# **Department of Medical Affairs**



**Standard Operating Procedure**

**HR Planning and Credentialing Guide for Clinical Departments**

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| --- | --- | --- | --- |
| **Section:** | **[Credentialing]** | **SOP No:** | **[A-1-001]** |
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### PURPOSE

The attached document appended to this Standard Operating Procedure (SOP) titled “HR Planning and Credentialing Guide for Clinical Departments”, has been designed to guide department Chair/Chiefs and the Manager of Administration and Finance (MAF)/delegate through the standard Professional Staff Human Resources and Credentialing processes.

### PROCEDURES

#### Refer to the appended guide below.

### ACRONYMS

* AMOSO – Academic Medical Organization of Southwestern Ontario
* CMPA – Canadian Medical Protective Association
* CPC – Certificate of Professional Conduct
* CPSO – College of Physicians and Surgeons of Ontario
* CWCC – City Wide Credentials Committee
* EHR – Electronic Health Record
* HR – Human Resources
* IMG – International Medical Graduate
* JPSHRC – Joint Professional Staff Human Resources Committee
* LHSC – London Health Sciences Centre
* MAC – Medical Advisory Committee
* MAF – Manager of Administration and Finance
* ME – MyEducation
* Professional Staff – Physicians, Dentists, Midwives
* PSO – Professional Staff Organization
* St. Joseph’s – St. Joseph’s Health Care London

### RELATED REGULATIONS AND/OR POLICIES

### References:

* [Professional Staff Bylaws](https://intra.lhsc.on.ca/medical-affairs/governance/laws-and-rules-regulations)
* [Public Hospital Act](https://www.canlii.org/en/on/laws/stat/rso-1990-c-p40/latest/rso-1990-c-p40.html)
* [Rules Regulations](https://intra.lhsc.on.ca/medical-affairs/governance/laws-and-rules-regulations)

#### Associated Policies:

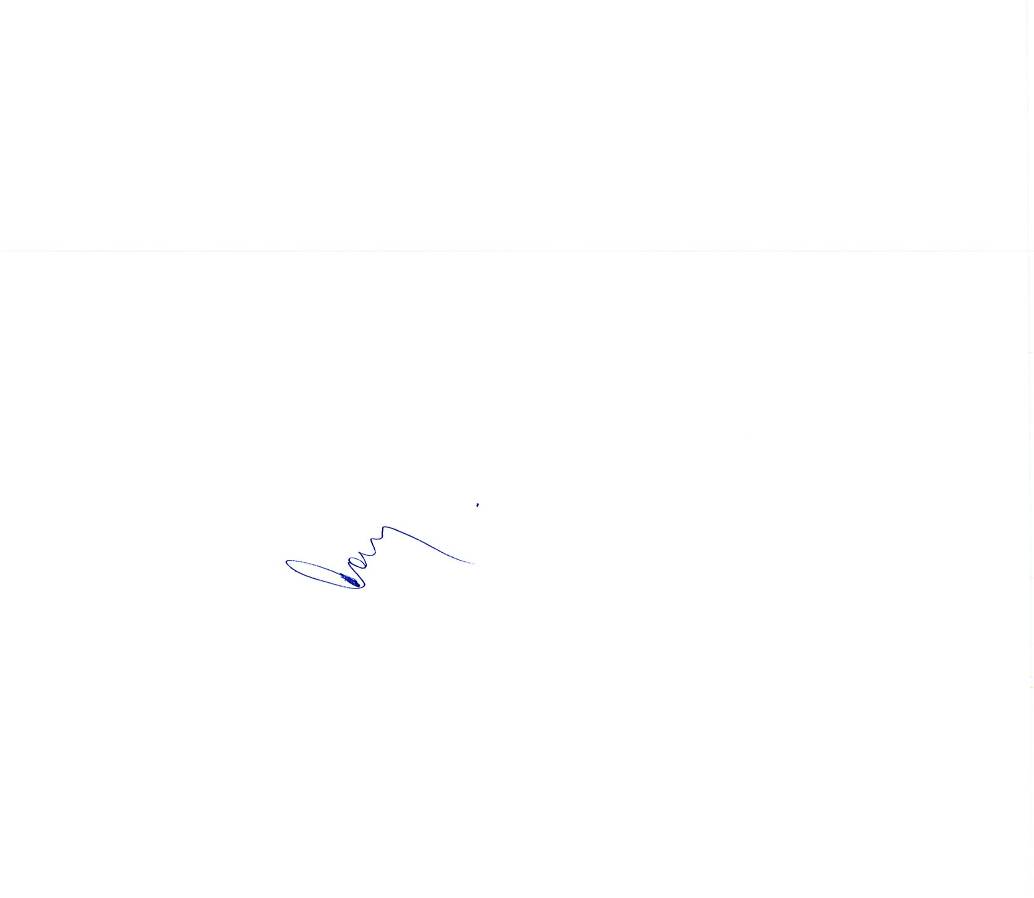
* Not applicable

### APPENDICES

* [Professional Staff Resource Guide](https://intra.lhsc.on.ca/medical-affairs/our-partners/professional-staff/resources)
* Reappointment Flow Chart – appended below

### 6. HISTORY

|  |  |  |  |
| --- | --- | --- | --- |
| **SOP #** | **Effective Date** | **Review Date** | **Summary of Changes** |
| - | - | - | - |
| - | - | - | - |
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Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: July 12, 2022

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\*\*Note: Updated versions of this guide will be posted to the Medical Affairs website. Please reference the [Medical Affairs website](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) to obtain this guide to ensure current and updated processes are referenced.

# **Clinical Department HR Plan**

All clinical departments have a Human Resources (HR) plan that outlines current positions available within the department that can be recruited into. This is a three-year projection of the department’s recruitment needs.

***Note: The HR plan is not a complete complement of a departments credentialed professional staff. This plan will only list positions available for active recruitment.***

Medical Affairs will provide each department Chief with their current HR plan in July of each year for review. This will provide the Chief the opportunity to review their plan in detail to determine if there are positions no longer needed, or whether new positions need to be requested.

HR plans are reviewed and approved through the [Joint Professional Staff Human Resources Committee (JPSHRC)](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#hr). The JPSHRC meets between the months of September to December and each Chief will be invited to attend one of these meetings to represent their HR plan, along with any new position requests being submitted.

**JPSHRC Membership:**

Membership includes the following:

* IVP, Medical & Academic Affairs
* Vice Dean, Clinical Faculty Affairs
* Two Chair/Chiefs
* Past Chairs, Medical Advisory Committee
* PSO Executive
* Diagnostic Services VP
* Clinical Services Representatives
* Lawson Research
* Clinical Teachers Association
* AMOSO
* Facilities Management
* Faculty Affairs, Schulich School of Medicine and Dentistry
* Medical Affairs

**New Position Request – *See the “Recruitment” section of the*** [***Medical Affairs website***](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#recruit) ***for additional information.***

If a new position needs to be added to a department’s HR plan, the department Chief will need to submit a [Position Request/Candidate Review Impact form](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#recruit) (PART A of the form) to [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca). See section “Recruitment” of the Medical Affairs website.

Medical Affairs will complete the following steps:

1. Assign a position number to the new position request
2. Add the position to the clinical department HR plan
3. Circulate the new position request to the following stakeholders for review and approval:
   1. JPSHRC ***(see membership above)***
   2. Pharmacy
   3. Clinical department VP and Manager

**New position approval communication:** Once the new position request has received the necessary stakeholder and JPHSRC approval, Medical Affairs will notify the department Chief and will provide a copy of their updated HR plan. **Recruitment can begin!**

**Note:**

* Professional staff who require hospital privileges, and do not utilize hospital resources such as office space, clinic time, OR time, AMOSO funding, etc. would not be aligned to a Clinical Academic position. These individuals would be privileged to a Term professional staff category; this category does not require a position number.
* Professional staff working in a Term appointment must have an Independent license with the CPSO. CPSO will not issue a Restricted certificate of registration to an international medical graduate (IMG) unless they are in a Clinical Academic position.

# **Replacement Position**

See section “Resignations and Retirement Planning” within this document.

*Re-approval through the JPSHRC and stakeholder group is not required for a replacement position. Reapproval is only necessary when a position remains vacant for three years or more.*

# **Office Space Assignment for New Recruit**

If applicable, office space must be identified with the initial position request that is submitted to Medical Affairs. As part of the position approval process, Facilities Management will review the office space location that is being submitted with a position request and will review for appropriateness and confirm approval.

Once a candidate has been identified, a Candidate Impact form is submitted to Medical Affairs (see “A Candidate Has Been Identified – Next Steps” section of this process). Office space location will be documented on this form and Facilities Management will provide a second review for approval. Should the office space location change after the Candidate Review process, you will need to inform Medical Affairs who will consult with Facilities Management to ensure approval of the revised office location.

Prior to the candidate start date, the department MAF or delegate will be required to submit a Space Request form via the Archibus system. Additional information can be obtained from the [Facilities Management website](https://intra.lhsc.on.ca/facilities-management/services/capital-projects/2-step-project-request-process-project-request-and-project-approval-form).

# **Advertising a Position for Recruitment**

Advertising for a position does not fall within Medical Affairs processes. Please contact Schulich Human Resources for guidance.

# **A Candidate Has Been Identified – Next Steps**

Once a candidate has been identified, the following documentation/information is to be emailed to [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca):

* [Candidate Impact form](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#recruit) (PART B)
  + ***see “Recruitment” section of the Medical Affairs website.***
* [Three references](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) – References are obtained by the department
  + ***See “Application for New Privilege Requests” section of the Medical Affairs website.***
* Current CV
* [Draft letter of offer](https://www.sjhc.london.on.ca/medical-affairs/writing-letters-of-offer)
  + ***See “Letter of Offer Templates” section of the Medical Affairs website.***
* [Academic Role Category form](https://www.schulich.uwo.ca/humanresources/leader_administrator_tools/faculty_resources/forms.html)
* Candidate date of birth (needed to enter candidate into Medical Affairs database)
* Candidate email address

For ease of process, we request departments to submit the above forms all at once as a complete package. Incomplete packages will be returned to the department. Once complete package is received, Medical Affairs will initiate the following steps:

1. Email the application package to the candidate to initiate the credentialing process.
2. Complete the Candidate Review process which informs the necessary stakeholders and JPSHRC that a candidate has been identified.
3. Complete the letter of offer review process which allows for the department to send the candidate the approved letter of offer.

**Credentialing Process – see** [**Medical Affairs website**](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) **for additional information**

**Determining a Candidate Start Date:**

All Professional Staff application requests are reviewed and approved through the following groups:

* City-wide Credentials Committee (CWCC)
* Medical Advisory Committee (MAC)
* LHSC and St. Joseph’s Boards of Directors

To ensure full review and approval, the credentialing process can take up to 8 weeks to process and approve. This process may be longer for non-Canadian trained professional staff as the onboarding process may be delayed due to CPSO and immigration processes.

***Review the*** [***application submission schedule***](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) ***to determine an appropriate start date. Refer to the “Hospital Appointment Approval Process” section of the Medical Affairs website.***

**Note:** All application requirements, including CPSO certification must be complete and submitted to Medical Affairs before approval through the CWCC, MAC, and Boards can occur.

**What if the Candidate Needs to Start Before the CWCC/MAC/Board Review Date?**

Should there be an **urgent clinical** need that cannot be accommodated by another professional staff member that requires the new candidate to begin working prior to the CWCC, MAC, and Boards review and approval, a Temporary appointment can be granted. As recently recommended by Medical Affairs and approved by MAC, Temporary appointments will be reviewed and approved by the leadership of Medical Affairs to ensure that only urgent clinical needs are approved. Delays in submitting the complete package will not constitute reason for approval of a Temporary appointment.

* A Temporary appointment allows for a candidate to begin working prior to formal approval.
* Temporary appointments are approved under the authority of the Integrated Vice President of Medical and Academic Affairs.
* These appointments can pose a risk to the organization as they have not been vetted through the thorough review of the CWCC, MAC, and Boards.

**Note: Temporary appointments will only be granted for an urgent clinical need that cannot be accommodate with another professional staff member.**

**Hospital Application Requirements:**

Medical Affairs will email the candidate information for completing the hospital application package.

***Note:*** *We ask that departments do not email the application website to the candidate in advance, as there is additional information that is provided by Medical Affairs when the application package is sent.*

To review the application submission requirements, view the [Medical Affairs website](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application). ***Refer to the “Hospital Appointment Approval Process” section of the Medical Affairs website.***

**Note:** All applicants are required to have a Certificate of Professional Conduct (CPC) issued to Medical Affairs from the College of Physicians and Surgeons of Ontario (CPSO) as part of the application package. CPSO will not release the CPC until the date of the CPSO certification start date. Because of this, if an applicant has been scheduled to begin working on the same day as the CPSO issuance date, expect a delay with the applicant’s start date. **Hospital privileges cannot be finalized, and approval of privileges cannot be obtained until after all application requirements, including the CPC has been received and clearance from Medical Affairs has been issued.**

# **Systems Access (Corporate ID, Hospital Email, Cerner, etc.)**

Systems access is requested by the clinical department Manager of Administration and Finance (MAF) or delegate:

* Complete the “[Systems Access Request](https://webformsold.lhsc.on.ca/?q=forms/system-access-request-form-medical-affairs)” form.
* Upon submission, the request will be directed to Medical Affairs for approval which will then go to the hospital IT department for account creation.
* Once the accounts have been created, the Corporate ID and password will be sent to the MAF/delegate. The MAF/delegate will do the following:
  1. Confirm that the candidate has completed the Privacy eLearning and agreement using the [Professional Staff Directory](https://medicalaffairs.lhsc.on.ca/prof_staff/listing/index.php).
  2. Enter the Corporate ID and password into the [STANDARD TEMPLATE](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) document. Refer to the “Systems Access – Corporate ID, Outlook, and Cerner” section of the Medical Affairs website.

***Note:*** *The standard template includes information with regard to the Electronic Health Records training, eLearning/ME(MyEducation), etc.*

* 1. Email the Corporate ID and password (entered into the standard template) to the candidate using the [File Safe system](https://filesafe.lhsc.on.ca/).

***Note:*** *For security purposes, password information cannot be emailed to a personal email address unless done so through the File Safe system.*

# **Probationary Period – Associate Category Professional Staff Only**

***Refer to the “Probationary Evaluation Process” section of the*** [***Medical Affairs website***](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources/credentialing-application) ***for additional details.***

Under the current London Health Sciences Centre (LHSC) and St. Joseph's Health Care London (St. Joseph's) and Credentialed Professional Staff By-Laws, all new Active Staff appointees are required to fulfill a 12-month probationary period, and during this period the appointment category is referred to as Associate.

Once a successful final evaluation is submitted, the category will change from Associate to Active for the duration of the credentialed Professional Staff's appointment.

The probationary period is intended to assess, among other areas, an appointee's clinical competency (impact on patient safety) and collegiality.

There are currently two evaluations that occur throughout the probationary period:

1. Preliminary Evaluation - occurs at approximately the 4-month service date
2. Final Evaluation - occurs at the 10-month service date

The evaluation is completed by the direct supervisor, and must be signed by the department Chief, supervisor, and professional staff member.

Upon receipt of a satisfactory final evaluation, Medical Affairs will review and recommend progression to an Active appointment to the City-wide Credentials Committee (CWCC). The CWCC may then recommend to the MAC and then subsequently may recommend to the LHSC and St. Joseph's Boards of Directors for approval.

This process will be completed by the 12-month end date of the appointees’ privilege line and shall **not** exceed the privilege end date. If by the end of the 12-month period, the probationary supervisor does not feel that the probationary credentialed professional staff member should not yet be granted full Active staff privileges, they can extend the probationary period to 24-months, or, suggest complete denial of hospital privileges. The extended probationary evaluation will need to be completed should this occur.

# **Changes to Professional Staff Privileges**

To request a change to an existing clinical appointment, the department must complete the “[Chief Support form – Appointment Change](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#credprocess)” Form (refer to “Forms – Credentialing and Human Resources” section of the Medical Affairs website). ***Complete this form to document changes to privileges AND to report a leave of absence greater than 60 days.***

This form will need to be signed by both the department Chief and the professional staff member.

Email completed form to [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca)

# **Professional Staff Annual Reappointment Process**

The Professional Staff Reappointment process occurs annually between February 14th and March 31st.

**Who is Offered Reappointment?**

* Professional Staff within all categories complete the online reappointment process (Active, Associate, Term, Locum Tenens, Supportive, and Honorary).
* Professional staff on a leave of absence are required to complete the online reappointment process.
* Professional staff whose Chief requests a deferral of decision to reappoint will be offered the opportunity to complete the online reappointment process, however their name will not be forwarded to the CWCC/MAC/Boards for approval until such time all concerns have been removed and the Chief is comfortable with offering reappointment.
* Professional staff who currently have their hospital privileges SUSPENDED will NOT have the opportunity to complete the online reappointment process.

**JANUARY:**

* Medical Affairs will provide each department Chief and the Manager of Administration of Finance (MAF) /delegate with a report of all professional staff who hold Term and Locum Tenens privileges for the purpose of informing Medical Affairs which Term/Locums professional staff will not be offered reappointment for the upcoming privileging cycle.
  + The department Chief’s office will send a letter to all Term/Locum Tenens professional staff who are not being offered reappointment a letter (template provided by Medical Affairs) informing them that their privileges will not be renewed.
  + Medical Affairs will update their database to reflect the end date of privileges.
  + These physicians will not receive the notification to complete the reappointment process.
* Medical Affairs will email each department Chief and the MAF/delegate requesting names of any professional staff who should have their reappointment deferred due to any capacity, competency, or conduct concerns. The Chief will request a deferral of decision to reappoint.
  + The IVP of Medical and Academic Affairs and the Director of Medical Affairs will meet/discuss with the Chief to understand and gather information to support the decision to defer the reappointment.
  + Professional staff who had their reappointment deferred from the previous reappointment cycle, which have not yet been resolved, will continue to have their reappointment deferred until all concerns have been resolved.
* Medical Affairs will communicate the upcoming Reappointment process within the Professional Staff monthly broadcast.

**FEBRUARY:**

* Medical Affairs will provide each department Chief and the MAF/delegate with details surrounding the reappointment process, such as reappointment start date, website link used to complete reappointment, PSO fees, late fee associated with not meeting the reappointment deadline, etc.
  + This communication also requests the department Chief to review their “Delineation of Procedural Privileges” and to inform Medical Affairs should they have any updates.
* **February 14:** Reappointment website opens!
  + Reappointment website is <https://hub.schulich.uwo.ca/login>
  + Login with Western login and password
  + Click on “Hospital Re-Application” tab and choose the LHSC/St. Joseph’s tab
    - Completing the reappointment process requires the professional staff member to review and if applicable provide updates as it relates to the following:
      * Demographic information, such as CPSO, CMPA, OHIP, and business address
      * Home address
      * Education information (MD, DDS, BSc, and Royal College certification (if applicable))
      * Referral directory
      * Current hospital appointment privilege details
      * Review and electronically accept Medical Directives (if applicable)
      * Hospital declaration – required to answer a series of Yes/No questions that relate to satisfying CME/CPD requirements, CPSO revocation/suspension, maintenance of RCPSC, reprimand or disciplinary actions, criminal charges, civil claim or suit, health concerns that impairs ability to practice, learning modules, and compliance with hospital policies and best practices.
      * PSO fee: Professional staff who hold Active, Associate, or Modified Active category are assigned a $25 PSO fee.
  + Professional staff whose hospital privileges started after February 1st are not required to complete the online Reappointment process as they recently submitted an application and declaration.
  + Professional staff who do not complete the reappointment process by March 31st will be subject to a $200 late fee.
  + Professional staff who hold privileges at Alexandra Hospital, Tillsonburg District Memorial, Strathroy Middlesex General, and/or Four Counties Health Services can also complete their reappointment via this website. These hospitals complete their annual reappointment process from February 14th to March 31st.
  + Professional staff who are on a leave of absence **ARE REQUIRED** to complete the online reappointment process.
* Reminder notices will be auto-generated from the Medical Affairs database on a weekly basis to those who remain pending for reappointment completion.

**MARCH:**

* Email reminders continue to generate to those who remain pending for reappointment completion.
* Throughout the month of March, Medical Affairs will monitor reappointment completion and will provide department MAF/delegate with reports of who remain outstanding with the request for assistance with encouraging reappointment to be completed.
* **March 31st:** Reappointment closes
* Medical Affairs will email all professional staff who did not reapply confirming end of privileges date of June 30th.

**APRIL:**

* **At the beginning of April,** Medical Affairs will provide the department Chief and MAF/delegate with final report of who did not complete the reappointment process requesting the Chief’s office to follow up to notify them that their privileges will expire on June 30th.
  + Professional staff who reapply after March 31st are required to pay a $200 late fee.
  + Professional staff who do not complete the reappointment process by April 30th will no longer have the ability to complete the reappointment process and will not have hospital privileges effective July 1st.
* Medical Affairs will review all declaration Yes/No responses to follow up with non-standard responses. In most cases, the individual inadvertently answered the question incorrectly. Those who did not, Medical Affairs will follow up with the department Chief to determine if they are aware of the concerns and whether they feel that their reappointment should be deferred.
* Medical Affairs will review all change requests submitted via the online reappointment process and update their database accordingly.

**ELEARNING COMPLIANCE:**

* + In April, Medical Affairs will review the eLearning compliance reports and any professional staff who are overdue for eLearning **as of** **March 31st** will be notified by Medical Affairs to complete their overdue eLearning ASAP.
  + Throughout the month of April, Medical Affairs will provide department Chiefs and MAF/delegates with their department overdue eLearning reports with a request for the department Chief’s office to urge their professional staff members to complete their overdue eLearning urgently.
  + Medical Affairs will generate a final report for professional staff who have overdue eLearning at the beginning of May. **Those who remain overdue will not appear within the final Department Privilege report that is submitted to the CWCC/MAC/Boards in late May.** These individuals will appear within the “Reappointment Deferral” report and will not be recommended for reappointment until such time all compliance has been met.

**INFLUENZA VACCINATION POLICY COMPLIANCE**

* All professional staff are required to submit proof of influenza vaccination or submit a completed influenza attestation form each year as per the [Influenza Vaccination policies.](https://lhsc.policymedical.net/policymed/home/index?ID=4a63de12-8b34-45f4-8ce6-349d1506c34d&ldp=Y&)
* Professional staff who do not comply with the Influenza Vaccination policy will not have their hospital appointment renewed for the next privileging cycle.

**DEPARTMENT CHIEF PRIVILEGE REPORTS**

**The following will occur in May:**

* Medical Affairs will provide department Chiefs with the following:

1. Department privilege report for the next credentialing cycle
   * Department Chiefs are required to review the privilege information for each member within their department and advise whether changes to privileges need to occur. Privilege changes may be related to their primary site, delineation, division, etc.
   * To implement privilege changes, the Chief will need to have the “[Chief Support form – Appointment Change](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#credprocess)” form completed and submitted to [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca) (refer to “Forms – Credentialing and Human Resources” section of the Medical Affairs website).
2. Department Departure report
3. Department Recommendation to Defer Reappointment report

* The Department Chief will be required to sign the “Department privilege” report and the “Department Departure” report and return to Medical Affairs in advance of the late May CWCC/MAC/LHSC and St. Joseph’s Board meeting. These reports will go to the late May CWCC/MAC/Board meetings. Professional staff whose reappointment has been deferred will be noted at the MAC meeting.

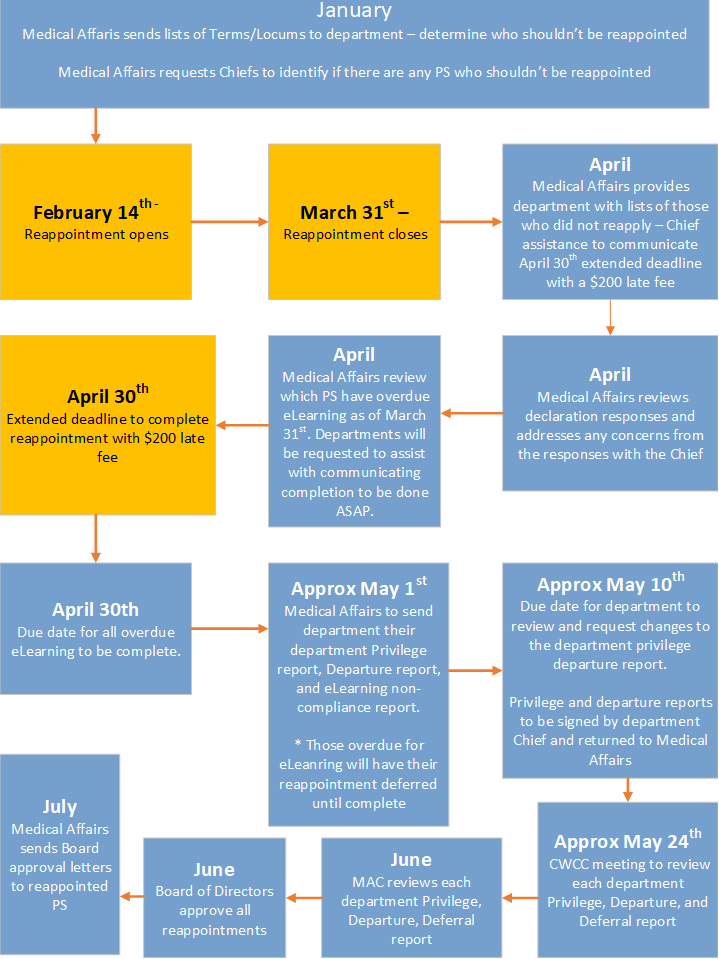
**JUNE:**

* + The hospital LHSC and St. Joseph’s Boards of Directors will review and approve the Professional Staff reappointments.

**JULY:**

* + Medical Affairs to issue the Board approval letters confirming the professional staff appointment for the next credentialing cycle.

***See reappointment cycle flow chart on the next page. All noted timelines are approximate and may change due to the year*.**

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# **Resignations and Retirement Planning**

## **Resignations:**

When a professional staff announces their resignation from the hospital, they are required to use their best efforts to provide the hospital with three months’ written notice.

Resignations notices must be forwarded to Medical Affairs **in advance** of the resignation date. If the resignation is from a Clinical Academic professional staff, the position that they hold will be added back onto the department clinical HR plan for recruitment to begin.

**Note**: Failure to communicate privilege end dates, or changes to an end date will affect systems access which could pose a security risk to the hospital, or delay patient care.

## **Retirements:**

Professional staff are required to complete a [Notification of Intent to Retire Planning form](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#hr) at least 12 months prior to the date at which they intend to retire, unless there are extraordinary circumstances, such as illness or disability. Following submission of the Notification of Intent to Retire Planning form, retirement plans should be reviewed every two years thereafter. ***Refer to “Resignation and Retirement Planning Process” section of the Medical Affairs website.***

### **FULL Retirement:**

Once a full retirement date has been announced:

1. Professional staff member to provide a signed letter of retirement to the department Chief.
2. Department to email retirement letter to Medical Affairs. [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca)
3. For Clinical Academic professional staff, Medical Affairs will add the position back onto the clinical department HR plan.

**PARTIAL Retirement:**

Professional staff who are reducing their scope of practice, but will continue to work clinically may have their professional staff category changed to MODIFIED ACTIVE.

* Department Chief to submit to [medical.affairs@londonhospitals.ca](mailto:medical.affairs@londonhospitals.ca) the [Modified Active Staff Planning form.](https://www.sjhc.london.on.ca/medical-affairs/administrative-resources#hr) Refer to “Resignation and Retirement Planning Process” section of the Medical Affairs website.
* When submitting the Modified Active Staff Planning form to Medical Affairs, it is important that you identify the following to Medical Affairs:
  + Identify if the professional staff will work within a **partial Clinical Academic** **capacity,** meaning that they will continue to utilize hospital resources and/or AMOSO funding.
  + Identify if the position should be added back onto the clinical department HR plan for partial or full recruitment. If the professional staff that is reducing their scope of practice will continue to work within a partial Clinical Academic capacity, resources for the position will be shared.

# **CPSO Restricted Certificate and Promotion Process**

Professional staff who have a Restricted certificate of registration with the CPSO are required to:

* Have an annual evaluation/letter submitted to the CPSO and cc’d to [Medical.affairs@londonhospitals.ca](mailto:Medical.affairs@londonhospitals.ca).
* If recruited as an Assistant Professor, they must achieve rank of Associate Professor with the University within 7 years.
* Upon promotion, and within 18 months of promotion, the professional staff member can choose to challenge the Royal College exam, or complete a practice assessment with the CPSO.

**Note:** Medical Affairs must be informed when a professional staff member reaches promotion. Medical Affairs must also be informed when the Royal College exam has been completed, or a CPSO practice assessment.

* If the CPSO practice assessment route is chosen, the CPSO certificate type will remain Restricted, however the restriction wording will read “may practice independently within <DEPARTMENT>”.

See the [hospital By-laws](https://intra.lhsc.on.ca/medical-affairs/laws-and-rules-regulations), section 4.3 Criteria for Appointment to the Credentialed Professional Staff.

# **CPSO Short Duration Certificate**

The CPSO Short Duration Certificate is issued by the CPSO for physicians who are coming from out of country and requires a temporary short-term hospital appointment.

* Applicant is required to initiate the process by contacting CPSO directly.
* CPSO will provide the applicant with the following two forms:
  + Confirmation of Appointment for Issuance of Supervised Short Duration Certificate – ***this is completed by the IVP of Medical & Academic Affairs***
  + Undertaking to Supervise Holder of short Duration Certificate – ***this is to be completed and signed off by the department Chief***
* **Short Duration certificate is only good for 30 days. Renewal of this certificate will require Medical Affairs senior leadership approval. Multiple consecutive renewals will not be accepted as a means of circumventing the appropriate application process.**