

## PGME:UWO COMMITTEE MEETING

### MINUTES

Date:  
March 6, 2013

Time:  
07:00am – 08:30am

Location:  
HSA101, Western Univ

MEETING CALLED BY	Dr. Chris Watling, Postgraduate Medical Education Associate Dean
ATTENDEES	Dr. C. Akincioglu, Dr. J. Amann, Dr. L.C. Ang, Dr. G. Cooper (v-c), Dr. J. Creider, Dr. T. Crumley, Dr. K. Faber, Dr. J. Granton, Dr. R. Guo, Dr. P. Hall, Dr. J. Harris, Dr. V. Hocke, Dr. J. Howard, Dr. S. Kane, Dr. S. Kawaguchi, Ms. M. MacPherson, Ms. R. Mak, Ms. M. Morris, Dr. A. Proulx, Dr. J. Schmidt, Dr. K. Sequeira, Dr. T. Sexton, Dr. N. Sultan, Dr. S. Tejpar, Dr. G. Tithecott, Dr. C. Watling (chair), Dr. E. Wong, Dr. A. Yazdani, Dr. D. Yuen
NOTE TAKER	Ms. Renata Mak <a href="mailto:renata.mak@schulich.uwo.ca">renata.mak@schulich.uwo.ca</a>

### AGENDA TOPICS

1. CALL TO ORDER & GREETINGS		DR. C. WATLING
DISCUSSION	The meeting was called to order at 07:01am. The Agenda was approved as circulated. The minutes of the previous PGME meeting had previously been circulated and were in order.	
2. REPORTS		DR. C. WATLING/ M. MORRIS/ M. MACPHERSON
DISCUSSION	2.1 Associate Dean's Report – Dr. Watling . no report	
DISCUSSION	2.2 PGME Manager's Remarks . Career Fair for Medical Students - Wednesday, March 27, 6:30pm – 8:00pm, Great Hall, Somerville House . PGY1 Rotation Schedule – update . Dr. John D. Brown Award – the deadline for nominations to be received is March 31, 2013 . Infrastructure funding – receipts due . Letters of Appointment–for continuing residents–will be sent by email and available on SSO . Resident Orientation - Friday, June 28, 2013	
DISCUSSION	2.3 PAIRO Residents Report Dr. Creider presented PAIRO's position on the attestation of exams: . PAIRO does not support the requirement of disclosure of MCCQEII results for purposes of academic promotion or achievement. MCCQEII is a prerequisite for independent registration and was not designed as an in-training assessment tool. . Investing time and energy into creating meaningful evaluation tools, which assess preparedness/competencies for moving on to the next level is an approach that PAIRO supports. If PG feels that some residents are struggling with the LMCC's something to consider is developing and offering an MCCQEII prep course to ensure that residents are successful in passing these exams.	
DISCUSSION	2.4 Medical Affairs Report . The LHSC Drug and Therapeutics Committee had two new policies approved and one policy updated to be implemented on March 20, 2013. Communication and education materials on all of the initiatives below will available the second week of March and will be communicated	

via hospital email.

. Ordering Methadone - New Policy and Practice Change for LHSC

A new policy has been approved for the ordering and administration of Methadone. The key components include

- Physicians who are ordering Methadone must receive an exemption/authorization first issued by the Office of Controlled Substances, Health Canada
- Only the MRP or Consulting Physician can order Methadone
- Previously patients brought their own methadone into the hospital. It was secured and used throughout their stay. This will NO longer be the practice at LHSC. Pharmacy will dispense Methadone.
- The exemption for ordering Methadone expires upon discharge
- For patients with opioid dependence, communication with community methadone providers in advance of discharge is very important.

. Ordering Marijuana - New Policy for LHSC

A new policy has been approved for ordering and administering Medical Marijuana or its substitute. Key components include:

- Only the MRP or Consulting Physician can write the order for Medical Marijuana.
- Patients must have authorization from Health Canada to consume or ingest marijuana.
- The physician is not obligated to order medical marijuana for patients with Health Canada authorization. -Physicians will only be responsible for ordering "patient may continue to consume medical marijuana", or they will order Sativex or an alternative medication to treat identified symptoms. The order should state the route and frequency
- The patient will need to complete and sign the Medical Marijuana CONTRACT FOR USE AND RELEASE FROM LIABILITY form.
- Patients will manage their own supply of smoked marijuana unless taken to the OR for an emergency procedure.
- If smoking marijuana is permitted, Security will escort patients to spot designated by Security for the safety of all.

. Narcotic and Controlled Drugs - Policy Change for LHSC

An updated policy has been approved for the ordering and administration of Narcotic and Controlled Drugs. Key components include:

- Physician roles and responsibilities were expanded to include the management of wastage when there is only one physician in a patient care situation and no other authorized practitioner is available to witness wastage. This revised policy also addresses incremental dosing for physicians in certain patient care situations.
- If patients require non-formulary narcotics in order to optimize care, physicians should not write "patient to use own". Physicians may write "No substitution" when it is necessary that patients continue on a narcotic that is non-formulary.
- Other changes include a new format, a new section on Patient's own narcotics and controlled substances section, the process for handling Wastage, more details on roles and responsibilities of area leaders and more focus on issue identification and reporting near misses or adverse events through AEMS.

. A New Patient Tracking System and Bed Boards will be implemented this month. Key components:

- When patients are admitted they will receive an electronic device on their armband. This device transmits to a hub which allows them to show up on the bedboard and on the patient

list on the screen. Some benefits include:

- If a Surgeon is between surgeries and they have time to reassess a patient they will be able to use the mouse to hover over the patient and it will let them know if they are in their room.
- When the patient is discharged the device goes into the bin at the Nurses station and once it is in the bin it sends a message to the ESW that the bed needs cleaned. ESW will accept the work and when it is cleaned will send the message that it is ready. The icons on the stages of readiness will be identified on the bed board for others to see.

### 3. CARMS RESULTS

**DR. C. WATLING**

#### DISCUSSION

Dr. Watling discussed the results of the CaRMS match 1<sup>st</sup> Iteration

- . 158 Western students participated in the match (155 current class, 3 previous year); 153 matched.
- . 299 positions available post-match
- . at Western, 19 positions unmatched: Neurology 1, Nuclear Medicine 1, Ob/Gyn 1, Psychiatry 3 and Family Medicine 13

A reminder that programs are only permitted to use and/or hold personal information of applicants disclosed to them by CaRMS for the purpose of selecting candidates for postgraduate residency training. All programs should now be in the process of securely destroying, deleting or converting into anonymous form the personal information of all unmatched applicants.

#### 3.1 ACTION ITEM

#### PERSON RESPONSIBLE

#### DEADLINE

### 4. PG POSITIONS ALLOCATION

**DR. C. WATLING**

#### DISCUSSION

Dr. Watling discussed the 2014 PG positions allocation. No new positions will be available in 2014 but some redistribution will take place (mostly for the subspecialty training program positions). Currently, Medicine has a quota that equals the number of PGY3 Medicine positions. Pediatric subspecialty has a quota of 7; Ob/Gyn (3 subspecialty programs) has a quota of 2; Surgery (2 subspecialty programs) has a quota of 2, Imaging (1 program) has a quota of 1.

#### 4.1 ACTION ITEM

#### PERSON RESPONSIBLE

#### DEADLINE

### 5. ACCREDITATION CFPC UPDATE

**DR. C. WATLING**

#### DISCUSSION

Dr. Watling attended the CFPC's Accreditation Committee meeting in Toronto on February 25, 2013. The results of the accreditation visit are as follows:

- . Family Medicine core program: Accredited Program - follow up with internal review in 18 months
- . Family Medicine Enhanced Skills: Accredited Program - follow up with letter (progress report) in 18 months
- . FM Emergency Medicine: Accredited program - follow up at next regular survey (6 years)
- . FM Care of the Elderly: Accredited program - follow up by external review 6 months after the next new resident starts.
- . FM Anesthesia: Accredited program - follow up by external review in 24 months.

#### 5.1 ACTION ITEM

#### PERSON RESPONSIBLE

#### DEADLINE

<b>6. ASSESSMENT VERIFICATION PERIOD (AVP)</b>		
		<b>DR. C. WATLING</b>
<b>DISCUSSION</b>	The AVP will be used to assess the strengths, weaknesses, and learning needs of IMGs who are accepted into residency programs as well as the NAC OSCE exam will be available. It is anticipated that the use of the NAC OSCE should improve the residency programs' ability to select candidates who are likely to succeed in a residency program.	
<b>6.1 ACTION ITEM</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
<b>7. HYBRID TRAINING PROPOSAL</b>		
		<b>DR. C. WATLING</b>
<b>DISCUSSION</b>	To respond to an increasing number of international requests, the Royal College has formed a new division: Royal College Canada International (RCCI). The RCCI offers the Royal College's services to international organizations on a cost-recovery basis. More information will follow.	
<b>7.1 ACTION ITEM</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
<b>8. SHARED CURRICULUM PLANS</b>		
		<b>DR. C. WATLING</b>
<b>DISCUSSION</b>	Dr. Farquhar (Learners Equity & Wellness Office) is interested in retooling 'Summer Series' into 'Transition to Practice' series. More information will be provided at the next PGME Committee meeting.	
<b>8.1 ACTION ITEM</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
<b>9. THE NAC OSCE EXAM</b>		
<b>DISCUSSION</b>	The National Assessment Collaboration (NAC) is an alliance of Canadian organizations streamlining the evaluation process for IMGs seeking a licence to practice in Canada. It is expected that the NAC OSCE will replace all current provincial IMG OSCE examinations. More information will follow.	
<b>9.1 ACTION ITEM</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
<b>10. EDUCATION OF PDS</b>		
<b>DISCUSSION</b>	This item will be tabled at the next PGME Committee meeting	
<b>10.1 ACTION ITEM</b>	<b>PERSON RESPONSIBLE</b>	<b>DEADLINE</b>
<b>11. ADJOURNMENT AND NEXT MEETING</b>		
<b>DATE AND TIME</b>	There being no further business the meeting was adjourned at 8:21am. Next meeting scheduled for WEDNESDAY, April 10, 2013.	