



University of Toronto PGME Ministry of Health-Sponsored Medical Resident Redeployment Program (MRRP) Principles and Frequently Asked Questions

(adapted from MRRP fact sheet, Queen's University – Updated January 21, 2022)

The Medical Resident Redeployment Program (MRRP) was established on April 29, 2021 to allow residents to contribute to the pandemic response outside of their residency program for extra pay. PGME has conversed with provincial partners and offers this interpretive document to help establish some principles to support this program.

<u>Principles Guiding the U of T Approach to this Program</u>

- 1. PGME enthusiastically supports the use of this program to recognize and facilitate resident contributions during the pandemic.
- 2. This document is prepared based on the best available information we have. This may be superseded by directives from the MOH, the OHA, or PARO at any time.
- 3. All work undertaken by residents under the MRRP must be arranged between the resident and the hospital offering the experience. Payment for such services, accordingly, must flow directly from the MOH to the hospitals and then to the resident.
- 4. Residents, with appropriate supervision, can provide care outside their usual scope of care (including that of other health care professionals, i.e. assisting nurses and respiratory therapists).
- 5. The MRRP is intended to compensate residents for work arranged by a hospital outside of the base requirements of their current residency rotation. All work assigned by the program, including redeployment to an alternate rotation, cross coverage of call and extra call up to the PARO maximum when assigned by the program and aligned with training expectations is covered by the base PARO contract and is not eligible for the MRRP. (e.g. program assigned redeployments arranged by a Department or through the PGME redeployment process)
- 6. Work done as part of the MRRP is not counted towards residency, does not count towards establishing PARO maximum call frequency, and is not evaluable by the program.
- 7. Any work done under the MRRP must in no way interfere with one's ability to fulfill the expectations of their residency program, including post-call days.
- 8. It is expected that residents with remediation in place that limit duty hours or involve added supervisory or curricular requirements would not participate in the MRRP.

Frequently Asked Questions

1. Who qualifies for this program?

All residents actively registered in accredited residency programs and who are paid by the Ministry of Health (MOH) or local departments are eligible to participate. Residents do NOT need to be registered in the Restricted Registration program to participate. (https://restrictedregistrationontario.ca) Clinical Fellows are not eligible for this program.

2. What kind of work qualifies for this extra pay?

Any hospital-based work done in addition to usual scheduled work (e.g. taking an extra call shift overnight or on the weekend, working on a lieu day or vacation day). Work may be within one's normal scope of work as a resident or outside of said scope, with appropriate supervision.

3. What is the amount of the additional pay?

\$50/hour (i.e. \$600 for a 12-hour overnight call shift)

4. How does the MRRP affect PARO maximum duty hours?

PARO-mandated duty hours should be respected, and any post-call period cannot interfere with subsequent residency program activities or redeployment assignments. Residents *can exceed the PARO maximum* call by undertaking MRRP activities, but MRRP activities do NOT count towards the determination of an individual residents call maximum for the purposes of scheduling within their program. (i.e. a resident can be asked to maximize their call within their rotation under the PARO agreement even if they are doing MRRP work outside of the program and even if the combined work exceeds the PARO maximum if the resident is agreeable). Residents *do not need to be at their PARO maximum* within their rotation in order to take advantage of the MRRP outside of the residency.

5. If I have a restricted registration certificate, can I still volunteer for MRRP activities? Yes. Those with RR can still participate in MRRP activities.

6. What if I have an independent license?

If you have an independent license your additional work (e.g. taking an extra call shift overnight or on the weekend, working on a lieu day or vacation day) would be paid through the MOH at the Independent Licence rate, or you could be hired by a hospital or group at an individually negotiated rate.

7. Does the work need to be directly COVID related to qualify for MRRP?

The work does not need to be directly related to caring for COVID patients, but the need for the work does need to have been triggered by COVID. For example, in addition to direct care of COVID patients or vaccinations, work done on non-COVID activities to backfill for others who have been pulled into COVID care would qualify for the MRRP.

8. How long is this extra funding available for?

The program has been extended and is now available from September 22, 2021 through to March 31, 2022.