

PGME COMMITTEE MEETING

Minutes Date: January 8th, 2014 Time: 07:00am – 08:30am Location: H101, Western

Meeting called by	Dr. Chris Watling, Postgraduate Medical Education Associate Dean
Attendees	G. Cooper, B. Garcia, S. Rumas, C. Akincioglu, L.C. Ang, K. Faber, D. Fortin, V. Hocke, S.L. Kane, J. Howard, T. Sexton, M. Ott, A. Power, ; PARO Rep: J. Lukovic, C. Cookson; Hospital Reps: M. Macpherson Guests:
Note taker	Courtney Newnham, courtney.newnham@schulich.uwo.ca

Agenda Topics

1. CALL TO ORDER AND GREETINGS		Dr. C. Watling
Discussion	The meeting was called to order at 07:00am. The Agenda was approved as circulated. The minutes of the previous PGME meeting had been circulated previously and were in order.	
2. REPORTS		DR. C. WATLING/ S. RUMAS/ M. MACPHERSON
Discussion	2.1 Associate Dean's Report – Dr. Watling	
	<p>Happy New Year!</p> <p>2014 Priorities:</p> <ul style="list-style-type: none"> . CBME – opportunities to innovate . Planning our internal review process . Residency allocation planning . Shared curriculum enhancements <ul style="list-style-type: none"> . Academic half days . T2R . Residents as teachers – workshops not serving the needs of all residents . Transition to practice – workshops that have discipline specific aspects and areas that cross specialty lines. Aim is to create a series of events e.g. every 2 months. <p>PARO Award Deadlines:</p> <ul style="list-style-type: none"> . Resident Teaching Award – January 20th, 2014 . Clinical Teaching Award – January 27th, 2014 <p>Further information can be found at: http://www.myparo.ca/PARO_Awards</p>	
DISCUSSION	2.2 PGME Manager's Remarks <ul style="list-style-type: none"> . Continuing Lists – Due Friday January 10th, 2014 . CaRMS update – all Western residents matched in the Medicine subspecialty match . R1 – ROL deadline to PGME – February 12th, 2014 . Transfer requests – Please submit internal and external transfer requests to the PGME office 	

	by January 31st, 2014 . PGME will notify programs by the beginning of February on transfer decisions. FITERs – deadline to PGME February 23rd, 2014 . All Program Directors and residents must sign before returning to the PGME office. Completed FITER indicates resident is eligible to sit the Royal College exam and has met all competencies required for the specialty. If a Program Director is uncertain about whether a resident fits these requirements, complete the FITER and withdraw if the resident is not at the required standard.		
DISCUSSION	2.3 PARO Residents Report PARO representatives thank the PGME office for their support with the CRA legal case. No new news to report.		
DISCUSSION	2.4 Medical Affairs Report HUGO – Will go live on the following dates: . University Hospital – April 13th, 2014 . Victoria Hospital – April 29th, 2014 . St. Joseph's Hospital – May 21st, 2014 *This date changed from March 16 th . Workstations will not be ready for March. This allows more time for planning. . An email will be sent shortly listing all residents to Program Directors and asking them to identify residents who need to be trained. An email will be sent asking Chief's to identify professional staff who need to be trained. . Programs can use academic half-days for training . Please contact Maureen before January 20th, 2014 if you would like a group session (maureen.macpherson@lhsc.on.ca). The call room at Victoria hospital was blocked due to construction. The door to PCCU is now open. The hospital apologizes for the inconvenience and had no prior knowledge this would be taking place. Construction will be on-going for the next two weeks.		
3. MCCQE PART 2			
Dr. C. Watling			
Discussion	Fall 2013 Administration . 97 Schulich residents took exam . Results: 85 Pass; 12 Fail . Results are private but Associate Dean's have access . Some residents who have failed, have failed more than once . Medical Council is aware of timing issues with other specialty exams Question: Can we better support our residents for success on this exam? . High stakes exam preparation course and working with the LEW . Develop a peer mentoring program . Family Medicine to provide some guidance given their experience in combining the MCCQE Part 2 with the CFPC exam.		
3.1 Action item		Person responsible	Deadline

4. INTERPRETING THE MCC EXAM RESULTS ON IMG CaRMS APPLICATIONS

Dr. C. Watling

Discussion

There are two National assessment programs:

- . Evaluating Exam (EE)
 - . MCQ – delivered across the world
- . National Assessment Collaboration (NAC)
 - . OSCE + MCQ – delivered in BC, AB, MB, ON, QC, NS

*These results do not necessarily equate to strong results in the qualifying exam

The letter residents receive following the exam for the MCCEE and NAC includes the date the exam was taken, the pass/fail decision, the total score for the resident, and the score required to pass.

What the letter does not tell you:

- . What attempt number it is
- . How the candidate did by discipline

The candidate can give permission to release supplemental feedback. According to the MCCEE, the most meaningful number is the pass/fail result.

Facts about the EE 2012 administrations:

- . 3620 candidates wrote the exam
- . 48% wrote in Canada
- . 97% in English
- . 19% born in Canada (Canadian studying abroad)
- . 14% attend schools prevalent among CSAs but are not born in Canada
- . 85% CSAs scheduled to graduate the year they write or the following year

IMPORTANT CHANGE IN 2013

The MCC approved a change to the eligibility criteria for the Medical Council of Canada Evaluating Examination. As of **June 1, 2013**, international medical students are able to apply to take the MCCEE **up to 20 months before their graduation** date. This means international medical students no longer need to be in the final clinical year of their medical school program to apply. The MCCEE, NAC, and OSCE can now be taken without losing a year of study.

Facts about the NAC administrations:

- . Bar graph of candidates' competency scores compared to previous population quintiles will be provided as of 2016 when we have 3 years of equated data.
- . In 2013, 1,222 candidates over 4 administrations took the exam
- . BC, AB (Calgary and Edmonton), MB, ON, QC, NS

IMPORTANT CHANGES TO THE NAC:

- . Change in registration starting November 2013
Registration for the NAC will be offered through physiciansapply.ca
- . Change in policy on number of attempts starting January 2015
Candidates who obtain a pass status will not be allowed to take the exam again to improve their score.

4.1 Action item

Person responsible

Deadline

5. CaRMS 2014

Dr. C Watling

Discussion

National Interview Period: **January 8-February 9th, 2014**

- . Preference to keep to set schedule
- . Changing times puts distributed medical education students at a disadvantage
- . Programs are responsible for scheduling interviews with applicants
- . Interviews for current-year Canadian medical school graduates from out-of-town universities are conducted during this three-week period.
- . No specific national time period for:
 - . IMGs
 - . Applicants at their own schools

Dates:

Ranking period opens: January 30th, 2014 (1200h)

Program ROL deadline: February 12th, 2014 (1600h)

Match day: March 5th, 2014 (1200h)

Principles:

Interviews should be:

1. Private
2. Of sufficient length (consider 30 minute minimum)
3. Free of intimidation
4. Free of personal questions about family, religion, age, or finances

Scheduling

- . Abide by schedule of dates
- . Ideally, coordinate with other programs nationally
- . Contact shortlisted candidates at least 1 week before interview date
- . Send unsuccessful candidates a letter informing them they will not be invited for an interview

Canadian Human Rights Act

All individuals are entitled to equal employment opportunities without regard to:

race/colour, national/ethnic background, sexual orientation, religion, age, family status, sex, pardoned conviction, or disability.

Bona Fide Occupational Requirements

- . Exception to CHR Act allowed when abilities required to carry out core functions of the job are related to a prohibited ground.

Interview Dos:

1. Ask all candidates the same questions
2. Ask questions related to the position
3. Ask applicants if they can meet the requirements of the position
4. Ensure that questions assess criteria that can be evaluated objectively
5. Arrange meetings with residents

Interview Do Nots:

1. Ask different questions of different candidates

2. Ask about children, child-bearing plans, or child care arrangements
3. Ask about family status and/or spousal employment opportunities
4. Request a photo
5. Ask about disabilities or limitations (it is okay to ask if they can meet the challenges of the job)
6. Ask applicants how they intend to tank your program

5.1 Action item	Person responsible	Deadline

6. PROGRAM DIRECTOR SURVIVAL STORIES	Dr. C. Watling
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Discussion	<p>Popular and useful new session at ICRE 2013</p> <ul style="list-style-type: none"> . Purpose is to recognize the unique problems that arise and learning how to handle different situations. . Have experienced Program Directors use stories that have happened a while ago to protect resident identity <p>Is there interest in something similar locally? What would be the appropriate venue? Can stories be adequately anonymized?</p>
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6.1 Action item	Person responsible	Deadline

7. ACCREDITATION AND QUALITY IMPROVEMENT	Dr. C. Watling
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Discussion	<p>From the A Standards Review 2012: "Feedback of teacher evaluations to teachers and RPC's is absent or weak in many programs (A1.3.11)" What is the standard? B1.3.8.3</p> <ul style="list-style-type: none"> . The responsibilities of the program director, assisted by the residency program committee include: An ongoing review of the program to assess the quality of the educational experience, including...an assessment of the teachers in the program. <p>Interpreting the standard</p> <ul style="list-style-type: none"> . There is evidence that teachers are evaluated regularly . The residents are comfortable with the process of evaluating their teachers and rotations . There are mechanism to provide confidential, timely feedback to individual teachers <p>Teacher Assessment</p> <ul style="list-style-type: none"> . Online assessment forms completed by residents . Assessment for didactic or small group teaching . Pooled resident feedback (especially for smaller programs) . Retreat discussion . Standing item for RPC . Novel strategies: peer feedback (e.g. one faculty member observes the clinical teaching of
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	<p>another faculty member)</p> <p>Resident Comfort</p> <ul style="list-style-type: none"> . Anonymity when possible . Small programs face bigger challenges <ul style="list-style-type: none"> . pooled feedback . feedback at 1-2 year intervals . use of exit interviews . Clear, safe reporting lines for problems . Peer feedback may reduce pressure on residents as only source of data . Have a backup line for reporting feedback for those who need to provide feedback for a teacher in power (e.g. Program Director or Chair) <p>Timely Feedback</p> <ul style="list-style-type: none"> . Mechanism can vary (via Chair, RPC, annual reports from PD, etc.) but here MUST be a mechanism . Articulate a plan for more urgent situations <p>Shifting the Focus</p> <p>Feedback can be positive as well as constructive</p> <ul style="list-style-type: none"> . Program teaching awards . Faculty asked to teach faculty-wide <p>Link constructive feedback to an action plan</p> <ul style="list-style-type: none"> . Mentoring . Faculty development 	
7.1 Action item	Person responsible	Deadline
8. PROGRAM DIRECTOR SURVEY		Dr. C. Watling
Discussion	<p>A short survey has been sent to better serve the needs of Program Directors through PGE committee meetings. Seeking information on:</p> <ul style="list-style-type: none"> . Preferred meeting day/time/location . Meeting format . Content suggestions <p>Responses are anonymous and constructive feedback is encouraged.</p>	
8.1 Action item	Person responsible	Deadline
Please complete the survey using the following link: https://www.surveymonkey.com/s/D9YSWL5	Program Directors	February 6th, 2014
9. AJOURNMENT AND NEXT MEETING		
DATE and time	<p>There being no further business the meeting was adjourned at 8:20am. Next meeting scheduled for Wednesday, February 12th, 2014 in HSA101.</p>	