

## **Draft: SEAMO Guidance Document: Reduction of Clinical FTE**

### **Purpose**

In certain circumstances, it may be advantageous for departments and member physicians to formally divide the responsibilities and the SEAMO funding attributable to one full-time SEAMO-funded position in the department between two (or more) department physicians. Where a reasonable rationale for doing so exists, such arrangements should generally be enabled where it is manageable and does not lead to unreasonable liability or risk for the department, SEAMO and/or the Faculty of Health Sciences.

This document is to be reviewed in parallel with the Queen's Reduced Period of Responsibility Policy and is intended to evolve over time. The information presented here provides guidance and clarity for Department Heads when adjudicating decisions related to reduction of FTE responsibilities, including job sharing, for consideration and planning of liabilities and risks that may be associated with such arrangements.

### **Principles**

1. A SEAMO full-time equivalent (FTE) is defined as contributing a minimum of 45 hours per week (exclusive of on-call responsibilities) towards achieving the deliverables of their role description.
2. Role descriptions of individual SEAMO-funded physicians, including the clinical (including on-call), educational, research and administrative expectations for their role, are negotiated between the Department Head and individual faculty members and reviewed annually. Any plans to reduce FTE must ensure sufficient coverage of all these responsibilities.
3. Departmental Practice Plans exist to fairly and transparently guide the allocation of the SEAMO funding received by each Department among its SEAMO-funded physicians according to collegially-derived principles which may vary between departments. SEAMO does not remunerate physicians directly, nor does it prescribe how funding attributable to an individual position should be allocated.
4. It is acknowledged that due to the heterogeneity of clinical practice between specialties and departments, individual departmental Practice Plans will vary from one another in terms of the definition of clinical and academic responsibilities for a FTE physician.
5. If and when a reduction in FTE involves a job-share then a formal job share arrangement must be in place (see Appendix A). A Job-Sharing Arrangement exists when two (or more) physicians appointed to a department enter into a formal arrangement with the Department Head to divide the usual responsibilities of one FTE SEAMO-funded position between themselves. In these circumstances, the terms of the Job-Sharing Arrangement must be defined in writing, in such a way that the liability to SEAMO and the Faculty of Health Sciences is minimized in the event of termination of the Job-Sharing Arrangement.
6. In order to qualify for the University's benefits and pension program, an individual physician must have a minimum 0.4 FTE role with their Department and a minimum T4 salary of \$15,000 per year.

## Guidance for Departments and Department Heads

Department Heads may encounter several circumstances where members of the Practice Plan request a reduction in FTE. Depending on the circumstances, there are several options available for the Head to consider:

1. An existing GFT faculty member requests to reduce their fractional FTE role (usually will be due to a reduction in clinical responsibility):
  - Where Departmental staffing and resources permit, and where Departmental accountability requirements are not threatened, the Head may approve a reduced fractional FTE (usually through a reduction in clinical activity only) and internally mitigate the service impacts of this reduction by modifying expectations and roles of other existing faculty members without modifying their fractional FTE;
  - The Head may recruit and appoint a new physician as a locum Adjunct 1 faculty member to undertake the vacant portion of the reduced-FTE physician's clinical role, and utilize the SEAMO funding otherwise attributable to the GFT physician to support this second physician who will be expected to shadow bill for the clinical work performed. This represents the lowest liability/risk arrangement, and would not require a formal Job Sharing Arrangement to be created.
  
2. Two or more existing GFT faculty members wish to simultaneously reduce their roles and enter together into a Job-Sharing Arrangement:
  - A new physician may be appointed as a locum Adjunct 1 faculty member to undertake the vacant fractional FTE, with annual reappointment so long as the Job-Sharing Arrangement remains extant (lowest risk solution); OR
  - If the combined fractional FTE reductions of the participating physicians results in an effective 1.0 FTE vacancy, then a new "departmentally-funded" GFT or Adjunct 2 position may be requested by the Department, subject to approval by the Strategic Priorities and Recruitment Committee (SPRC), and supported with the SEAMO funding attributable to the vacant fractions of the other two or more positions' funding (higher risk solution). In this scenario, a formal Job-Sharing Arrangement (as detailed in Appendix A) will be required to be submitted to SPRC at the time that permission to recruit is requested.
  
3. The Department has a vacant SEAMO-funded full-time equivalent position, and identifies two or more new recruits who desire to share the vacant position:
  - In such a circumstance, it is recommended that the two or more new recruits be appointed as Adjunct 1 or 2 faculty, as opposed to GFT appointments, and that the individual role descriptions and letters of appointment clearly outline the fractional FTE position to which each is appointed. A formal Job-Sharing Arrangement (as detailed in Appendix A) will be required to be approved in advance of the appointment of the new physicians.

## Appendix A

### Requirements of a Job-Sharing Arrangement

*Please reach out to QHS Staffing ([qhsstaffing@queensu.ca](mailto:qhsstaffing@queensu.ca)) prior to beginning the job-share arrangement process as a change in appointment may be required.*

Job-Sharing Arrangements must include:

1. Standard language as approved by Human Resources/Staffing Office of the Faculty of Health Sciences.
2. An agreement between the physicians sharing the full-time equivalent position and the Department Head as to the duration of the Arrangement and its terms of renewal.
3. A clear role description for each physician participating in the Job-Sharing Arrangement, which identifies their individual fraction of a full-time equivalent position, their specific individual responsibilities and deliverables, and their planned remuneration from the Practice Plan for their individual role.
4. In situations where two or more faculty hold either geographically full-time (GFT) or Adjunct group 2 appointments, identification of the University T4 salary that will be paid to each participating physician in the Job-Sharing Arrangement.
5. A statement from the Department Head regarding contingency planning for the following possible circumstances:
  - a. The resignation, termination, or unplanned absence of one of the participating physicians in the job-sharing arrangement, which would leave the Department with a partially-vacant SEAMO-funded full-time position;
  - b. The request from any physician with a GFT faculty appointment participating in the Job-Sharing Arrangement to increase their fractional full-time equivalent role beyond that presently defined in the Arrangement.
6. Review and approval from the Staffing Officer of the Faculty of Health Sciences, and the Vice-Dean (Clinical Medicine) and Medical Director of SEAMO.
7. The relevant hospital(s) should be made aware of any changes that may impact clinical operations.