POSTGRADUATE MEDICAL EDUCATION ADVISORY COMMITTEE Minutes of Friday, January 27, 2012

Present:

C. Abrahams (PGME)
G. Bandiera (AD PGME)
R. Byrick (CPSO)
R. Fels-Elliott (PAIRO)
J. Goguen (Medicine)
K. Iglar (Fam Med)
J. James (MSH)

H. McDonald-Blumer (Int Med)

J. Maggi (SMH)
N. Marshall (PGME)
B. A. Millar (Rad Onc)
L. Muharuma (PGME)
G. Mukerji (PAIRO)
A. Pattern (PGME)

A. Rachlis (UG Clerkship);

S. Raphael (Lab Med) F. Scott (PH + PM)

S. Spadafora (VD PGME)

K. Somal (PAIRO)

J. Tepper (Sunnybrook) TC I. Witterick (Otolaryngology)

N. Wong-Chong (PAIRO)

Regrets:

A. Atkinson (Peds); S. Glover Takahashi (PGME); W-C Lam (Ophthalmology); M. Levine (Anesthesia); R. Levine (Surgery); D. McKnight (AD Eq + Prof); L. Probyn (Diag Rad); J. Rosenfield (VD UGME); H. Shapiro (Ob/Gyn); R. Schneider (Peds SS); N. Rosenblum (CIP); A. Zaretsky (Psychiatry)

Guest: Dr. Pam Catton, Chair, Board of Examiners Carolyn Kearns, Consultant

AGENDA/MINUTES

- 1. a) The agenda as circulated was approved, moved by I Witterick and seconded by H. McDonald-Blumer. The agenda was modified to allow Item #6 be presented first followed by Item #8a-d.
 - b) The Minutes of the November 18th meeting were accepted as distributed.

REGULAR UPDATES

2. Update from COFM, HUEC

- S. Spadafora reported the following items from HUEC:
 - The One-Mail rollout has been difficult and Discovery Commons and the Ministry staff are working on on-line registration and sign-off (instead of paper/fax submissions).
 - The Physician Assistant program now has a representative on HUEC...
 - The Blood Borne Pathogen procedural guideline is currently being reviewed and will be brought to PGMEAC after HUEC review
- S. Spadafora relayed the COFM update:
 - Blood Pathogen policies are being discussed and revised.
 - Currently residents receive disability letters while on extended or prolonged leaves from the PGME office which triggers the CPSO to issue their license despite in some cases the resident has not practiced in many years. An administrative solution is being investigated as opposed to modifying the Act.
 - The Thomson IMG report has been released. There are 30 recommendations regarding IMG allocation, application, and assessment. PG:COFM is reviewing and preparing its response re short and long-term remedies. Some recommendations are under CPSO jurisdiction.
 - There is no assurance the preceptor funding envelope will increase over last year.

3. Resident Issues

Safety guidelines are being evaluated regarding home visits for Psychiatry and Family Medicine residents as they are not clearly defined.

4. Internal Review Committee + Pre-Accreditation

Currently IRC is on schedule with the reviews and will formally wrap up the committee in April 2012. Approximately 1/3 are complete, 1/3 require more documentation and the remaining 1/3 require another review.

There will be 2 accreditation workshops held to prepare programs for 2013 accreditation; a half day in the Spring and a full day in the Fall.

Currently S. Spadafora and G. Bandiera are meeting with Department Chairs, Vice-Chairs and Program Directors to relay the department's strengths and weaknesses determined from the Internal Review process. UofT will be held to new standards in 2013 and these meetings are key in preparing departments for the new standards. PSQ's will be distributed by Labour Day.

An email was distributed to program directors requesting feedback on the proposed RCPSC/CFPC Accreditation Site Survey pilot project. This pilot project has been suggested due to 3 large accreditations scheduled back to back (UBC, UofT, McGill). With this new format, some departments may be exempt from an external review based on specified criteria.

S. Spadafora informed PGMEAC members that the report of the PGME A Standards External Review should be ready in March.

5. Policy Review Update:

- Safety, Intimidation & Harassment

The revised document will be distributed prior to the March PGMEAC for members to review, comment and discuss during the March meeting.

- Guidelines for Assignment of Postgrad Trainees

These Guidelines were discussed and approved at PGMEAC February 2011 with the stipulation to have HUEC review the document. HUEC reviewed the document and requested their proposed "referee" role be deleted. The numbering under section C will be revised. Suggestions from PAIRO, I. Witterick and H. McDonald-Blumer will be made and, with these changes, the document will be considered final.

6. PGME Strategic Plan – Discussion, Survey

Carolyn Kearns is facilitating the consultation phase of the PGME Strategic Plan. She has met various groups who interact with PGME for their feedback. Her goal is to determine themes, strengths, weaknesses, concerns, and initiatives from as many as possible. To date, C. Kearns has met with PGME Staff, MOH, COU, FOM leadership and several committees. A survey will be sent to PGMEAC members to obtain their input. A "town hall" event is also being arranged for additional feedback. C. Kearns spoke to the group summarizing her meetings to date. She has an understanding of the PGME strengths, the concerns/weaknesses and she has received several suggestions for initiatives to be implemented over the next 3-5 years. The draft plan is expected by June 2012.

7. Privacy Module

An on-line privacy module will become a registration requirement for all learners. It has been installed in POWER and will take effect July 2012. It was noted that completion of the privacy module is a minimum standard and some hospitals may still require a physical signature on a form attesting to patient and record confidentiality.

NEW BUSINESS

8. POWER Steering Committee Issues:

a. ITER Pass/Fail

Dr. Pam Catton explained the Board of Examiners Committee mandate. The BOE is a Faculty of Medicine committee that reports to Faculty Council. If a resident has a change in academic standing, they must be reviewed at the BOE and ensure due process regarding review of the ITERS and remediation has taken place. There have been issues in reviewing records where a "clear fail" has not been indicated by the program, and recommended that a statement/mark be noted on the ITER clearly indicating if the rotation is passed or failed. Ensuing discussion included comments regarding timeliness of the evaluation, difficulty separating professionalism issues from other areas assessed, and variations of what is considered a pass across programs. S. Spadafora thanked Dr. Catton for her presentation and the BOE concerns will be taken under advisement by the committee in its review of ITER minimum standards.

b. ITER Minimum Standards

G. Bandiera distributed a document on minimum standards. He stated that the movement to a 5-point scale had already been agreed upon and is being imposed by the PGME office on all new ITER forms added to POWER. On this scale, a 3 and above are clearly defined as a pass and 2 and below would be a fail, and a separate question of pass/fail would be removed.

In discussion, it was suggested that a pop-up window be added to inform the evaluator when they score a 1 or 2 e.g. "Do you realize you are failing this resident?" and a checkbox to confirm the Program Director has met with the resident and advised him/her of the fail. This system would be in effect going forward, not revising past ITERs. Timing would be imperative with completing ITERS and a deadline would be imposed to ensure residents are not informed of the failure months after a rotation is completed.

Currently the ratings vary across programs. There was discussion on rating professionalism vs skills and the need to have ratings clearly defined. G. Bandiera noted that implementing this system will slowly change the culture and encourage programs to bring residents to BOE earlier.

The document will be redistributed to the PDs/ all RPCs for feedback including wording around pass/fail and other items.

c. Confidentiality Statement

The confidentiality statement was previously discussed at the September 2011 PGMEAC meeting. It has since been modified and clarified to be clear and transparent for all teachers and residents. The key message is the evaluation is confidential but not anonymous. The document has been vetted by the FIPPA officer, EduDeans, the Dean and the UGME Curriculum Committee. The document provided showed the track changes and once approved will be uploaded to POWER. The Confidentiality Statement was approved; moved by I. Witterick, seconded by H. McDonald-Blumer. It was approved by those present, with one abstention.

d. Clerk Evaluation of Residents as Teachers

G. Bandiera explained the MedSIS regarding Clerk evaluations and importing into POWER. MedSIS has a drop-down list for clerks to select the resident who have supervised them. The residents on rotation at that time are on a short list, although all others can be accessed by starting to type their name. Once the clerk completes the evaluation of the resident in MedSIS, this information will be reported in POWER in the resident account as well as the Program Director. The resident will only see the evaluation if a minimum of 3 have been completed. This process tracks resident activity

and allows for anonymity of evaluator. With a score of 2, an alert will be sent to the Program Director and the UG course director. J. James suggested implementing an additional field on the form to indicate the type of interaction to allow for further analysis. She also proposed adding this field to teacher evaluations. The suggestions presented will be taken to UME for further discussion/implementation.

OTHER BUSINESS/INFORMATION

9. Release of Program Director Reports

Program Director reports were distributed to program directors for 2010/11. It was noted that the data in the reports reflect that program's learners ie. surgery residents doing surgery rotations. G. Bandiera will be forwarding the reports to the chairs with comments and suggestions.

10. Program Admin Appreciation Day, March 1, 2012

The Program Administrators Appreciation Day will be held March 1st at the Metropolitan Hotel. The day will consist of a luncheon, speakers and program development for fellowship and residency coordinators and family medicine site administrators.

- 11. The CPSO is reviewing its Changing Scope of Practice policy. A discussion of the policy and reasons for change, and input to the consultation process will be reviewed at the next meeting.
- 12. The Program Directors Appreciation Dinner will be held at Sassafraz Restaurant on March 7.
- 13. A Strategic Plan Retreat may be held at the next All PDs in June.

The meeting was adjourned at 2:30 p.m.