

The 'Old' Office of Resident
Wellness:
Update for PGMEAC

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Announcing....!!!!

Our New Name!

Postgraduate Wellness Office

“Serving Residents and Clinical Fellows”

Offering the ‘Healthy Docs Curriculum’

We have expanded our staff

- Julie Maggi – Director
- Heather Flett – Associate Director
- Anita Gupta – Counsellor/Education consultant
- Chris Trevelyan – Counsellor/Education consultant
- Diana Nuss – Admin assistant

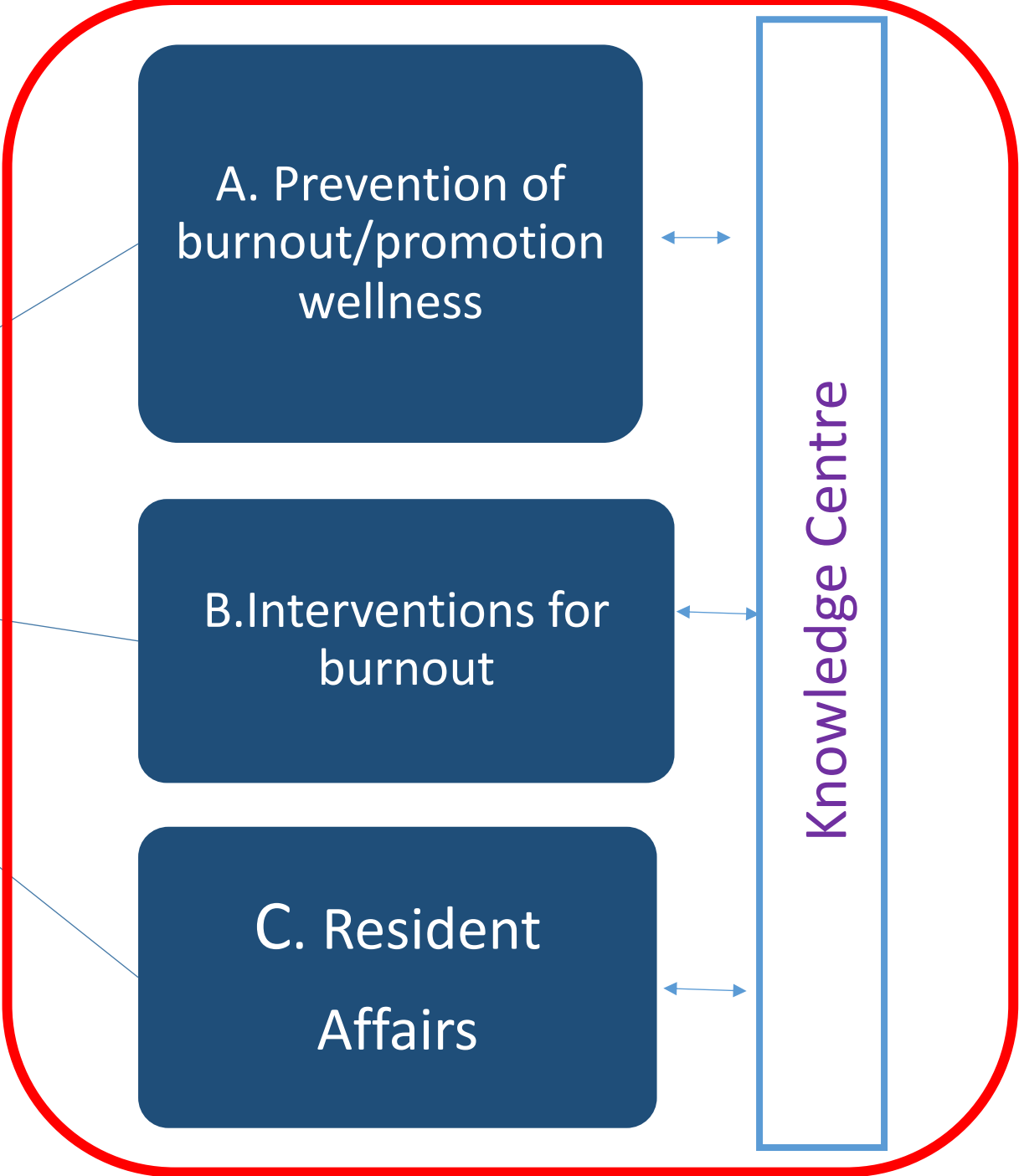
PG Wellness

A. Prevention of
burnout/promotion
wellness

B. Interventions for
burnout

C. Resident
Affairs

Knowledge Centre



Number of Trainees/Year

06-07	07-08	08-09	09-10	10-11	11-12	12-13	13-14	14-15	15-16	16-17	17-18	Total
19	39	63	86	102	118	147	185	183	233	230	261	1695

Number of Visits/Year

06-07	07-08	08-09	09-10	10-11	11-12	12-13	13-14	14-15	15-16	16-17	17-18	Total
25	57	187	294	337	439	467	650	683	815	1263	1526	1695

Who do the trainees visit in our office?

Who	14-15	15-16	16-17	17-18
Counsellor(s) only	95	136	148	168
Director(s) only	53	55	43	51
Both	35	42	39	37
Total	183	233	230	256

What brings people into see us?

- Anxiety (self identified)
- Stress
- Mood disorders

- Low mood/other mental health
- Workplace environment issues
- Career choice uncertainty
- Accommodations

Workshops and facilitated groups

- Approximately 90/yr for the last several years

What's going on

- **PGMEAC Wellness Subcommittee**

- meets quarterly

- ideally broad representation from programs and fellowships

- redefining TOR

- **Docs for Docs**

- we have a dream that all trainees and their families will have access to a family physician

- great momentum and engagement so far

- scholarly approach

- **Research/innovation** – organizational fatigue study, balint group innovation, causal model of resident wellness using VOTR data, scholarly approach to needs assessment

- **Workshops** – streamlining and creating a few new ones (Imposter syndrome, medical error, vicarious trauma)

BMA

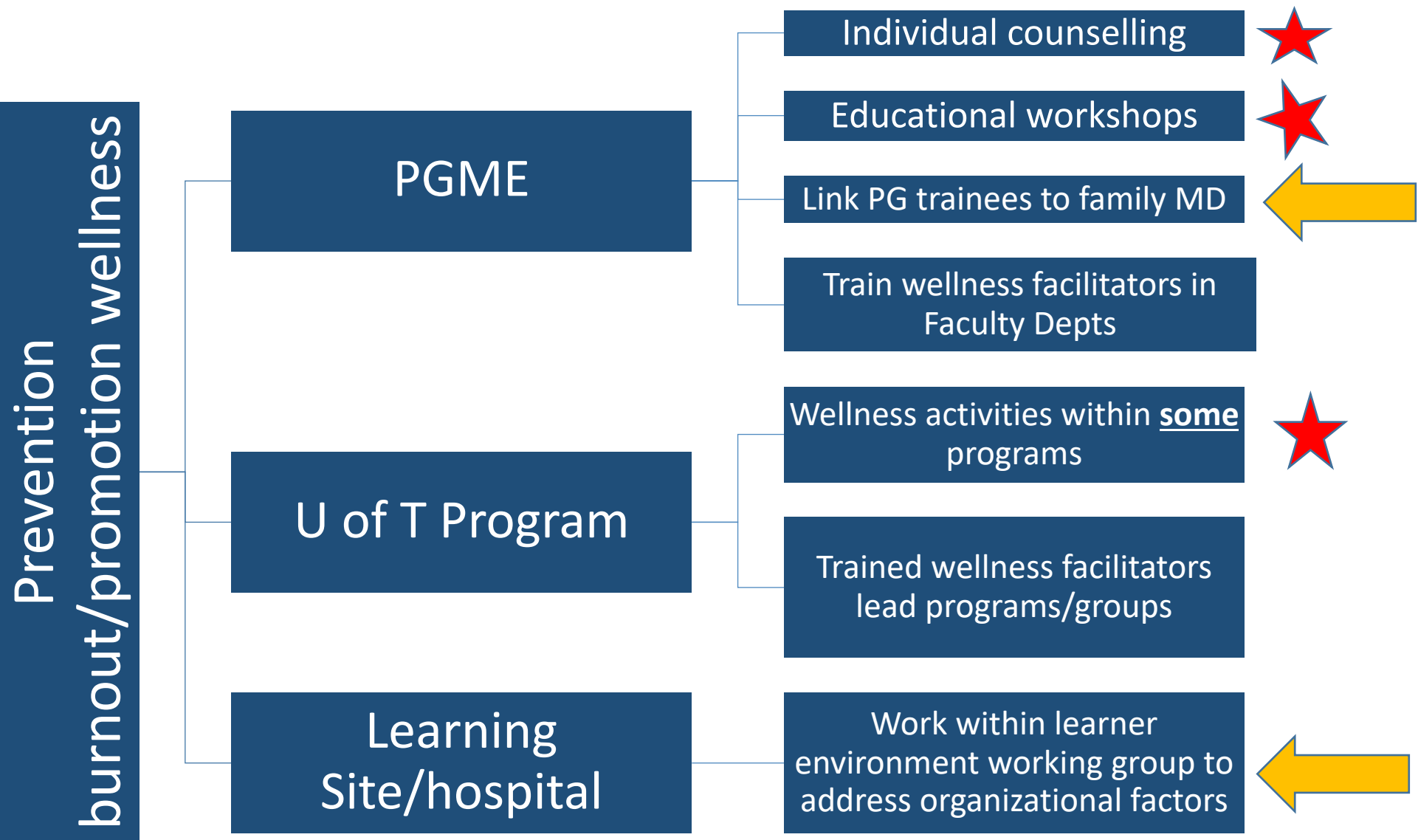
- To consider if there is a medical condition that affects, or may affect, the ability of a trainee to participate , perform or continue in a training program
- Allows a committee that is separate from program/dean to review detailed medical information to best determine how health may be impacting on training, consider accommodations, etc

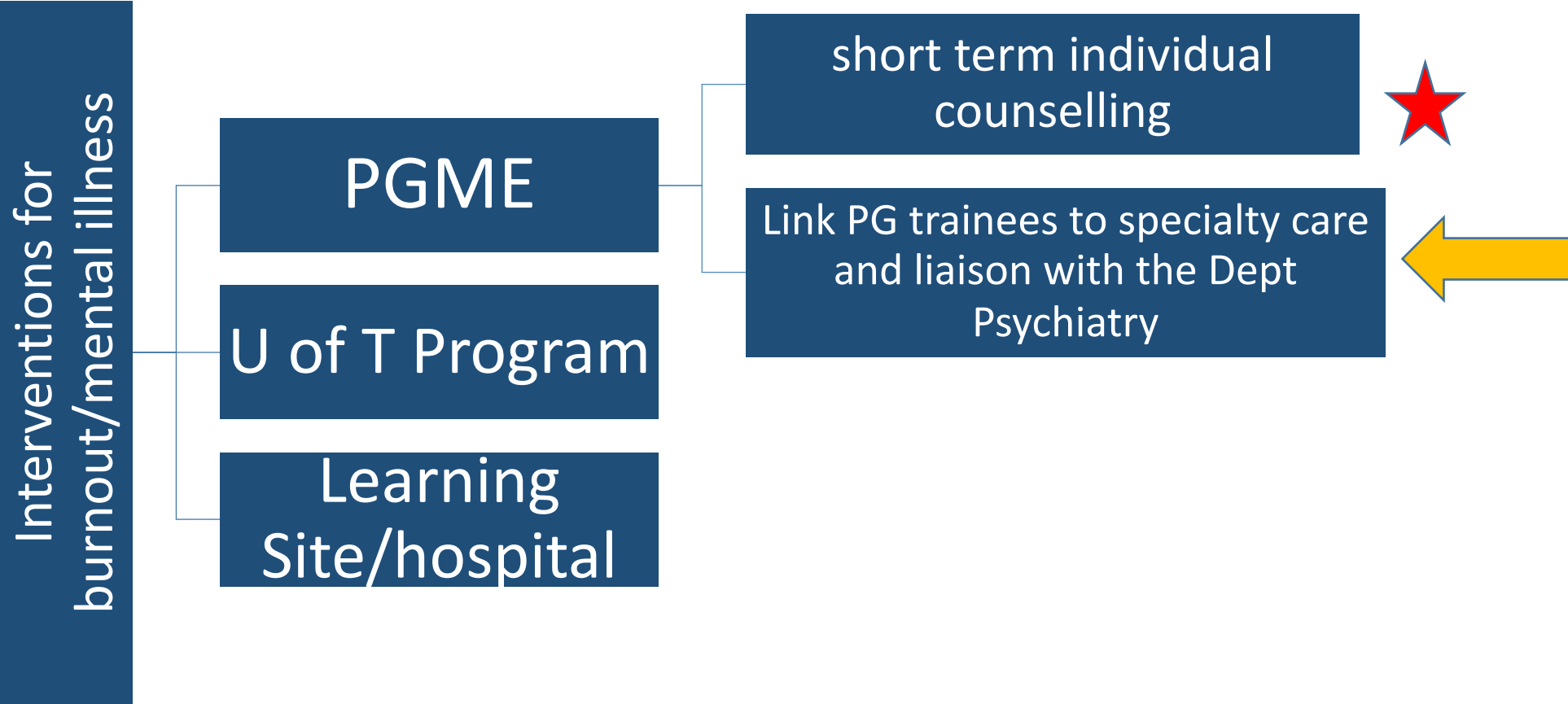
July 2017-Nov 2018

- 11 cases reviewed
- In 4 cases IME ordered
- Referral sources: 8 from PD, 1 from Associate Dean, 2 from BOE
- Timeline from referral to completion of process = 1 month to 6 months. (average 3.4 months)
- Themes
 - Trigger events/situations - Professionalism incident(s) or poor performance
 - Questions asked of BMA - Is there an illness accounting for behaviours/poor performance? Is treatment optimized? Are accommodations necessary? What extent of accommodations is necessary? Is trainee able to return to training?

Day to day what we offer you and your residents...

- No barrier access to an appointment for residents/clinical fellows with counsellor
- Support for PD/programs/chief residents when there is a resident in difficulty
- I&H first point of contact
- Leaves, accommodations, etc – need advice? Call us!





Resident Affairs

Board of Medical Assessors



PGMEAC wellness subcommittee



Accommodation for illness/disability



Advising residents re Intimidation/Harrasment, leaves



Advising PD's



Wellness support for residents undergoing remediation



Knowledge Centre

Prevention Burnout/Promotion Wellness

Database for resources re burnout prevention/prevention and promotion wellness for Programs
Make available widely and online

Interventions for burnout/mental illness

Database for resources re burnout prevention
Make available widely and online

Resident Affairs

- Develop best practices for accommodation of illness/disability in clinical training (liaison with U of T Accessibility Office)

Research of Program
components/Participation in National
Committees addressing wellness/resident
affairs

