trainee Funding

Note: The PGME 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 Internationally (Visa) Sponsored trainees are required to complete a two week 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 Provincial Medical Administration Office (PMAO) will obtain the following documentation to set up employment and remuneration for the fellow:

1. Shared Health Direct Deposit Form (Appendix 9)
2. Police Information Check/Criminal Record Check (including Vulnerable Sector check)
3. Manitoba Adult Abuse Registry
4. Manitoba Child Abuse Registry

Appendix 8- PGME/Shared Health Fellowship Contracting Flow Process Reference - PGME Trainee Registration Manual
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. Please note that if you have already signed up for an account with physicians apply, you need to share your supporting documents with CPSM through physiciansapply.ca.

Any training outside Canada and the United States must be submitted for source verification:

- Medical Diploma
- Medical School Transcript
- Internship (if applicable)
- Postgraduate Training
- Specialty Certificate
- License, Registration Certificate

Applicants are responsible for source verification fees of each document submitted, translation of certificates of professional conduct fees, and registration and license fees.

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.

In order to be considered for post-graduate fellowship training, applicants must be eligible for one of the following memberships issued by the CPSM:

Full – Family Practice or Specialty Practice

Provisional (Academic Post-Certification Trainee) Class

Regulated Associate Member – Educational - Resident Class

*Please note this license is typically for those fellows who do not require a Manitoba Billing Number*

For more information on membership classes, please follow the above links or contact CPSM directly.

CPSM Provisional (Academic - Post-Certification trainee) Licensure

Provisional (Academic – Post-certification trainee) Membership (Regulated Health Professions Act) was created by Manitoba legislation to allow short-term registration for a time period not more than 24 consecutive months. The provisional (academic – post certification trainee) category on the regulated member register is established for the purpose of enabling an eligible post-medical degree trainee, who has successfully completed all of the requirements that would allow him or her to practice as a specialist in his or her home country, to pursue further clinical or research training in his or her specialty.

With respect to the procedural aspects of the Provisional (Academic – Post-certification trainee) Membership process, the following applies:
Management of Fellows

The Fellowship Program submits an application addressed to the Associate Dean, PGME via pgme@umanitoba.ca requesting registration under Provisional (Academic – Post-certification trainee) Membership. The application should include the following:

- Fellowship Checklist
- Applicant’s CV
- 3 reference letters
- Shared Health/PGME Medical Clinical Fellowship Agreement (IC) (Appendix 3)
- A letter of support from the Fellowship Program Director
- English Language Proficiency

The PGME office then generates a letter for registration under Provisional (Academic – Post-certification trainee) Membership which is signed by the Postgraduate Associate Dean and the Vice Dean, Academic Affairs.

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 Provisional (academic – post-certification trainee) Membership 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.

CMPA Medical Malpractice Coverage Information

All postgraduate medical trainees whose work involves patient contact must obtain CMPA membership/its equivalent for the duration of their registration with PGME at the University of Manitoba. The PGME Office has provided the CMPA with a listing of all trainees accepted to the University of Manitoba for postgraduate medical education training. Fellows are required to pay their membership fees in full directly to CMPA.

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)

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

Immunization

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

- Shared Health PGME Immunization Pre-Employment Letter
- Shared Health Immunization and Communicable Disease Record Form
- Shared Health 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 PGME 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 membership for the duration of the leave
3. The Associate Dean, PGME will notify Shared Health with respect to the Leave of Absence
4. The fellow’s status/documentation in the online curriculum management system will be modified accordingly
5. The fellowship letter of offer and contract will be amended and must be verified and signed by all parties
Management of Fellows

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

1. The Fellowship Program Director will advise the PGME 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 membership and registration
3. The Associate Dean, PGME will notify Shared Health with respect to the return of the fellow from the leave of absence
4. The fellow’s status/documentation in the online curriculum management system will be modified accordingly

Vacation

Fellows are allowed 28 days of unpaid vacation.

Orientation of Fellows

Internationally (Visa) sponsored fellows must attend the two-week Orientation Program (link to IMG) 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 professionals.

The Shared Health 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 Shared Health facility.

The training is offered through our learning management system, UMLearn, 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

It is the fellowship program’s responsibility to ensure the appropriate supervision is in place and adheres to the proposed professional practice section of the approved fellowship program application. 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
Management of Fellows

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/health_sciences/medicine/education/pgme/adminprocesses.html

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

Approval: PGME Executive- January 12, 2016
Revised: February 8, 2016; November 8, 2016; March 28, 2018; March 8, 2019; November 30, 2020
Approval: PGME Executive – January 19, 2021
1. **PURPOSE AND MANDATE**

1.1 **Purpose/Mandate:** The Fellowships (“Committee”) is a subcommittee of the Max Rady College Postgraduate Medical Education (PGME) Executive Committee, established to:

(a) Serve as an advisory body regarding the oversight of PGME Fellowship Training and the management of PGME Fellowship issues.

(b) The Fellowships Committee is responsible for overseeing PGME fellowships and for providing advice, identifying best practices, developing guidelines and recommendations related to the management of clinical fellowships and Areas of Focused Competence (Diploma) Programs regarding but not limited to the following:

- Appointment of fellows
- Educational goals and objectives/competencies for fellowships
- Remuneration of fellows
- Orientation support for new fellows
- Assessment and management of educational challenges/deficiencies, including termination and appeals

1.2 **Clarification on Purpose/Mandate:** This Committee is intended to complement existing University resources, which address matters of PGME Fellowships, and to foster collaboration on such matters relating to the College. This Committee is not intended to act as a substitute, duplicate or alternate forum to address issues over which other areas of the University have specific jurisdiction.

2. **REPORTING AND ACCOUNTABILITY**

2.1 **Accountability:** The Committee is established by, and accountable to, the PGME Executive Committee.

2.2 **Reporting:** The Committee, through the Chair, shall, semi-annually, provide a written report to the PGME Executive Committee.
3. **CHAIRPERSON AND COMMITTEE MEMBERSHIP**

3.1. **Chair:** The Committee Chair or Co-Chairs (i.e., the “Chair”) shall be the Associate Dean, PGME or delegate.

3.2. The Chair is responsible for the following at Committee meetings:

   a) Calling the meeting to order;

   b) Establishing an agenda and ensuring agenda items are addressed;

   c) Ensuring the minutes from prior meeting(s) are reviewed and approved by the Committee (with or without modification);

   d) Facilitating discussion to reach consensus on matters under consideration in a professional manner;

   e) Adjourning meetings after business is concluded; and

   f) Acting as the main representative of the Committee.

3.3. **Membership:** The Committee membership shall then consist of the following members, including the Chair:

   (a) The Associate Dean, PGME

   (b) The Chairpersons of the PGME Committees of Surgery, Internal Medicine, Anesthesia and Pediatrics

   (c) The Directors of Fellowship of the Departments of Medicine, Surgery, Anesthesia and Pediatrics

   (d) Five (5) Fellowship Program Directors appointed by the Associate Dean, PGME

   (e) Five (5) Residency Program Directors appointed by the Associate Dean, PGME

   (f) One (1) AFC Program Director appointed by the Associate Dean, PGME

   (g) 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

   (h) Two (2) residents, appointed by the Professional Association of Residents and Interns of Manitoba (PARIM)

   (i) Business Manager, PGME, IMG, CIP, Wellness and Professionalism

   (j) PGME Team Lead

   (k) Other *ex officio* members, as necessary, invited by the Associate Dean, PGME
3.4. **Equitable, Inclusive and Diverse Membership:** The PGME strives to achieve equitable, inclusive and diverse membership on its committee that is reflective of its commitment to equity, diversity and inclusion and this should be considered in the appointment of Committee members.

3.5. **Liaisons:** Committee members shall serve as liaison persons with others in the areas from which they are appointed.

3.6. **Best Interests:** Committee members shall deal with matters before the Committee in such a way that the best interests of the College take precedence over the interests of any of its constituent parts, should those interests conflict or appear to conflict.

3.7. **Consultation:** In carrying out its role, the Committee may call upon various resources as it deems required.

4. **TERM OF OFFICE**

The term of office of each Committee member shall be until the first of the following occurs:

(a) the member no longer holds the position noted in 3.3; or in the case of the appointed Residency Program Directors and Fellowship Program Directors, for a two (2)-year term with one (1) two (2)-year term optional renewal. The resident and fellow appointments shall be for one (1)-year terms.

(b) the term of the appointment ends;

(c) the appointment is rescinded by the appointer; or

(d) the member resigns from the Committee.

5. **FUNCTIONS AND ACTIVITIES OF COMMITTEE**

5.1. As part of its Mandate, the Committee will engage in the following activities:

a) **Inventory:** The Committee will inventory Fellowship activities occurring within the College.

b) **Prioritize:** The Committee will identify Fellowship priorities to achieve its Mandate.

c) **Make Recommendations:** The Committee will make recommendations regarding its Mandate to the Chair, PGME Executive Committee including the identification of priority issues and implementation strategies.

d) **Receive Recommendations:** The Committee will receive recommendations regarding its Mandate from the Chair, PGME Executive Committee including the identification of priority issues.

e) **Referral to Working Groups:** The Committee may refer priority issues connected to its Mandate which require review, collaboration and analysis to Committee working groups.
6. **MEETINGS**

6.1. **Number of Meetings:** The Committee shall meet two (2) times per academic year, or subject to the call of the Chair.

6.2. **Notice of Meetings:** Notice of a Committee meeting must be provided to Committee members, at least five (5) business days advance of the meeting, unless waived by the Committee members at the meeting.

6.3. **Agenda:** Agenda items should be sent to the Committee secretary at least forty-eight (48) hours in advance of the meeting. The agenda should be prepared and distributed to the members of the Committee prior to the meeting.

6.4. **Quorum:** A minimum of eight (8) Committee members must be present at a meeting in order to constitute a quorum.

6.5. **Decision-Making:** The preferred model for decision-making is consensus. If consensus cannot be reached, a vote shall be held. A majority of the votes cast by Committee members in attendance at the meeting is required to be in favour of the issue under consideration in order to definitively decide the issue. The Chair will not vote unless to break a tie.

6.6. **Committee Meeting Guests:** The Chair may consult with Committee members electronically, and may arrange email, telephone or other electronic meetings, instead of in-person meetings, as the circumstances may require.

6.7. **Electronic Discussion and Meetings:** The Chair may consult with Committee members by email or arrange telephone meetings, instead of in-person meetings, as the circumstances may require.

6.8. **Confidentiality:** All Committee members, resource persons, consultants, guests, and administrative support persons who may be in attendance at a Committee meeting or privy to Committee information, are required to protect and keep confidential any protected information (e.g., classified or privileged information) received through participation on the Committee, unless such information is otherwise approved for public information.

6.9. **Minutes & Confidentiality:** Minutes are to be taken of business occurring during Committee meetings. However, the Committee may move “in camera” to deal with certain items if the subject matter being considered relates to personal and confidential matters that are exempt from disclosure under applicable access and privacy legislation.

7. **COMMITTEE ADMINISTRATIVE SUPPORT**

The Committee shall receive administrative support from the Postgraduate Medical Education Office. The administrative support shall be provided through an individual whose duties shall include:

a) Assisting the Chair with preparation of Committee meeting agendas and distributing notification of meetings;

b) Ensuring follow-up of Committee action items;
c) Information-gathering;

d) Preparation and distribution of meeting material;

e) Minute-taking; and

f) Maintaining Committee records.

8. WORKING GROUPS

8.1. Referral to Working Groups: The Committee may refer Fellowship issues of priority, confirmed by the Associate Dean, PGME as requiring review, collaboration and analysis, to one or more Working Groups, which may be College-specific, as the circumstances require.

8.2. Working Group Leads: Each Working Group shall have one or more Leads, as appointed by the Committee Chair, in consultation with the Committee. The Lead need not necessarily be a Committee member. The Lead shall provide the Committee Chair with periodic updates of the Working Group work and progress and shall provide a final report to the Committee Chair at the completion of the Working Group’s project.

8.3. Working Group Reporting: Committee Working Groups shall report to the Committee Chair through their identified leads ("Leads"), who will then consult with the Committee and report to the Associate Dean, PGME.

8.4. Working Group Mandate: Each Lead (or Co-Leads) shall consult with the Committee Chair in clarifying the parameters and timelines associated with the assigned issue/project.

8.5. Working Group Membership: The Lead(s) of each Working Group shall recruit the membership they deem necessary to carry out the work on their assigned issue/project.

8.6. Working Group Terms of Reference: In addition to the above provisions on Working Groups:

a) The Leads shall bear in mind the College’s commitment to diversity when recruiting Working Group members;

b) The terms of office for each Working Group member shall be for the duration of the assigned project, unless the Lead determines otherwise; and

c) The above provisions dealing with Committee Meetings shall apply as the circumstances permit (except that minute-taking is not a requirement at Working Group meetings, given that administrative support may not be available).

9. AMENDMENTS TO TERMS OF REFERENCE

Amendments to these Terms of Reference may be proposed by the Committee to the College

10. DATES OF APPROVAL, REVIEW AND REVISION

10.1. Date Original Approved: September 10, 2013, Dean’s Council & FEC

10.1.1. Revised/Approved Fellowship Advisory Committee, June 3, 2014, May 29, 2018

10.1.2. Revised/Approved: PGME Executive Committee, August 19, 2014, June 12, 2018
10.2. **Review:** Formal review of these terms will be conducted every ten (10) years. In the interim these terms may be revised or rescinded if the Committee deems necessary.

10.3. **Supersedes:** Previous TOR versions

10.4. **Committee Administrative Support:** PGME Resident Administrator

10.5. **Effect on Previous Statements:** These terms shall supersede all previous terms on the subject matter herein.
University of Manitoba  
Clinical Fellowship Application Process  
Guidelines

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

The PGME Office estimates that it would typically take 6 months to process an application for a new Clinical Fellowship Program. 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 Max Rady College of Medicine Postgraduate Medical Education Executive Committee.

Forward the original copy of the Fellowship Application and (1) copy to:

   Wendi Charette  
   Educational Programs Office  
   260 Brodie Centre  
   University of Manitoba  
   Postgraduate Medical Education
Application for Proposed Clinical 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 __________________________________

Program Administrator _____________________________________________________

1. OVERVIEW

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

B. Outline the benefits of fellowship training in this speciality 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 and roles within sites.

<table>
<thead>
<tr>
<th>Principal</th>
<th>Affiliated</th>
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</table>
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:

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<th>Training Location</th>
<th>Estimated Number of Teaching Patients per year</th>
<th>Estimated Number of</th>
</tr>
</thead>
<tbody>
<tr>
<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 speciality or affiliated speciality:

1. 
2. 
3. 
4. 
5. 

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

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

D. Is (are) the existing speciality 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 speciality training programs in the University.
Application for a Fellowship Training Program- Part 2

Contact Information

Program Name

Department Name

Name of Fellowship Program Director

Address of Director

Phone Number

Email

University Appointment Director

Number of Fellows Requested per year

Duration of Training

☐ Six Months

☐ One Year

☐ Two Years

Preamble

Describe the specialty, the serving population and defined scope of practice. Reference section 5(3) of the CPSM General Regulation, which speaks to fellowship supervision and the requirement to specify the fellow’s scope of practice during fellowship training.

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 the fellow to be trained with advanced skills or defined area of focus in this specialty/sub specialty. Include a description of the trainee’s proposed professional practice.
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. Recommended Salary
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 assessment process?

The [insert program name] program objectives require the following competencies for successful completion of training:

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 are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system.

- **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

II. Call Rotation

III. 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

**Supervision of Fellow:**

The head of the division or department and another physician will be responsible for **supervising** the fellow (this will, in most cases, be the University’s Department Head and Program Director for the Department where the training will take place).

Example - The fellow will practice (NAME OF FELLOWSHIP) under supervision. The fellow will also be expected to independently provide care to (may need to insert specific descriptors here- adult pediatric etc) patients across the full spectrum of practice of a Consultant in (INSERT SPECIALTY)

**Assessment of Performance**

Describe the methods of assessment and who will perform the assessment(s).

How does the program ensure that the assessments are received by 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**

Fellowship Program Director

Date

Fellowship Department Head

Date

Submitted By: ________________________________

Date: ________________________________

Approval By: ________________________________

Date: ________________________________

**Note:** No amendments or changes to the fellowship program shall be valid unless it is in writing and signed by all Parties.
MEDICAL CLINICAL FELLOWSHIP AGREEMENT
Effective as of Insert Date (“the Effective Date”)

AMONG:

SHARED HEALTH INC.
(“Shared Health”)

-and-

THE UNIVERSITY OF MANITOBA
On behalf of its
Max Rady College of Medicine
Rady Faculty of Health Sciences
(the “University”)

-and-

INSERT FULL PHYSICIAN NAME
(the “Physician”)

WHEREAS:

A. Shared Health provides for the delivery of medical services in accordance with the applicable legislation in Manitoba;

B. The University’s Max Rady College of Medicine (“College”), through its affiliation with Shared Health, provides professional medical education services, including certain medical clinical fellowship training for individual’s registered with the College of Physicians and Surgeons as Provisional (Academic-Post Certification Trainees) (“Fellowship Training”);

C. Fellowship Training includes a component whereby the physician undergoing such training provides certain medical services (“Services”) to Shared Health and to one or more of the Service Delivery Organizations (“SDOs”) in Manitoba as defined in the Master Affiliation Agreement between the University and Shared Health;

D. The Physician has applied for Fellowship Training and warrants that he/she has the necessary knowledge, skills and experience required for such training and can meet the requirements and provide the confirmations as set out herein; for the purposes of certainty, the Physician warrants he/she:

- has satisfactorily completed the educational requirements for Royal College of Physicians and Surgeons of Canada specialist certification or is recognized as a medical or surgical specialist in the jurisdiction in which he or she last practiced before applying for Fellowship Training as outlined herein;
- meets the approved English language fluency criteria for Fellowship Training as outlined herein;
- is or will be legally entitled to work or study in Manitoba before engaging in Fellowship Training as outlined herein;

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

NOW THEREFORE, the Parties agree as follows:
1. **TERM OF AGREEMENT**

1.1 This Agreement shall be deemed to commence on the Effective Date.

1.2 Once signed by all Parties, this Agreement shall continue until the Physician completes the Fellowship Training unless earlier terminated in accordance with the provisions of this Agreement or as amended in writing by the Parties.

2. **FELLOWSHIP TRAINING, PAYMENTS AND BILLING**

2.1 **Schedule “A”:** The Parties agree that the Physician’s Fellowship Training shall be in accordance with the terms of this Agreement, including **Schedule “A”** attached hereto (which includes details about the Services, the provincial clinical service specialty training program ("Clinical Service") and the College department ("Department") where such training will primarily take place).

2.2 **On-Call Coverage:** In addition to the Services, the Physician shall provide certain after-hours on-call coverage as requested by Shared Health or the 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 Clinical Service.

2.3 **Medical Coverage:** In order to accommodate occasions when the Physician is unavailable to provide the Services, the Physician shall co-operate with Shared Health and the Department to ensure adequate provision of medical coverage.

2.4 **Payment:** Shared Health shall pay the Physician in relation to the Fellowship Training (including the Services) as set out in **Schedule “A”**.

2.5 **Timing of Payments and Proration:** 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. Payments pursuant to this Agreement will be prorated for the actual service rendered by the Physician based on the percentage of full-time equivalent ("FTE") as agreed upon by the Parties, taking into account any part-year appointment or extended leaves of absences during which the Physician is not available to provide Services.

2.6 **Physician Billings:** The Physician will be responsible for submitting accurate and timely billings to the appropriate payer for Services provided, if requested by Shared Health and/or the Department. For the purposes of certainty, all payments received by the Physician from third party payers (such as Manitoba Health) for Services provided while engaged in Fellowship Training, and for any other medical clinical services provided during the term hereof (e.g., as a result of moonlighting), shall be directed and paid to the Department.

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

2.8 **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.
3. ADDITIONAL PHYSICIAN REQUIREMENTS AND CONDITIONS

3.1 The Physician agrees to comply with all applicable laws, policies, procedures and reasonable requirements of the University, Shared Health and any applicable SDO to facilitate the Fellowship Training. This includes the requirement to provide certain documentation, confirmations and additional agreements as noted below; any unreasonable delays (as determined by the University and Shared Health in their sole discretion) may result in the cancellation of this Agreement:

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

(b) **CPSM Licensing:** The Physician shall have and maintain a current certificate of practice from the College of Physicians and Surgeons of Manitoba (“CPSM”) to practice medicine in the Province of Manitoba as a Provisional (Academic – Post Certification Trainee);

(c) **Shared Health Appointment:** The Physician shall maintain an appropriate appointment and privileges pursuant to Shared Health’s Medical Staff By-law (“By-law”) and, if applicable, an appointment and privileges from any SDO in which the Physician shall be providing the Services;

(d) **CMPA Coverage:** The Physician shall obtain and maintain liability/malpractice coverage with the Canadian Medical Protective Association (“CMPA”) or equivalent liability insurance or coverage with an insurance carrier satisfactory to the Shared Health and the University;

(e) **Personal Health, Dental and Accident Insurance Coverage:** The Physician shall obtain his/her own health, dental, disability and accident insurance coverage, as this coverage is not provided by the University nor the Authority;

(f) **Citizenship and Immigration Requirements:** The Physician shall ensure that all citizenship and immigration requirements that apply to his/her ability to engage in Fellowship training are met.

(g) **Immunization and Health Records:** The Physician shall submit all necessary immunization and health record forms in accordance with Shared Health’s and/or the University’s and/or any applicable SDO’s Immunization and Tuberculin Testing policies;

(h) **Check Results:** The Physician shall provide current and satisfactory check results relating to criminal records, child abuse registry and the adult abuse registry (and provide updated check results from time to time as may be required);

(i) **PHIA Pledge:** The Physician shall signing a pledge of confidentiality regarding the Personal Health and Information Act (Manitoba) (“PHIA”);

(j) **Orientation Sessions:** The Physician shall attend any orientation sessions required by the University, Shared Health, and/or any SDO where Services are provided;

(k) **Learner Placement Affiliation Agreements:** The Physician shall sign any agreements that may be reasonably required by the Shared Health or the University pursuant to learner placement affiliation agreements that may exist between the Shared Health and the University, from time to time;
(l) **Mandatory Courses:** The Physician shall take all mandatory courses associated with the Fellowship Training by the University (and pay all fees relating to same);

(m) **Research:** The Physician shall ensure that the only research to be conducted as part of his/her Fellowship Training will be limited to research having received appropriate ethical approvals and/or research impact committee approvals.

4. **CONFIDENTIAL INFORMATION**

4.1 **Information Sharing:** The Physician acknowledges and agrees that his/her personal information, including personal health information, will be shared between the Shared Health and University (and any SDOs as applicable) for the purposes of facilitating the Fellowship Training, including but not limited to evaluations, human resources matters, payment coordination, scheduling, Departmental and Program activities, the results of any checks required pursuant to section 3.1 above and any disciplinary review matters. Such information will be shared on a limited and need-to-know basis only, in accordance with applicable privacy laws and policies.

4.2 **Inquiries of and Disclosures to CPSM:** The Physician acknowledges and agrees that the University and/or Shared Health 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 **Further Disclosures and Inquiries:** The Physician acknowledges and agrees that the University and/or Shared Health may make periodic disclosures and/or inquiries to other organizations or individuals, related to the Physician’s Fellowship Training. Such disclosures and inquiries will be made in compliance with applicable access and privacy laws and policies.

4.4 **Physician Obligations:** The Physician acknowledges and agrees that he/she is aware of his/her obligations pursuant to PHIA and *The Freedom of Information and Protection of Privacy Act* (Manitoba) (“FIPPA”) and regulations thereunder and agrees to comply with such obligations. The Physician further acknowledges that he/she may come into possession of information and documents belonging to the Shared Health, and/or the University and/or any applicable SDO or concerning any of those organizations’ 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 Shared Health, the University or any applicable SDO upon the expiry or termination of the Agreement (or earlier, if requested).

4.5 Confidential Information shall not include information that:

(a) is or becomes part of the public domain with the authorization of Shared Health and/or University or any SDO;

(b) is disclosed by the Physician with the written consent and authorization of the Party to whom the Confidential Information relates;

(c) is independently developed by the Physician outside the terms and conditions of this Agreement, except to the extent that such information includes personal health information or personal information as defined in PHIA and FIPPA respectively;
5. **PHYSICIAN ACCOUNTABILITY AND REPORTING**

5.1 During the term of this Agreement, the Physician shall be accountable to both Shared Health 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.

5.2 As required by section 3.14 of the CPSM General Regulation, the University Department Head and another physician to be designated shall be responsible for supervising the Physician as an academic post-certification trainee.

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, including medical clinical services, to any other person, except where there may be a conflict of interest with Shared Health 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 designated representatives of Shared Health and the University as noted in Schedule “A” prior to accepting the engagement to provide such other services. Shared Health and/or the University shall determine whether there may be a conflict, or potential conflict, and what action, if any, is required as a result.

7. **REVIEWS**

7.1 **By the Authority:** In accordance with Shared Health’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 Shared Health’s designated 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 academic post-certification training as a Fellow.
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 Shared Health 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. The Physician is not an employee of the University, Shared Health, any SDO, nor is the Physician a member of the Professional Association of Residents and Interns of Manitoba (“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, and any other medical clinical services performed by the Physician for the Shared Health and any SDO, the Physician provides same as a medical professional acting as an independent contractor pursuant to this Medical Clinical Fellowship Agreement.

(c) **Confirmations:** For the purposes of certainty, it is understood and agreed that:

(i) **Not an employee:** The Physician shall not, for any purpose, be deemed to be an employee of Shared Health, the University, any SDO, nor be entitled to or receive any rights or benefits of employees of any such organization;

(ii) **No insurance provided:** Shared Health and the University are not responsible to carry nor shall they carry any workers’ compensation insurance, health insurance or accident insurance to cover the Physician.

(iii) **No contributions or benefits:** Shared Health and the University shall not, on behalf of the Physician:

- make any contributions to the Canada Pension Plan or any other pension plan, Employment Insurance, CMPA (or any other liability insurer), Doctors Manitoba, CPSM, or continuing medical education or other professional expenses/fees;
- withhold any income taxes;
- provide any additional compensation for medical services delivered on statutory holidays;
- provide any other contributions or benefits, including but not limited to paid vacation, statutory holidays, sick leave or continuing medical education leave;

(iv) **Physician liability:** The Physician shall bear sole responsibility for the discharge of the following responsibilities:

- any professional liability;
- income tax liability;
• 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;

(v) **No medical corporation:** During the term of this Agreement, the Physician may not assign their duties to a medical corporation, nor perform any Services or other medical clinical services as a medical corporation. The Physician’s relationship to the University, Shared Health and the applicable SDOs is that of an individual only.

10. **SHARED HEALTH 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 University, Shared Health or any applicable SDO shall be considered and shall remain the exclusive property of the University, Shared Health, the SDO, as applicable, at all times. All such property shall be surrendered to the University, Shared Health or the SDO 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 and all of his/her omissions or negligent acts and shall save harmless and indemnify the University, Shared Health, and any applicable SDO from and against all claims, liabilities, demands, actions, losses, expenses, costs, or damages which they may incur as a result of the Physician’s negligence in carrying out his/her duties and responsibilities under this Agreement, or as a result of the Physician’s breach 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 University and Shared Health from any and all liability, loss, damage, costs and expenses or tax liability of any nature which may be incurred by the University and/or Shared Health to Canada Revenue Agency or other taxation authority resulting from the payments to the Physician pursuant to this Agreement.

12. **TERMINATION**

12.1 Any Party may terminate this Agreement at any time by giving ninety (90) days notice in writing to the other Parties. Such written notice may take the form set out in Schedule “B”.

12.2 In addition to the above termination rights, Shared Health and the University may, acting together, immediately terminate this Agreement, in writing, without prior notice, if any one or more of the following are met:
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 Shared Health and the University, the Fellowship Training carried out and/or Services provided by the Physician are negligently or recklessly performed;

(c) in the joint opinion of Shared Health and the 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 Shared Health and the 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 Shared Health, any SDO, and/or the University in the eyes of those they serve or the public in general;

(g) the Physician fails to hold a current certificate of practice from CPSM to practice medicine in Manitoba;

(h) the Physician fails to maintain an appropriate appointment to the Shared Health Medical Staff or the medical staff of any applicable SDO;

(i) the Physician fails to maintain liability/malpractice coverage with CMPA or equivalent coverage with an insurance carrier satisfactory to Shared Health and the University; or

(j) The Physician fails to provide any of the confirmations of requirements for Fellowship Training pursuant to section 3.1 of this Agreement.

Failure of Shared Health and/or the 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 obligations pertaining to the Physician’s appointment to Shared Health’s Medical Staff and privileges appurtenant thereto shall be governed by the applicable Shared Health or SDO’s Medical Staff By-law.

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 University, Shared Health and applicable SDOs 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 executors, 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 Schedules:** The Preamble and Schedules attached hereto are integral parts of this Agreement and shall be used in its interpretation.

14.5 **Survival:** The provisions of this Agreement dealing with confidentiality, the property of the University, Shared Health and SDOs, indemnification by the Physician, and the binding nature of this Agreement, 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 Fellowship Training, including Services and provision of other clinical medical services during the term of this Agreement. 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. Any such amendment shall be in the form set out in Schedule “C”.

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 Shared Health, the University and any applicable SDO where Services and other clinical medical services are carried out, the laws of the Province of Manitoba and the laws of Canada applicable therein.

14.10 **Gender and Numbering:** 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.

IN WITNESS WHEREOF this Agreement has been duly executed by the Parties.
SHARED HEALTH INC.

Per:

Dr. Perry Gray
Chief Medical Officer and Provincial Lead, Medical Specialty Services
1502-155 Carlton Street
Winnipeg MB
R3C3H8

UNIVERSITY OF MANITOBA
On behalf of its Max Rady College of Medicine, Rady Faculty of Health Sciences

Per:

Dr. Cliff Yaffe
Associate Dean, PGME
Max Rady College of Medicine

And Per:

[Insert Name of Department Head]
Department Head, [Insert Name of Department]
Max Rady College of Medicine

PHYSICIAN:

Witness of Physician Signature
Print Name: _________________________

Physician Signature
Print Name: _________________________
SCHEDULE “A”

This Schedule “A” forms part of that medical clinical fellowship agreement made among the Shared Health, the University of Manitoba, on behalf of its Max Rady College of Medicine, Rady Faculty of Health Sciences (“University”) and the Physician (“Physician”) noted below.

1. Name of Physician: INSERT Physician Name

2. Fellowship Training Speciality (“Clinical Specialty Service”): 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 (“Department”):
   INSERT Department Name & Address

7. Educational Goals, Objectives and Competencies for Fellowship Training (Used to Guide Assessment and Performance) (i.e., “Goals and Objectives”):
   Attach Fellowship Program Outline Document
   Or note reference to webpage where such information is listed

8. Details of Physician’s Proposed Professional Practice during Fellowship Training (i.e., “Scope of Practice”):
   Example:
   The fellow will practice NAME OF FELLOWSHIP under supervision. The fellow will also be expected to independently provide care to INSERT SPECIFIC DESCRIPTORS (i.e. Adult Pediatric) patients across the full spectrum of practice of a Consultant in INSERT SPECIALTY

9. The medical clinical services (“Services”) to be carried out by Physician for Shared Health and its Service Delivery Organizations (“SDOs”) as required during Fellowship Training (must be consistent with Goals and Objectives and Scope of Practice):
   List the sites and, if applicable, specific roles within sites.
   Examples:
   Anesthesia (HSC- elective cases, Main OR first and backup call, labour floor call)
   Internal Medicine (SBGH- CTU attending)

   NOTE: Additional medical clinical services may be provided by the Physician during the term of this agreement, provided that same are in accordance with the Scope of Practice, and occur under the supervision noted herein and that any billings and payments for such services occurs in accordance with the Agreement.

10. Other agreed upon terms relating to Fellowship Training, if applicable:
    INSERT DETAILS; 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-Shared Health site):
11. Reporting: For the purposes of Physician reporting and supervision, per Section 5 of the Agreement, and Section 3.14 of the CPSM General Regulation, the designated representatives of the University and Shared Health shall be as follows:

For Shared Health: Specialty Service Lead [INSERT NAME - Department Head]

For the University: Fellowship Program Director and Department Head [INSERT NAMES]

12. Notices: For the purposes of notices and communications, per Section 13 of the Agreement, notices and related communications shall be provided to the Parties as follows:

For Shared Health:

Provincial Medical Administration Office
Attention: Medical Staff Contract Administrator
1502-155 Carlton St
Winnipeg, MB
R3C 3H8

For the University:

To the Department:
Department of INSERT Department Name
Attention: Business Manager & Department Head
INSERT mailing address
Winnipeg, MB INSERT Postal Code
Telephone: (204) INSERT Telephone Number
Fax: (204) INSERT Fax Number
Email: INSERT email address

And to the College’s PGME Office:
Postgraduate Medical Education Program
Max Rady College of Medicine, Rady Faculty of Health Sciences
Attention: Associate Dean, PGME
260 Brodie Centre, 727 McDermot Avenue
Winnipeg, MB R3E 3P5
Telephone: (204) 789-3290
Fax: (204) 789-3928
Email: pgme@umanitoba.ca

For the Physician:

INSERT Physician Name
INSERT Physician mailing address
INSERT City, INSERT Province INSERT Postal Code
Telephone: (204) INSERT Telephone Number
Fax: (204) INSERT Fax Number
Email: INSERT email address
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:
# Appendix 5 – Fellowship Website Information

## TEMPLATE: Fellowship Program Information

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**DESCRIPTION/OVERVIEW OF PROGRAM** *(maximum 250 words)*

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**IF YES, INDICATE APPLICATION PROCESS**

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**PROGRAM INQUIRIES**

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**APPLICATION PROCESS**

Candidates must apply to:

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PGME Executive Approved January 12, 2016
Dear Dr. [Name]:

Re: Letter of Offer - Medical Clinical Fellowship

The University of Manitoba ("University") on behalf of its Max Rady College of Medicine, Rady Faculty of Health Sciences, and Shared Health Inc., ("Shared Health"), are pleased to offer you a Fellowship opportunity in accordance with the attached fellowship training agreement ("Agreement"). Certain terms from the Agreement are summarized below. If there is any discrepancy between the matters addressed in this cover letter and the Agreement itself, the Agreement shall govern.

Name of Fellowship Program: [Insert name of fellowship program]

Anticipated Start Date: [Insert Details]

Anticipated End Date: [Insert Details]

Payment: [Insert Details]

Required Confirmations: Please note that your Fellowship cannot start nor can any associated payments be made to you until the University’s Postgraduate Medical Education ("PGME") Office confirms its receipt of the documentation noted below. Delay in the Anticipated Start Date may result in the Fellowship being cancelled.

1. Confirmation of your registration with the College of Physicians and Surgeons of Manitoba ("CPSM") as a Provisional (Academic-Post Certification Trainee);
2. Confirmation of your medical protective liability coverage through the Canadian Medical Protective Association ("CMPA") or other liability insurer acceptable to the University and Shared Health;
3. Confirmation of your clear criminal records check (including vulnerable sector search), Manitoba Adult Abuse Registry check and Child Abuse Registry check; and
4. Confirmation of your immunizations and N95 Fit Testing, in accordance with University and Shared Health requirements and the requirements in any applicable service delivery organization in Manitoba ("SDO") where you provide medical services ("Services") during the Fellowship.

Your Fellowship Status and Related Responsibilities: Your status during your Fellowship training will be that of a postgraduate learner of the University. This training will require you to provide Services to Shared Health and its SDOs as a Fellow. You will not be an employee of the University, Shared Health nor any SDO under the Agreement. You will be considered an independent contractor in relation to Services provided. As such, you are responsible for the payment of all taxes to applicable taxation authorities for monies received by you pursuant to the Agreement. You are also responsible for securing your own health, dental, disability and accident insurance coverage, and that all citizenship and immigration requirements applicable to your ability to engage in Fellowship training are met.

Governing Documents: You will be bound by the policies, procedures and other governing documents of both the University and Shared Health as well as the governing documents of any SDO where Services are performed. Copies of such documentation are available by referring to the websites of the University, Shared Health, and the SDOs, or
by contacting the PGME Office at (204) 789-3290 or the Shared Health Provincial Medical Administration Office at (204) 926-1357 or at info@mhpnetwork.ca.

Please note that the University’s Accessibility Policy requires that any requests for human rights accommodations for accessibility reasons be directed to the University’s Student Accessibility Services Office (204) 474-7423. All such requests will be considered and addressed by the University and Shared Health in accordance with applicable laws and policies.

**Confirmation of Acceptance:** To confirm your acceptance of our offer, please sign and return a copy of the Agreement, as soon as possible, to the following mailing or e-mail address. Counterpart pages of the Agreement, electronically signed, and delivered by electronic means, shall have the same effect as an original.

Postgraduate Medical Education (PGME)
Max Rady College of Medicine, Rady Faculty of Health Sciences
Educational Program Office
University of Manitoba
260 Brodie Centre, 727 McDermot Avenue
Winnipeg, MB R3E 3P5
Email: regpgme@umanitoba.ca

We look forward to working with you.

---

**SHARED HEALTH, INC.**  
Per: _____________________________

**UNIVERSITY OF MANITOBA**  
Per: _____________________________

Perry Gray, MD  
Chief Medical Officer  
And Provincial Lead, Medical Specialist Services  
Shared Health

Dr. Cliff Yaffe  
Associate Dean, PGME  
Max Rady College of Medicine

Dr. [Insert Name of Fellow]  
Date

Encl.

c. Fellowship Program Director  
   Regional Lead of Specialty  
   Department Head  
   Shared Health Provincial Medical Administration Office
Max Rady College of Medicine

Guidelines for accepting Internationally (Visa) Sponsored Trainees

POSTGRADUATE TRAINING AGREEMENTS

Postgraduate Medical Education currently holds seven legally contracted training agreements between the University of Manitoba, Max Rady College of Medicine and sponsoring agencies from the following countries:

- Saudi Arabian Cultural Bureau
- Kuwait Bureau
- 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 or equivalent, 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 their personal information related to their 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 their 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 of Manitoba PGME training programs are accredited by the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada or equivalent. Upon successful completion of the Training Program, trainees will be eligible to apply for certification by the appropriate body.

Although Internationally (Visa) Sponsored Trainees are not members of PARIM they are subject to same obligations as PARIM members to the University of Manitoba, Shared Health, CPSM and must comply with all other reasonable requirements of the College and/or the Shared Health related to their position (including requirements related to the College’s agreement with your sponsoring organization).

**REPORTING**

Where applicable, each trainee and the sponsor 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 or equivalent.

The University shall notify the sponsor, 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 sponsor to resolve any difficulties.

**SPONSORSHIP**

The sponsor, during the period of the trainee’s enrollment in the Training Program, and for up to 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 (as these costs are not covered by the training fee);
d. professional fees; and
e. professional liability insurance.

The financial support is provided to trainees, in part, through a monthly stipend directly from the embassy with the exception of the Saudi Arabian trainees. The Saudi Bureau sends the annual stipend to the University for each Saudi Arabian trainee participating in the Training Program and the University distributes the monthly stipend.

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 sponsored trainee’s salary budget (foreign trustee
payment) is established, the remaining funds are split 50/50 with the departments who have Internationally (Visa) Sponsored 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 mandatory courses 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 PGME will contact the sponsor to ensure the financial support is place.
- Residents/fellows abide by the by-laws, rules, regulations, policies, procedures, and practices of the University of Manitoba and Shared Health

APPLICATION AND SELECTION

Programs are required to notify the PGME office of their interest in accepting residency and fellowship applications by March 8th, including opening and closing dates for applications. Commencing around the beginning of March 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 the distribution date is not guaranteed to be forwarded to the program unless specifically requested. Consideration of acceptance of Internationally VISA sponsored residents must be approved by the Associate Dean, PGME & ARETS Committee. Programs should not consider applications that have not routed through the PGME 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 notarized copy of the medical degree (with English translation, where applicable)
4. A notarized 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 Qualifying Examination
   IMGs must have written and passed the Medical Council of Canada Qualifying Examination Part 1(MCCQE1) for those applicants who have successfully passed the Medical Council of Canada
Evaluation Examination, this will be accepted as the equivalent.

7. **Language Proficiency**
   English is the language of study at the Rady Faculty of Health Sciences, Max Rady College of Medicine, University of Manitoba. All applicants whose first language is not English must submit proof of English language proficiency with application.

   **Note: for 2021 the online IELTS Indicator test will be accepted as equivalent to the IELTS**

   - IMG applicants must fulfill the English Language Proficiency requirements.

Candidates are exempted from English language proficiency testing under the following circumstances:

i. the language of instruction and patient care throughout the entire undergraduate medical education curriculum was in English. A letter of attestation mailed directly from the Dean of the candidate’s medical school confirming that the majority of the language of instruction and patient care was conducted in English is required.

ii. their undergraduate medical education was taken in English in one of the countries that have English as a first and native language (see list below)

For example, evidence could be provided to support the following:

a) taken in their totality, the majority (>50%) of the applicant’s undergraduate and/or postgraduate medical education was in English;

b) taken in its totality, the majority (>50%) of patient care provided by the applicant was in English

All other candidates must have taken the Academic Version of International English Language Testing System (IELTS) with a minimum score of 7 in each component with an overall band score of no less than 7 in the same sitting. IELTS scores will be considered valid for 2 years from the date taken.

**List of countries that have English as a first and native language** - Countries: Australia, Bahamas, Bermuda, British Virgin Islands, Canada, Ireland, New Zealand, Singapore, South Africa, United Kingdom, United States of America, US Virgin Islands - Caribbean Islands: Anguilla, Antigua and Barbuda, Barbados, Dominica, Grenada, Grenadines, Jamaica, St. Kitts and Nevis, St. Lucia, St. Vincent, Trinidad and Tobago

Notarized/certified documents must be submitted

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 Residency Program 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 Program Director may elect to offer a position(s) with a ‘letter of intent’ to the suitable candidate(s). The Residency Program is responsible for sending a Letter of Intent to offer the position to the selected candidate(s) and Sponsor.

In order to maintain a fair and consistent process, there are common national offer dates for Visa sponsored trainees. The following principles and dates have been agreed to by the PGME Deans:

- All PGY 1 (direct entry) programs will have a common 1st offer date: October 13th with a deadline for acceptance by the candidate of October 16th. No program can require candidates to accept earlier than the acceptance date. This is to allow candidates time to adequately consider all offers before making a decision.
- Upon the refusal of a candidate to accept an offer of admission to a PGY1 program, programs can extend offers to the next candidate(s) on their rank list at any time after October 16th

MSM, PSM and FM-ES
- All subspecialties will follow the match deadline listed in CaRMS for the appropriate match (see below), unless the subspecialty group has set their own date.

<table>
<thead>
<tr>
<th>Match</th>
<th>Offer Release</th>
<th>Offer Acceptance</th>
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<tbody>
<tr>
<td>MSM</td>
<td>November 4, noon</td>
<td>November 9, noon</td>
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<tr>
<td>PSM</td>
<td>November 18, noon</td>
<td>November 23, noon</td>
</tr>
<tr>
<td>FM-ES</td>
<td>December 16, noon</td>
<td>December 21, noon</td>
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</table>

Please note that dates may change year to year, the PGME office will communicate any changes of dates to the programs well in advance.

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

Please note that Visa Sponsored trainees require approximately 6 months to obtain appropriate work permit documentation, therefore please provide the PGME Office with the applicable documentation/information no later than the offer accepted dates noted above.
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 typically starts the beginning of June.

Sponsored trainees:

- **Must** participate in the mandatory two week 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.

  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 their financial institution, furniture delivery, etc.)

- Foreign residents are responsible for obtaining and paying for their own CMPA membership fees in full. The PGME Associate 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 Shared Health for any portion of membership fees for foreign sponsored residents.
- It is the responsibility of the resident to ensure their work permit is current and the PGME office is provided with renewed work permits.

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

Please refer to:

PGME Program Resources Community for templates – PGME Documents – Resources – Visa Sponsored Templates
https://entrada.radyfhs.umanitoba.ca/community/pgmecommresources
PGME Admin processes – Alternate Route of Entry
http://umanitoba.ca/faculties/health_sciences/medicine/education/pgme/adminprocesses.html

PGME Visa Sponsored Trainee Funding Policy
http://umanitoba.ca/faculties/health_sciences/medicine/education/pgme/policies.html
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<th>Date Completed</th>
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<table>
<thead>
<tr>
<th>Department prepare Fellowship Agreement (FA)</th>
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| Send electronically to PGME <pgme@umanitoba.ca> |
| [must include CV and three reference letters] |
|                                             |

<table>
<thead>
<tr>
<th>PGME prepare Letter of Offer (LOO) as initiated by FA</th>
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<thead>
<tr>
<th>PGME to obtain Associate Dean’s signatures</th>
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</table>

| PGME send electronically LOO & FA to PMAO |
| <pmao_residents@sharedhealthmb.ca>       |
|                                           |

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<thead>
<tr>
<th>PMAO to review/revise/print LOO &amp; FA. Obtain Regional CMO signatures. Send to PGME [Inform PMAO Credentialing]</th>
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<table>
<thead>
<tr>
<th>PGME to send LOO &amp; FA to Fellow with instructions</th>
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<table>
<thead>
<tr>
<th>Fellow to submit to PGME the Signed LOO &amp; FA</th>
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| PGME to forward Signed LOO & FA to PMAO <pmao_residents@sharedhealthmb.ca> |
|                                                                           |
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<thead>
<tr>
<th>Fellow to submit to PMAO: ➢ Completed Direct Deposit Form ➢ Banking Information (as specified on form)</th>
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<tr>
<th>PMAO submit package to MRO</th>
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</table>
Shared Health - MEDICAL REMUNERATION

DIRECT DEPOSIT FORM (for non-Medical Corporations)

Physician Last Name: __________________________________________________________

Physician First Name: __________________________________________________________

Home Address: _______________________________________________________________

Postal Code: __________________________ Social Insurance #: ______________________

Phone #: ___________________________ E-Mail Address: __________________________

If no email address is provided, you WILL NOT receive payment notification

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

Provincial Medical Administration Office
1502-155 Carlton Street
Winnipeg, MB  R3C 3H8
Fax: 204-943-1792

E-mail: PMAO-Residents@sharedhealthmb.ca Phone: 204-926-1356

_____________________________________________  ______________________________
Physician Signature                          Date
### Fellowship Application Checklist for Programs

(Excluding Internationally (VISA) Sponsored Fellow – Please refer to [this PGME International (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.

<table>
<thead>
<tr>
<th><strong>FELLOW BASIC INFORMATION</strong></th>
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<tbody>
<tr>
<td>Legal Last Name:</td>
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<tr>
<td>Legal First Name:</td>
</tr>
<tr>
<td>Legal Middle Name (if applicable):</td>
</tr>
<tr>
<td>Fellowship Program Name:</td>
</tr>
<tr>
<td>Start Date of Fellowship:</td>
</tr>
<tr>
<td>End Date of Fellowship:</td>
</tr>
<tr>
<td>Date of Birth:</td>
</tr>
<tr>
<td>Gender:</td>
</tr>
<tr>
<td>Citizenship:</td>
</tr>
<tr>
<td>Mailing Address:</td>
</tr>
<tr>
<td>Phone Number:</td>
</tr>
<tr>
<td>Email Address:</td>
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<tr>
<td>Is this Fellow a Provisional (Academic – Post Certification Trainee) Class?</td>
</tr>
<tr>
<td>Will a pager be required?</td>
</tr>
<tr>
<td>Medical School of Graduation:</td>
</tr>
<tr>
<td>Year Graduated:</td>
</tr>
<tr>
<td>Residency Training Completed:</td>
</tr>
<tr>
<td>Year Completed:</td>
</tr>
<tr>
<td>Residency School:</td>
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</tbody>
</table>

<table>
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<tr>
<th><strong>DOCUMENTATION REQUIREMENTS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>CV</td>
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<tr>
<td>Three Reference Letters.</td>
</tr>
<tr>
<td>1. Click here to enter text.</td>
</tr>
<tr>
<td>2. Click here to enter text.</td>
</tr>
<tr>
<td>3. Click here to enter text.</td>
</tr>
<tr>
<td>Shared Health/PGME Independent Contract (IC) (Please note minimum salary is $75,000)</td>
</tr>
<tr>
<td>A Letter of Support from the Fellowship Program Director (required for Academic – Post Certification Trainees Only)</td>
</tr>
<tr>
<td>Copy of a valid Permanent Resident Card (if applicable)</td>
</tr>
<tr>
<td>Language Testing (IELTS) Result (If applicable – please see <a href="#">PGME English Language Requirements</a> for criteria and exemptions)</td>
</tr>
<tr>
<td>Confirmation of Pass Result of the Medical Council of Canada Qualifying Examination (MCCQE) Part 1 or the United States medical licensure Examination (USMLE) Steps 1 and 2 (Required for Regulated Associate Member – Educational Resident Class) <em>Please note if a fellow is applying for a Full licence with CPSM they will require MCCQE Part 1 and Part 2</em></td>
</tr>
</tbody>
</table>