

PGME COMMITTEE MEETING MINUTES				
	Date: Wednesday, June 12, 2024	<b>Time:</b> 07:00 – 08:00 AM	Location: Virtual	
MEETING CALLED BY	L. Champion, Associate Dean, Postgraduate Medical Education			
ATTENDEES	N. Adunuri, P. Basharat, S. Blissett, L. Bondy, P. Cameron, A. Cheng, M. Clemente, T. DeLyzer, L. Diachun, D. Driman, S. Elsayed, A. Ens, A. Florendo-Cumbermack, D. Grushka, F. Harmos, H. Iyer, L. Jacobs, S. Jeimy, T. Jevremovic, M. Kahng, T. Khan, R. Khanna, J. Laba, D. Laidley, J. Landau, R. Leeper, Y. Leong, H. Levin, K. Lotfy, A. Lum, S. Macaluso, K. MacDougall, I. Makar, W. McCauley, P. Morris, D. Morrison, C. Newnham, V. Ng, M. Ngo, M. Nicholson, M. Phung, M. Qiabi, K. Qumosani, F. Rehman, J. Ross, B. Rotenberg, , M. Shimizu, P. Stewart, T. Van Hooren, J. Van Koughnett, S. Venance, J. Walsh, P. Wang, C. Zeman, Q. Zhang <b>Hospital Rep</b> : R. Caraman, K. Chan, G. Dresser, A. Dukelow, D. McVeeney <b>PARO Reps:</b> M. Chopcian <b>Guests:</b> P. Bere, L. Curtis, K. Lancey, S. MacGregor, S. Taylor			
REGRETS	A. McConnell, S. Scott			
NOTE TAKER	Lindsay Curtis			
1.0 CALL TO ORDER (7:00 AM) & APPROVAL OF AGENDA, MINUTES				
DISCUSSION	<ul> <li>Minutes and agenda approved.</li> </ul>			
2.0 ANNOUNCEM	<b>NENTS</b>			
DISCUSSION	<ul> <li>2.1 WELCOME TO OUR NEW PROGRAM DIRECTOR – L. CHAMPION <ul> <li>Dr. Tatiana Jevremovic, PD Family Medicine Enhanced Skills.</li> <li>To our outgoing program directors, thank you for everything you have done to support your trainees, your program, and PGME.</li> </ul> </li> <li>2.2 CaRMS TENDER – L. CHAMPION <ul> <li>AFMC has initiated process for tender for Resident Matching Service; rationale provided by AFMC is that this a legal requirement (this has been disputed by RDoC and PARO).</li> <li>PGME Deans, RDoC, and PARO have advocated for CaRMS to continue as a valuable service.</li> <li>Tender will occur over the next year, with implementation for 2027; link to AFMC FAQ document and townhall dates shared in meeting chat.</li> </ul> </li> <li>2.3 CPSO SOCIAL MEDIA POLICY – L. CHAMPION <ul> <li>Navigating a number of complaints from faculty/residents and students about faculty/resident's and student's social media posts, CPSO's Social Media Policy is now posted on PGME's Policies page.</li> </ul> </li> </ul>			
3.0 UPDATES				
DISCUSSION	<ul> <li>3.1 PARO UPDATE – M. CHOPICAN         <ul> <li>Recently hosted a successful mini pu will be hosting a PGY1 orientation so welcome environment.</li> <li>PARO team looking forward to attend</li> </ul> </li> </ul>	cial on June 14 to a	allow residents to socialize in a	

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3.2 PGME EDUCATION UPDATE – S. MACGREGOR		
<ul> <li>Resident Orientation 2024: live one-hour virtual event hosted by Medical Affairs on Friday June 28; leaner access to OWL went live Monday June 3; OWL site contains resources from Medical Affairs, education modules, links to Transition to Residency 2024, and Q&amp;A forum.</li> <li>Transition to Residency (T2R) 2024: virtual sessions will occur every Wednesday afternoon from July 3 to September 4; time on September 11 will be dedicated to either completing required modules or a program-specific session; links and resources will be hosted in OWL and will go live one week prior to session; Save the Date and schedule has been sent to PAs.</li> <li>Upcoming events: Resident Teacher Bootcamp tentatively scheduled for early November, Transition to Program specific session; with MD Eigeneial also being planned; more</li> </ul>		
Transition to Practice virtual sessions hosted with MD Financial also being planned; more details will be shared when we meet again in the fall.		
<ul> <li>3.3 FACULTY TRIGGERED EPAS – J. VAN KOUGHNETT         <ul> <li>Faculty EPA engagement is not easy; balance between telling faculty it's on the residents and they will come to you vs. taking some of that burden off the residents and having faculty trigger EPAs on their own.</li> <li>Based on the last semi-annual EPA report, 29% of General Surgery EPA assessments are triggered by faculty (compared to 8.5% across all programs).</li> <li>Tips and tricks based on what has worked in General Surgery</li> <li>Find your champions; Who are your educators who want to engage in the process? Who is already giving feedback? This is a key demographic, target them; Who is not afraid to tell is like it is? From whom do residents want feedback? Targeting these faculty has been very helpful, as has asking Competence Committee (CC) members to trigger EPAs; CC members appreciate the value of EPAs and also recognize the value of EPAs that are not self-selected by the trainees for when they've done a good job.</li> <li>Find the opportunities for faculty to trigger EPAs: find EPAs that work for procedure days, teaching sessions, debrief sessions, and simulation sessions, and complete them in real time; stress to residents and faculty that completing a EPA is a normal part of the day.</li> <li>Reward the engaged by acknowledging faculty at department meetings (e.g. top 5), acknowledging the resident who are engaged with CBME, consider EPA completion as part of the criteria for teaching awards.</li> <li>Make it easy by providing a space to complete the EPA live; a private space that is a natural gathering place, with a computer and 2 chairs; it's an opportunity to give honest feedback that faculty will be engaged and trigger EPAs, but giving faculty permission and encouragement to trigger EPAs will make a difference over time.</li> <li>Faculty can trigger any EPA at any time, does not need to be appropriate for stage of training</li></ul></li></ul>		
<ul> <li>feedback with preserving resident confidentiality.</li> <li>7.1.1.2: The system of teacher assessment ensures recognition of excellence in teaching and is used to address performance concerns.</li> <li>7.1.1.3: Resident input is a component of the system of teacher assessment.</li> <li>7.1.1.5: There is an effective process to identify, document, and address unprofessional behaviour by teachers.</li> </ul>		
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<ul> <li>9.1.1.6: The feedback provided to teachers in the residency program is reviewed.</li> <li>Programs do have faculty evaluation forms but not all programs have forms completed, reviewed, or followed up; residents in some programs are completely unaware of faculty evaluations. Faculty in some programs have not had any evaluations provided to them or reviewed as part of their department annual review or incorporated into the promotion process.</li> <li>New faculty evaluation form circulated with meeting material; reviewed by Clinical Chairs twice; one form for all programs, with 8 questions (4 additional questions for surgical programs); using one form will increase consistency and make the process simpler and easier for residents who rotate through different services.</li> <li>Plan to substitute old forms with the new form on one45 unless programs choose to continue with their original form (opt-out request); exception for surgical programs using Innovations and FM (MyFM); website will be updated to include a section; Program Administrators will be provided instructions for accessing and retrieving forms, collating, timelines, minimum number, etc.</li> <li>PGME Faculty Evaluation Policy available on PGME's Policies page; outlines strategies to help small programs maintain confidentiality, including not providing evaluations until there are a minimum of five evaluations and combining with evaluations from off-service residents rotating through the program.</li> </ul>
<ul> <li>3.5 SURGICAL FOUNDATIONS CHANGE – L. CHAMPION</li> <li>As of July 1 2024, SF will be a Fundamentals Program; residents will be required to complete both the SF examinations as well as the SF Portfolio (EPAs) before being eligible to be formally promoted to Core stage in their home discipline; residents can work on all their Core EPAs even if they have not been formally promoted; residents will also need to report their SF results to their home program (and the RCPSC will provide exam results).</li> <li>May help prevent residents not completing SF for years or not successfully completing SF examination, but program not aware; SF Orientation is being updated to reflect change.</li> </ul>
<ul> <li>3.6 CanPrePP – L. CHAMPION</li> <li><u>CanPrePP</u> started in 2020; site provides program descriptions as well as an event calendar.</li> <li>Problem: CaRMS program descriptions are posted each year, with a set deadline, and reviewed by PGME to ensure there is no CaRMS violation; CanPrePP has no process (and PGME does not have resources to keep the site up to date, etc.); program descriptions in many cases are the original from 2020 (e.g. old program director or program administrator names, etc.)</li> <li>Site is an issue for many Universities in Canada; PGME not terribly supportive of the ongoing site except for maybe the calendar; if program wishes to use site, suggest putting 'See information on CaRMS program site'.</li> </ul>
<ul> <li>3.7 2024 REGISTRATION UPDATE - K. LANCEY</li> <li>Not including staggered starts in Family Medicine or Clinical Fellows, there are 225 incoming trainees and 618 continuing trainees starting on July 1, 2024.</li> <li>Important dates: Monday June 24 warning letter from PGME to all trainees not ready to begin training; week of June 24-28 PGME will email programs directly for possible delayed starts; Friday June 28 3pm deadline to have all trainees credentialed for July 1 start; Monday July 1 CPSO, Medical Affairs, and PGME all closed.</li> <li>Over the last 3 years PGME has improved registration success rate (100% compliance) by implementing automated notifications, close monitoring and collaboration with programs, and streamlining online registration, but we still need your help.</li> <li>With two weeks left for registration, we need your program's help to monitor your trainee status (and following up).</li> <li>Resources available to Program Administrators: <ul> <li><u>webSAS</u>: web-based version of database that is easily accessible; PA session on June 11 reviewed the database and how to generate registration status report.</li> </ul> </li> </ul>

Next Meeting: Wednesday, September 11, 7:00 – 8:00 AM, Virtual		
5.0 QUESTIONS	& ADJOURNMENT (8:00 AM) AND NEXT MEETING	
DISCUSSION	<ul> <li>4.1 POLICIES         <ul> <li>Assessment Verification Period (AVP) Policy: approval of policy; added PARO and Learner Experience Office as options for support, updated language regarding vacation, updated the licensure extension process to reflect CPSO's revised process.</li> <li>Motion to approve revised policy: approved by virtual vote.</li> </ul> </li> </ul>	
4.0 NEW BUSINES	S	L. CHAMPION
	<ul> <li><u>Schulich Hub</u>: online registration portal that all trainees must use to complete their registration requirements; this is where their Letter of Appointment is located, as well as instructions on how to complete registration requirements.</li> <li><u>CPSO Member Portal</u>: in addition to monitoring the Schulich Hub, trainees must monitor their CPSO license application through the CPSO Member Portal; this is where updates to their license application or renewal can be found; once their CPSO license is issued, the Schulich Hub is updated.</li> <li>For both PGME and Medical Affairs, email reminders are going out to trainees; programs should let trainees know these are hard requirements for July 1 starts; if they are experiencing potential delays or issues with their start date, trainee should reach out to PGME.</li> <li>ROLE DESCRIPTION TEMPLATES – L. CHAMPION</li> <li>Role description templates now available for Academic Advisor, Research Lead, Site Lead and Wellness Lead; Research and Site leads are mandatory roles for the RPC; may be modified by programs to meet the program requirements; not mandatory to use templates but may be helpful for programs; templates were circulated with meeting material and will be added to the website.</li> </ul>	