CONTINUITY POLICY (Clinical Half-day Return)
Department of Family Medicine
University of Alberta

PURPOSE: To define the expectations for Resident clinical continuity with Family Medicine patients throughout residency.

SCOPE: The policy applies to all residents in the Family Medicine Residency Program at the University of Alberta.

TERMS: PGY1 – Post graduate year one
EBM – Evidence Based Medicine
PGY2 – Post Graduate year two

Expectations:

1. Residents are to be scheduled for Clinical half-days (Continuity Clinics) to encourage patient continuity throughout the program for all blocks outside of PGY1 Family Medicine Block time.

2. Each resident is to be scheduled for one set half-day per week. This day must then be rigidly adhered to for the remainder of the training program. Changes to this set day must be held at minimum but are possible with sufficient advance notice.

3. Clinical half-day returns to family medicine are mandatory and protected. Off service rotations must take the mandatory clinic half-day into consideration when creating call schedules.

4. Residents are not allowed to take call the day before their regular half-day return clinic. Residents may be on call the same day as their clinical half-day return so long as the resident arranges for call duties to be covered by a colleague until the clinic is completed.

5. Residents are required to ensure that off-service rotations are aware of their scheduled clinical half-day. The program will assist residents who are experiencing difficulty in this regard.

6. Residents MUST attend 100% of all scheduled clinical half-day returns. Acceptable absences from a scheduled clinic include illness or injury.

7. Exceptions and acceptable reasons not to schedule half-day returns are vacation, distributed program site rotations, other rotations >50km from the resident’s home base, mandatory academic activities (such as academic day, EBM workshop, practice management workshop) and statutory holidays.

8. If an unexpected absence occurs, the resident must call the appropriate clinical staff to inform them of the requirement to reschedule the patients with the resident, or with a colleague who is in the clinic that day. Residents who do not make these arrangements or who have unexplained absences from clinical half-day return will have this unprofessional behaviour documented in their permanent file. This may have consequences on future attempts to get privileges or licences to practice. Repeated absences may require extension of training or ineligibility to write the certification exam.

9. Teaching sites will provide a mechanism to allow residents to develop responsibility to a defined patient practice population (resident’s patient panel) by allowing the resident:
   a) to schedule their patients for follow-up
   b) to access patient data for management of patient care. Residents will keep track of investigations ordered for their patient panel, and will follow-up on investigations.