



**General Psychiatry Residency Program
Waivers of Training (WOT) Guidelines**

Background

Policies and Procedures for Certification and Fellowship (October 2022)

<https://www.royalcollege.ca/content/dam/document/eligibility-and-exams/policy-procedure-certification-fellowship-e.pdf>

Section 4.2 Residency Training Requirements

4.2.2 By the end of training, the resident must have achieved the objectives of the specialty/subspecialty and must successfully meet the requirements of the CanMEDS competencies as they relate to their specialty/subspecialty. At any point during a resident's training, the Program Director with the approval of the Post Graduate Dean, has the authority to lengthen or change a resident's program if evaluations reveal that the resident is not meeting the specialty training requirements.

CBD Policy Working Group Communique: Waivers of Training (2016)

<https://www.royalcollege.ca/content/dam/documents/accreditation/competence-by-design/directory/cbd-policy-waivers-of-training-e.pdf>

Considerations and Recommendations

In considering the adaptations necessary to adjust these policies, the review of Royal College and CFPC policies pertaining to waivers of training may serve as a useful guide for faculties. The proposed Royal College policy will not indicate the circumstances that would qualify residents for leaves of absence; these circumstances would be determined by the university and/or the local collective agreement. Furthermore, the Royal College policy will state that following a leave, the Program Director and Postgraduate Dean should review the trainee's status with regard to stage of training to determine if any adjustments to the training program are required. It is therefore suggested that faculties review their existing policies to reflect that a leave of absence may not impact the total duration of training if the necessary competencies have been achieved. Faculties may also consider whether to require a minimum duration of training.

Additional Considerations for PGME: Accelerated Training

In light of CBME and the shift away from time-based training practices, faculties may consider developing policies that address the possibility of accelerated training. In the process of developing these types of policies, thought should be given towards determining if there is a minimum duration of training that must be completed, and if there are explicit service or organizational requirements that will be challenged in the event that training is shortened for some residents. Consideration could be given to separating the issues of competence and contracts within existing policy. Competence, as defined by achievement of all required EPAs, may be achieved before a resident satisfactorily completes his or her contract to provide service, but the latter may still need to be honoured.

Residency Program Considerations

Waivers of Training (WOT) vs. Accelerated Training

Currently, the General Psychiatry Residency Program does not have any specific guidance from University of Toronto, PGME or the RCPSC Psychiatry Specialty Committee with regards to modifications to Waiver of Training Policies considering CBD implementation. As such, until such guidance is available, the General Psychiatry Residency Program will continue to offer a maximum of 3 months of a Waiver of Training. In addition, there are also no current national guidelines for Psychiatry regarding accelerated training. As such, this status is currently not being considered at Competence Committee. Residents who achieve all of the residency program's Transition to Practice training requirements and who have additional time left in training as per collective agreement contract will be offered opportunities to develop enhanced competencies in the Transition to Practice phase of training.

Residency Training Program Requirements

Whilst the RCPSC defines minimum requirements, the University of Toronto has the purview to include additional requirements that all residents must fulfill to demonstrate their competence. As such, in addition to completion of all core rotations (including psychotherapy and after-hours coverage requirements), Entrustable Professional Activities (EPAs), FOD and COD STACERs, and scholarly projects/assignments, the General Psychiatry Residency Program at the University of Toronto also requires residents to complete specific Transition to Practice clinical experiences (i.e. rotations) and attend the program's Transition to Practice Curriculum (**minimum attendance 70%**) alongside completion of Transition to Practice EPAs during TTP rotations. Completion of the aforementioned requirements will be reviewed at Competence Committee (i.e. Psychiatry Competence Subcommittee or PCS). Hospitals also have the purview to enforce collective agreement contracts in the service of patient care responsibilities in collaboration with residency program leadership, PARO, and UofT PGME, informed by principles articulated by the CPSO (i.e. relating to Transitions in Care).

Guiding Principles

1. In adjudicating decisions regarding waivers, the reasons for the leave of absence are not considered, except in cases when the resident was placed on a mandatory leave due to serious professional conduct or academic performance concerns (see principle 6 below).
2. The total training eligible for a waiver is the lesser of the previously articulated RCPSC pre-CBD maximum waiver of 3 months or the total length of all leaves taken by a resident during training.
3. Residents who have completed a portion or all their training on a part-time basis may be eligible for a waiver of training as long as they have met all residency program training requirements. The total time away from training is considered equivalent to a contiguous leave of equal length (e.g. a resident training at 0.8 full-time equivalent who works 4 out of 5 business days weekly over 10 weeks is eligible for a maximum of 10 days waived).
4. Residents who have approved leaves of less than 30 days, have met residency training program requirements as per PCS and who are in good academic standing may have the time waived by the Program Director so that they graduate "on-cycle" on June 30th of their final year of training. In this case, a WOT application is not needed.
5. The resident's privacy in terms of personal or health information will always be maintained. Residents are not required to, and are discouraged from, disclosing details of their leave. Moreover, the reasons for the leave, if known, should not influence the decision made with regards to the WOT.
6. The resident may wish, but is not required, to disclose additional circumstances relevant to their application, such as fellowship or job offers. Such circumstances may be taken into

consideration when determining the length of training waived but are not required for a waiver to be granted.

7. Residency training that is extended due to performance or professional conduct concerns as per Board of Examiners-Postgraduate Education (UofT PGME) or Resident Assessment and Support Subcommittee (RASC) support plans do not qualify for a waiver.
8. WOT can only be considered in the final year and TTP phase of training. PGY4/COD residents who have had leaves of absence during Psychiatry training who are entering subspecialty training in Geriatric or Child and Adolescent Psychiatry will have the Transition to Practice phase of training delegated to the subspecialty program – as such, they are not eligible for a WOT during Psychiatry training.

Process

1. In the late summer/early fall of the academic year, program administrators will contact Transition to Practice residents in their final year of training and invite them to apply for a WOT. The formal application for a WOT is integrated into the PCS CBD self-reflection.
2. Residents are advised to carefully consider and communicate with PG site directors, sites, supervisors, and Chief Residents as needed with regards to patient care/clinical responsibilities that may be impacted by a WOT.
3. Applications for a WOT will be considered at Psychiatry Competence Subcommittee (PCS) meetings in the fall of the academic year that the resident is due to complete Transition to Practice rotations/clinical experiences. Timelines will be adapted as needed for off-cycle residents. PCS recommendations move forward for approval by the Program Director and Psychiatry Residency Program Committee (PRPC).
4. Alongside evidence that the resident has met educational requirements, the Program Director and PRPC must consider the impact to patient care/clinical responsibilities in making decisions regarding the timing of a WOT.
5. Approved WOTs will then move forward from the Program Director to the Associate Dean, PGME for final approval. The program will then inform CPSO regarding the resident's revised completion date for training.

Appendix – Acronyms

CBD – Competence by Design

COD – Core of Discipline

CPSO – College of Physicians and Surgeons of Canada

EPAs – Entrustable Professional Activities

FOD – Foundations of Discipline

PG- Postgraduate

PRPC – Psychiatry Residency Program Committee

RCPCS – Royal College of Physicians and Surgeons of Canada

TTP – Transition to Practice

WOT – Waivers of Training

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