

PGME COMMITTEE MEETING MINUTES					
	Date: Wednesday, March 4, 2020	Time: 07:00 – 08:00	Location: HSA H101		
MEETING CALLED BY	L. Champion, Associate Dean Postgraduate Medical Education				
ATTENDEES	 C. Akincioglu, P. Basharat, S. Elsayed, A. Florendo-Cumbermack, H. Ganjavi, S. Gryn, A. Haig, R. Hammond, H. Iyer, SL. Kane, K. MacDougall, D. Morrison, ML. Myers, C. Newnham, S. Northcott, M. Ott, A. Power, K. Qumosani, W. Sischek, G. Tithecott, T. Van Hooren, J. Vergel de Dios, A. Vilos, M. Weir, C. Yamashita Hospital Rep: S. Fahner; PARO Rep: B. Chuong; P.A. Exec Rep: L. Dengler; Guests: J. Binnendyk, J. Fidler, T. Janzen, S. Giberson-Kirby, P. Morris, M. Olanski 				
REGRETS	A. Proulx, J. Rosenfield, J. Ross, J. Wickett				
NOTE TAKER	K. O'Donnell; kate.odonnell@schulich.uwo.ca				

CALL TO ORDER & APPROVAL OF AGENDA/MINUTES L. CHAMPI			L. CHAMPION	
DISCUSSION	Agenda and Minutes - APPROVED			
ACCREDITATION UPDATE L. C		L. CHAMPION		
	•	Narrative reports have been received.		
DISCUSSION	•	Program Directors are expected to review the report with th identify any areas of factual error.	eir RPC to	
	•	Completed form due March 10 th .		
	•	Four program reports remain pending.		
ACTION ITEM: COMPLETED – PROGRAM RESPONSES FORWARDED TO RCPSC. FOUR ADDITIONAL PROGRAM NARRATIVES RECEIVED MARCH 9TH				
CBME PROGRESS REPORT		J. VI	ERGEL DE DIOS	
DISCUSSION	•	CBME Steering Committee proposed setting a 14-day expire completion, with email reminders of expiry date.	ry for EPA	
	•	Faculty metrics and data will be collected, including number of EPAs completed, average time to complete and submit, number of EPAs triggered by faculty. PDs will have access to these metrics.		
	•	Survey has been sent out to implementers; PDs, PAs, CBM programs who have launched CBME. Feedback allows Cor advocate for identified program needs. Survey results will b	nmittee to	



ONECHART			M. OLANSKI, J. FIDLER, T. JANZEN	
	the aim of at all time	OneChart is the move toward an electronic and digitized health record, with the aim of maintaining legible, standardized and accessible data available at all times. Though paper will not be eliminated, aim is to significantly reduce usage.		
	cardiac e associate sepsis w engagen	For patients, demonstrated benefits include decreased mortality linked to cardiac events through device integration, fewer medication errors associated with the impact of the anesthesia drugs, lower incidence of sepsis with the decision support tools, enhanced patient and family engagement through sharing of components of the record with patients and families, increased information to support Patient Portals.		
DISCUSSION	sign off a improved through notes, ar	For clinical team, demonstrated benefits include less time managing chart sign off and searching for information; more time for front line patient care, improved communication across and throughout the continuum of care through one single source of information, capture concise, history-rich notes, and assist in clinical decision making, and allow for accurate and timely communication amongst all team members.		
		Phase One implementation is occurring from Fall 2019 to Winter 2021 with limited roll out, and plan for full roll out to be in 2022 and later.		
	undergra	tion that not enough engagement w aduate trainees regarding functional nent with residents and students, in- nent.	ity, goal is to increase	
INSTITUTIONAL AC	CREDITATION SURV	EY POLICIES & POLICY COMMIT	TEE L. CHAMPION	
	policies a reference	ation review of institution identified a and terms of reference. Suggestion e for the PGME Committee and var ertain policies.	to update the terms of	
DISCUSSION	standard	ToR has been drafted for PGME Committee, based on institutional standards. Draft will be circulated to group for review and feedback for discussion and acceptance at April meeting.		
		Additional policies required related to pandemics, mass casualty, and fatigue risk management.		
		Request made for volunteers to participate in Policy Committee, and Internal Review Committee.		
5.1 ACTION ITEM: CIRCULATE DRAF COMMITTEE	T TOR FOR PGME	5.1 PERSON RESPONSIBLE: L. CHAMPION	4.1 DEADLINE: PRIOR TO APRIL MEETING	
RESIDENT TRAVEL	AND COVID-19		L. CHAMPION	
DISCUSSION	travel for	as sent to PDs; Western has asked education purposes. For personal nent of Canada website regarding tr	travel, recommend to review	

		5, 2020 7:00am – 8:00am in HS SCHEDULED: FRIDAY MARCH 2		
ADJOURNMENT AND NEXT MEETING				
ACTION ITEM: PROVIDE DISCUSSED FEEDBACK TO THE CPSO		6.1 PERSON RESPONSIBLE: L. CHAMPION	6.1 DEADLINE: MARCH 20 [™]	
	Feedback discussed and will be provided to the CPSO.			
DISCUSSION	 Document detailing requirements for supervision is up for renewal, the CPSO has requested feedback. 			
CPSO GUIDELINE – PROFESSIONAL RESPONSIBILITIES IN L. CHAMPION POSTGRADUATE EDUCATION				
	 Residents may be required to complete 14-day quarantine on return from travel to certain areas. Residents required to quarantine would be placed on leave with pay. Routine N95 mask fit testing suspended. Four medical schools have cancelled international visiting electives. Residents aren't required to disclose personal travel, but as health professionals aware of public health, travel is a calculated risk and professionalism issues could be draw upon if residents travel to areas of known risk. Increase in patients under investigation. 			