



All Program Directors & Family Medicine Site Directors' Meeting

Friday, May 31, 2024



Welcome Remarks

Dr. Meredith Giuliani

Associate Dean, Postgraduate Medical Education Temerty Faculty of Medicine





Acknowledging the land

We would like to acknowledge this sacred land on which the University of Toronto operates. It has been a site of human activity for [thousands] of years. This land is the territory of the Huron-Wendat and Petun First Nations, the Seneca, and most recently, the Mississaugas of the Credit.

The territory was the subject of the Dish with One Spoon Wampum Belt Covenant, an agreement between the Haudenosaunee Confederacy and Confederacy of the Ojibwe and allied nations to peaceably share and care for the resources around the Great Lakes.

Today, the meeting place of Toronto is still the home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work in the community, on this territory.



PGME Updates

Dr. Meredith Giuliani

Associate Dean, PGME







Learner Assistance



Welcome to Postgraduate Medical Education (PGME)

Acknowledgments & Appreciation

Dr. Meredith Giuliani

Associate Dean, PGME





Exiting Residency Program Directors (from June 2023)

Darius Bagli

David Barth

Nikki Bozinoff

Andrew Brown

Emma Cory

Michele Farrugia

Jeannette Goguen

Samir Grover

John Hanlon

Pediatric Urology (AFC)

Hematological Pathology

Addiction Medicine: Enhanced Skills

Interventional Radiology

Child Maltreatment Pediatrics (AFC)

Obstetrics and Gynaecology

Internal Medicine

Adult Gastroenterology

Pain Medicine



Exiting Residency Program Directors (cont'd)

Ebru Kaya

Christopher Li

Helen MacRae

Lynn Marshall

Gerard Morton

Giovanna Sirianni

Melinda Solomon

Martina Trinkaus

Palliative Medicine

Adult Respirology

Colorectal Surgery

Clinical Environmental Health: Enhanced Skills

Brachytherapy (AFC)

Family Medicine: Enhanced Skills

Pediatric Respirology

Adult Hematology



New Residency Program Directors (from July 2023)

Riina Bray

Jackie Chiang

Romy Cho

Michael Chua

Michelle Gould

John R. Kachura

Vaibhav Kamble

Julia Kfouri

Clinical Environmental Health: Enhanced Skills

Pediatric Respirology

Child Maltreatment Pediatrics (AFC)

Pediatric Urology (AFC)

Pediatric Gastroenterology

Interventional Radiology

Family Medicine: Enhanced Skills

Obstetrics and Gynaecology



New Residency Program Directors (cont'd)

Eric Leung

Larissa Liontos

Erin Lurie

Jakov Moric

Matthew Sheppard

Yvonne Tse

Eric Tseng

Brachytherapy (AFC)

Hematological Pathology

Addiction Medicine: Enhanced Skills

Adult Respirology

Pain Medicine

Adult Gastroenterology

Adult Hematology



Exiting Family Medicine Site Directors (from July 2023)

Amanda West

Oak Valley Health – Markham Stouffville Hospital

New Family Medicine Site Directors (from July 2023)

Natasha Dias
 Oak Valley Health – Markham Stouffville Hospital

Mira Shuman Sunnybrook Health Sciences Centre

Rajani Vairavanathan Michael Garron Hospital – TEHN



Awards Acknowledgement

Dr. Meredith Giuliani

Associate Dean, PGME





2024 Postgraduate Medical Trainee Leadership Award

Dr. Wadah Ahmed, PGY4, Diagnostic Radiology

Dr. Elizabeth Chuk, Clinical Fellow, Radiation Oncology

Dr. Ashley Warnock, PGY4, Psychiatry

Dr. Han Yan, PGY2, Family Medicine



2024 Social Responsibility Award in Postgraduate Medical Education – Trainee

Dr. Adom Bondzi-Simpson, PGY3, General Surgery

Dr. Betty Yibrehu, PGY3, General Surgery



2024 Robert Sheppard Award – Trainee

Dr. Adom Bondzi-Simpson, PGY3, General Surgery

Dr. Betty Yibrehu, PGY3, General Surgery



2024 PARO Award Recipients Resident Teaching

Dr. Joseph Dubé, PGY4, Medical Genetics

Dr. James Im, PGY5, Adult Neurology



2024 PARO Award Recipients Excellence in Clinical Teaching Award

Dr. Scott Fung, Gastroenterology

Dr. Mark Lachmann, Psychiatry



2024 PARO Award Recipients Citizenship Awards for Medical Students

Ms. Jeeventh Kaur

Ms. Samiha Mohsen



2024 PARO Award Recipients Dr. Robert Conn Resident Advocate for a Clinician

Dr. Hanna Faghfoury, Medical Genetics and Genomics



2024 PARO Award Recipients Residency Program Excellence Award

Department of Paediatrics, Medical Genetics and Genomics



2024 The CAME Rising Star Certificate of Excellence

Dr. Justin Lam, Clinical Fellow, Pediatrics



2024 Canadian Society for Clinical Studies (CSCI) Award

Dr. Jethro Kwong, PGY2, Urology



2023 Resident Doctors of Canada (RDoC) Puddester Award for Resident Wellness

Dr. Victor Do, PGY4, Pediatrics



2023 Resident Doctors of Canada (RDoC) Mikhael Award for Medical Education

Dr. Adom Bondzi-Simpson, PGY3, General Surgery





Registration Update

Maureen Morris

Director, Operations





Orientation Activities & Common Hospital Orientation Day

- Onboarding, social & orientation activities should be held AFTER July 1.
 - Program activities should be planned with protected time.
 - Any activities, mandatory or voluntary, occurring prior to training commencement date must be provided with a time-in-lieu in compliance with the PARO-OTH agreement.

Common Hospital Orientation day

- Tuesday, July 2, 2024
- scheduled for the first business day after July 1

New Resident Reception

- Wednesday, July 3, 2024, 5:00PM 7:00PM; remarks begin at 5:45PM
- MaRs Discovery District (Auditorium), 101 College Street, Toronto
- Please encourage your new residents to RSVP



Planning for Onboarding: 2024 - 2025

- PGY1 Call Schedule
 - Attachment 27 PARO-OTH Agreement
 - In the first four weeks: Before a PGY1 takes solo overnight call enhanced senior support is available
 - Enhanced senior support for PGY1 learners would include:
 - "Graduated on call period"
 - Weeks 1-2: Senior support is provided for overnight call
 - Weeks 3-4: Senior support is immediately accessible for overnight call
 - Learner to check in with education lead
- Whenever possible, avoid cross coverage scheduling
- Deferral of solo on call for services with high volume and high acuity of patients



Important Registration Reminders

- New and Returning learners should be in the process of completing their registration requirements.
 - Outstanding registration requirements can be viewed in POWER
- For those with a July 1 start/return date, we are asking for registrations to be completed by June 19, 2024
 - This will allow for processing time as well as hospital registrations
 - We recognize some items are beyond their control; please encourage learners to complete what they can now (Modules, Immunization, etc.).
 - For those with a start date other than July 1, we are requesting learners to be registered at least 7 days in advance of their start date.



Important Closures

- University of Toronto will be closed as of 5PM on Thursday, June 27, 2024; reopening 8:45AM on Tuesday, July 2, 2024.
 - We will have limited staff checking in to assist with urgent issues for July 1, 2024
- CPSO will be closed as of 5PM on Friday, June 28, 2024; reopening on Tuesday, July 2, 2024
- CMPA will be closed end of business day Friday, June 28, 2024; reopening on Tuesday, July 2, 2024

Please encourage learners to plan ahead and not submit items right before closures as this may impact their ability to start on time.



Questions





Academic Freedom

Dr. Pier Bryden

Associate Dean, Clinical Affairs & Professional Values







With thanks to:

Archana Sridhar
Assistant Provost
JD, Harvard Law School









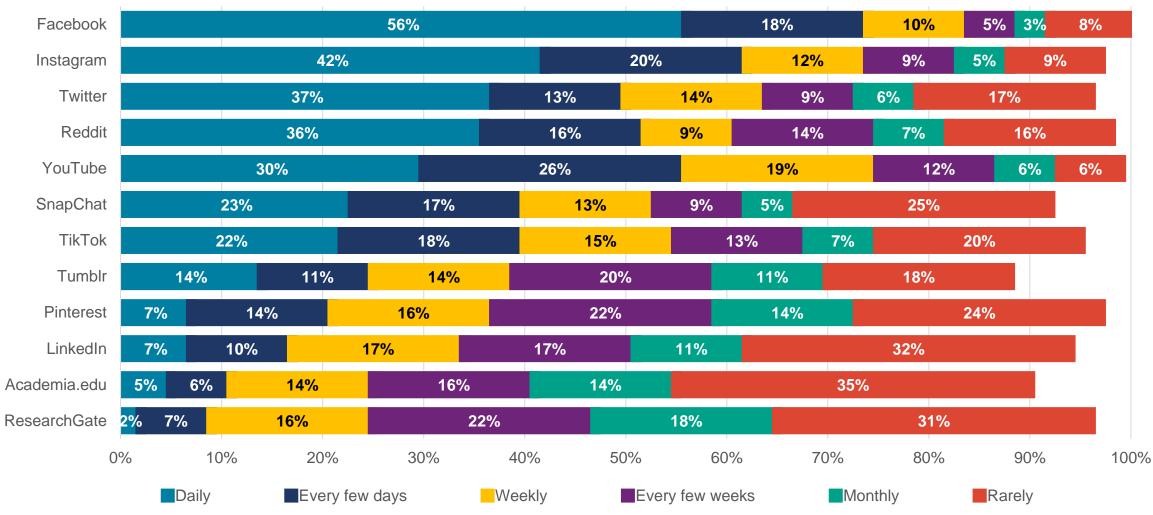
Objectives

 Be aware of potential risks of social media use and mitigating strategies

 Understand concept of academic freedom as relevant to clinical faculty



Frequency of use





What makes online behavior unique?

- Permanent
- Divorced from context
- Disinhibition
- Deindividuation
- Personal / professional
- Short and fast 'going viral'
- Risks amplify for marginalized groups
- Mischaracterization or impersonation

- Cain et al, 2019
- Chen et al, 2020
- Dumitrescu, 2022
- Epstein, 2022
- Keegin, 2022
- Leiter, 2010
- Schmidt, 2017
- Weckerle, 2013

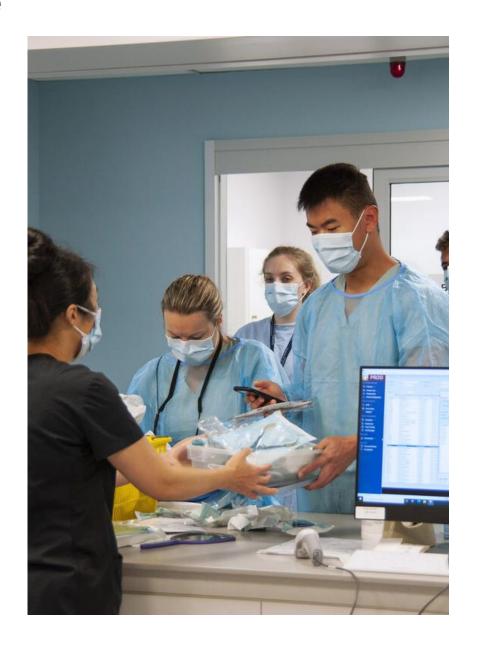


Professionalism cases in academic medicine

- Disparaging of specific faculty or students
- Derogatory towards certain types of patients (i.e., low income, race or religion, etc.)
- Comments about work including about colleagues, patients or stress
- Political contributions
- Violations of confidentiality
- Profanity
- Sexually suggestive content

(Kitsis, 2016)





Six common areas of risk



Public Policy & Current Events



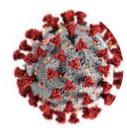
Race & Gender



Civility & Insults



Foreign Affairs



Misinformation & Health



Students & Outside Groups



Understanding Academic Freedom



Academic freedom is ... a social compact between society and the professoriate in which the public agrees that the pursuit of truth without interference from political and economic interests or other individuals is in the best interest of society, and such an environment allows professors autonomy in deciding how best to pursue truth.

- Tierney & Lechuga (2010)





What are we talking about when we say 'academic freedom'?

Activities









Form











Academic Freedom ≠ **Free Speech**



Securing the right of free speech generally requires emphasizing our inability, or unwillingness, to distinguish between good and bad ideas.

Academic freedom, by contrast, incorporates within itself the effort of a scholarly discipline to filter out bad ideas. Knowledge produced within a scholarly setting is routinely vetted, assessed, and, if necessary, censored.

- Whittington (2019)







Academic Freedom	Free Speech or Expression
Rights (and responsibilities) that accompany the academic profession	Charter or constitutional or moral right; can also be recognized by institutions
Covers tenure stream faculty (and teaching stream and others at U of T); can cover students, instructors, and others depending on sphere of activity	Covers everyone
Requires individual rights to be recognized by the institution, usually via MoA, collective agreements, institutional policies, etc.	Rights enforceable against the state under law (but universities not considered state-actors)
Ideas evaluated and assessed for quality – e.g. tenure, PTR, research grants, publications	'Marketplace of ideas' – content and viewpoint neutrality
Fully covers research and teaching; also intramural and extramural expression (with some limitations)	Covers all types of expressive activities - including social media, harmful speech, misinformation, etc with very limited exceptions under law

Political context

- Ontario free speech directive
 - www.freespeech.utoronto.ca
- Quebec Bill 32 on classroom speech
- Alberta's free speech report cards
- Pierre Poilievre's "free speech guardian"
- Canada is not alone



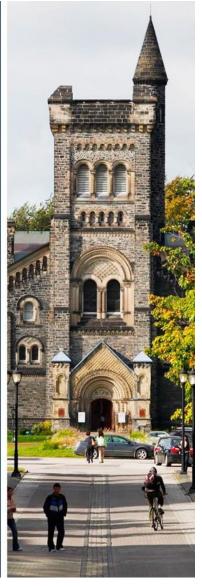
THOSE THAT DON'T WILL

NOT RECEIVE FEDERAL

RESEARCH GRANTS

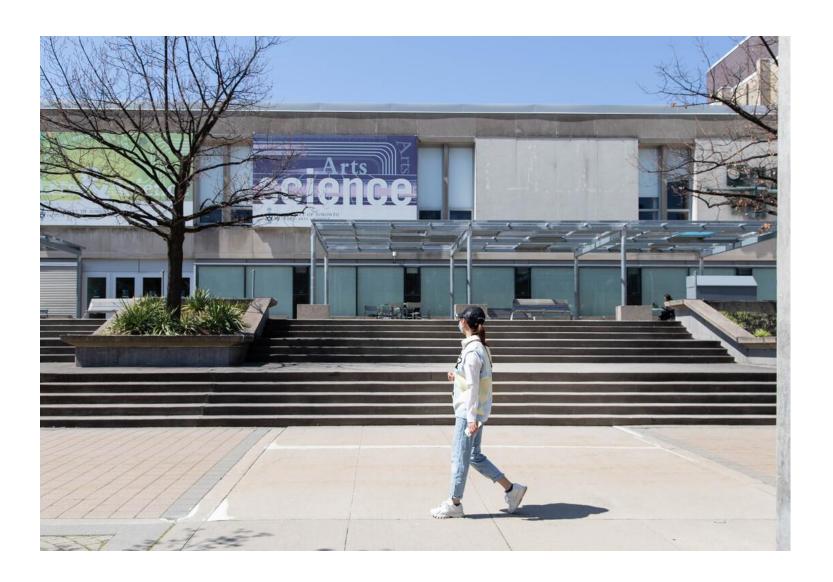
OR OTHER GRANTS





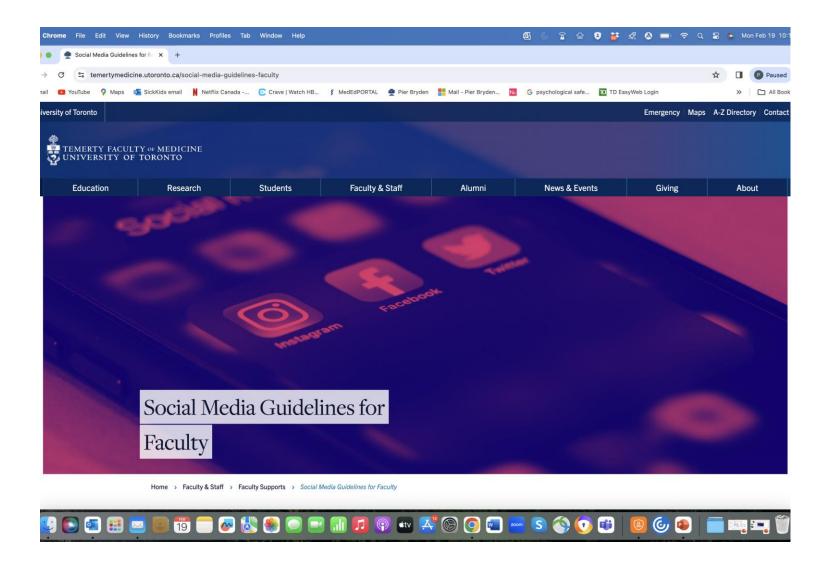


Disciplinary differences



- Professional codes
- Disciplinary norms
- "Political energy" (Menand, 1996)
- Departmental structures and interdisciplinarity (Scott, 2019)
- Collegial governance
- Faculty engagement

Temerty Resources



https://temertymedicine.utoronto.ca/socialmedia-guidelines-faculty

U of T policies and resources

- U of T Free Speech resources and policies
- Provostial Guideline on the Appropriate Use of Information and Communication Technology
- Policy with Respect to Workplace Harassment
- Guideline on Workplace Harassment and Civility
- Guideline on Discrimination on Prohibited Grounds and Discriminatory Harassment
- Memorandum of Agreement with the University of Toronto Faculty Association (UTFA)
- Code of Student Conduct and other student-related policies
- Policy on Sexual Violence and Sexual Harassment

See also:

Social Media Resources and Supports for Faculty Members and Librarians (June 2022)

Community Safety Office E-Safety Tips

Links available at www.provost.utoronto.ca

https://freespeech.utoronto.ca/



Final Thoughts



[The university] should be an intellectual experiment station, where new ideas may germinate and where their fruit, though still distasteful to the community as a whole, may be allowed to ripen until finally, perchance, it may become a part of the accepted intellectual food of the nation or of the world.

- AAUP (1915)







Thank you!



Further resources

Local Resource sites

https://freespeech.utoronto.ca/

https://temertymedicine.utoronto.ca/social-media-guidelines-faculty

https://centreforfacdev.ca/social-media-resources/

https://www.caut.ca/about-us/caut-policy/lists/caut-policy-statements/policy-statement-on-academic-freedom

Toolkits

• Curtis, P. (2022). A Guide to Twitter and Social Media Safety for Academics (and Everyone Else). http://prcurtis.com/docs/twitterguide2/

Books

- Marron, D. (2022). Conversations with People Who Hate Me.
- Weckerle, A. (2013). Civility in the digital age: how companies and people can triumph over haters, trolls, bullies, and other jerks.

Podcasts

- Cancel Me, Daddy especially June 10, 2021; Sept. 16, 2021; Feb. 24, 2022. https://www.cancelmedaddy.com/
- Professor-ing (Feb. 17, 2021). "Embracing Social Media." https://www.facultydiversity.org/professoringpod



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<u>ws-20-21/flores-research/</u>



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Program Administrators Advisory Committee (PAAC) Update

Sheri Johnston

Interim Chair, PAAC





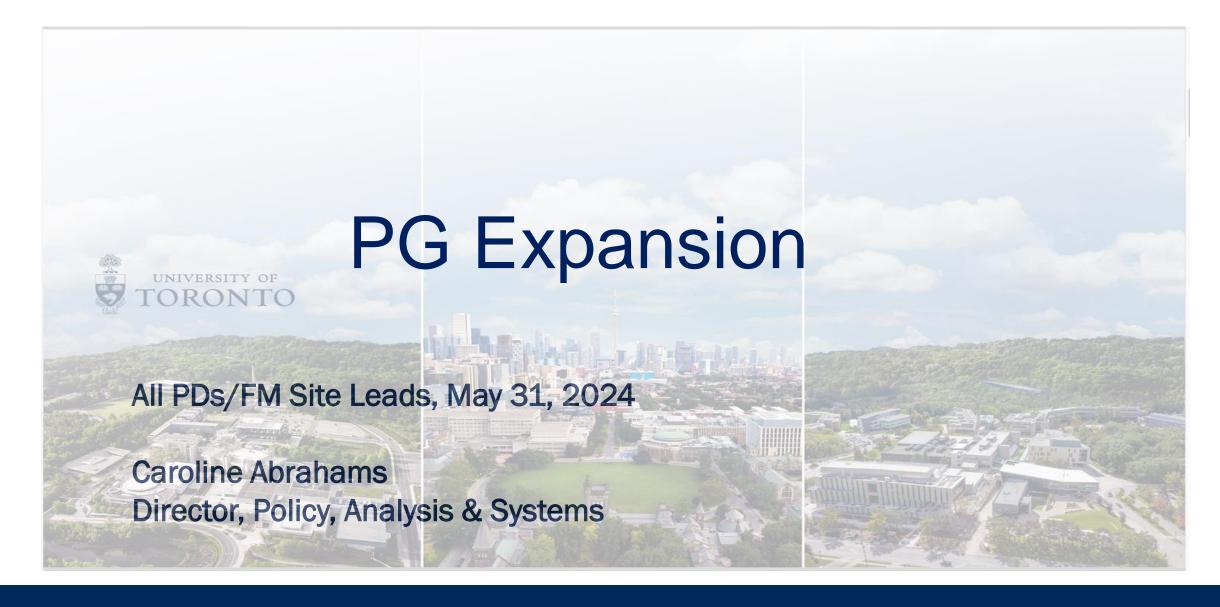
Expansion Update

Caroline Abrahams

Director, Policy, Analysis & Systems







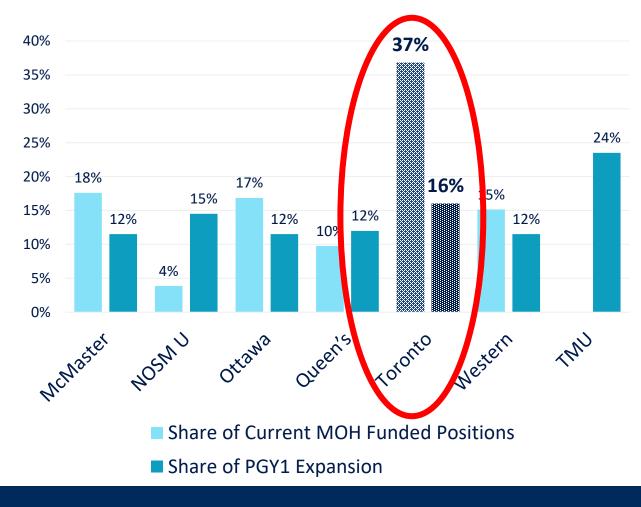
Medical School Expansion in Ontario



 The expansion is the largest in over 10 years. It is in alignment with COFM's proposal and health system needs and is part of a broader health human resources initiative.

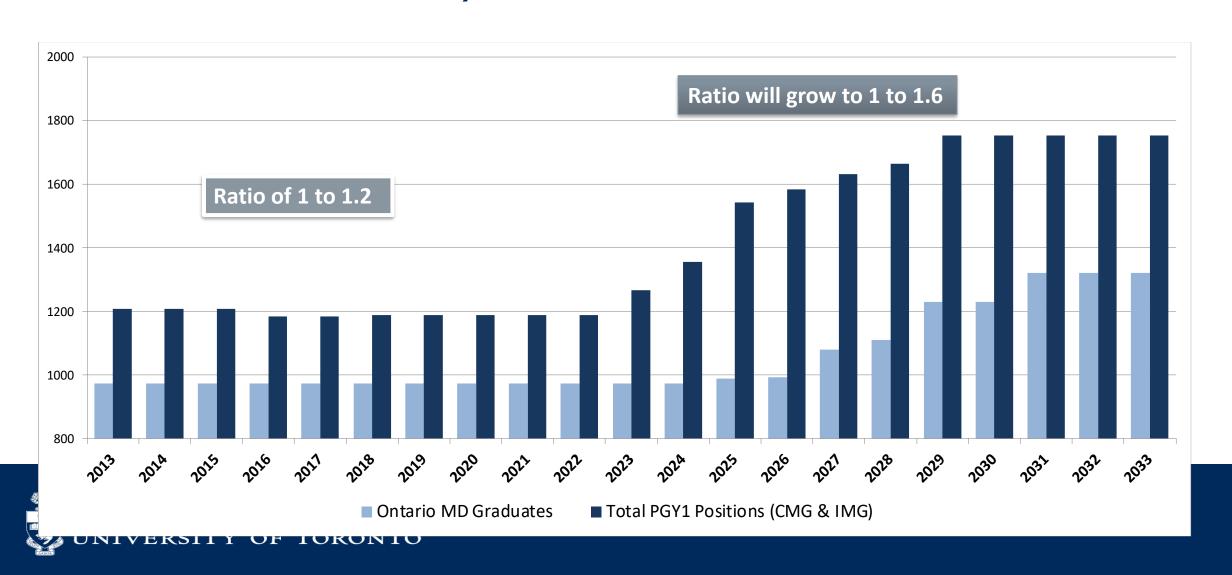
- Ontario expansion: 281 new medical student positions (27% increase) and 449 new PGY1 positions (37% increase) by 2027/28
- U of T expansion
 - 44 new MD positions (17%)
 - 67 new PGY1 positions (16%)

PG Expansion in Ontario: 2023/24 – 2027/28



- 449 new PGY1 positions
 (37% increase) by
 2027/28 across 7 medical schools including Toronto
 Metropolitan University
- In March 2024, Ontario government announced planning grant for York Medical School to plan for a potential opening of UG and PG learners in 2028/2029

Ontario MD Grads vs. PGY1 Positions 2013 – 2033 (CMG & IMG PGY1 Positions) (including estimates for York)



Roll-out of PGY1 Expansion Positions at U of T

	2022	Expansion					%		
	Intake	2023	2024	2025	2026	2027	2028	Total	Increase
Family Medicine	159	6	8	12	7	5	2	40	25%
RC Specialty	248	9	8	6	3	0	1	27	11%
Total	407	15	16	18	10	5	3	67	16%

Distribution of PGY1 Positions to Date

	2023	2024		
Program	CMG Positions	CMG Positions	IMG Positions	
Family Medicine	6	2	6	
Anesthesiology	1	1		
Diagnostic and Molecular Pathology (Ana Path)		-1	+1	
Emergency Medicine	1	1		
Internal Medicine	1	1		
Physical Medicine and Rehabilitation	1			
Neurology	1	1		
Medical Genetics		1		
Pediatrics			1	
Obs/Gyn			1	
Ophthalmology	1			
Psychiatry	1			
General Surgery	1		1	
Orthopedic Surgery	1			
Total	15	6	10	

Family Medicine Expansion

- Challenges of infrastructure to support additional FMTUs, recruitment/retention of teachers and capacity for more learners in the community – a provincial challenge
- Expansion to date focused on Humber River, TWH and other sites
- Future expansion planning focussed on Scarborough and Barrie/Orillia/Midland corridor
- New sites dependent on creation of new/expanded FMTUs

RC Specialty Expansion



where applicable, specialty CaRMS streams.

RC Specialty Expansion: 2025 and Beyond

- Working with 10 RCPSC programs on expansion plans:
 - Anesthesia, Emerg Medicine, Obs/Gyn, Ophthalmology, Otolaryngology,
 Pediatrics, Psychiatry, General Surgery, Orthopedic Surgery, Urology.
- One-time funding provided to support planning to increase residency training footprint (ranging from additional rotations to dedicated CaRMS stream)
- Funding to support: site lead admin stipends, admin support, faculty development, equipment etc.
- Annual quota allocations process currently underway to confirm allocations for 2025-26

Scarborough - U of T SAMIH PARTNERSHIP



- MD Program (up to 44 students/yr; 120 steady state) +
- PGME FM and RC Programs
- Physician Assistant Program (52 students/yr; 104 steady state)*
- Physical Therapy
 Program (40
 students/yr; 80 steady
 state) +



- Nurse Practitioner Program (30 students/yr; 60 steady state)*
- Nurse Practitioner
 Clinic







- U/G Life Science Students (300 students/yr; 1,200 steady state) +
- Clinical Psychology Clinic



 Joint UTSC-Centennial College
 Paramedicine

program



PG at Scarborough Health Network

- SHN = Scarborough General Hospital, Birchmount Hospital & Centenary Hospital
- Education Leadership:
 - Dr. Samir Grover, VP Education
 - Dr. Molly Zirkle, U of T Director of Expansion
 - Sasha Singh, Director of Education
 - TBD, Faculty Development Lead
- Med Ed Committee underway and in development education programming, curriculum, assessment, faculty development, quality assurance/accreditation, etc.

PG at SHN - Current and Future State

Current:

- Site of FM learning approximately 24 residents in preceptor-based model
- Approximately 9,000 MTDs in rotations including Obs/Gyn, Pediatrics, IM and Subspecialties, Surg Subspecialties, EM, Psychiatry, Anesthesia and EM
- Successful May 1st Summit

Future:

- Plans to build FMTU(s)
- Core and elective RC rotations could lead to dedicated streams for RC programs
- Fac Dev TLC series starting in September

A Few Challenges (but not insurmountable):

- Call Rooms
- Learner spaces/policies/support
- Transportation/Accommodation
- Commitment from SHN physicians to teach

Questions

Central Curriculum: PGME

Heather McDonald-Blumer

Faculty Lead, Curriculum





Curriculum Portfolio Overview:

- Responsible for strategic oversight and direction of curriculum
 - Scope, standards and improvement in central PGME curriculum
 - Standardisation and harmonisation across PGME programs

- Advise on guidelines / processes prompting curriculum change including:
 - ∘ CBME/CBD
 - o CanMEDS 202?
 - Mandates of governing bodies (RC, CFPC, AFMC, CPSO)



Objectives:

 ensuring residents are provided exposure to the expanding curricular requirements as set by societal need and our governing bodies

providing program education leaders with materials to support their intrinsic competency curriculum

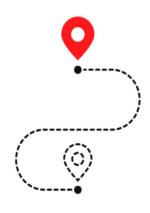
balancing program autonomy with a unified standard across PGME

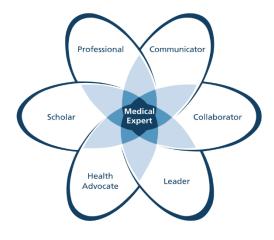
 expanding content requirements with the realities of other components of our medical education process.



Activities:









CBD 2.0

CanMEDS 2025



PGCorEd Update

Required: Teaching in Residency

Elective: Collaborator

Communication with and for patients

End of Life Care

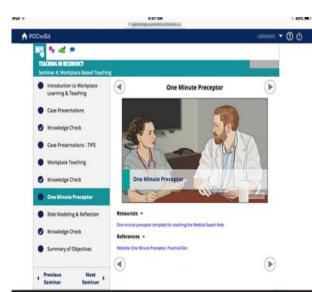
Health Advocacy and Health systems

Leader

Patient Safety

Professionalism





CBD 2.0 Update:



Commitment to Action

May 2023

CBD Summit #1 June 2023

Outcome: Draft adaptations table

CBD Summit #2

September 2023

Outcome: Prioritized adaptations CBD Summit #3

March 2024

Outcome: Refinement of adaptations

Consultation on proposed adaptations

Adaptations proposal to CSE (and Council)
June 2024



CBD 2.0 Update:

June 17: 9:00 AM



June 26: 3:30



CanMEDS Update:



New Themes: Intrinsic Competencies +

EDI in medical care and education

Indigenous Health

Planetary Health

Transition to Practice

Leadership

Quality Improvement/Pt Safety

Wellness and Fatigue Management









Curriculum Hub

Curriculum Committee Jennifer Ditta: Curriculum Coordinator































Format for each topic:

- Key Offices and Faculty
- Curriculum Hub Objectives
- Fundamental Content
 - Videos
 - Modules
 - Power Pt
 - Key Written resources
- Additional and/or Enriched Content
 - Local
 - National
 - Specialty specific









Key Faculty

Goals & Objectives

Fundamental Content Resources

Additional Resources

Key Faculty

- Dr. Ryan Giroux, Faculty Lead: Indigenous Health (PGME)
- Dr. Lisa Richardson, Associate Dean: Inclusion and Diversity
- Dr. Chase McMurren, UGME Indigenous Health Lead
- Other:
 - Lindsey Fechtig, Manager at OIH
 - Kawennanoron Cindy White, Elder at OIH
 - Jeffrey Kiyoshk Ross, CFD Advisor Indigenous Education
 - Office of Indigenous Health
 - The Temerty Faculty of Medicine's OIH supports learners, faculty, and staff across the education continuum. Its goal is to cultivate and promote a learning and working environment which is culturally safe and where Indigenous knowledges are respected and valued whilst co-creating an ecosystem of partnership and wellness. Temerty Medicine



Key Faculty

Goals & Objectives

Fundamental Content Resources

Additional Resources

Goals & Objectives

- Curriculum Hub Objectives
 - Identify key concepts relating to Indigenous health.
 - Map of Indigenous health concepts and content within the CanMEDS roles.
 - Describe competencies that may guide Indigenous health curriculum.

Programs would be able set their own Objectives





Key Faculty

Goals & Objectives

Fundamental Content Resources

Additional Resources

Fundamental Content Resources

Internal Curricula

External Curricula (National)

External Curricula (Specialty-Specific)

Internal Curricula

- Indigenous Health in Toronto (2023)
 - o 2 sessions developed by Dr. Ryan Giroux | link.....
- Surgical Foundations: Indigenous Health
 - 1.5-hour sessions, to be paired with the Surgical Foundations Lecture | link......
- Department of Family and Community Medicine | Enhanced Skills Program





Key Faculty

Goals & Objectives

Fundamental Content Resources

Additional Resources

Fundamental Content Resources

Internal Curricula

External Curricula (National)

External Curricula (Specialty-Specific)

External Curricula (National)

- Royal College of Physicians and Surgeons of Canada | <u>Indigenous Health</u>
 - Foundational information on Indigenous health/history to become culturally safe practitioners.
 - o Length: 120-180 minutes (can use in part or whole)
 - o Includes: Facilitator's Guide, Pre-Workshop Activities, and Vignettes for discussion.
 - Links available on the RC website
- San'yas Ontario Cultural Safety Training | link
 - Self-paced and facilitated training
 - o Designed for Ontario learners
 - Cost: approximately \$300 per person
- Queen's University: Indigenous Health Education and Practice | Indigenous Health Care Modules
 - Curriculum covers themes including Historical Perspectives of Indigenous Peoples in Canada; Biases, Racism, and Discrimination in Healthcare; Indigenous Ways of Knowing and Healthcare; Healthcare Rights; Healthcare Services; Culturally Safe Healthcare; & Intersections Between Education and Healthcare.
 - Format: 7 modules, asynchronous learning
- CFPC Indigenous Health Case Study Compendium

Author Recognition:

- Creative Commons
- Tracking utilization

Letters of recognition



Step Wise Approach



Faculty

Evaluation

Residents

Assessment?

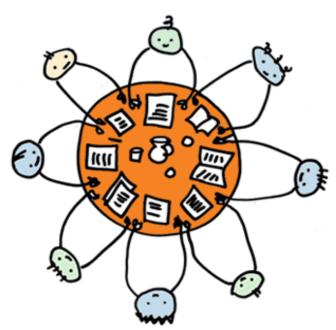


Next Steps

- For July 2024:
 - Some content
 - PD and PAs

- For 2024-2025
 - Resident input
 - Content contributions
 - Curriculum Committee participants





Questions/Discussion





Assessment Update

Dr. Julie Johnstone

Faculty Lead, Assessment



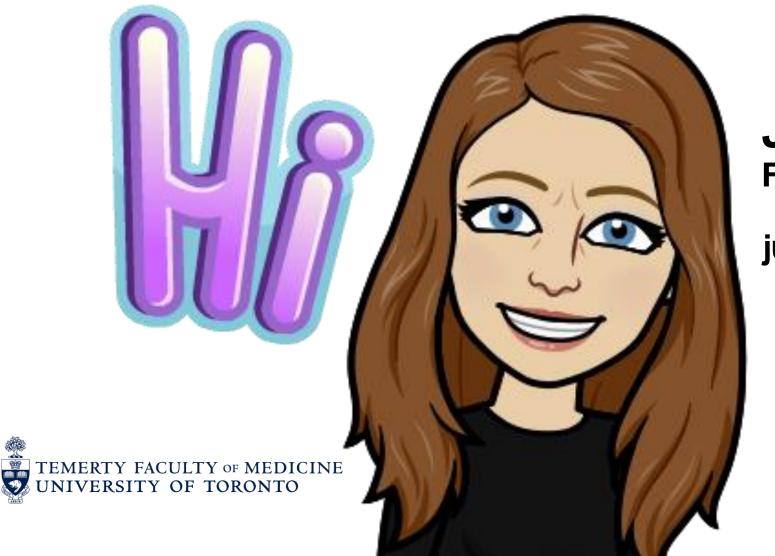






Assessment Postgraduate Medical Education

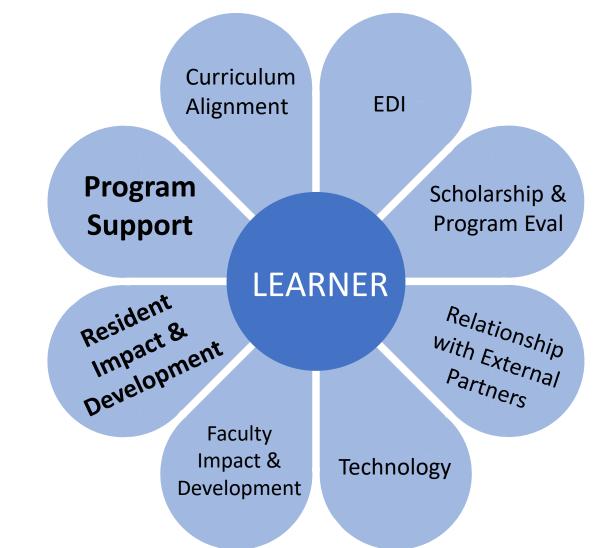




Julie Johnstone Faculty Lead, Assessment

julie.johnstone@sickkids.ca





PRIORITIES





Assessment Committee of Temerty (ACT) PGME

Responsible for the strategic planning, process development, and ongoing improvement of *learner and faculty assessment* processes in PGME, inclusive of Family Medicine and Royal College programs.

As such, responsible for the development, implementation, and evaluation of evidence-informed assessment strategies that can be <u>adapted</u> across diverse postgraduate programs.





Assessment Committee @ Temerty (ACT) PGME

LEARNER PROGRAM FACULTY BEST PRACTICE

COLLABORATION ACROSS PGME, WITH PROGRAMS, & WITH LEARNERS





Assessment Priorities Link to Programs

Competence by
Design – where
curriculum &
assessment meet
culture

Scholarship – assessment think tank & knowledge translation

Equity, Diversity, & Inclusion – how are assessment practices biased?

Faculty
Assessment –
multiple partners
and stakeholders

OLA and Faculty
Supports – the
impact of
assessment on all

01.

02.

03.

04.

05.

Program Support

CBD 2.0 Town Halls

June 17th @9am June 26th @ 3:30pm **CC** Workshops

Running an effective CC & program of assessment Sep 12th & Oct 24th

CQI in CCs
Mar 6th & April 10th

02.

Consults with PDs/ CC Chairs

Faculty Development

03.

01.





WHAT ELSE? julie.johnstone@sickkids.ca







Thank You & Questions





Sponsored Trainees Application Process and Timelines

Shannon Spencer

International Relationship Manager

Mohammed AlQahtani

PGY 4 Paediatric Neurology





Postgraduate Training Agreements

Postgraduate training agreements are currently in place between the University of Toronto Temerty Faculty of Medicine and sponsoring agencies from the following countries:

- Bahrain
- Kuwait
- Oman
- Qatar
- Saudi Arabia
- United Arab Emirates





Process for sponsored applicants

- Applications for residency training from international applicants must reach the PGME Office directly from the sponsoring agency after the signing of a postgraduate training agreement.
- PGME reviews each application for qualifications and completeness before submitting to the applicant's desired program.
- The PGME Office forwards the residency application to the appropriate University of Toronto Program Director with verification of sponsorship authority.





Proposed Timelines 2025: National Deans (TBC)

Program	PGME Application Deadline	National Offer Deadline
PGY 1	August 12, 2024	October 10, 2024
Paediatric Subspecialty (Round 2)	August 12, 2024	October 15, 2024
Medicine Subspecialty	August 23, 2024	October 23, 2024
Family Medicine, Enhanced Skills	September 10, 2024	December 12, 2024

Upon the refusal of an offer of admission, programs can extend offers to other candidates (who have not yet accepted an offer from another program) on their rank list any time <u>after</u> the stated Offer Acceptance Deadline.





Application Deadlines

- PGME sets the application deadline for these positions. There is a short turn around to Programs
- PGME sends programs a login and password for the Sponsored Trainee
 Application Registry (STAR) an internal PGME system used as a repository for sponsored trainee application documents
- Programs have access to their applicants all in one place
- Programs initiate interviews with candidates of their choice and follow the deadlines for offering positions
- All admission decisions are made by the Program





Offering Positions

- Please copy <u>pgme.international@utoronto.ca</u> on your offers, so we may communicate with our sponsors
- Do not offer positions to applicants that have not applied through the PGME office
- If you receive direct contact from applicants who are from our sponsoring countries, please contact <u>pgme.international@utoronto.ca</u>, so we can ensure they have sponsorship
- Do not offer Departmentally funded positions to sponsored trainees. This is in breach of our Training Agreement
- Any extensions of training should be first sent to PGME to confirm extension of sponsorship, prior to offers being extended. Not all sponsors support extensions





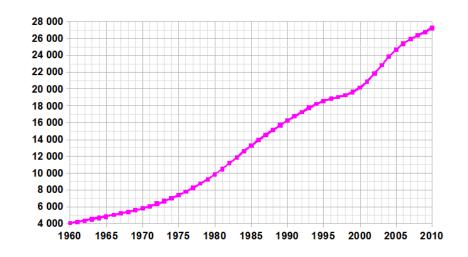
Dr. Mohammed Alqahtani

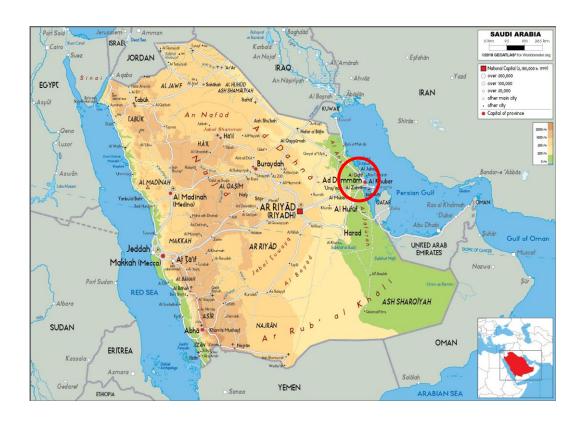




Saudi Arabia

• Population: 32,175,224 (2022)









Health system

- Free universal health care The Basic System of Government
- Public health department 1925
- 1980s 15% were Saudi nationals
 - 0.5 physician for every 1000 person
- 2022 41% are Saudi nationals
 - 2.8 physician for every 1000 of population
- Saudi Commision for Health Specialties
 - 28 residency programs
 - 111 fellowship programs
 - CanMEDS framework





The World Bank 2024 General Authority for Statistics 2022 SCFHS annual report 2023



The change: health care

- Life expectancy
 - 69 years (1990)
 - o 77 years (2022)
- Infant mortality rate
 - 44.3 per 1000 births (1990)
 - 6.7 per 1000 births (2022)
- Hospitals
 - 498 hospitals
 - 76,988 beds (225 per 100,000)
- And more and more...





The story starts from here

- Saudi Arabian Cultural Bureau est. 1978
- 40 different sponsors across Saudi Arabia
- >1000 medical trainees across Canada
- ~300 in UofT across most PGME programs







Why!

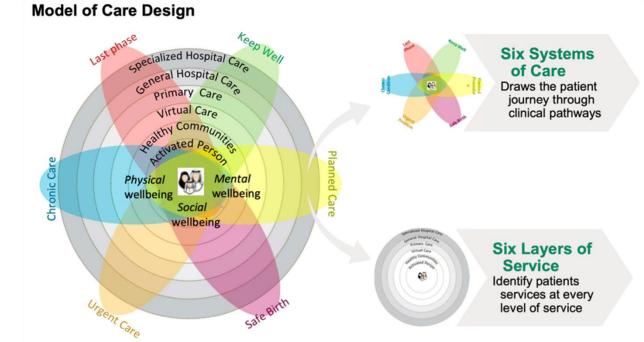
- High quality patient care
- Hands on leadership training LEADS framework
- Mentorship
- Research opportunities
- International collaboration and globalization of health care
- Diverse exposure growth opportunity





The future

- Vision 2030
 - Value based health care
 - Improve access to health care
 - Preventive care
- Success factors:
 - Involvement in leadership roles
 - Tailored mentorship towards specific goals
 - Flexibility in Clinical Fellowship structures







Thank you!















Accreditation Update

Dr. Linda Probyn

Director, Accreditation



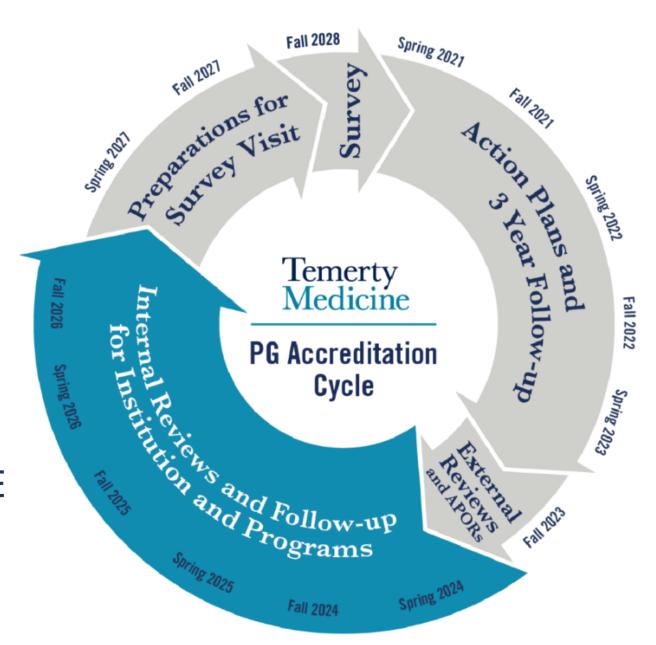


Temerty Medicine

Accreditation Update All PDs May 31, 2024

Dr. Linda Probyn
Director of Accreditation, PGME





Programs Requiring Follow-up From 2020 External Review

• APORs (14):

- Adult Nephrology
- Clinical Pharmacology and Toxicology
- Clinician Investigator Program
- Dermatology
- General Surgery
- Geriatric Psychiatry
- Obstetrics and Gynecology
- Institution

- Occupational Medicine
- Orthopedic Surgery
- Surgical Foundations
- Pediatric Neurology
- Pediatric Surgery
- Family Medicine Enhanced Skills
- Family Medicine CORE



Programs Requiring Follow-up From 2020 External Review

External Reviews:

- Neuropathology (RR)*
- Emergency Medicine (ER)*
- Psychiatry (RR)*
- Adult Neurology (ER)

External Reviews (NOI):

- Cardiology (Pediatric) (RR)*
- Internal Medicine (ER)*
- Anesthesiology (ER)*



Standards of Accreditation

General Standards of Accreditation for Institutions with Residency Programs

General Standards of Accreditation for Residency Programs

Version 1.1

Version 1.1

New Standards of Accreditation:

- Residency Programs: July 2024
- Institution: Pending





Specialty Committee Meetings

New in the Program Standards of Accreditation:

1.1.3.8 [Royal College Requirement]: The program director or delegate attends at least one specialty committee meeting per year in person or remotely.

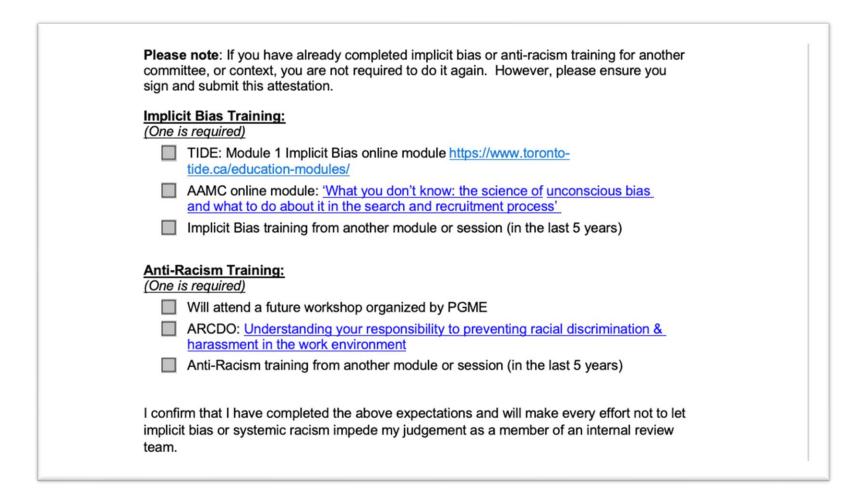
• PGME:

- Maintaining a list of specialty committee meetings with reminders
- Please contact us for information to assist with agenda items



Anti-Racism and Implicit Bias Training

Attestation Form:



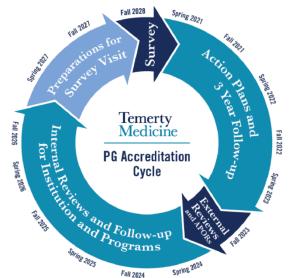


Internal Review Committee & Accreditation Team

The Internal Review Committee (IRC), Accreditation Team, (two subcommittees: (Family Medicine) FM-IRSC and (Areas of Focused Competence) AFC-IRSC), work to support programs and departments to meet the standards of accreditation, fostering a process and culture of continuous improvement, our goals:

- To prepare programs for 2028 accreditation survey
- Reduce workload where possible, for internal reviews
- Focus on ways to address areas for improvement
- Help programs address support concerns, and lack of resources



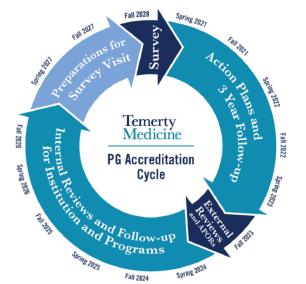


Internal Review Committee & Accreditation Team

2020 External Review Survey Results:

- Program Administrators spent on average of 57 hours preparing the Accreditation Questionnaire (AQ) for the accreditation survey
- Program Directors spent on average 85 hours preparing the AQ for the accreditation survey
- Including PGME time it took on average 164 hours to prepare an AQ
- 41% of Program Administrators said that preparing for accreditation significantly impacted their work (little to no time to perform other duties)





In the last cycle there was both a self study & an AQ

STANDARD 5: Safety and wellness is promoted throughout the learning environment.

Element 5.1: The safety and wellness of patients and residents are actively promoted. (Indicator page number(s) are listed below in blue)

	Requirement(s)		Meets	Partially Meets	Does not Meet	Findings	
5.1.1	Residents are appropriately supervised. (p.21)		x			We are working hard to ensure this consistently happens.	
5.1.2	Residency education occurs in a safe learning environment. (p.21-22)		х			We are working hard to ensure this consistently happens.	
5.1.3	Residency education occurs in a positive learning environment that promotes resident wellness. (p.22-23)		х			We are working hard to ensure this consistently happens. We have a robust Wellness Subcommittee.	

STANDARD 6: Residents are treated fairly and adequately supported throughout their progression through the residency program.

Element 6.1: The progression of residents through the residency program is supported, fair, and transparent. (Indicator page number(s) are listed below in blue)

Requirement(s)		Exceeds	Meets	Partially Meets	Does not Meet	Findings	
6.1.1	There are effective, clearly defined, transparent, formal processes for the selection and progression of residents. (p.23)	х				CaRMS selection has a clear and rigorous structure. We are using the Competence Committee now for promotion decisions.	
6.1.2	Support services are available to facilitate resident achievement of success. (p.23)	х				We have faculty mentors when required, academic advisors, site directors, chief medical residents and the	

c) Describe how the Residency Program Committee functions OR provide a copy of the Terms of Reference for the Committee (include name of attachment on page 1).

The Residency Program Committee (RPC) is responsible for the overall operations of the program (please see Appendix L) and therefore discussions and decisions occur about many aspects of the program. Discussions are open and collegial to allow for effective problem resolution and productive program review. All members are aware of the "Blue Book" (RCPSC Standards of Accreditation). All members have the opportunity to add items to the agenda for discussion. In addition, there are standing agenda items which include "Resident Forum" to allow the residents protected time to bring any issues to the committee they wish. Other standing items on the agenda include "CBC Update" and "Integrated Research Year (IRY) update" which occurs at each meeting. At the end of each meeting, all members of the committee are asked to communicate any important information to the groups they represent. Minutes are distributed to all faculty and residents. Minutes are circulated within 1 week of the meeting in most circumstances. Quarterly, the committee hears reports from the evaluation committee. All decisions by the RPC are reached by consensus.

The Program Director, Associate Program Director and Chief Resident attend Orthopaedic Council meetings (the Committee is chaired by the Division Chair and members of the committee include the Site Chief Orthopaedic Surgeons and Co-Chairs of the Research Committee). Any issues discussed at the Residency Program Committee level that need to be brought to the Orthopaedic Council are done so by the Program Director.

- d) List the subcommittees of the Residency Program Committee, if any, and describe the functions of each subcommittee **OR** provide a copy of the Terms of Reference for the subcommittees (include name of attachment on page 1).
 - a. The Resident Evaluation Committee meets quarterly and reports to the RPC. This subcommittee is also chaired by the Program Director, Dr. Peter Ferguson. The committee is responsible for reviewing the quarterly resident evaluations, for recommending remediation to the RPC, and for resident promotion.
 - b. The Research Committee reports to the RPC for research matters related to the residents. It is co-chaired by Dr. Cari Whyne and Dr. Diane Nam.
 - c. The Curriculum Committee is responsible for the organization of Orthopaedic Principles (OP) day (academic half day). It is chaired by Dr. Raj Rampersaud.
 - d. The Selection Committee is a subcommittee of the RPC that only meets during the resident selection process.
 - e. The Competency-Based Curriculum (CBC) Committee meets monthly, chaired by Dr. Markku Nousiainen, to review all aspects of the CBC stream. This committee reports directly to the Program Director and the RPC.



Introduction to Accreditation Program Evaluation (APE)

- We have reduced the amount of work through the Internal Review cycle
- Pre-populating your information from 2020 into the APE
- PGME will move information into Royal College Questionnaire for 2028
- Continuous Improvement -Standard 9

STANDARD 9: The residency program committee systematically reviews and improves the quality of the residency program.

Element 1.2: There is an effective and functional residency program committee structure to support the program director in planning, organizing, evaluating, and advancing the residency program.

Standard	Program Information	RPC Findings (M/DNM)	Review Team Findings (M/DNM)
Requirement 1.2.1: The residence in the residency program.	cy program committee structure is composed of appropriate individuals		
1.2.1.1: Major academic and clinical components and relevant learning sites are represented on the residency program committee.	See attachment # - RPC Terms of Reference See attachment # - RPC Membership List		
1.2.1.2: There is an effective, fair, and transparent process for residents to select their representatives on the residency program committee.			
1.2.1.3: There is an effective process for individuals involved in resident wellness and safety program/plans to provide input to the residency program committee.			
1.2.1.4 [Exemplary]: There is an effective process for individuals responsible for the quality of care and patient safety at learning sites to provide input to the residency program committee.	Exemplary Indicator, describe if applicable but not required.		
Review Team Findings:			



PGME Support

- Help programs prepare Accreditation Program Evaluation (APE) (self study):
 - Workshops (circulate recording of workshop & slides)
 - 1 on 1 program meetings
 - Prepopulate the APE (based on 2020 review and PGME templates)
 - Edit documents and move information into the Accreditation Questionnaire for 2028
- Help programs/departments address Areas for Improvement (AFIs)
- Support Program Directors and Program Administrators
 - (workshops, focused meetings, direct calls for support)

How many programs do we support?:

Royal College Programs: 76

Family Medicine: and Sites: 26

AFC Programs:15



Internal Review Process

- The expectation is that ALL programs (PDs or other education lead)
 participate in at least 2 internal reviews over the course of the internal
 review cycle (2024 2026)
- New PDs or education leads will be paired with experienced reviewers
- Help programs/departments address Areas for Improvement (AFIs)
- Valuable for own learning and PD development
- PGME: Support **Program Directors** and **Program Administrators** (workshops, focused meetings)

To accomplish internal reviews for programs, we require:

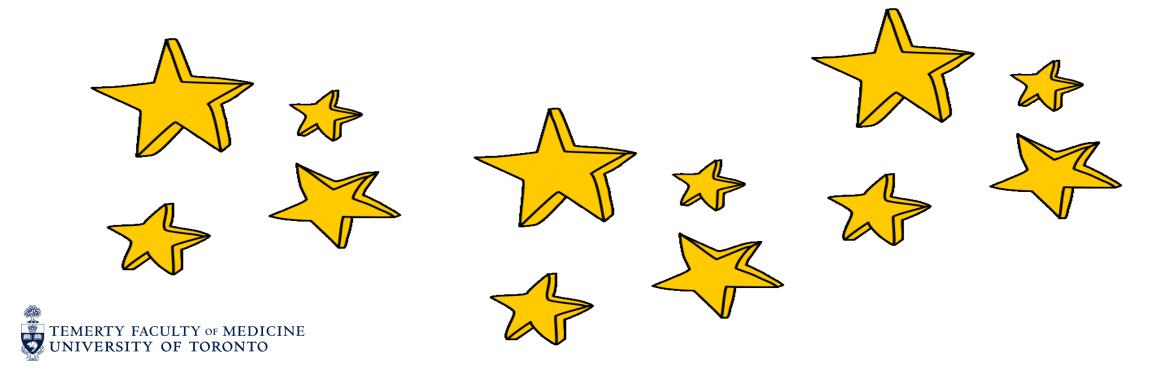
- Over 200 faculty reviewers
- 100 resident reviewers



Introduction to Accreditation Program Evaluation (APE)

• Internal Reviewers qualify for 15 credits (per year) under Section 2, peer review

https://www.royalcollege.ca/en/cpd/maintenance-of-certification-program/moc-framework.html





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Yasmine Ishmael



Kim O'Hearn



Nina Chana

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Dr. Mark Rapoport



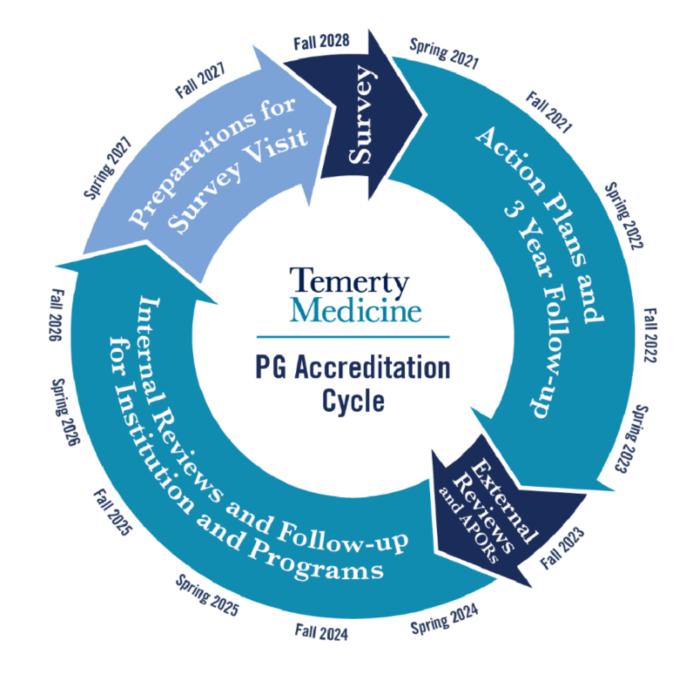
Dr. Hemen Shukla



Dr. Julia Alleyne



Questions?





Closing Remarks from the Associate Dean

Dr. Meredith Giuliani

Associate Dean, Postgraduate Medical Education Temerty Faculty of Medicine



