

POSTGRADUATE MEDICAL EDUCATION ADVISORY COMMITTEE
Minutes of Friday, November 27, 2015

G. Babcock (PGME)	M. Fefergrad (Psychiatry)	C. Moravac (PGME)
G. Bandiera (Assoc. Dean) (via t/c)	J. Goguen, (Med Sub-Spec)	M. Morris (PGME)
M. Bechard (PARO)	R. Levine (Surgery)	L. Muharuma (PGME)
C. Bernard (Family Med.)	J. Lloyd (Ophthalmology)	B. Pakes (PGME)
I. Brasg (PARO) (via t/c)	J. Maggi (SMH)	L. Probyn (PGME)
P. Campisi (Otolaryngology)	H. McDonald-Blumer (CoreMed)	G. Salmers (PARO)
K. Dong (PARO)	B. A. Millar (Rad Onc)	D. Steele (ObGyn)
K. Eadie (PGME)		

Regrets:

A. Atkinson (Core Peds), E. Bartlett (Diagnostic Radiology); S. Bernstein (UG Clerkship); A. Freeland (Associate Dean); K. Iglar (Family Med); J. James (Mt. Sinai); J. Kirsh (CPSO), J. Rosenfield (UG Vice Dean), S. Sade (Lab Med)

AGENDA/MINUTES

1. a) Agenda approved as circulated.
- b) Minutes of September 25, 2015 meeting were approved with one exception, in Section 9, last sentence, "M. Bechard said she has had students express their excitement around this initiative", 'students' to be replaced with 'residents'.

REGULAR UPDATES & FOLLOW-UP

2. Follow-up from previous meetings (G. Bandiera)

Dosimeter Issue Update

Hospitals are responsible for tracking dosimeters for all health care workers in radiation-exposed areas. There is a province-wide system which uses the Social Insurance Number (SIN) to track users/learners. There were issues with the dosimeters and data collection at St. Michael's Hospital identified by residents which were jointly resolved and a plan implemented. Institutions needing a plan or advice on radiation exposure recording for learners, can contact Patricia Houston (houstonp@smh.ca) or Julie Maggi (maggij@smh.ca).

Quotas Allocation Committee Meeting

G. Bandiera reported that the Ministry provided written approval of the province-wide plan for a reduction of 25 residency positions. There will be (9) nine cuts of CMG spots across UofT programs for CaRMS 2016. Discussions within the Ministry regarding 2017-18 reductions, if any, are ongoing.

Resource Stewardship Workshop

Resource Stewardship is part of the "Leader" role within the CanMEDS framework. Drs. Anne Matlow and Brian Wong recently facilitated a workshop which provided tools and a lot of great ideas for teaching resource stewardship. Please contact Dr. Matlow at anne.matlow@utoronto.ca to learn more about Resource Stewardship and the Choosing Wisely initiative.

Rotation Dates to 13 Block Schedule/System

The 13-block schedule changeover dates for 2016-17 set by the Dept. of Medicine are of interest to other departments. Dr. McDonald Blumer indicated that Medicine dates are coordinated with other Ontario schools. There was discussion regarding the PGME standardizing and publishing the rotation schedule. It was agreed that PGME will send the 2016-17 changeover dates set by Medicine to all departments. Starting in 2017-18, PGME will set the dates. Starting rotations on Tuesdays vs Mondays may present issues. PARO will review with its constituents the efficacy of a Monday or Tuesday start day and provide input for the 2017-18 schedule. The topic will be an agenda item at the February meeting. Members were asked to communicate any concerns they may have to Dr. Bandiera.

3. Council of Ontario Faculties of Medicine (G. Bandiera)

Vulnerable Sector Screen (VSS)

2015/16 was the first year UofT required a Vulnerable Sector Screen for all new trainees for Canadian citizens/permanent residents. New international medical graduates on work permits were required to complete an on-line attestation and will be required to obtain a VSS from Toronto Police Services upon next year's renewal. The CPSO still requires a Criminal Record Check but accepted the VSS for UofT trainees to avoid duplication. This process went smoothly and most residents were able to register on time.

MCCEE

The Medical Council of Canada will replace the MCCEE with the MCCQE1. The exam will be on-line and therefore made available to all applicants. There are concerns regarding a Canadian content bias for IMGs. The MCC has assured that these concerns will be addressed before the merging of the exams takes place in 3-4 years.

Resident Leadership Activities

PARO members at PGE COFM advocated for recognition and support of residents' leadership activities. There are no formal time blocks in programs slated for involvement in committees, retreats and organizational activities. G. Bandiera indicated that time away from scheduled clinical training/shifts/call depends on the nature of the rotation and the competency level of the resident. Program committees decide and monitor these types of activities, which makes it easier to implement and validate.

Return of Service (ROS)

R. Levine asked about the ROS obligations of International Medical Graduates if there are no jobs in Underserved Areas. Some IMGs also enter fellowships delaying their ROS. G. Bandiera stated that the contract is between the Ministry of Health and the trainee, and changes in government's planning may result in practice location or re-payment. M. Bechard stated that PARO has also received many questions about Return of Service and prepared a "Top 10 Return of Service Q&As" with Ministry contact information.

CAHO & Competency Based Education

The Council of Academic Hospitals of Ontario indicated that their representatives will be attending PG COFM meetings to gain a better understanding of CBE and implementation issues.

4. Resident Update – PARO (M. Bechard)

A number of residents found that the PGCorEd modules were not available for the PGY1 year, but will be released in January 2016. M. Bechard asked how many and which modules must be completed by the end of Year 2 and what is the communication on this. L. Probyn indicated we will look into the issue, send the notice and report back.

M. Bechard reported on activities in which the Association has been involved such as the resource document for IMGs, a quarterly newsletter, networking events such as socials and movie nights, and a Wellness and Resilience review. Contract FAQs and a copy of the PARO-CAHO Agreement are now on the PARO website. On the Wellness & Resilience review, the questionnaire was completed by PARO reps and covered questions on academic half-days, residents as teachers, and wellness-resilience training. This was completed by UofT reps but may be extended across the province. The intent is to learn and share best practices. R. Levine asked if the committee could see the questionnaire and anonymized comments. M. Bechard will report back to members at the next meeting on this request.

On the question of wellness programs such as yoga, it was noted that capacity is an issue – with entry not available until next Fall. L. Probyn will investigate the access issue and report back.

At the PARO General Council meeting, provincial concerns regarding the new Graduate entry program were discussed as FM resident graduates are concerned with restrictions on the first 3 years of practice regulations on wages and supervision. A meeting with the Ontario Ministry of Health has been organized with the hope that some elements of the plan can be changed.

5. Internal Review Committee Update (L. Probyn)

L. Probyn reported that we are almost half-way through the accreditation cycle. In January 2016, Family Medicine internal reviews will begin. In September 2016 there will be a follow up of internal reviews and, as a result, reports will be updated and, in September 2017, preparations for 2019 will begin. She indicated that with the asynchronous roll-out of Competency Based Education and a new accreditation model, PGME and programs will have to be flexible.

6. Competency Based Education (CBE) (L. Probyn)

PGME is publishing a newsletter regarding CBE which will provide information and updates and also be available on the PGME website. The newsletter will go to Program Directors and Chairs and they will be encouraged to distribute it widely. If members have items which they feel should be communicated/shared with our community, please submit to us. PGME is working closely with the Royal College on the Competency By Design model.

Best Practices in Evaluation and Assessment (PBEA) Working Group (L. Probyn)

L. Probyn reported that a working group on evaluation and assessment is being formed and asked for volunteers. PARO indicated its interest in membership. The report will go to the Board of Examiners and the PGMEAC. It is hoped that a final report on best practices will be prepared by Fall 2016 for use by Program Directors.

7. Policy/Guidelines: Guidelines to Request an Extension for a PEAP or AVP (M. Morris)

There have been a number of questions from programs and requests for extensions.

PEAP Extension: The Pre-Entry Assessment Program 4-12 week period covered by the CPSO license. A request may be made for an extension of up to 4 weeks. The College requires a letter from the PD outlining reason for extension request, a letter of support from the Associate Dean (PGME) and a revised letter of appointment (PGME). Included in the letter are reasons why more than the 12 weeks is needed for a full and fair assessment, such as illness of trainee or temporary unavailability of the supervisor, but not remedial purposes.

AVP Extension: An additional 12 weeks, beyond the original 12 weeks can be requested. The first 6 week extension is processed at the CPSO staff level and the second 6 week extension requires review by the CPSO Registration Committee. Program Directors are recommended to request the full 12 week extension to avoid any break in training. The “extended” AVP can end sooner if resident is successful. For the extension, the requirements are: a detailed AVP report, a letter from the Program Director outlining reason for extension request, including remedial plan and a revised Letter of Appointment (PGME). An extension for remedial purposes is acceptable

NEW BUSINESS

8. National Transfer Guidelines (M. Morris)

The final version of the National Transfer Guidelines was approved by the national PG Deans committee on November 26, 2015. The main difference from previous procedures is that the resident must inform his/her home school PGME office of the transfer request which will be forwarded to the desired school. The desired school will inform the home school PG office of availability/capacity which will be communicated to the resident. The resident will provide the home school PGME Office with consent to release ITERs, record of leaves, remediation/outcomes, etc. to the desired school. In all cases, funding must be confirmed prior to offers being made.

Internal Transfer Requests:

The timetable for transfer requests is the same as previous years: The email request to PGY1 and PGY2 residents is sent in January with a January 31st deadline. Requests are sent to Program Directors in February and programs will review/interview candidates and respond to PGME by the end of the month. Funding decisions and confirmation of internal transfers will be made by the PGME Office in March. Funding cannot be transferred to other schools. Approvals may be dependent on transfers to other programs such as a transfer from a specialty program to Family Medicine. As the process is to remain confidential until an offer is made/resident consent is provided, it was acknowledged that some programs are advised late into March that a resident will be exiting.

Intraprovincial Transfer requests are reviewed after CaRMS second iteration (April 12, 2016).
Interprovincial & US Transfer Requests are reviewed after intraprovincial transfer requests.

Some programs wish to review all of the transfer requests at one time. These arrangements will be made individually with programs and Dr. Probyn. It was acknowledged that such off-cycle arrangements may disadvantage internal transfer requestees who have made multiple transfer requests.

M. Morris – any resident in training is able to enter the 2nd CaRMS. Some trainees use that as a means to transfer. There is also Re-entry, practicing physicians coming back in for retraining; and, Repatriation, Canadians trained in the U.S. who require additional training to write the RCPSC exam.

B. Pakes requested transfer statistics for the last few years.

9. 2016-17 Re-appointments (M. Morris)

M. Morris sent Program Directors and administrators an email regarding the reappointment period from Nov. 30, 2015 to Feb. 26, 2016. Program Directors are asked to review the resident's record of leaves, remediation etc. to ensure correct progression to date. It was noted that CIC is reporting an average processing time of 118 days (about 4 months) for work permit renewals via paper and 110 days online. Programs must therefore re-appoint by January on-time renewal for July permits to get them through for July 1st, as there will be a greater delay in processing. There will be an *Administration Information Session* on reappointments next week.

10. BPAS, NAC-OSCE

L. Probyn – regarding CaRMS file review, files are already available, but by December 1st Programs will have all the documents. She brought members attention to the November 6th email which was a reminder to review the Best Practices on Admissions and Selection report, the NAC OSCE scoring and electives. (see attached)

The meeting adjourned at 2:30 p.m.