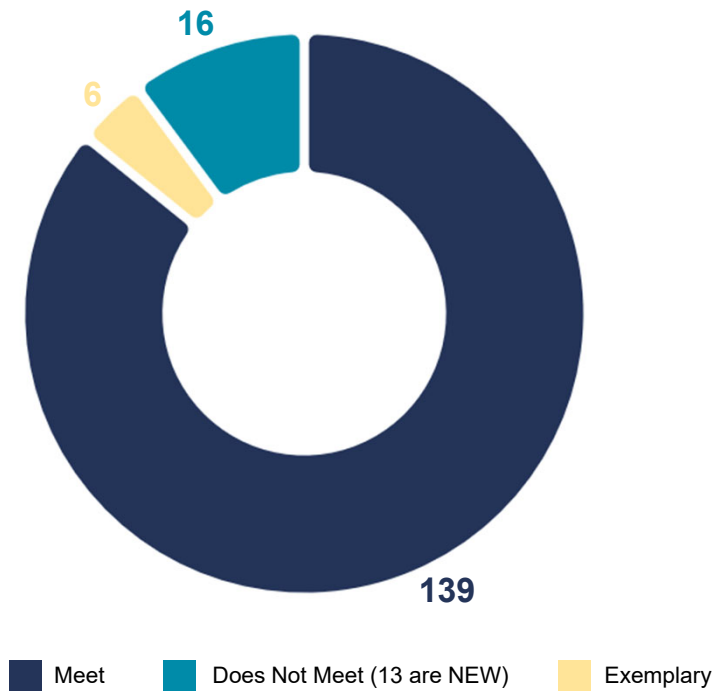


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**Does Not Meet (DNM)
Indicators from PGExec
Self-Study**

Self-Study Findings by PGExec

PGExec reviewed the institution's approach to each of the 161 accreditation indicators to assess if each indicator meets the criteria.



Does Not Meet Indicators Categories

1. Institutional Commitment to Anti-Racism and Anti-Discrimination
2. Policies and Guidelines
3. Processes

Institutional Commitment to Anti-Racism and Anti-Discrimination



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Institutional Commitment to Anti-Racism and Anti-Discrimination

- NEW 1.1.1.3: The mission, vision, and/or values statement(s) expresses a commitment to address racism in all its forms, anti-Black racism, anti-Indigenous racism, and discrimination in all its forms.

What We're Doing

1. Institutional commitment expressed through strategic initiatives, reports, and working groups.

- EDI Statement
- Anti-Black Racism at Temerty Medicine Findings Report
- Final Report of the Steering Committee for the U of T Response to the Truth and Reconciliation Commission of Canada
- Anti-Racism Strategic Tables

What's Missing

1. Our Education Mission and EDI statement express a strong commitment to equity and inclusion, but do not explicitly reference racism.

What's Next

1. Wait on the finalized standards before escalation to OVD.

Institutional Commitment to Anti-Racism and Anti-Discrimination

- NEW 4.2.1.1 - 4.2.1.2: The institution has well-defined, transparent, and effective policies and processes in place addressing racism and discrimination in all forms and implements them.

What We're Doing

1. Learner Mistreatment Guideline
2. Support from OLA, OIH, OID, ARCD, Institutional Equity Office
3. University-wide review of Statement on Prohibited Discrimination and Discriminatory Harassment
4. Curriculum Hub provides resources.
5. Black & Indigenous Health Faculty Leads ensure representation and advocacy.

What's Missing

1. No formal policy specifically addressing racism at the Faculty level.

What's Next

1. *Recommendations from the University-wide Statement review are now available.*

Institutional Commitment to Anti-Racism and Anti-Discrimination

- 1.2.2.4: The postgraduate dean anticipates and manages conflict, including race-based and discrimination-based conflict, effectively.

What We're Doing

1. Associate Dean, PGME collaborates with CAFA, Black & Indigenous Health Leads, OIH, OID, and OLA.
2. Conflict management evaluated through multisource feedback process (Fall 2024).
3. LEU process includes escalation to Associate Dean when appropriate.

What's Missing

1. While no gaps were identified, we recognize opportunities for continued improvement is always possible.

What's Next

Institutional Commitment to Anti-Racism and Anti-Discrimination

- NEW 4.2.2.1: Individuals involved in residency education, including residents, teachers, program leaders, and administrative personnel have access to and are required to engage in anti-racism and anti-discrimination training.

What We're Doing

1. Access via Curriculum Hub (for PDs, PAs, and Educational Leads).
2. Mandatory training for PGME committee members (tracked via attestation).
3. Department scan underway to align with existing efforts.

What's Missing

1. No universal requirement for all roles (e.g., residents, faculty, PAs).
2. No centralized tracking system for training completion across all roles.

What's Next

1. Complete department scan → compile training modules.
2. Review faculty training for alignment with requirement.
3. Discuss outstanding gaps and future implementation.

Policies and Guidelines



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Policies and Guidelines

Health and Safety Guidelines

- NEW 4.1.3.3 - 4.1.3.5: The institution has well-defined, transparent, and effective policies and processes in place addressing residents' psychological safety, cultural safety, and professional safety.
- 4.1.2.1: The review of safety policies is informed by data relating to patient safety incidents connected to all individuals involved in resident teaching. (RR)

What We're Doing

1. The PG Learner and Health Safety Guidelines are being updated to address psychological, cultural, and professional safety.
2. Wellness Guidelines for PG trainees and OLA also offers wellness supports.

What's Missing

1. The updated Guidelines are being reviewed (have not been approved by PGMEAC).

What's Next

1. The Guidelines will be presented at an All PDs/FMSDs meeting and PDs can provide feedback on any recent adverse events or policy misalignments.
2. The Guidelines are expected to be reviewed and approved at PGMEAC in Spring 2026.

Policies and Guidelines

Program Support Guidelines

- 2.2.2.2: There are written guidelines to ensure support for the program director, including administrative support and remuneration, which provide flexibility to accommodate the variation in the size and complexity of residency programs.

What We're Doing

1. Task Force on Best Practices in PGME Program Support assembled in Dec 2024.
2. Current guidelines are being reviewed and updated.
3. Minimum remuneration model for PDs to be included.

What's Missing

1. Updated models have not been finalized or implemented.
2. Current support guidelines do not include minimum remuneration.

What's Next

1. Finalize and communicate updated support models for rollout in July 2026.

Processes



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Processes

- NEW 4.2.1.4: The mechanism for responding to and adjudicating instances of racism and discrimination involves individuals with the lived experience of racism and discrimination.

What We're Doing

1. LEU team who receives and responds to incidents of mistreatment includes diverse individuals.

What's Missing

1. Lived experience not yet embedded in formal adjudication process.

What's Next

1. Temerty Medicine leadership in PGME, CAFA, and Learner Affairs are consulting with central university leaders and others regarding how best to implement this into the review and resolution of LEU reports.

Processes

- NEW 5.1.1.6: The policies and processes governing appeals stipulate that alleged bias and discrimination are grounds for appeal.

What We're Doing

1. Discussions are underway to determine how best to explicitly state this in existing guidelines and processes.
2. Several groups are working on conflicts of interest processes and bias.

What's Missing

1. Bias and discrimination are accepted grounds for appeal, though this is not explicitly stated in the current documentation.

What's Next

1. Discussions are ongoing on how to include this in current and future processes.

Processes

- NEW 5.1.1.7: The institution has an appropriate and transparently governed process to review concerns of academic performance or progression for racial bias and other forms of discrimination when requested by the resident.

What We're Doing

1. PGME Assessment Committee promotes equitable assessment practices. ACT's DEIA Working Group provides advice and recommendations in assessment.
2. Collaboration underway with Black Health & Indigenous Health Leads to map current pathways that can be built upon.

What's Missing

1. No formal, transparent process currently in place for residents to request review of academic concerns specifically for racial bias or discrimination.

What's Next

1. Develop and formalize review pathways in collaboration with ACT and Black Health & Indigenous Health Leads.
2. Ensure transparency and accessibility of process for residents.

Processes

- NEW 6.1.1.2: There is a well-defined, transparent, and effective process for the assessment of teachers who deliver Indigenous health related curriculum.

What We're Doing

1. Indigenous Health Lead and Office of Indigenous Health are drafting sample questions.

What's Missing

1. No formalized or consistently applied process yet in place.

What's Next

1. Finalize questions and provide to programs who will add them to their AHD evaluations as appropriate.
2. Develop process for centralized data collection.

Processes

- NEW 8.2.2.2 - 8.2.2.3: The institution has a well-defined, transparent, and effective process in place governing safe data collection, data management, and appropriate use of collected data related to race, racism, and other forms of discrimination and this process is informed by racialized and underrepresented residents, teachers, and other individuals involved in residency education.

What We're Doing

1. DMAAC's EDIIA Data Governance WG will develop guidelines for collecting, analyzing, and reporting EDIIA data.
2. Collaboration with OIH, OID, and MEDG WG.

What's Missing

1. No formalized PGME-specific process governing race-related data collection and use.

What's Next

1. Continued EDIIA Data Governance WG meetings to ensure deliverables are met.

Questions?



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