

Checklist for Clinical Fellow Appointments

Name: _____

| Initiator | Tasks | Suggested Timeline |
|------------------------|---|--------------------|
| Division Administrator | <ul style="list-style-type: none"> <input type="checkbox"/> Verifies funding availability prior to hiring candidate. (For questions, please contact the applicable unit responsible for the funding sources.) <input type="checkbox"/> Provides potential Clinical Fellow information to start process <ul style="list-style-type: none"> <input type="checkbox"/> Ensures prospective fellow achieve a satisfactory TOEFL-IBT score as set by the College of Physicians and Surgeons of BC re: physician from non-English Speaking countries. https://www.cpsbc.ca/physicians-area/registration <input type="checkbox"/> Prepares preliminary application package, including a fellowship application form (also known as the application for approval of appointment form) and sends it to potential Clinical Fellow. http://postgrad.med.ubc.ca/files/2013/04/App-for-Approval-of-Appt-Apr-2013-2.0.pdf <p><i>*Note:</i> Is the applicant a sponsored Clinical Fellow? Postgraduate Dean's Office processes sponsored Clinical Fellows who have the following citizenship: <i>Saudi, Kuwaiti, Omani, Qatari, Bahrain, Libyan, or United Arab Emirate.</i> Check with the Postgraduate Dean's office to determine if the applicant is a sponsored Clinical Fellow. If yes, UBC Postgraduate Dean's Office processes these applications as well as the UBC appointments.</p> | |
| Clinical Fellow | <ul style="list-style-type: none"> <input type="checkbox"/> Signs Application for Approval of Appointment and provides an email address for correspondences. | |
| Division Administrator | <ul style="list-style-type: none"> <input type="checkbox"/> Ensures Application for Approval of Appointment is confirmed and signed by: <ul style="list-style-type: none"> <i>* When circulating the application for signatures, attach CV, Certificates/Credentials.</i> 1. Potential Clinical Fellow 2. Program Investigator/Division Head 3. Department Head 4. Vice President, Medicine (On page 2 of the application, include the amount and source of funding even if it is self-funded.) 5. Associate/Assistant Dean, Postgraduate Education (enclose the processing fee payable to UBC by cheque or UBC journal voucher.) | 2 weeks |
| Division Administrator | <ul style="list-style-type: none"> <input type="checkbox"/> Sends an Educational License request letter to the Registrar's Office of the College of Physicians and Surgeons of BC (CPSBC) (see letter template) (include approved application for approval of Appointment Form, CV and copies of credentials, certificates, degrees) <p>The CPSBC will send a Letter of Registration along with the blank CPSBC Registration Form and Criminal Record Search Form (granting temporary registration for educational purposes; pending immigration procedures and EICS).</p> | 2 to 3 weeks |
| Division Administrator | <ul style="list-style-type: none"> <input type="checkbox"/> Prepares the Letter of Invitation (if applicable) and offer letter and sends MSWord copy to DoM HR Assistant for Department Head's signature. <input type="checkbox"/> Sends the signed Letter of Invitation, Offer letter and the Letter of Registration to Clinical Fellow via email. (see email template) | 1 week |

Checklist for Clinical Fellow Appointments

Once the Fellow has Arrived in Vancouver

Name: _____

| Individual Responsible | Tasks | Timeline |
|---|--|----------|
| Division Administrator | <input type="checkbox"/> Contact Health Authority to confirm that the Clinical Fellow has arrived and coordinate necessary paperwork with Health Authority. | |
| Division Administrator | <input type="checkbox"/> The following paperwork is collected and is sent to the Department's HR office: <ol style="list-style-type: none"> 1. New Employee Form 2. Offer Letter (signed) 3. CPSBC Education License 4. Social Insurance Number (copy of SIN card) 5. VISA/work permit 6. Application for Approval of Clinical Fellow Appointment 7. CV 8. Personal Data Form 9. Direct Deposit Form (if paid) 10. TD1 & TD1BC Form (if paid) 11. Safe prescribing module (if writing orders) 12. CMPA "Member Update" (if applicable) | |
| HR Assistant/ Division Administrator | <input type="checkbox"/> Coordinate Funding Approval for Clinical Fellow position. (if paid) <input type="checkbox"/> Creates position number, Employee ID, CWL log-in pin in HRMS. <input type="checkbox"/> Prepares FAF, collecting authorizing signatures and sends FAF to the Dean's Office for approval (attach applicable items above). <input type="checkbox"/> Sends copy of FAF along with Employee ID and CWL log-in Pin to Division Administrator. <input type="checkbox"/> Tracks FAF and ensures appointment is processed on HRMS in a timely manner. | |
| Division Administrator /HR Assistant | <input type="checkbox"/> Assists with benefits information and medical coverage for clinical fellows. | |
| Division Administrator | <input type="checkbox"/> Arranges for assignment of MSP Billing # from Ministry of Health if applicable. | |