

PGME COMMITTEE MEETING

Minutes	Date: May 3rd, 2017	Time: 7:00-8:00am	Location: HSA 101
Meeting called by	Dr. Chris Watling, Postgraduate Medical Education Associate Dean		
Attendees	R. Butler, G. Eastabrook, K. Faber, A. Haig, V. Hocke, S. Levin, S. Macaluso, W. Moote, M. Ott, A. Proulx, M.M. Taabazuing, T. VanHooren, J.A. Van Koughnett, J. Wickett, A. Yazdani, D. Yuen; PARO Reps: M. Li; Hospital Rep: M. Macpherson; P.A. Exec Rep: L. Baker-Spiller; Guests:		
Note taker	Courtney Newnham, Courtney.newnham@schulich.uwo.ca		

Agenda Topics

1. CBME PROGRESS REPORT		Dr. Watling
Discussion	<ul style="list-style-type: none"> . Spring retreat took place on April 21st and focused on competency committees (CC) including: <ul style="list-style-type: none"> . how to make decisions within a CC structure . what information CC members are going to need based on the decisions they are going to have to make . at what point is the CC making very specific decisions such as promotion and at what points are they making decisions about whether or not residents are progressing as expected although there may not be a promotional decision to be made . The RCPSC emphasized that it is important for schools and programs to not get fixated on being perfect . They were reassured of a graduated process of raising the bar and setting the standards over the next two accreditation cycles . The revised assessment policy will be sent to Schulich's legal specialist shortly with the hope of presenting at the June PGE Committee meeting . The PGE office supports not using the ITER as a form of summative assessment, keeping in mind there are a range of types of summative assessment tools that may be used in its place . It is encouraged and required that some form of a summative progress report be required at the end of a learning experience for any resident that is not progressing as expected . When assessment is completely focused on observed moments around observed events in the work place there is a danger that important elements of residents' performance may get lost in the shuffle such as professionalism, integrity, and how well people work with others . There are tools through the RCPSC to capture these moments including the narrative assessment and multi-source feedback tools . PGE encourages innovation in other ways in order to capture these moments as well . The e-portfolio will be launched shortly by the RCPSC for programs who are transitioning on July 1st, 2017 . Learner information will not be disclosed to a third party without their expressed consent, even if that third party is their certifying body 	

	<ul style="list-style-type: none"> . There will be levels of permission in terms of access in the e-portfolio including parts that only residents can access and no one else . Ideally every program would use the e-portfolio with the caveat that this decision will be revisited again four months after its implementation to ensure programs who are using it have not discovered issues that will be a problem for all programs . Residents are held to the standards that applied to the program the day they started at Schulich and will carry forward through the entire course of the program; this does not mean programs have to carry out two parallel streams for the next four/five years . The aim of CBME is to strengthen assessment, coaching, and feedback which should benefit junior and senior residents and while the standards would remain the same for senior residents, that does not mean the way they are assessed has to remain the same
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2. PAGING ISSUE

Dr. M. Ott

Discussion	<ul style="list-style-type: none"> . The Division of General Surgery does not want to continue paying for resident pagers which is costing \$18-19,000/year . The hospital is mandated by contract to provide a pager to a resident as part of the PARO contract but they are charging that contractual obligation back to departments . General Surgery is actively pursuing other methods of paging . Medical Affairs has contacted IT and there are issues with privacy when using a mobile device . Updates will be circulated when available
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3. VISITING STUDENT ELECTIVE

Dr. C. Watling

Discussion	<ul style="list-style-type: none"> . It is still perceived as difficult for a medical student to get electives at Western . According to the UME Manager, the capacity at Schulich has increased by 300% over the last three years and the UME office does not decline any learners for electives unless their application is incomplete, although at times programs decline learners . There is a \$100 non-refundable fee/elective which is a national standard; fee in place to dissuade gaming of the system . The only way in which Western is an outlier from the National rules is that they accept applications at any time and never close while other schools require 12-16 weeks' notice to apply for an elective . There has been a move to an elective portal to standardize the process but not every school in the country has signed on . The committee discussed the disadvantage of an additional high cost to learners when they apply outside the normal window of time, particularly for students who decide later in clerkship to change their area of interest . Clarity required whether the application process is open all year long or whether standards force schools to not accept applications within a certain number of weeks before the start of an elective . In general, UME Deans believe there is a hidden curriculum around some programs wanting to see applicants who have done all their electives in that discipline to show their commitment to that discipline . UME Deans want to discourage this practice and support a policy of diversity of elective experiences for medical students who graduate with a more generalist sense of medicine . Therefore, there may be a move toward restricting the extent to which medical students can bundle their electives in a particular discipline; it is possible that moving forward, PGE PDs should
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	not be looking for candidates with the majority of electives in their discipline as a sign of a good candidate because it may not be possible
4. CaRMS DEBRIEF	
	Dr. C. Watling
Discussion	<p>. CaRMS information presented at CCME was shared with the Committee</p> <p>Facts about CaRMS 2017:</p> <ul style="list-style-type: none"> . 5,372 applicants and 128,334 applications which is up by 4.9% . Applicant pool consisted of 2,955 CMGs and 1,811 IMGs . In first iteration, 166 unmatched CMGs and 133 IMGs; second iteration 68 CMGs and 57 IMGs . 87.4% of CMGs matched to first choice discipline . Unfilled positions after second iteration, 58 French, 6 English <p>For more detailed information, please view the attached slides</p>
5. ADJOURNMENT AND NEXT MEETING	
Date and time	<p>The meeting was adjourned at 8:05 am.</p> <p>Next meeting scheduled for Wednesday, June 21st, 2017, 7:00-8:00am, HSA101</p>