

POSTGRADUATE MEDICAL EDUCATION ADVISORY COMMITTEE
Minutes of Friday, September 20, 2013

Present:

C. Abrahams (PGME)	J. James (MSH)	L. Muharuma (PGME)
A. Atkinson (Peds)	M. Levine (Anesthesia)	K. Pardhan (PARO)
A. Bacher (PARO)	J. Lloyd (Ophthalmology)	L. Probyn (PGME)
G. Bandiera (AD PGME)	J. Maggi (SMH)	J. Robertson (Edu Deans)
P. Campisi (Otolaryngology)	H. McDonald-Blumer (Core IM)	F. Scott (PHPM)
L. Fechtig (Edu Deans)	D. McKnight (AD Eq & Prof)	S. Shachar (Lab Med)
M. Fefergrad (Psychiatry)	R. Levine (Surgery)	S. Spadafora (VD PGME, Chair)
S. Glover Takahashi (PGME)		D. Steele (ObGyn)
K. Iglar (Fam Medicine)		

Regrets:

S. Bernstein (UG Clerkship); R. Byrick (CPSO); J. Goguen (Med SS); B. A. Millar (Rad Onc)
N. Rosenblum (CIP); J. Rosenfield (UG Dean); R. Schneider (Peds SS); Jonathan Kronick (HSC)

AGENDA/MINUTES

1. a) Dr. Spadafora welcomed new members of the Committee.
- b) The agenda was approved as circulated.
- c) The minutes of May 24, 2013 were accepted as distributed.

REGULAR UPDATES & FOLLOW-UP

2. Update from COFM, HUEC

COFM:

Pause on Specialty Expansion positions

Dr. Spadafora reported that our 5-year phased expansion of new specialty positions was paused by the Ontario Ministry of Health. Of the 26 in the plan, 9 positions had actually been added to CARMS – 3 in 2011-12 and 6 in 2012-13.

The Quotas Allocation Committee will be meeting shortly to discuss the 2014 CARMS allocation and this will be voted on at the October PGMEAC meeting.

Until we hear further from the Ministry, Dr. Spadafora noted that programs may want to consider accepting additional visa trainees to maintain programs and services.

HUEC:

- a) The Vulnerable Sector Screen Working Group of HUEC was formed and reviewed current practices and procedures at the hospitals. A draft report was prepared but a further review by the Associate Vice Provost, Health Sciences Policy and Strategy will be required to ensure compliance/coordination with other university processes and programs. This item will be noted for follow-up at a future meeting.
- b) The e-learning modules on sharps and hand hygiene will become part of the PGME registration requirements, similar to the privacy module. HUEC agreed that trainees would only have to complete the modules every two years, not necessarily tied to their registration date or academic session.

3. Resident Update

The name of the PAIRO organization has changed to the Professional Association of Residents of Ontario (PARO), eliminating Internes.

The General Council election took place in August, and the Toronto representative is Dr. Jenny Laidlaw.

S. Spadafora complimented PARO on the feedback they provided during the Accreditation process.

4. Accreditation Follow-Up/Next Steps

G. Bandiera reminded members that the Joint CFPC-RCPSC Chairs report on Accreditation had been distributed. It listed many strengths and a few areas of concern.

For Family Medicine, the April preliminary report from the Accreditation team indicated there was to be a focused review. The decision of the CFPC Accreditation Committee for both the 2-year program and Enhanced Skills was: Accredited - Follow-up in 2 years.

The Palliative Medicine Conjoint Program received the status of Accredited: follow-up at the next regular survey.

Of the 72 specialty programs, 8 were excluded from the Accreditation process as they had either just had a review recently, were inactive, or in transition. 23 programs submitted all of the documentation to the College, but were not selected for an external survey. Of the remaining 64 programs, 3 were recommended for Internal Review follow-up and 2 for External Review. The Accreditation Committee will make the final decision at its meeting in October 2013.

The areas of concern (simulation, program support, inter-functionality across sites, PGCorEd) were reviewed, and jurisdiction was identified. A Task Force will be formed to investigate Program Support, with a view to preparing guidelines on minimum program support based on size, complexity and a recommendation on protected time within an accountability framework. Other recommended jurisdictions and actions were noted on the slides (see attached). An additional issue identified was Teacher Evaluations regarding the need to amalgamate evaluations from a variety of programs to obtain a full picture of a faculty member's teaching portfolio.

5. Policy/Guidelines/Consultation:

a) **Vulnerable Sector Screen/Police Check:** deferred to future meeting when report is available

b) Best Practices on Admission & Selection (BPAS) Report

The BPAS report – distributed to the members in May – was presented by G. Bandiera via a slide show highlighting changes made since the draft version. Three items were added under Transparency on how to deal with information regarding a trainee which was not in the application, and a file retention policy. Under Fairness, it was noted that files should not be given to the interviewers. On #21 Ranking, it was confirmed that improper behaviour should be reported to the Selection Committee.

Comments will be updated in the final version of the report. A vote was called to accept the Report, with revisions identified on the slides and those made at this meeting. H. McDonald-Blumer made the motion to accept the report, seconded by R. Levine. All approved.

6. 13-Block rotation schedule – Coordination

H. McDonald-Blumer indicated that there were still some issues with the coordination of schedules with Medicine as some programs are not on the same rotation schedule and have issues with residents leaving a rotation early or starting late. S. Spadafora noted that during the transition, it will not be perfect but will be a work in progress. It was agreed that when you are hosting a trainee, your program would have a “say” in the timing. The biggest issue is patient safety during the first of the month and a Saturday start. Call was also identified as a problem with the differences in rotation dates, with random start and stop dates in the same site. The goal is that all should switch at the same time, but as a best practice, the “host” will tell the trainee the start date and time, and the trainee must agree to this.

It was noted that Ontario schools have already posted their rotation dates for 2014-15, with a Tuesday turnover date.

S. Spadafora recommended that each program take this issue back to their program committees and look at their program requirements to see how they might fit in the schedule. And in the spirit of cooperation, seek to move towards an integrated schedule. We will re-visit the issue after programs have had an opportunity to revise their start and end dates, if possible. We will compile the start and end dates of each program and publish.

7. Call Stipends – deferred to the October 25th meeting.

The meeting adjourned at 2:30 pm.