

Postgraduate Medical Education Advisory Committee (PGMEAC)

Friday, March 23, 2018 12:30 – 2:30 pm 500 University Avenue; PG Boardroom A

MINUTES

Attending: B. Abankwah (PAAC), A. Atkinson (Core Peds), G. Bandiera (AD PGME), M. Bell (CPSO – via TC), S. Bernstein (UG Clerkship – via TC), P. Campisi (Otolaryngology), R.J. Cusimano (Cardiac Surgery), L. Erlick (Dir. UG & PGME, TSH via TC), M. Fefergrad (Psychiatry), S.Glover Takahashi (PGME), J. Goguen (Int Med), H. Hussein (PARO), M. Hynes (PGME), R. Levine (Surgery), J. Lloyd (Ophthalmology via TC), J. Maggi (PG Wellness via TC), A. Matlow (PGME), M. Morris (PGME), S. Murdoch (DFCM), L. Muharuma (PGME), L. Murgaski (PGME), B. Pakes (PHPM), L. Probyn (PGME), S. Sade (Anatomical Path via TC), S. Spencer (PGME), C. Whyte Ulysse (PARO)

Regrets: L. Bahrey (Anesthesia), E. Bartlett (Diag Rad), A. Bezjak (Rad Onc), R. Chen (CIP), M. Farrugia (ObGyn), A. Freeland (VP Education THP/AD Med Ed Regional), P. Houston (UG Vice Dean),), K. Iglar (Dir. PGME, SMH), J. James (VP Educ Sinai Health System), R. Schneider (Peds Sub-Spec), E. Yu (Med Sub-Spec)

Guest: Dr. J. Ferenbok, Director, Translational Research Program

AGENDA/MINUTES

- 1. a) The agenda was approved with two additions: CMPA Symposium dates and the Valuing Clinical Teachers study chaired by Dr. Arno Kumagai, which was presented at HUEC in January. The item order was also revised: #11, Global Health Day was moved to first on the agenda.
 - b) Minutes of the Friday, February 23, 2018 meeting were approved as circulated.

G. Bandiera welcomed committee members to the meeting, and provided a brief roll call of representatives at today's meeting, including those joining via teleconference.

2. Translational Research Program

J. Ferenbok gave an overview of the Translational Research Program. It is a M.Sc. program in the graduate unit designed for students who want to build on scientific discoveries to introduce, test and evaluate problem-solving designs that improve people's health. The program is 2 years. The first year consists of courses Tuesday and Thursday, leading to a "capstone" project – a collaborative translational project where student teams address real-world health needs and leverage resources of hospitals and the university to achieve their goals. Projects are supported and facilitated by TRP faculty, a Course Director(s) and a Project Advisory Committee. Classes are Tuesday and Thursdays in the first year between 1 and 7 p.m. The program is very flexible and therefore very attractive to medical residents. Dr. Ferenbok left brochures and encouraged members to review the website at https://trp.utoronto.ca

MATTERS ARISING/REGULAR UPDATES & FOLLOW-UP

3. Follow-up from previous meetings

The Academy of Resident Teachers (ART) proposal was reviewed by members and comments collected and forwarded to the program planning committee. Most of the comments were related to concerns

with time spent away from residency training and formal recognition of the work, and rating sites. It was noted that PARO also offers a half-day workshop for residents called *Teaching to Teach*, which is available to residents from all universities and programs to provide them with a minimum standard of teaching skills to carry out their role as teachers successfully. G. Bandiera thanked everyone for their input and stated that our comments would be forwarded to the ART program planners.

4. Resident Report

Four items were reported: 1) a financial program called Tax Talk is offered by PARO; 2) a PARO rep will be speaking at the PGY1 Orientation reception on June 28thand a PARO social event will follow. 3) a full General Council meeting will be held today to elect next year's president; 4) Call Room Issue: PARO was heartened to hear that Sunnybrook has pledged funding for new call rooms, while issues at SMH and MSH are ongoing re call rooms that are difficult to access. It was noted that appropriately equipped facilities for breast-pumping have been requested. A. Atkinson has information on that topic and will bring it to the next HUEC meeting.

5. Postgraduate Administrators Advisory Committee (PAAC) Report

B. Abankwah shared that the Program Administrators Appreciation Event will be moved to June. The PAAC Award nomination forms will be sent out shortly.

6. Updates from COFM, HUEC

COFM

- G. Bandiera noted that Bill 148 Fair Workplaces, Better Jobs Act resulted in many changes to the Employment Standards Act (ESA) such as minimum wage, sick leave entitlement, etc. The previous ESA allowed for 10 unpaid days off due to illness, injury and emergencies. With the changes, two of those days will now have to be paid. If an employee's collective agreement provides a greater right or benefit than the ESA's personal emergency leave standard, then the terms of the contract will apply.
- The unmatched students were discussed. The MOHLTC is discussing the issue internally. For any additional positions, a Return of Service will be applied. The Department of National Defense is also considering its options and funding.
- The MOHLTC is now less restrictive with their enforcement of the Return of Service and repayment requirements for IMGs, allowing residents to work in urban areas and a commit to work at least 20 hours in an Underserved Area. Health Force Ontario will assist the IMGs with the new requirements.

HUEC

- The Faculty Strategic Plan is still being developed with external consultants.
- The unmatched students continue to be a topic under discussion.
- The common badge issue was discussed. There seemed to be interest from the hospitals. L. Erlick confirmed that the issuing of badges is a problem at multiple sites even at 3 different campus site. The topic will be raised again a future meeting.

7. Internal Review Committee (RC)

L. Probyn presented the current status of the IRC activity (see slides). She indicated the new Institutional accreditation standards will be presented at the All Program Directors meeting on May 25th. G. Bandiera noted that an internal review of the PG Office according to the new standards has been scheduled for November. The results will guide us to preparedness for the 2020 external review.

8. CBME and BPEA

G. Bandiera and S. Glover Takahashi presented 5 documents for approval prepared by the BPEA Working Group to assist programs in CBME implementation. The documents provide templates and guidelines for the creation of Competency Committees, selecting assessors, providing timely assessment and feedback, disclosure of learner needs, and consideration of resident self-assessment. The documents were approved by the members in attendance. Discussion points/questions raised are listed after each of the documents as noted below:

i) Competence Committee Minimum Standards

- Evaluation is a Faculty responsibility so membership excludes residents. It was noted that CCs may have a non-voting resident member in a senior or chief role
- Some RPCs already have a remediation/promotions/evaluation sub-committee which may be reconstituted to a Competence Committee

ii) Appropriate Disclosure of Learners Needs.

- Regarding whether Entrada will allow the preceptor to see the ITER of a previous rotation, it will be up to the RPC to document the process and content of what will be shared with faculty members of the next or future rotations – whether in the same discipline or off-service
- programs must apply the policy/guideline and not take action for an individual trainee
- Faculty and residents have an obligation to report patient safety and professionalism issues
- on the legality of sending resident assessments to other faculty members, the process must meet privacy standards but again, the RPC must approve the "processes for assessment data/report(s) to be shared to meet the educational needs of a resident and/or to ensure patient safety"

iii) Timing and Processes for CBME Workplace Assessment

- immediate assessment and feedback is ideal the recommendation in the document is within 48 hours of the observation
- there is no time stamp on unsuccessful or successful completion of an EPA
- there will be no email or other reminders to faculty to complete the assessment. The expectation is that residents will initiate the evaluation immediately after successful completion of the EPA

iv) Guidelines for Selection of Assessors/Raters in CBME

- The percentage of CBME workplace assessments to be completed by appointed faculty was changed to greater and or equal to 50 (>=50) in the document. Other assessors (fellows, co-residents) may assess "when deemed appropriate to the assessment activity"
- Resident orientation development as well as faculty development will be required to successfully implement CBME. G. Bandiera noted that we are developing some central resources available to ALL assessors
- It was noted that number of assessments completed by a faculty members should be monitored/recorded for promotion/awards or other recognition

v) Guidelines for the use of Resident Self-Assessment in CBME Assessment Programs

- The distinction between self-assessment and self-reporting was discussed. Some degree of guided self-assessment should be developed in residents and fellows
- Self-assessments are not appropriate for decisions of the Competence Committee
- Residents can complete their field notes and log reports, and these are appropriate for inclusion in the decision-making as the activities can be verified by other sources

9. Policies/Guidelines

L. Muharuma highlighted the comments received on the Transfer Guidelines. The document was accepted by members with the relevant edits and the final version will be posted on the website.

NEW BUSINESS

10. Advanced Cardiac Life Support (ACLS)

Currently, the PG Office reimburses residents or the centres where the residents take their first ACLS training. If the program requires the resident to obtain re-certification, the program will pay for the course/reimburse the resident. If the hospital requires it for entry to a rotation, the hospital will pay for ACLS training.

11. Global Health Day – B. Pakes

B. Pakes is the Academic Lead for Global Health at PGME. He informed members today was World TB Day. He presented an outline of the Global Health Education Initiative – a program for residents delivered via in-classroom modules by a variety of faculty and field experts. Classes are Tuesdays and Thursday evenings offered over a 2-year period. Over 100 faculty members are involved in the programs. There are usually 40 new resident registrants annually. The Global Health program also provides pre-departure briefings to residents undertaking international electives and the GH Education Committee reviews applications for the Robert Sheppard Award for Health Equity and Social Justice and the PGME Social Responsibility Award. Judy Kopelow is the Manager, Global Health Programming and Strategic Initiatives and organizes the PG Global Health Day. This year, the event will be held on Thursday May 31st at the Li Ka Shing Knowledge Institute at St. Michael's Hospital from 12:30 to 5:00 pm, including lunch. Presenters and moderators include Nobel Peace Prize winner Setsuko Thurlow, former Premier Bob Rae, Ontario Regional Chief Isadore Day, Wendy Lai, President MSF, and many others. All members are urged to attend and also encourage residents to attend.

12. All PDs Agenda

G. Bandiera encouraged all PGMEAC members to attend the year-end All Program Director and FM Site Director meeting on Friday May 25th. Dr. Whiteside, former Dean will be giving the annual Mickle address, and awards will be presented.

13. 2018-19 PGMEAC Meeting Dates – were circulated.

14. Date of Hospital Orientation

The hospital orientation date for incoming PGY1s will be the first working day after July 1st.

15. CMPA Symposium Dates

2018

Tuesday, November 6th – Specialties Thursday, November 8th – Specialties **2019** Tuesday, March 5th – Specialties

Wednesday, March 6th - Specialties

16. Valuating Clinical Teachers - topic was deferred

The meeting was adjourned at 2:35 pm