

FELLOWSHIP EDUCATION ADVISORY COMMITTEE
Minutes of April 9, 2019 Meeting
8:00 AM to 9:30 AM – PGME Boardroom A

Present:

Caroline Abrahams (PGME)	Dr. Linda Probyn (Director, Admissions & Evaluation PGME)
Dalia Al-Mouaswas (Ex officio; UHN)	Dr. Arun Ravindran (Psychiatry) *
Jessica Fillion (PGME)	Dr. Rayfel Schneider (FEAC Chair; Paediatrics)
Jennifer Fischer (Medicine)	Dr. Giovanna Sirianni (Family & Community Dr. Medicine)*
Dr. Karl Iglar (St. Michael's Hospital)	Dr. Salvatore M. Spadafora (Vice Dean, Post MD)
Cheryl Jaigobin (Medicine)	Shannon Spencer (PGME)
Dr. Zachary Liederman (Clinical Fellow)	Dr. Adrienne Tan (University Health Network)*
Dr. Helen MacRae (Surgery) *	Dr. Doreen Yee (Anesthesia)
Maureen Morris (PGME)	
Loreta Muharuma (PGME)	
Laura-Leigh Murgaski	

* By teleconference

Regrets:

Dr. Glen Bandiera (Associate Dean PGME)	Dr. Peter Chung (Radiation Oncology)
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1. Minutes of FEAC Meeting of October 30, 2018

Dr. Schneider confirmed the committee's acceptance of the draft minutes of the FEAC meeting of October 30, 2018. These will be posted on the FEAC website as final.

Action Items Update:

(a) Research Fellows and Clinical Fellows (R. Schneider)

PGME continued to follow up with the CPSO regarding delegation of controlled acts. The response from CPSO was shared with FEAC and included three main principles:

1. The primary consideration for the delegation must always be the best interests of the patient
2. The delegated act must be performed in a manner that is as safe and effective as if it had been performed by the delegating physician
3. The responsibility for the delegated act always remains with the delegating physician

It was agreed that this CPSO statement would be added to FEAC document as a footnote.

(b) WSIB

Shannon Spencer will continue the environmental scan about WSIB coverage for clinical fellows and will provide a report to HUEC when this is completed.

2. AFC Applications & (L. Murgaski)

Laura Leigh described for the Committee the process of review for AFCs. PGME provides background on applications and provides sub-committee review. The Hyperbaric Medicine Application has been reviewed by a sub-committee including Dr. Sirianni, Dr. Ravindran, Dr. Schneider and comments were sent to Dr. Spadafora. Laura-Leigh thanked the FEAC sub-committee for their review and feedback on the AFC application. They are currently waiting for a response from the Royal College. Laura Leigh also let the Committee know that the AFC application for Adolescent and Young Adult Oncology had been reviewed by a sub-committee and a response from the Royal College is pending. Dr. Spadafora reiterated that just as residency programs are peer reviewed, AFCs should similarly undergo robust review, and that the Chair of the Department must also support of the application.

Laura Leigh let the Committee know that a new AFC application has been sent for review and in the coming weeks FEAC members will be asked to be part of a sub-committee to review the application, prior to submission to the Royal College.

3. Fellowship Scan, Department of Medicine (C. Jaigobin)

Dr. Cheryl Jaigobin is the Director of Fellowships for the Department of Medicine, which has the largest cohort of fellows at the University of Toronto. The Department would like to learn about their fellowship programs, to ensure that standards for fellowships are being followed, and to highlight strengths and areas for improvement. The review began in December 2017 and will continue through to June 2019. There are 19 Divisions in the Department and one review was completed for each Division with the exception of Cardiology, Medical Oncology, and General Internal Medicine.

PROCESS:

They developed a Pre-Survey Questionnaire (PSQ) and Fellow Questionnaire. Letters were sent to each Departmental Division Director and Fellowship Director requesting that a PSQ be completed for each fellowship in their Division for academic years 2014-15, 2015-16, 2016-17 and 2017-18. Questionnaires were also sent to past and current fellows from 2014-present. Fellows could respond anonymously, if they wished. The PSQ consisted of the following:

- Goals and Objectives of the Fellowship
- Clinical/Research Expectations
- Educational opportunities
- Other scholarly activities
- Selection process

- Evaluations
- Working environment
- Ongoing review of the program

The Fellow Questionnaire consisted of the following:

- Application process
- Awareness of Educational Objectives
- Educational and Research Opportunities
- Supervision
- Evaluation
- Wellness
- Overall rating of the fellowship
- Any concerns (free text)

After the questionnaires were reviewed, meetings were organized as follows:

1. Formal fellowship reviews with Divisional Fellowship Directors, Supervisors and Fellows including external reviewers (1-2) from other Divisions in the Department of Medicine
2. Debrief meeting with the Departmental Divisional Director (DDD), Divisional Fellowship Director to discuss findings and recommendations.

Dr. Jaigobin noted that the opportunities provided from the review(s) were many including:

- Learning about the fellowships across the Department
- Letting fellows know that they have a voice
- Determining whether fellowship standards are being met
- Identifying strengths and areas of concern
- Meeting with DDD and Fellowship Directors to address concerns and make changes, but also highlight strengths
- Setting timelines for changes
- Introducing fellows to the Departmental Fellowship office

Dr. Jaigobin noted that there are many benefits of doing a robust review. She noted that there is a rich educational experience being offered in the Department of Medicine Fellowship Programs. It is important to devote enough time to do a robust review and to work collaboratively with hospital and university leadership in making changes.

Dr. Spadafora congratulated Dr. Jaigobin on such a robust review of the departmental fellowship programs. Several FEAC members indicated they were interested in reviewing the questionnaires that Dr. Jaigobin used in the review. Dr. Jaigobin mentioned she would be very happy to share the template and Shannon would share with committee members.

4. Update Saudi Sponsored Clinical Fellows (S. Spadafora)

Dr. Spadafora reviewed developments over the past three months, beginning with the initial statement by the Saudi Arabian Cultural Bureau on August 7, 2018 that sponsorships for all residencies and fellowships would be terminated by the end of summer; and including the Saudi Bureau's later confirmation on August 28, 2018 that all Saudi nationals in residency and fellowship programs may, at their option, remain in their programs at Canadian medical schools while those on a leave of absence may resume their training in Canada. Dr. Spadafora noted that the Royal Order from August had not yet been lifted. However, Saudi medical trainees already here can continue in their programs, but the portal for new applications has been closed. Dr. Spadafora thanked Faculty for their support of the Saudi trainees affected by the order.

Efforts to diversify the sponsored trainee cohort are being undertaken by the Faculty of Medicine.

5. Access to Primary Care for Clinical Fellows (R. Schneider)

The current information in the PGME Orientation Booklet on Primary Care needs updating. Dr. Heather Flett and Dr. Julie Maggi plan to attend the next FEAC meeting to discuss improvements to primary care access for clinical fellows.

Dr. Spadafora noted that since the change in the name of the Resident Wellness Office to the Postgraduate Wellness Office, the number of fellows attending this office has increased.

Dr. Schneider encouraged committee members to bring forward any issues they felt would be appropriate for the FEAC agenda. He also noted that the results from the Voice of the Clinical Fellows Survey should be available for the next meeting.

The meeting adjourned at 9:30 AM.