

## PGME COMMITTEE MEETING MINUTES

	<b>Date:</b> Wednesday, March 8, 2023	<b>Time:</b> 07:00 – 08:00	<b>Location:</b> Virtual
<b>MEETING CALLED BY</b>	L. Champion, Associate Dean, Postgraduate Medical Education		
<b>ATTENDEES</b>	H. Banner, R. Barnfield, P. Bere, M. Bhaduri, S. Blissett, J. Borger, P. Cameron, A. Cheng, J. Copeland, S. Elsayed, A. Florendo-Cumbermack, A. Good, D. Grushka, S. Gryn, C. Hsia, H. Iyer, S. Jeimy, S. Jones, T. Khan, J. Laba, D. Laidley, Y. Leong, A. Lum, M. Marlborough, B. McCauley, A. McConnell, P. Morris, D. Morrison, M. Ngo, S. Northcott, K. Qumosani, M. Rajarathinam, J. Ross, P. Stewart, S. Taylor, J. Thain, V. Turnbull, L. Van Bussel, J. Van Koughnett, J. Walsh, P. Wang, M. Weir, R. Woodhouse, C. Yamashita, Q. Zhang		
<b>REGRETS</b>	J. Ross		
<b>NOTE TAKER</b>	Sara Jamieson		

### 1.0 CALL TO ORDER (7:00 AM) & APPROVAL OF AGENDA, MINUTES

<b>DISCUSSION</b>	▪ Approval of minutes by L. Champion
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### 2.0 ANNOUCEMENTS

L. CHAMPION

#### 2.1 SPRING 2024 EXAMS

- The residents must apply to the Royal College one year in advance of the exam for a training assessment to confirm they have met specialty-specific training requirements.
- For Spring exams, that deadline is April 30 of the before the exam (i.e. for Spring 2024, deadline is April 30, 2023).
- Please make sure that Spring 2024 eligible candidates have applied for assessments of training- this must be completed prior to registering for the examinations.
- These deadlines are firm and without the training assessment, the resident cannot be added to the list of eligible candidates. Failure to meet this requirement will impact a resident's eligibility to write the exam and carries a late-assessment fee.
- The resident will be issued a ruling letter from The Royal College stating that they meet the training requirements to register for the examination.
- The Spring 2024 exam registration deadline is November 4, 2023. (The resident must pay the money and confirmed their examination).
- Fall examinations- Candidates must apply for training assessment by August 31 of the year before the exam. Reminders will be sent out.

#### DISCUSSION

#### 2.2 LHSC ONENUMBER CLOSED

LHSC has discontinued OneNumber as of February 27<sup>th</sup>

1. For communities- they call a number and get the physician who is identified on the call roster (unchanged). Flow and Access clerk stays on the line and provides information re: bed availability etc. (unchanged)

2. Workflow for Flow/ Access clerk unchanged.
3. If a patient needs CritiCall then referring to hospital phones CritiCall (unchanged).
4. Urgent Care has another number – but process unchanged.

No perceptible change from LHSC physician perspective, no change in workflow for the Flow/ Access Clerk, and no change from community perspective (they call LHSC or CritiCall and get the same MD as before).

### 2.3 PARO TEACHING AWARD

- Congratulations to Dr. Lebei Pi from the Cardiology program for the Western 2023 PARO Resident Teaching Award. 17 full nominations.

### 2.4 MULTIFAITH CALENDAR 2023

FYI: Will be sent out to Program Admins

• 3.0 UPDATES		R. WOODHOUSE
<b>DISCUSSION</b>	<p><b>3.1 PARO UPDATE- R. Woodhouse</b></p> <ul style="list-style-type: none"> <li>• V. Turnbull was unable to attend due to being on call and getting paged.</li> <li>• PARO's most recent team meeting was on February 23<sup>rd</sup>- plans were discussed for PGY1 orientation and social events (cooking class, café study session and a skating event)</li> <li>• <b>PARO's</b> third full General Council Meeting will be Friday, March 10<sup>th</sup> where elections will be held for President Elect and Treasurer Elect- this will be the first in person PARO meeting since COVID.</li> </ul>	
4.0 BUSINESS ARISING		L. CHAMPION
<b>DISCUSSION</b>	<p><b>4.1 MINISTRY OF HEALTH AND ALLOCATION 2024</b></p> <ul style="list-style-type: none"> <li>• No information on funding from MOH ('minimum as usual funding')</li> <li>• 5 additional positions provided for 2023 (10)</li> <li>• Residency Allocation Subcommittee meeting – late May or June</li> <li>• Additional 10 positions for 2024 match               <ul style="list-style-type: none"> <li>-Priorities from MOH→ Family Medicine (60%), Psychiatry, Emergency Medicine, Anesthesia (priority for these programs).</li> <li>-Family Medicine - planning for six additional for 2024 match (8/20)</li> </ul> </li> <li>• We will need to identify additional positions within our resources and capacity, and with MOH expectations</li> <li>• Will be asking programs for information re: additional position. Tara will be sending out more information to our programs in the next week with a deadline of late May just help with the allocation.</li> </ul>	
5.0 NEW BUSINESS		
<b>DISCUSSION</b>	<p><b>5.1 FACULTY PEER EVALUATIONS – Maternal-Fetal Medicine (MFM) (10 Min)</b>  <b>Dr. Harrison Banner- Program Director MFM</b></p> <ul style="list-style-type: none"> <li>• MFM is a two-year subspecialty training program with 1-2 residents per year and six core faculty</li> </ul>	

- **The challenge:** Being such a small program MFM is held to the same standards as any large program would be when it comes to accreditation which includes Faculty Assessment.
- **Specific challenges include:**
  - Few residents from which to obtain teacher feedback- limited sources of information
  - Concerns re: resident anonymity in providing feedback
  - Timeliness of feedback limited- in attempt to protect confidentiality by batching evaluations
- **Previous approach:**
  - Combine MFM resident evaluations with OBGYN resident evaluations and batch these together but there were concerns with this approach such as: feedback not specific to level of learner, feedback was not being provided to the MFM Program Director and there was limited ability to use feedback for faculty development/growth.
- **Process of Quality Improvement Evaluation**
  - Needed to work on building a culture of psychological safety in providing/receiving feedback and fostering a growth mindset in faculty members towards teaching.
- **A multi-prong approach was taken:**
  - evidence-based tool for data collection, multi-source feedback to increase amount of data and regular review with faculty members.
- **Recommendation #1: Evidence Based tool:**
  - Used Maastricht Clinical Teaching Questionnaire- 7-10 ratings can produce a reliable teacher rating.
- **Recommendation #2: Multi-Source Feedback:**
  - Adapted the MCTQ into a Peer and Self Assessment tool. Each is done twice yearly.
- **Recommendation #3: Regular Review with Faculty:**
  - PD has an annual meeting with each member of faculty to review the Teaching Portfolio which includes all their previous assessments within the past year so that's opportunities for growth/CPD.
  - New process started in Fall 2022 and was recognized as "Leading Practice" during RC Accreditation in November 2022.

**\*\*Slides and presentation are included with these minutes.\*\***

**Any questions: [Harrison.banner@lhsc.on.ca](mailto:Harrison.banner@lhsc.on.ca)**

Power Point Slides:



MFM Faculty  
Evaluation Teaching

Link to video Presentation:

<https://ssmd.ca.panopto.com/Panopto/Pages/Viewer.aspx?id=f599b6de-a709-4404-bc94-afcc00f350c3>

- 5.2 EQUITY DIVERSITY INCLUSION UPDATE**  
**Dr. Sukhi Bains: Associate Dean for Equity Diversity Inclusion**
- **SSMD Demographic Data Collection**

-Dr. Bains has met with multiple department heads at Schulich to determine what are the main challenges with EDI  
- Trying to understand Inclusivity and the goal is to understand who we are so we know where we need to go but without getting a baseline and understanding of who the community at Schulich is we can't improve on EDI.

- **What We Have Currently?**
  - Western Equity Census
  - Admissions/ OMSAS/CaRMS
  - CR(EDI)T and Graduate Studies
  - Western Central HR Data

\*None of these ask the same questions which makes none of data comparable.

**The goal: Anonymous, aggregate, comparable data across the institution.** It will be voluntary, ask consistent questions about sociodemographic data (i.e. gender identity, sex assigned at birth, sexual identity, Indigenous identity, racial/ethnic identity, etc.), organizational data (i.e. academic rank, departmental affiliation, staff roles, leadership, learners, etc.) and this data will be collected at different points of entry at Schulich.

### 5.3 AD PGME FEEDBACK QUALTRICS SURVEY

- Institutional Standards of Accreditation requires a process to 'conduct a regular and formal review of PG Dean Performance, which includes multiple sources of feedback.' (1.2.1.4)
- Qualtrics survey to PGME Committee with questions re: leadership, support, advocacy, etc. – 10 minutes or less (12 questions)
- Each question is based on the institutional standards of what the Post Graduate Dean should be doing.
- Feedback will be helpful. Thank you.

### 5.4 PGME APPRECIATION

#### Dr. Karim Qumosani

- Program director for Gastroenterology and the Hepatology AFC
- Reviewer for Royal College and Internal Reviews
- On our Policy Subcommittee
- Program Director Mentor

Thank you, Karim, for your support, advocacy and hard work.

**QUESTIONS & ADJOURNMENT (8:00 AM) AND NEXT MEETING**

**Next Meeting: Wednesday, April 12, 2023 @ 7:00 – 8:00 a.m., Virtual**